

Post Match Reporting

2018/2019 Match Cohort Data

Specialty: Family Medicine
N= 18 (6.0% match cohort)

Item	N	% of specialty cohort	Mean	Standard Deviation
Graduation year				
2018	10	55.6%		
2019	8	44.4%		
Three digit Step 1 score			222.4	22.1
MSPE Adjective:				
Outstanding	4	22.2%		
Superior	4	22.2%		
Excellent	10	55.6%		
Very Good	0	0.0%		
Good	0	0.0%		
AOA elected	2	11.1 %		
Applied to preliminary or transitional programs:	0	0.0%		
Other specialties applied to:				
Internal Medicine				
Obstetrics & Gynecology				
Number of categorical programs applied to			30.2	17.4
Honors Received:				
Anesthesia	8	44.4%		
FCM	9	50.0%		
Internal Medicine	2	11.1%		
Neurology	6	33.3%		
Obstetrics/Gynecology	6	33.3%		
Pediatrics	7	38.9%		
Psychiatry	8	44.4%		
Surgery	5	27.8%		

Post Match Reporting

2018/2019 Survey Respondent Cohort Data

Specialty: Family Medicine
N= 14 (6.1% survey respondents)

Item	N	% of specialty cohort	Mean	Standard Deviation	Min	Max
How many programs invited you to interview?			15.1	3.2	10	19
How many interviews did you accept?			11.3	2.4	7	15
Did you review your application with a career advisor before applying?	13	92.9%				
Before ranking programs, did you review your rank list with a career advisor?	12	85.7%				
Total Spent on Interviews						
\$0-\$500	1	7.1%				
\$501-\$1000	4	28.6%				
\$1001-\$2000	7	50.0%				
\$2001-\$3000	2	14.3%				
\$3001-\$4000	0	0.0%				
>\$4000	0	0.0%				
Did you complete a Pathway project?	2	14.3%				
Did you complete a research project in the field you matched?	8	57.1%				
Did you have a publication during medical school?	7	50.0%				

The field project was in:

Medical education/family medicine

(1) Air pollution and asthma - JMP Thesis, (2) LICs / MedEd, (3) Geospatial analysis of HIV resources in southern Africa

Family Medicine (2)

Community organizing, health policy

Opioid treatment

Transgender health and reproduction

Fathers and children

Describe any publications:

1. JMP Masters Thesis 2. (note: published after the Match!) Pepper, Joshua, et al. 2019. "Twelve Tips for Students in Longitudinal Integrated Clerkships." MedEdPublish 8 (1). <https://doi.org/10.15694/mep.2019.000059.1>.

Haefeli J, Ferguson AR, Bingham D, Orr A, Won SJ, Lam TI, Shi J, Hawley S, Liu J, Swanson RA, Massa SM. A data-driven approach for evaluating multi-modal therapy in traumatic brain injury. Sic Rep. 2017 Feb 16; 7: 42474. Pub Med PMID: 28205533.

Community organizing and health policy

Both related to JMP's MS thesis - Conscientious Objection to Abortion Provision: Why Context Matters –

Developing a Survey and Conceptual Model to Assess Conscientious Objection to Abortion Provision paper in which I am first author, for original research.

Research relating to inhibition of a transcription factor as potential therapy to prevent metastasis.

Results from various HIV reservoir studies through UCSF's Positive Health Program at SFGH

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

Margo Vener (13)

Dean Jones

What were your most useful career resources?

MARGO!!

Advisors/faculty, residents, AAFP residency application handbook, google

Residents and interns at UCSF FCM, Peers who graduated 1-2 years before me

Dean Jones for couple matching

Margo Vener

Just her

Going to the National Conference (especially if applying outside bay area) panels with students in the year ahead, at various points in the process.

She sent out emails leading up to the match which laid out exactly what we should be doing (reviewing lists, sending thank you emails, etc.) She is amazing!

The Career Resource Center's presentation on CVs was really helpful and made think about how to better organize my CV to reflect my interests.

Handouts from Margo; residency webpages; AMA FREIDA residency website; current residents; other friends/applicants also interviewing at the same residencies. Useful to compare notes. Word of mouth, talking to residents at programs/regions I was interested in and always ending the conversation with more names/contacts to talk to at different programs/regions. Family medicine is a huge field, I was interested in learning more about programs in the mountain west and Margo Vener does not know as much about rural programs outside of California.

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

Not go to as many interviews, especially to places that I wasn't as interested in going.

Stress out less about Step 1. - Be more diligent about sending thank you letters right after my interviews, so I didn't stress about this later - Start working on my personal statement sooner

Take the month of January (or two weeks during January) as a light month or off completely to have time to reflect on my rank list as for family medicine it is an option/acceptable to email your top 1-2 programs on or before February 1st and let them know you are ranking them at top of your list.

not interview in as many places, perhaps try to link places as much as possible so not travel as much. also, would not schedule a tier 1A in middle of interviews, probably definite thing I would change if I could

Ask all questions even the dumb ones to my advisor. Double check all interview dates to confirm that the date and the day of the week matches

Attend the National conference for AAFP programs in July

Do away rotations where you want to interview. Go on fewer interviews

Unsure

I wish I'd budgeted better for travel costs. Also, I wasn't always able to group interviews together geographically, but I wish I'd reached out to residency programs about interview dates. For example, a program might have only offered me two dates in January, but if I'd emailed and said "I'm in _____ on these dates, is there any chance I could interview then?," they might have made an exception for me. Lastly, I didn't realize how early family medicine interviews would be and wish I'd known that when planning my 4th year schedule.

cancel interview that I wasn't going to go to earlier. As soon as you think you might not go, cancel the interview. You likely won't change your mind and gives another potential interviewee as much time as possible to attend in your place.

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

Believe in yourself, and just be yourself when interviewing for programs. You're going to spend years of your life here--if they don't like you for you in the interview, it's probably not a great place.

Talk to Margo Vener as much as possible, do an away rotation at a program you think may be a good fit

Tape your rank list to your bathroom mirror so you (and your partner, if applicable) become used to seeing it.

my first two interviews were with programs I wasn't as excited about and they were both local so they were easy to get to and helped take the pressure off/get a sense for what the interview trail would be like/practice interviewing -interview dinners are a great way to get a sense of the resident culture, but don't judge a program by comparing interview dinners because they vary drastically in turnout within a program depending on the week you interview and which residents are available to show up that week -I took off November to interview and felt like that was a good month

Keep one page on a journal that lists the whole year and mark down the interview dates in erasable ink; on another page write a list of schools interviewing at and if hotel/ticket/transport arranged. Change the email you receive interview offers to either SMS your phone or change it so that account has a unique alert (interview spots do disappear fast). On the interview trail, create a relaxing bedtime routine for the day before the interview (good book, hot chocolate, soothing music). If couples matching, Dean Jones is a wonderful resource. He can give realistic expectation and advise on how to rank.

Family Medicine is not an intimidating field. First step is always to take a deep breath and remember that. Second, really consider where you would want to live first and apply accordingly--programs are so very difficult to really gauge until you go in person for the interview. It is better to apply to too many programs than not enough. Third, remember that everything, and I literally mean everything, works out in the end. There will be many situations (i.e. traps) to make one feel that they are not doing enough, that they themselves are not enough but the truth of the matter is that every person has their own journey--comparison is detrimental and useless. If one person advises you to only apply to community programs, that's good for them. If one person advises you to always go to the interview dinner, that's good for them. It does not mean that those things are good for you. Do what makes sense for you in the moment and try your best not to feel guilty about it.

Family medicine programs, in particular, can vary so widely in their training. It's helpful to keep an open mind, but also be realistic about what skills you want to gain during residency in relation to where you see yourself in the future because it's only 3 years, and you will definitely keep continuing learning after that.

Best of luck!

I applied in Family and OB, because I had not yet decided on my preference. I ended up submitting a mixed rank list, with mostly family programs, based upon my preference for specific programs.

Talk to Margo

Margo Vener is an invaluable resource. If you're going into Family Medicine you need to talk to Margo.

make sure you go to all the socials or as many as you can. Often you can get a better feel of the residency spirit at the social than at the interview itself. Don't be afraid to ask blunt questions in a polite way, you're interviewing the program as much as they are interviewing you. keep a spreadsheet of key questions/interests you will ask or get a sense of from each residency. Then make notes after every interview day. have fun with process, especially

towards the end of the interview trail when the process can feel very draining. Who knows, you might love your very last program!!