

## Post Match Reporting

### 2018/2019 Match Cohort Data

#### Specialty: Internal Medicine-Primary Care

N= 21 (7.0% match cohort)

Item	N	% of specialty cohort	Mean	Standard Deviation
<b>Graduation year</b>				
2018	10	47.6%		
2019	11	52.4%		
<b>Three digit Step 1 score</b>			232.1	15.8
<b>MSPE Adjective:</b>				
Outstanding	16	76.2%		
Superior	2	9.5%		
Excellent	3	14.3%		
Very Good	0	0.0%		
Good	0	0.0%		
<b>AOA elected</b>	7	33.3 %		
<b>Applied to preliminary or transitional programs:</b>	0	0.0%		
<b>Other specialties applied to:</b>				
Internal Medicine				
Internal Medicine-Pediatrics				
Family Medicine				
Obstetrics & Gynecology				
Internal Medicine-Subspecialties				
<b>Number of categorical programs applied to</b>			24.3	8.1
<b>Honors Received:</b>				
Anesthesia	11	52.4%		
FCM	10	47.6%		
Internal Medicine	17	81.0%		
Neurology	13	61.9%		
Obstetrics/Gynecology	16	76.2%		
Pediatrics	13	61.9%		
Psychiatry	15	71.4%		
Surgery	8	38.1%		

## Post Match Reporting

### 2018/2019 Survey Respondent Cohort Data

**Specialty: Internal Medicine-Primary Care**

**N= 20 (8.8% survey respondents)**

Item	N	% of specialty cohort	Mean	Standard Deviation	Min	Max
How many programs invited you to interview?			15.8	4.7	9	25
How many interviews did you accept?			12.3	3.0	7	19
Did you review your application with a career advisor before applying?	19	95.0%				
Before ranking programs, did you review your rank list with a career advisor?	13	65.0%				
<b>Total Spent on Interviews</b>						
\$0-\$500	0	0.0%				
\$501-\$1000	3	15.0%				
\$1001-\$2000	7	35.0%				
\$2001-\$3000	6	30.0%				
\$3001-\$4000	4	20.0%				
>\$4000	0	0.0%				
Did you complete a Pathway project?	8	40.0%				
Did you complete a research project in the field you matched?	13	65.0%				
Did you have a publication during medical school?	11	55.0%				

**The field project was in:**

Community medicine  
Oncology (2)  
Geriatrics, Hospital Medicine  
Quality Improvement/Cost Analysis  
Health Disparities  
Primary care  
urinary incontinence, sexual health  
transgender health, LGBT health education, STI treatment and prevention  
Pulmonology  
Geriatrics  
GME policy  
Internal Medicine Primary Care

**Describe any publications:**

3rd author paper from before medical school Middle author on a paper, also research done before med school.

1 self-reflective humanities essay on a patient encounter that was published in Academic Medicine. Another on a telemedicine research project from the summer after MS1.

Social Science and Medicine, Journal of Adolescent Health. Qualitative research with API undocumented young adults on health and healthcare access.

Determinants of treatment seeking for urinary incontinence; Review of urinary incontinence and associated women's sexual dysfunction

4 papers: 2 from curricular research projects in the pre-clinical years, 2 related to gap research year work. All 4 were written/published during the gap year itself.

I was an author on several publications that were published during med school, however most of them were from research conducted prior to medical school

2 first author publications in cardiology journals from research I worked on prior to medical school

One first-authored publication in a peer-reviewed journal (Journal of General Internal Medicine)

1 meeting abstract about indicators of poverty in a multiethnic sample of cancer patients from my work prior to medical school 1 first-author publication comparing national suicidal mortality rates for Koreans and Korean Americans, published during my JMP2 year 1 first-author publication on burnout among primary care physicians and its relationship to patients' unmet social needs (qualitative study), accepted pending revisions (my JMP masters thesis)

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

Cindy Lai (9)  
Geoff Stetson  
Margaret Wheeler  
Dr. Gurpreet Dhaliwal (3)

Formal advisor, residents, and prior attendings

David Chia

Sara Ayazi (general career advisor)

and while not IM-PC, I found Margo Vener (FCM) very helpful

Jeff Kohlwes

Margo Vener

Personal Mentors in the field (Advisory College Mentor and Research Mentor)

### **What were your most useful career resources?**

Post-match reports to understand how competitive of an applicant I was. Doximity to create initial list, which I then pared down with help from my advisor (Dr. Lai). Dr. Lai was also very helpful in helping edit my final personal statement. Reddit IM spreadsheet to compare other interviewee impressions after I interviewed with a program. Several attendings/mentors who I've worked with in my specific fields of interest (hospital medicine, health care policy/advocacy) helped me weigh pros and cons to decide between my top two choices.

residency websites

office of career development was by far the most helpful. Sara Ayazi helped me identify my values and figure out which specialty would be best and what I should look for in programs. She helped me with my CV and prepare to interview.

Visiting various program website

AMA Freida website, Doximity

I was very underwhelmed by the career advising in IM at UCSF. I found it helpful to talk with former UCSF students who had applied in IM 1-2 years prior. I also found it helpful to talk with UCSF alumni at the schools that I interviewed at (either current residents or faculty). Lastly, there was a shared spreadsheet that was being spread on SDN/Reddit where individuals logged if they had gotten interview invites or rejections and it was a helpful source of information to know when schools were sending out invites or rejections (or when they roughly had the year prior).

I spoke to two of the confidential career advisors and my coach. Post-match report. UCSF residents

Margo!!

Going to a conference in my chosen field was useful in terms of meeting residents from other programs and seeing the work being done at different programs.

Post match surveys!

I didn't utilize many of the advisory resources for internal medicine. I double applied in family medicine and found that Margo Vener was by far the best advisor I interacted with. She sent out emails to everyone applying in FM with tips throughout the interview season and made herself readily available for any advice. She also offered to read all of our personal statements.

Previous years post-match surveys Match lists from prior years

Doximity Speaking with peers who have recently graduated Speaking with Cindy Lai

Also Dean Haber was incredibly helpful. Not only helped with essays, but also with creating lists, crafting emails, etc.

Residents and prior attendings.

For internal medicine, Cindy Lai, my letter writers, my Advisory College mentor, and assigned Coach (both happened to be in IM) were helpful. Some of the career-oriented podcasts on Curbsiders also helped me feel connected to a larger community in internal medicine. Advice from near-peers, whether from personal relationships or specialty-organized events and panels, was incredibly helpful for boosting morale and navigating logistics. Articles via websites like Doximity were occasionally helpful. For double-applying, Dean Jones was easily the best, most high-yield, supportive, and non-judgmental resource for me. It was also helpful to use the AAMC Careers in Medicine and FREIDA > Career Planning Resource web sites. Nothing of course beats being able to talk to folks who were in the same boat as you - they can help normalize your journey when it can feel isolating, contextualize or reframe your situation in the larger picture, and offer wisdom such as acknowledging the grief that comes with closing doors.

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

I'm not sure there would be anything I would do differently except maybe interview at 1-2 fewer programs? Going in I knew I would be a fairly competitive applicant, but was still nervous about getting interview slots so ended up scheduling interviews early on that, in retrospect, I could have scheduled later in the season and then cancelled. That said, it was useful to schedule some low-stakes interviews up front to gear up for programs I was more excited about.

use the ucsf host program more

I would have tried to do more personal reflection prior to submitting my rank list.

I wouldn't do much differently. I thought it was useful to see many different residency programs before deciding which was a good fit for me.

Feel more confident about my application and apply to/ interview at less programs

Been a bit more realistic/less trusting of everyone's comments on how "everything will be alright."  
Program directors have no reason to be completely honest with you, and they can give you false good impressions. After learning to stop "playing the game", felt a little healthier about the whole process.

I would ask for letters of recommendation earlier as it can take some time for them to get done.

Talk to more people before, be more willing to advocate.

I'm not sure I would've done anything differently - I did the best given the information I had at the moment, worked hard to get my materials completed on time, kept my advisors and letter writers up to date, and sought out lots of advice. I was concerned during my interview trail that I should've sent more thank-you's, but IM is moving away from this and I don't believe I was penalized for not doing so as I matched at my top choice.

Work with the office of career dev earlier.

I came back from an MPH year, and found reintegrating and meeting with advisors regarding scheduling advice and applications very challenging. I would recommend that anyone coming back from a year off have a rough plan before they leave already set up. I also had no sense of whether or not I wanted to be part of a community vs. Academic program, so I applied to many different types of places. Most of my community options were stacked as my early interviews. I realized after my academic interviews that I preferred those options, so in

retrospect I would have done a mix of community and academic program interviews early on so I could have a better sense of what interviews to cancel.

One thing I found helpful was trying to talk to prelims at the programs I was interviewing - esp prelims who were doing their main residency (Derm, neuro, etc) at a different institution...they were often able/willing to offer more real-talk and realistic criticisms (I mean, they have nothing to lose) about the program than Medicine interns were. I would have tried to do this more.

Applied to fewer programs, thinking more realistically about geographical locations that I would truly like to end up in as opposed to applying to programs based more so on their name/prestige

I'd take a little bit more detailed notes about my gut reactions to places. The details of call schedules etc didn't matter as much to me in the end (it all was complicated and very difficult to tell how it would actually impact my life, and residents said it didn't matter), but how I felt really did.

I probably would have applied to fewer schools.

I would not have applied to as many less competitive programs. I had a lower than average Step 1 score and so diversified the programs I applied to. However, many of these programs did not offer me interviews, presumably because they thought I would not want to come. The majority of programs in my target and reach range did offer me interviews. I would have created my rank list as soon as my interviews ended instead of waiting a couple of weeks before the deadline. That limited my ability to send out emails of interest to my top choices.

Not go to so many interviews!

I would not schedule a program that you are highly considering as your first interview if you can avoid it. This is less about your performance and more about your ability to evaluate and know what you are looking for getting better after having a couple under your belt.

I definitely over applied to programs, mostly out of my own anxiety. I interviewed at 11 which is the magic number and even that felt like too many. Overall I felt that I did the process the best I could. There are not many things I would change.

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

Especially for Internal Medicine, most people are quite competitive applicants coming from UCSF; a high percentage of honors/AOA, letters of recommendation, and/or a significant research or extracurricular project will all improve your chances of getting interviews at top programs. I would encourage people to consider programs that they might not have due to location or UCSF not typically sending many students there. By the end of my interview season, my rank list looked dramatically different from the beginning, and I think it more closely reflected my own values/interests/priorities in a residency program. That said, no residency program will be perfect, so it is also important to determine what your highest priorities are (e.g. rigor of clinical training, location, proximity to support network, professional and mentorship opportunities, fellowship match) before comparing programs. Additionally, even if you are interested in hospital medicine, I'd recommend interviewing at primary care programs -- these often offer excellent general IM training and learning outpatient medicine is a completely different beast worth investing extra time in.

Try to talk to a few people about where you should apply, and then take their advice! You can always decline interview invites if you end up getting more than you want to go on. Internal medicine is a great and large specialty with many positions in many excellent programs, so you will end up somewhere good!!

From my personal experience and after speaking with friends who also applied into IM, UCSF students match very well and have broad interview choices. Thus, I recommend applying to 15 programs max and interview at around 12. For places that you are less interested in, schedule those interviews near the end of the interview trail such that you can cancel them as you go. Interviews trickle in over the course of September and October so be patient. However, make sure to check your email regularly, or even better, set up notifications on your phone, because interview spots fill up within minutes of the interview invite. Make sure to go to as many of the pre-interview socials as you can, as this is where you will get the most information as to whether the program is a good fit. The interview trail can be very tiring, so I recommend taking time in between interviews to rest or explore a new city. With regards to being competitive for IM, I know that board scores is a common concern, but in my experience, they are not factored in as heavily in the evaluation process as other specialties. Clerkship grades and letters of rec appear to have greater weight. The interviews themselves are often very chill and given UCSF's reputation, many programs are trying to recruit you. With regards to choosing primary care vs. categorical, I was recommended by my advisor to apply only to categorical programs since I am interested in a career in hospital medicine/general internal medicine. However, I ended up applying to three primary care program sites and discovered that the mentorship, people, and support system in the primary care programs felt like a better fit for me. If you are considering general internal medicine, I would highly suggest applying to primary care programs. In my experience, many PC programs are quite flexible in allowing you to subspecialize if you discover that that is a better fit for you during residency.

I know opinions vary on this - however, I do think that your letter of intent matters a great deal. I was told by a program that I would be "highly considered", as well as by both interviewers at the program. When we returned for a dinner they invited us to in January, they seemed to want to elicit confirmation that we'd go there. This program was #2 on my list, so I didn't send them a letter of intent, and they ultimately didn't rank me at all (found out from insider information). Just as a heads up!

If you get an interview with a program, you have a great shot at getting in. Prepare and do your homework, but don't stress out too much during the interviews. Programs want UCSF grads. Despite the enormously subjective nature of honoring, try to honor in your sub-i and other clerkships since programs like UCSF may talk about holistic admissions but will rarely accept applicants who don't hit all the regressive superficial benchmarks.

Encourage students to advocate for themselves.

Applying into IM was a relatively relaxed process for me, as I felt sincerely wanted by residency programs in many places I would really liked. I kept track of the compliments from program directors and interviewers that felt true, and am using those to help build a narrative of the physician I am becoming. For those considering double-applying, I would advise 1) avoiding it if you can, as it's a lot of extra work, and 2) remembering if you need the interview trail to help better understand yourself and which specialty you'd like to go to, that's totally okay. I did 5 interviews in a different specialty and know that I made the most intentional, informed decision I could.

Get a credit card with points/miles. I was able to use a lot toward flights. Be very open to programs outside of UCSF and those considered "top tier" by UCSF. I'm so grateful I could keep an open mind, and ended up doing a 180. I really wanted to stay at UCSF at the start, and by the end I was embracing a program across the country that was offering me better opportunities for my particular interests, and seemed more engaged in my personal success. There are a lot of amazing programs, faculty, and residency peers out there. Go find the place that will best support your educational and life goals :)

Put interviews of places you are less certain about in January or later, so that you can easily cancel them after you've done interviews at places you might like better. Many programs release the dates they interview. I created a calendar/spreadsheet of all the places I applied and their interview dates so that I knew in advance the best way to try and group interviews in certain locations. That being said, there is a lot of turn over and new dates/spots

open up frequently so it is easy to switch. Because of that, it's often easier to wait on buying your plane tickets until you've received most of your invites and your schedule is more stable (also helpful if you cancel interviews later). Just be aware many of the advisors at UCSF are biased towards academic programs. If you are interested in community programs or other things I found it most useful to contact prior students. Interview fatigue is real. The most interviews I did in a row was 3 in the same city and it was exhausting (but doable if necessary). Remember that there are usually dinners the night before in your planning. It's nice to put interviews at programs you care about after some "warm up" interviews, but not so late that you are already feeling burnt out.

I found the mock interviews at the OCPD to be surprisingly helpful - I recommend doing this before you start interviewing, or during once you catch the questions that need more thought.

Make sure to touch base with various faculty advisors before ranking, and before applying - this is a great way to hear about other programs that might be a good fit for you that might not have crossed your mind at first.

Enjoy the travel time, take an extra day or two in cities if you can to get a feel for the place. I stayed in Airbnbs because I like having privacy and down time after interviews, but UCSF also has a great program where you can stay with alums and save money. The interviews are very relaxed, but I still tried to have a talking point about each thing on my resume.

If you are contemplating about taking a year off solely to increase chance of matching into internal medicine, that is not necessary. I did not and matched at my top choice and that was the same for many of my classmates. Ask for your letters early (4-8 weeks before). Two of my letters came on the day after the deadline and caused a lot of unnecessary anxiety had I not just asked earlier.

I will answer this question as someone who only applied to academic programs, I don't know how the process would be different at other community programs. Although IM is not considered super competitive, if you are trying to stay at a large top academic program- try your best on step 1, I think if you are in the 230+ that will help. Understanding that third year grades sometimes feel out of your control, still try and honor as many rotations as possible, especially IM and your subIs. Have depth to your involvement in the things that interest you. I did a year long research project in another specialty before deciding on IM and this did not hinder me at all. I ended up talking about my research at almost every interview.