

Post Match Reporting

2018/2019 Match Cohort Data

Specialty: Emergency Medicine

N= 29 (9.7% match cohort)

Item	N	% of specialty cohort	Mean	Standard Deviation
Graduation year				
2018	16	55.2%		
2019	13	44.8%		
Three digit Step 1 score			232.0	18.2
MSPE Adjective:				
Outstanding	8	27.6%		
Superior	6	20.7%		
Excellent	15	51.7%		
Very Good	0	0.0%		
Good	0	0.0%		
AOA elected	3	10.3 %		
Applied to preliminary or transitional programs:	0	0.0%		
Other specialties applied to:				
Pediatrics				
Number of categorical programs applied to			51.2	40.9
Honors Received:				
Anesthesia	16	55.2%		
FCM	7	24.1%		
Internal Medicine	10	34.5%		
Neurology	10	34.5%		
Obstetrics/Gynecology	8	27.6%		
Pediatrics	12	41.4%		
Psychiatry	11	37.9%		
Surgery	10	34.5%		

Post Match Reporting

2018/2019 Survey Respondent Cohort Data

Specialty: Emergency Medicine
N= 23 (10.1% survey respondents)

Item	N	% of specialty cohort	Mean	Standard Deviation	Min	Max
How many programs invited you to interview?			19.4	7.6	9	41
How many interviews did you accept?			12.9	2.7	7	18
Did you review your application with a career advisor before applying?	18	78.3%				
Before ranking programs, did you review your rank list with a career advisor?	12	52.2%				
Total Spent on Interviews						
\$0-\$500	0	0.0%				
\$501-\$1000	2	8.7%				
\$1001-\$2000	5	21.7%				
\$2001-\$3000	7	30.4%				
\$3001-\$4000	4	17.4%				
>\$4000	3	13.0%				
Did you complete a Pathway project?	6	26.1%				
Did you complete a research project in the field you matched?	14	60.9%				
Did you have a publication during medical school?	15	65.2%				

The field project was in:

Emergency Medicine (4)

Tox (2)

Sepsis

Hospital mortality

global health - injury

Emergency Medicine and environmental health - ED visits related to wildfire-smoke exposure in California

Ultrasound

Wilderness medicine/rural social determinants of health

CT imaging and consent in Trauma Patients

Trauma Registry

Describe any publications:

All were in dermatology and varied from clinical research to public health

First author NEJM, Several ClinTox, Several Drug Testing and Analysis

Journal of Family and Community Medicine- Qualitative study of the Berkeley Soda Tax (Measure D)

A case report from a summer project I worked on after first year.

One book chapter on environmental health and occupational hazards associated with oil and gas development/fracking in California. A first-author publication in press after my research year on ED visits related to wildfire smoke exposure in California.

length of CPR pauses in medical codes associated with use of bedside US; perceptions and skills of medical students before and after an elective course in POCUS

A publication (with several collaborators) on a social determinants of health continuing education curriculum for healthcare providers in rural Alaska

1st author publication in Emergency Medicine journal; 2nd author publication in stem cell research

Basic science, had some second authors in good journals but nothing clinical

First author clinical review

Basic Neuroscience, clinical psychiatry all unrelated to EM

qSOFA/sepsis

Paper describing post-op complication risk factors in underserved population

SDH, policy, advocacy

Assisted with an project exploring the ability of a commercially available smart watch application created by using deep learning and neural network to detect atrial fibrillation.

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

Marianne Juarez (3)

Dr. Aaron Harries (11)
Harrison Alter
Eric Isaacs
Charlotte Wills
Clerkship co director
Jahan Fahimi
Nate Teisman
David Duong
Robert Rodriguez
Melissa Clark
recent grads

What were your most useful career resources?

EMRA match map, AAMC's list of 100 residency interview questions, FRIEDA (not sure if that is how it is spelled), Love-letter tutorials to places that did not initially offer interviews, program-to-program communication on my behalf, Alumni-Host program (this was amazing).

EMRA Match Tool EMRA Student Guide

EMRA website (<https://webapps.emra.org/utills/spa/match#/search/map>) to learn about different programs throughout the country

Office Of Career Development for CV review

EMRA Match map of EM residencies

UCSF advisors, fellow classmates here and on away rotations

EMCORD Application guide, EMRA's program map, EMRA's list of potential interview questions

former students

Emergency medicine residents association website (EMRA Match), Doximity, UCSF office of career and professional development

Individual websites for each program. I did not find doximity to be very helpful.

I did not have a close relationship with any faculty at UCSF going into the interview season. I met with Aaron Harries who suggested I join EMRA and look at their website for ideas about programs to apply to. Despite not knowing me in a clinical context, he was helpful and encouraging. He looked over my personal statement, the list of schools I was applying to, and provided specific answers by email as needed throughout the season. I also periodically consulted faculty at Highland, who knew me better than UCSF faculty from my rotation there. Gene Hern's talk on how to prepare for illegal questions (I watched the webcast) was funny and helpful. I also talked a lot with classmates and friends who were applying or matched in EM the year before. This was helpful in terms of knowing when specific programs released interview invites, what people thought of different programs, what communications with program directors were fruitful.

EMRA has an interactive map that has basic details about each program. Each program website was surprisingly helpful. Most important to me were career mentors and speaking with residents or recently graduated residents/practicing physicians who are working in the areas I was interested in, who have a more birds-eye and real-world perspective on residency choice. Also, if you're couples matching, Dean Jones was immensely helpful.

None particularly. Spent a lot of time in the field prior to medical school, came to medical school intending to specialize in EM.

SDN is terrible for one's mental health, particularly when people -- who may well be lying -- say that they have gotten interviews extremely quickly after sending in their applications, or have gotten calls from program directors who specifically stated they don't make any contact post-interview. But it has just enough good info that I checked it fairly regularly. I ignored it once I'd actually been to interviews, though. I'd much rather trust my own gut feeling about a program than a review from some rando on the internet. The EMRA website was also occasionally useful.

Advising sessions

UCSF EM advisors, residents and faculty
sdn for more info about some residency programs; EMRA residency map ;UCSF OCPD for CV, interview advice and practice; Reddit for moral support

Career advisor for EM

EMRA Website/Residency Map

I found carrier advising to be thoroughly unhelpful and unprepared. In hindsight I feel that I had basically no mentor ship or guidance throughout the application process.

Recent past applicants as EM applying has changed significantly in the last 5 years and recent students get this best /EMRA apps/CORD EM applying guide /EM basics/EM clerkship podcasts/WikiEM/ALIEM videos

I started building my program list based on this website. This gave me basic information about each program and where they were all located. <https://webapps.emra.org/utis/spa/match#/search/map>

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

I would have tried to obtain an alumni host for every interview. I would have made my spouse go with me to seriously-considered programs, I would have done an away rotation on the east coast (I felt a considerable regionalism based on who offered interviews.

Spend more time looking at programs you are applying to Choose programs you would be interested in training at

Not sure I'd do anything differently

Apply to fewer programs.

Seek help early applying for away sub-is, apply to many. No one told me that top programs get upwards to 100 applications for the July-October months, I applied to 3 and didn't get into any. By the time I was rejected from everywhere, it was way to late to apply to more. Apply to less programs! I was encouraged to apply to 40 since my Step 1 score was below average, and this felt like WAY too many. I was even scolded by an APD at a similarly competitive program who asked how many interviews I did, then said that 12 was what she recommended to her students. By my final interviews I was so tired and over the whole process, it felt unfair to the faculty interviewing me.

I wouldn't change anything.

I definitely over-applied. But I think that ultimately over-applying is not such a big deal. Over-interviewing is a much bigger waste of your money and your/the programs' time. I probably would have gone to 3-4 fewer interviews if I was doing it again.

Apply to fewer schools

Go on fewer interviews

Apply to more programs the first round, send more love letters, ask the PD to help with contacting other programs -- ultimately asked for him to help reach out to two programs one of which sent me an interview invite the day after!

Interview only at places I'd go

I would have done a third rotation in early summer for more SLOEs/STEP 2 CK prior to any EM subIs would have helped solidify MS3 a bit. I would have written a draft of my PS during the last intersession when the CV was due.

I would have applied to less programs.

Write letters of intent to a few Programs that I did not have obvious connections to

Interview at fewer programs, but that will depend on individual competitiveness

Try to stress out less after ERAS submission and not read too far into which programs are sending out interview invites when. Avoid SDN/med school subreddit like the plague; given the level of stress they caused, I can only assume they are heavily funded by the pharma lobby in order to sell more benzodiazepines.

I would interview in less places. Have an understanding that residency communications are not reliable indicators of their interest

Interview at fewer programs

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

Offer student panels on how to succeed prior to the time for 3rd year scheduling.

Plan to interview at 12-14 programs mostly through november/december (some in late october, less in jan/feb).

Don't interview at places you wouldn't rank in the first place-- give that spot to someone who might need/appreciate it more.

Write letters of intent to a few programs that might not take you based on geography, etc

Away rotations in Emergency Medicine are incredibly helpful, but VSAS is a pain to navigate. If you want to go somewhere, apply before the summer of MS4 year.

Aaron Haries was a great resource for advice - very direct and honest.

Particularly in EM, I think the social associated with the interview is extremely important to both choosing a program and having a program choose you. Do your best to be yourself at this event and avoid being overly formal with residents. I would usually spend these events asking residents a few program-related questions but otherwise would spend the majority of the time just having a casual conversation about anything they might be

interested in. I think from their perspective, residents tire of answering the same questions about their program and will probably remember you more if you seem like a fun/chill person with shared interests. I noticed significantly more recruitment effort from programs where I talked with residents about movies or books we both liked than those in which we had in-depth discussions about off service rotations.

I will offer some comments specifically for those taking a year off to pursue a higher ed degree (e.g. MPH, MBA, MPP). The most important advice I received is that the degree in and of itself means nothing and will not give you an advantage during residency interviews, presumably because so many applicants have additional degrees. Instead, what you should work on during this year and what you should subsequently emphasize in your application is what you actually DID during this year, outside of the classroom. For instance, I pursued an MPH in global health and became involved in various projects related to humanitarian response (research, policy work) during the year and was able to talk about those in residency applications. A friend got an MPH in public policy and used the year to get involved in several community organizing projects, which became major talking points during interviews. The point being that, for better or for worse, just having the degree and going to classes will not differentiate you from other candidates, but the interesting things you do with the knowledge you gain from getting the degree will.

A brief, specific email to the PD at a program you are very interested in can be very helpful in getting an interview if you aren't offered on initially. I sent two such emails and was offered interviews at both programs late in the season as other people canceled. If possible, set up shadow sessions / second looks at programs you are seriously interested in. The amount of useful information you can get from the interview pales in comparison to what you can observe in a few hours of a shift. Logistics that saved my finances. I applied for the Southwest credit card in time to get the sign up bonus before interview offers went out -- you can book and cancel an unlimited number of flights using points with no fees. I used Swap and Snooze and friends/classmates for places to stay on the road. I also signed up for the alumni hosting but it was a little stressful staying with alumni since my travel plans changed frequently and alumni usually need more advance notice. Look at the methodology for Doximity "Reputation" rankings before caring too much about what it says - it's deeply flawed and self-referential! Leaders and mentors in the field of EM have much more insight about how a program will fit you and how well respected they are than that website does.

Apply broadly even if you're a competitive applicant because you might be surprised by some "less competitive" programs and find you want to go there. There are a ton of really interesting and excellent programs around the country. There's a lot of implicit pressure/inertia for UCSF students to stay on the coasts, if you're open to going to a new place be sure and look at some programs that don't have "big names" as you might be surprised and find a program you love.

Based on my n=1 experience, there were definitely some regional preferences in action in where I was offered interviews. I was offered interviews at essentially all the California programs and several top programs in the Northeast as well. But I didn't get interviews at the "top tier" Southern programs like Vanderbilt, UNC, etc. I'm from the Southeast and would have been curious to check out those programs, but my geographical ties to the region were not evident on ERAS -- I went to college in the Northeast and lived in the Northeast and the West before medical school, and there is nowhere on ERAS to list your hometown or high school. I would say that if you have geographical ties to a region outside California, or interest in a specific program in another part of the country, it is important to reach out to the program to express your interest *before* the main wave of interview invites goes out (this year, that occurred during the few days surrounding October 12). My experience -- and experience of several friends applying in EM -- was that if you are waiting until late October to advocate for interviews, it's usually (but not always) too late.

Sub-intern rotations and letters of rec are most important.

Apply to more places than you think, some places really surprised me! Ended up ranking a program I never thought I'd go to over a program I had thought was my dream program

Apply broadly. Everyone wants to go to UCSF and Highland but they only accept a handful.

I would recommend an away rotation either at an institution you're interested in or at least in a geographic region you're interested in. And try to do your best at them - the EM Sub I's are very important pieces of your application

I wrote a ddx list out for the major chief complaints before my subIs with relevant decision rules etc and this really helped. Try to get your documents ready for EM subI season (immunizations, TB test, flu, fit test, insurance proof, photo etc). Leave Nov/Dec open for interviews- Oct and Jan aren't too busy in EM for interviews. I applied to more programs than I was advised to and got the right number of interviews in the end. Many of the invites I got were random (some very competitive others not) and very spread across the country (lots of \$\$\$). All my interviews came in early October in a few days so make sure you are near your phone then... ie no surgery/medicine etc rotations if you can avoid it. Create a filter for interviews and forward it to text because the spots go fast (and most programs give more offers than there are spots). For me there was only one big early wave of invites and I didn't get off any of the 4 wait lists I was on for the entire season, and contacting programs I got no initial interview for/was waitlisted for yielded nothing, and advisors did not contact programs on my behalf, which seemed offered/standard previously so be prepared for that (unless this was just this cycle due to volume). Basically, put your efforts in early on because there may not be a ton to be proactive about after October.

Remember it's all about match. Once you get to the interview, your numbers, scores, research done... all that is leveled with other applicants. Be confident in what you bring to the table. Programs want you to be yourself and want to know you are a good match at their institution and with your potential co-residents. Also, be kind with one another. EM is growing as a popular field, but there is no reason to be competitive with your peers. The interview process can be a lonely process, but if you surround yourself with awesome colleagues you will help each other out and support each other. Also, programs and residents can totally spot you if you're trying hard to outshine your fellow co-applicants.