### Post Match Reporting

2015/2016 Match Cohort* Data

**Specialty: Internal Medicine-Preliminary**  
N= 40 (72.7% 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><strong>Graduation year</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2015</td>
<td>19</td>
<td>47.5%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2016</td>
<td>21</td>
<td>52.5%</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Three digit Step 1 score</strong></td>
<td></td>
<td></td>
<td>238.8</td>
<td>17.4</td>
</tr>
<tr>
<td><strong>MSPE Adjective:</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Outstanding</td>
<td>13</td>
<td>32.5%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Superior</td>
<td>5</td>
<td>12.5%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Excellent</td>
<td>23</td>
<td>57.5%</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><strong>AOA elected</strong></td>
<td>9</td>
<td>22.5%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Applied to preliminary or transitional programs:</td>
<td>35</td>
<td>87.5%</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Other specialties applied to:</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Honors Received:</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Anesthesia</td>
<td>12</td>
<td>30.0%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>FCM</td>
<td>10</td>
<td>25.0%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Internal Medicine</td>
<td>15</td>
<td>37.5%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Neurology</td>
<td>17</td>
<td>42.5%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Obstetrics/Gynecology</td>
<td>14</td>
<td>35.0%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pediatrics</td>
<td>9</td>
<td>22.5%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Psychiatry</td>
<td>16</td>
<td>40.0%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Surgery</td>
<td>12</td>
<td>30.0%</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Match Cohort includes applicants who matched into this specialty via the regular match process.
<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>8.9</td>
<td>4.1</td>
<td>2</td>
<td>19</td>
</tr>
<tr>
<td>How many programs invited you to interview?</td>
<td></td>
<td></td>
<td>11.1</td>
<td>5.2</td>
<td>2</td>
<td>20</td>
</tr>
<tr>
<td>How many interviews did you accept?</td>
<td></td>
<td></td>
<td>9.3</td>
<td>4.1</td>
<td>2</td>
<td>20</td>
</tr>
<tr>
<td>Where did the program you matched fall on your rank list?</td>
<td></td>
<td></td>
<td>1.6</td>
<td>1.0</td>
<td>1</td>
<td>4</td>
</tr>
<tr>
<td>Did you review your application with a career advisor before applying?</td>
<td>28</td>
<td></td>
<td>80.0%</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>21</td>
<td></td>
<td>60.0%</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></td>
<td>0.0%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>$501-$1000</td>
<td>1</td>
<td></td>
<td>2.9%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>$1001-$2000</td>
<td>4</td>
<td></td>
<td>11.4%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>$2001-$3000</td>
<td>6</td>
<td></td>
<td>17.1%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>$3001-$4000</td>
<td>9</td>
<td></td>
<td>25.7%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>&gt;$4000</td>
<td>15</td>
<td></td>
<td>42.9%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Did you complete a Pathway project?</td>
<td>14</td>
<td></td>
<td>40.0%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Did you complete a research project in the field you matched?</td>
<td>28</td>
<td></td>
<td>80.0%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Did you have a publication during medical school?</td>
<td>26</td>
<td></td>
<td>74.3%</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
The field project was in:

Anesthesia
Epidemiology
Dermatologist
Derm
Dermatology
dermatology
Dermatology
Diagnostic Radiology
Interventional radiology and radiology medical education
radiology
Collateral Score and Contrast Staining Evaluation in Stroke Cases and evaluating interpretive vs non interpretive skills in radiology text books
CT
Radiology
Liver imaging retrospective study
Stroke Imaging, Imaging of Rosai-Dorfman Disease, ACR Appropriateness Criteria in Medical Education
Radiology
Diagnostic Radiology
neurology
Neurology
Neuroinfectious disease and stroke
Neurology
ophthalmology
ophthalmology- Basic science and clinical (glaucoma)
ophthalmology
Proton therapy
Neuro-oncology

Brain cancer radiation

Describe any publications:

From work in summer between first and second year

Research, case reports, scholarly articles, book chapters

Translational research on leprosy immunology

Several small editorials, reviews and case reports. A few prospective studies with simple protocols. Survey study. first author phd paper / middle author phd paper / middle author clinical paper / middle author clinical paper / NB: ERAS accepts SUBMITTED manuscripts, so my applications had a bunch of submitted items in the "publications" box. That's how numbers get inflated, even though many of those submitted MSs never get published.

Both first author publications. One review article inside my field, one original research outside my field.

Second author medical education article in academic radiology

neuroIR / geriatrics/anesthesia

1) Prognostic value of contrast staining in stroke patients published in Interventional neuroradiology / 2) Interpretive vs non interpretive skills in radiology text books published in Academic Radiology

Four oral presentations, one poster.

Basic science work I did in graduate school before medical school was published

3 basic science / 1 clinical review / 1 clinical retrospective study

A journal publication from a summer research project on malarial chemoprophylaxis. A journal publication from a case report on Rosai-Dorfman Disease. A journal publication on a medical education intervention using the ACR appropriateness criteria. An abstract from an analysis of door to needle times for stroke at SFGH.

2nd Author


All were publications related to brain development from prior to starting medical school

1) Comprehensive Review Paper on Stem Cell Research in Glaucoma (Peer reviewed) / / 2) Short piece on stem cells in the clinic

There are in the surgery field from work I did before medical school but published while I was in Medical school. There were as follows: / increased mortality in delayed intubation in initially stable trauma patients, / dialysis dependent chronic renal failure in patients with nephrectomies performed 2/2 to trauma
Two abstracts and one paper. Both from undergraduate research that wrapped up while in medical school.

8 diabetes review articles, 1 book chapter in Peds Onc, 1 meta-analysis from summer research, 1 opinion article on resident well-being

One preclinical paper / One clinical paper

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

Kristina Sullivan

Mark Rollins (3)

Manny Pardo

Kanade Shinkai (4)

John Koo

Kelly Cordoro

Wilson Liao

Erin Amerson

Emma Webb (10)

David Naeger

Ben Yeh

Jane Wang

Dan Lowenstein

Vanja Douglas (4)

Jacque Duncan (2)

Nisha Acharya

Lisa Pascual (3)

Sibel Deviren

Daphne Haas-Kogan (2)

Steve Braunstein

**What were your most useful career resources?**
Post-match feedback from applicants specific to my specialty, pre-application career meetings, FAQ with recently matched applicants, meeting with advisors

Marty Bogetz, Adam Collins, and Doximity to learn more about both the specialty and specific programs.

Talk to your career advisor early in the application process. Ask to get an honest assessment of your qualifications and how many programs you should be applying to (both in your specialty and prelim if applying to prelim programs).

I met with my research advisor, Dr. Siegrid Yu. I didn't really have much career advice and didn't know of any career resources.

--Dermatology Interest Group (helps you get to know dermatology faculty and residents) / --Meeting with Kanade for logistics/scheduling and advice on how to gain exposure to dermatology; she can often help create opportunities that you wouldn't have thoug

Kanade Shinkai / UCSF derm chief residents / Michael Rosenblum / Timothy Berger

Use sdn sparingly - it can be helpful for logistical information like interview dates switching, but the chitchat can devolve into crazy so don't pay attention or get sucked in. / / The guide that Dr. Shinkai put together online was helpful.

Doximity

(1) Emma Webb/Dave Naeger are helpful in reviewing your personal statement and addressing Qs like what are my chances, how many programs should I apply to, etc. / (2) AMSER guide (just Google it): includes application timeline, how to craft your ERAS application, common interview questions

Career advisors, research mentors

I hate to admit this, but I used student doctor network to see when applicants were getting interviews because it helped me plan my interviews at places I had offers, but it also helped me strategize about how/ when to email program directors to request interviews at programs I was really interested in, but had not yet heard from.

Doximity, program websites

Classmates, Dr. Webb, residents

1. Third year rotations--constantly think about whether or not you could do this every day. / 2. AAMC CIM quiz and resources / 3. Freida specialty guide / 4. NRMP data reports for probability of matching by number of contiguous programs ranked.

speaking to previous applicants

Current neurology residents

talking to previous year's applicants

-AAPMR website /

Cindy Lai- helpful for prelim year advice
I used SDN very heavily--while you have to consider the sources, the information there was incredibly useful given what programs write about themselves on their websites was minimal. The AAMC also has some useful resources on example interview questions, personal statements, etc. though Radiation Oncology interviews seemed quite different from what interviews in other specialties are like. Mentors, even those outside the specialty, were also helpful. Definitely, definitely find out who applied in the year prior to you and pick their brain on the process--above all this was the most accurate information.

Student Doctor Network subthread for radiation oncology, current radiation oncology faculty/residents

SDN section on RadOnc (avoid the annoying posts by hyper-competitive weirdos and focus on details regarding interview dates and such)

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

Apply to more preliminary programs, cut down on the number of interviews I did (ideally would have interviewed at 10 maximum, I did 14)

Interview at fewer places. Though I enjoyed the trips and used them mostly to see friends, interviewing at 20 total spots (between anesthesia and prelims) was way too much.

Nothing.

I would have sought advice of an additional faculty member that would be confidential.

Save more money for interviews!

Try to shadow earlier and gain more exposure to dermatology in the first two years. The sooner you know you are interested in dermatology, the sooner you can begin to work on projects and get to know the dermatology faculty. It is important to have mentors who know you well and are willing to advocate for you--this is more easily achieved (in my opinion) if either 1) you know you want to do dermatology early in medical school or 2) you take a year off.

Nothing

Write thank you letters to everyone.

Attend less interviews

Interview at ~11-12 programs instead of the generally advised 14

Go on fewer interviews

Apply to fewer radiology programs and more preliminary programs. Go on fewer interviews (max 15).

I did not submit my preliminary application as easily as my advanced program application, which may have hurt me with respect to getting interviews. I would recommend considering this application as important as your advanced program application and being aggressive with seeking out interviews at locations that you are really interested in (I drummed up two extra interviews by specifically requesting them from the program director when I had a significant reason for my interest); this application is clearly less important, but it caused significantly more stress than my advanced application/ interviews because of the few offers I received.
No

I would have applied to fewer programs. I applied to more than my advisor recommended.

Nothing

I wouldn't do anything differently, the match system is unpredictable.

apply to less programs

Interview at less preliminary medicine programs.

I would ask different questions and take more notes; because I did not think right away about what would be most important to me, and by the time I sat down to rank the programs, I forgot the important details; they all start looking the same. / I would have reached out to more people for help, earlier - one of my neurology LOR writers got me 3 interviews in a day, after I shared that I did not get an interview at my dream program and did not have enough prelim interviews - she got me that dream interview and the most competitive prelim programs in Bay Area. / I would have networked more starting in the first year of medical school - it's all about who you know

Sign up for TSA precheck prior to interviews / / I would have emailed programs I was interested in earlier in the application process to express that interest as I think this has a significant impact on how programs see you / / I would have applied to a few more places simply because you learn a lot about what you want in a program and the neurology community you are joining by going to more places, even if you probably only need to go to a small number places.

-you don't need to do an away rotation to match / -however, if you have a program you really want to go to, try to do an away there.

Go to all of my interviews offered and lobby for my 2nd choice more. I was overconfident in matching at my top choice.

I would not apply to as many out of state preliminary programs. I would do at least one more (two total) away rotations for PM&R.

Start thinking about this process much earlier in medical school--if you can shadow any specialty you're considering to get to know the faculty, begin research projects (especially in Radiation Oncology, research matters much more than your activities--I think I would have had a hard time if I hadn't done work prior to medical school), and generally get integrated into the field you'll have a better experience. Also, realize the process is less objective than it seems--networking, writing program directors (when appropriate), and doing away rotations all played a larger role than expected.

might have considered proactively emailing more program directors at programs that I had significant interest in interviewing after submitting my application to express that interest, would have started doing more oncology-focused research earlier in medical school.

I wouldn't have applied to programs that, realistically, I would have never actually gone to.

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

Talk with the anesthesiology career advisors as early as you think you're interested in anesthesia (ideally by the first month of 4th year). They help tons with setting you on the right track in terms of adjustments you make to
your 4th year schedule, personal statement advice, and how many programs to apply to based on your scores/grades. Don't count yourself of certain residency programs based on your perception of your grades or test scores; you may need to expand your list of programs a little more, but by no means should you limit which programs you apply to (unless there is a personal preference). Apply to at least 15-20 programs for an anticipated 10-14 interview invites.

As much as I didn't want it to, for me it all came down to geography. Be realistic about your willingness to go places before applying to places and certainly before accepting interviews.

Be honest with yourself about where you want to be/live and whether or not programs in that area are attainable. This is in part based on your advisors thoughts and suggestions but for example, if you want to stay in California you can still apply and schedule east coast interviews. But if you get to the point where you feel you are obtaining enough California interviews don't be afraid to save yourself some money and cancel interviews at places you really don't think you would want to live. Having said that, you may still want to go to interviews at places you don't see yourself living (particularly if the programs are well regarded in that specialty) so that you can get a sense of what makes a program good. It can help you to sort out what you might be looking for in a program closer to where you want to be. Ultimately, it is a trade off between the two I mentioned above that comes down to how much you want to spend/save and how much time you have to travel.

Find a mentor (UCSF won't really help you with this) and get advice along the way.

--I think it is important to focus on finding mentors that you feel like you CLICK with and trust. If you have a mentor who is not responsive/different interests/just super busy, find another one. Try to connect with your mentors on an academic and person

Dermatology is tough. One either has to be willing to go anywhere or not match. Not matching is possible if not probable if a student's application is not strong and she limits herself to certain programs and geographical areas.

/ / Important factors: / Clinical grades / Letters of recommendation / Step scores (including Step 2, which should be at least as good as Step 1 some say) / Resume-padding research / Flexibility / Fearlessness

Mentorship is key especially in a field that is highly competitive like dermatology. I would not be where I am today without the amazing mentorship I have received. You must seek out and cultivate the mentorship relationship yourself, and don't expect the relationship to fall into your hands. / / Overall be a good, kind, ethical and decent human being. You will encounter ridiculous amount of crazy intense people on the interview trail and you do not want to be like them. Do not be a gunner - nobody likes a gunner.

Think hard about your whole rank list: don't just focus on the top.

List interesting activities in the "hobbies" section of ERAS

Get started in research early, ideally Year 1 summer. Make sure you find a research mentor who has prior experience working with med students (so they know what's feasible/appropriate), has the time to guide you (ie. isn't working with countless other

Thinking about this specialty early and trying to get exposed to the reading room before fourth year would be helpful otherwise it's easy to overlook this as a possible choice of career.

Talk to Emma Webb before you apply. She was the most accurate at gauging how successful I would be during the interview process. She is also very nice and super funny. =)

Interviews are generally very relaxed and low key. They tend to ask the common questions you expect (i.e., tell me about yourself, why radiology, explain this project you worked on, etc.). I was only rarely asked to discuss the
challenges ahead for the field and never asked to interpret a radiology study. Interviews started earlier this year than in the past. My first radiology interview was October 5th and my last was in late January. Some of the California programs (UCLA, UCSD) only offered interviews in January. The early interviews were mostly from Midwest and East Coast programs. I recommend scheduling research time or easier non-clinical electives during this period, like the ECG course. Take good notes after each interview and try to make a rank list as you go through the interview season. Many of the programs seem similar and can blend together easily.

Reach out to specific programs that you are interested in early, some programs respond to applicant interest. I had a mentor reach out to UCLA which is where I wanted to go, he happened to know somebody there, and I was able to speak to the PD early and convey my enthusiasm for the program. Some programs do not seem to respond to applicant interest—however they may just not let you know that they are taking it into consideration.

Attending the pre-interview dinners is a great way to learn more about the program and get to know the residents.

As I already mentioned, advisors hate to admit it, but everyone knows that connections help. Reach out to anyone you might know that could put in a good word on your behalf; network early. Ask for help for both prelim and neuro interviews. I met program directors or their relatives at friends’ gatherings. If you are trying to move to the other side of the country, you have to really convince them you are truly interested. I did not get any invitations at East Coast schools (which did not matter to me) - maybe I should not have applied there anyway. I only interviewed on the West coast, which is sufficient, because it is a good range of competitiveness. Vanja Douglas and Dan Lowenstein were the best supports! Don't let the stress of applying and interviewing at prelim programs overwhelm you - it all works out in the end!

Talk to the current residents about their experiences and the programs they liked. They often have more up to date info that faculty and advisors. The websites for the neurology programs are often extremely unhelpful and even the programs often admit this. When you visit a program, try to spend as much time as possible with the residents. Even if you won't be working with any of them by the time you get there, you definitely get a sense of the type of people they are looking for or, more importantly, the type of person attracted to the program.

Attend the ophthalmology residency application info sessions

Apply to even MORE programs than you originally planned/national average

- contact recent alums who have matched into PM&R. they understand the process as well as anyone / schedule your interviews the SECOND they come into your inbox! some programs just invite everyone and it's a first-come, first-served system.

Don't believe what programs tell you. I was given honors by my top choice and got a really strong letter of rec commented on by other programs yet still didn't match there. The attending I was with even told me he would do his best to get me ranked in their top 7.

Definitely check out the east coast PM&R programs, they have a very different model than most of the west coast programs.

I think another student mentioned this in a prior report, but to echo--Radiation Oncology is competitive, and having significant research experience (not necessarily in Radiation Oncology) plays a large role in whether you receive interviews at the top programs. The trend in Radiation Oncology is to apply very broadly, so doing away rotations in geographical locations other than your own is helpful in conveying interest to programs outside California. Outside of the top programs, there is a geographical bias in where you receive your interviews so
having some connection to an area (your hometown, where you did undergrad) often plays a role in interview selection I think.

If you are interested in one of the more competitive programs, there is an unwritten "expectation" that you will inform the program director of your number 1 choice that they are number 1. I learned that from other applicants, but it's important because at least anecdotally, some programs will not rank people to match who they don't explicitly know are ranking them #1.

Don't skimp on prelim applications!