Post Match Reporting
2018-2020 Match Cohort Data

Specialty: Surgery
Number of Survey Respondents = 15
2018(33%), 2019(40%), 2020(27%)

<table>
<thead>
<tr>
<th>Match year</th>
<th>Match cohort</th>
<th>% total cohort</th>
</tr>
</thead>
<tbody>
<tr>
<td>2018</td>
<td>6</td>
<td>4.05%</td>
</tr>
<tr>
<td>2019</td>
<td>8</td>
<td>5.00%</td>
</tr>
<tr>
<td>2020</td>
<td>6</td>
<td>3.90%</td>
</tr>
</tbody>
</table>

Mean   St Dev
Step 1  242.50  12.19

At least one faculty member knew me both personally and professionally during the course of medical school.

| Strongly Agree | 4 |
| Agree          | 0 |
| Disagree       | 0 |
| Strongly Disagree | 0 |

If there was a faculty member who knew you both personally and professionally throughout medical school, please describe who that faculty member was and how they knew you.

In the spring of 2015, I was introduced to Dr. Tippi MacKenzie by a fourth year medical student at the time, Catherine Tsai. Catherine told me that Dr. MacKenzie was the best research mentor imaginable. She had coached Catherine through experimental design and scientific presentations, and she supported her through the surgery residency application process. Such high praise from a former mentee meant a lot to me. I took Catherine’s advice: I met with Dr. MacKenzie and ended up joining the lab as a summer student. I am incredibly fortunate to have had Dr. MacKenzie as a mentor for the past five years. She has continually inspired me, encouraged me, and advocated for me. Dr. MacKenzie taught me to design well controlled experiments, write award winning grants, interpret complex data, and present in front of a distinguished audience of scientists and surgeons. She encouraged me to question dogma and imagine alternatives. She was my role model for a surgeon scientist, leading teams in the OR and the lab. Most of all, she showed me how to be an accomplished Professor of Surgery and RO1 funded investigator as well as a kind and considerate doctor, woman, and mother. Friends, family, and well meaning physicians advised me not to become a surgeon, saying “You will be miserable,” “You are too nice to be a surgeon,” or “You can’t be a good surgeon and a researcher.” Dr. MacKenzie is the perfect counterexample. Dr. MacKenzie gives me the confidence to see myself as a surgeon and researcher too. She is my inspiration and role model.

Dr. Benjamin Breyer was an exceptional mentor that spent time with me in the operating room, working on research projects, and teaching during grand rounds. He knew me very well as he was the kind of mentor that wants students to succeed in goals they set for themselves. He respected me as an LGBT identified individual and held the highest standard of professionalism. He made an effort to get to know me as a whole person and budding researcher. I am truly grateful to have worked with him.
Surgeon mentors.

My CMC coach knew me both personally and professionally and has helped me through the toughest of times.

**How many categorical programs did you apply to?**

| <= 5  | 11 |
| 6 – 10 | 0  |
| 11 – 20 | 0  |
| 21+    | 4  |

**Did you apply to any advanced programs?**

Yes    0
No     4

**How many advanced program(s) did you apply to?**

None

**Which advanced program(s) did you apply to?**

None

**How many programs in your specialty (not including preliminary programs) invited you to interview?**

| <= 5  | 0  |
| 6 – 10 | 3  |
| 11 – 20 | 6  |
| 21+    | 6  |

**How many interviews in your specialty did you accept?**

| <= 5  | 0  |
| 6 – 10 | 4  |
| 11 – 20 | 10 |
| 21+    | 1  |

**Did you review the list of programs to which you applied with a designated Career Advisor?**

Yes    13
No     2
Before ranking programs, did you review your rank list with a designated Career Advisor?

Yes 9  
No 6

If not a Career Advisor, whom did you review your rank list with?

Faculty 1

Did you enter the Couples Match through the National Resident Matching Program (NRMP)?

Yes 1  
No 14

Did you apply to preliminary and/or transitional PGY1 programs in addition to programs in your specialty?

Yes 1  
No 14

How many PGY1 programs invited you to interview?

None

How many PGY1 program interviews did you accept?

None

Estimate the total amount you spent on interview trips.

0 - 300 1
301 – 500 0
501 - 1000 1
1001 - 2000 1
2001 - 3000 7
3001 - 4000 2
4001 – 5000 1
5001+ 2

Were you involved in a research project in your specialty?

Yes 12  
No 3
Did you do any away rotation(s)?

Yes  5
No   10

List the institution(s) and specialty for your away rotation(s).

MGH (3)

UCSF Fresno  Burns/Plastics ; Harbor UCLA  Trauma Surgery

University of Washington  Transplant Surgery

Do you have any publications since starting medical school?

Yes  8
No   7

How many publications do you have?

<= 5     13
6 – 10    1
11 – 20   0
21+       1

Do you have any publications in the specialty you applied to since starting medical school?

Yes   1
No    3

How many specialty publications do you have?

<= 5    1
6+      0

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

Dr. Andre Campbell (8)

Tippi MacKenzie

Kim Kirkwood (4)

Letter Writers
What were your most useful career resources?

Frieda (AAMC), program websites, residents

There was a Michigan weekend program in surgical leadership that I applied to and went to very helpful, where they walked us through each step of the general surgery residency cycle and gave us very specific examples and advice from residents and faculty. If you know a faculty member very well (e.g. they are your research mentor) Senior residents, especially those you have worked with several times

Recently matched MS4s, residents (especially interns they went through the process most recently!)

The best resource is someone who has gone through the process just before you and can guide you through all of the required details, politics, and nuance. The faculty are often slightly out of touch with the process, and there is only one surgical career advisor who is not always easily accessible for detailed questions.

AAMC residency resources, including interactive charting map they now have. Doximity was +/- useful

I think the most useful resources were other applicants and recent UCSF graduates in general surgery programs across the country. The UCSF faculty are very helpful for generating your list and refining it based on potential sub specialties of general surgery you may be considering. I found the post match reports to be incredibly helpful as well.

I didn’t really find any of the official resources to be particularly helpful (other than the specialty specific career advisor) as they don’t know many specifics based on specialty and will really only give you the same advice you could get from googling how you should pick a residency. Also, I felt that the number suggestions (how many to apply to, how many interviews, how many to rank, etc) were the exact same for every person in my specialty and not tailored to strength of the application, so, get a sense from people before you who were similar applicants how many they really needed to apply to in order to get the number of interviews you need.

Prior applicants Assistant Program director here at UCSF

talking to Dr. Kirkwood, Dr. Campbell, and Dr. Kenzo Hirose after my sub Is to evaluate how competitive an applicant I was and narrow down a list of programs to apply to (Dr. Hirose was particularly helpful for this). Had all letter writers read my personal statement and provide critique Talking to Dr. Varma, Dr. Kirkwood, and Dr. Campbell after my interviews for help building my rank list.

Most helpful: upperclass people Career advisors were 2nd most helpful. STAR database AAMC website

Residents 1 3 years ahead in my specialty
If you had to do anything differently in the residency matching process, what would it be?

Anticipate costs more realistically. I ended up needing to take more loans to cover expenses after interview season. Fourth year is expensive! Between Step 2, interviews, etc. expenses really add up. Plan for more $$ than you think you might need.

Worry less. Focus on the next step, one step at a time.

I would have saved the money and gone to fewer interviews.

I would strongly encourage applicants to do an away rotation.

It is your best chance to become known by an institution that is sorting through hundreds of other applicants they only know on paper. The faculty here are wary that an away could hurt you, however, we have very strong clinical training at UCSF, and you will do well on an away rotation. Apply to more programs. It cannot hurt, and the money is worth the peace of mind.

I would definitely do more away rotations. I would have done 2 or 3. I also would have reserved telling any program it was my first choice until I was personally ready to make that determination. I would have gotten to know faculty in the "brass" interview sooner, setting up meetings or something.

I am not sure how beneficial it is to tell programs they are your number one. I think there is a lot of pressure to do so prior to submitting your list, but if you are still considering programs don’t let any institutions pressure you. Also, there is still a culture of programs reaching out to applicants, so I would have gotten better advice on how to handle that.

I would not have applied to "safety" program as most of them never even got back to me about an interview likely because they assumed I would not attend. If you are likely going to be interviewing at mostly top 10 schools maybe diversify to the top 30-40, but if you go beyond that, they'll see through it and it’s just a waste of time and money. I also would have reached out to graduates in my specialty much earlier than I did. This was the most helpful information that I got and I wish I had made my original list off of this. You can’t really tell much about programs based off their websites and there are limited hard facts that will realistically affect your decision (perhaps the rank and some schools that have a skewed gender balance...which to me is a sign of something being off) but current residents who went through the interview process can give you some idea of places they liked and why and places they didn’t like and that can help guide your decisions more. Everyone was really willing to talk to me once I reached out, but I waited to do it until after interviews and I regret not doing it earlier. People will also give a balanced opinion about their own program and whether it might be a good fit for me as well as other places they interviewed at. I felt like they weren't just trying to talk me into their institution, but would have a more honest conversation about pros and cons of different programs.

Apply to fewer programs

Reach out to more programs to address perceived lack of interest based on geography.

Apply to fewer programs to try to save some money. I’m happy I went on 14 interviews but had way too many interview offers to go through.

Spend more time reaching out to upper class and advisors sooner than later.
I would not attend interviews at places I was highly unlikely to rank highly purely due to geography. I had fairly tight geographic restraints and yet applied and interviewed broadly at places I didn't have much interest in ending up at, mostly out of fear.

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

Speak with a career advisor early. Also, meet with various people in your specialty so that folks can get to know you early on in your process. I was a bit intimidated to meet with attendings, but realized that they were happy I was interested in surgery and wanted to help. I wondered "what do I talk about with these attendings!?" Having a clear idea of why surgery is important, but beyond that try asking open ended questions about their careers, advice on choosing a residency program, or what they look for in a trainee. Talking with residents is also a great resource. Also, consider taking some time in your schedule (summer of 4th year) to work on your application. I had a month of research during which I worked on my research project, but also had time to work on my residency application.

Do what you are interested in and passionate about that can change completely and everyone understands that. It's 100% ok and good to volunteer/work/research/publish in a specialty different than where you end up so don't worry too much.

If there's a program where you really want to go or a city you really want to match in, do the away rotation, especially if that program is a top 10 program. For those programs, they have the luxury of selecting who they already know (and can extrapolate will be successful and make them look good), so your chances of matching there are much higher if you spend time there and get to know people.

Dedicate yourself to doing well on your sub is. This lays the foundation for the rest of the process because the faculty you work closely with will not only write you strong letters of recommendation, but will become your biggest advocates. Surgery is a small field, and everywhere I went, people always acknowledged who wrote my letters this will reflect positively on you because we have great (and well known) faculty here. At UCSF however, the culture is such that people are kindly willing to help you and advocate for you, but usually only if you ask. So, get comfortable with asking! Phone calls from your mentors to PDs, chairs, other faculty etc. really make a difference, so it is helpful to have laid a very strong clinical foundation working with your mentor during your sub is. Additionally, the residents (and word of mouth from the residents) contribute heavily in UCSF's thought process about you. Be genuine in your relationships with the residents, ask for their help and advice, and at the end of the day, they will speak positively on your behalf to the people in charge.

I would recommend incorporating research into your medical school experience, ideally in surgery, and get it published. I would apply for more awards. I would get mentors and letter writers lined up before sub I's (at least 2 3 of them), and then do sub I on those services so they can add to their knowledge about you. Ask them after the sub I. Reach out to programs during the limbo phase where you haven't heard from them but they may have already sent out a wave of interview invitations. I would also do away rotations, 1 3 would be sufficient. Don't be deceived general surgery is competitive and you may have trouble getting interviews. You will be fine, but be prepared to not get interviews you were hoping to get. Talk to career advisors to help network/advocate for you at other institutions.

Although UCSF does not really encourage students to do away surgery rotations, I would recommend doing an away at a program you are interested in. This gives you the opportunity to learn more about the program, determine whether the program is a good fit for you, and show that you can succeed there.
By the fact that you have UCSF attached to your name, you are inherently going to be somewhat sought after. Even if you feel like a mediocre candidate (I did), you probably are a stronger candidate than you think. I was surprised to get interviews at virtually every program that I wanted to go to and at the end of it all during my final conversations with programs, both of my top two told me I would match there if I so desired. This is not to say that everyone will necessarily match at their top program, BUT that you will be a stronger candidate than you think, you WILL get interviews, and you WILL have great options that will be hard to choose between at the end of it all. The amount of stress that this process causes is so unnecessary...you have more power than the programs it is truly an applicant favored match. Also, its VERY easy to get swept up in rankings. Certainly go to a good program that is going to set you up to do what you want to do in the future and open doors for you. But general surgery is LONG and many people drop out during residency. Go to a program where you are going to be happy. Because at the end of the day, if you dont finish residency, it doesnt matter what potential fellowships your program could have opened doors for. Think about what you want your life to look like when you are a senior resident. Will you have kids then? Will you be married? Will you want to own a house or live in an apartment? Be near family? Be in a big city with tons to do or a smaller town that feels calmer when you leave work? Don't wait to live you life until after all your training is done, this is your life and take that into account when you think about programs. As people will tell you on the interview trail, general surgery residency is hard but it doesnt have to suck. Go somewhere where it will be a great 5 7 years. Even though it seems insane (and it is), actually be neurotic about getting back to programs about interviews IMMEDIATELY (by that I mean, try to have your reply sent to them within 20 minutes of receiving the invite). I know people who got boxed out of interviewing at a program they were interested in because they didnt respond in time. That would be such an unfortunate reason not to go to the program of your dreams. Its SO dumb, but consider actually having a separate tone/vibration for a separate interview e mail address with push notifications and keep your phone on you. Have someone manage your e mail while you are on a plane or otherwise unable to access your e mail. It is ABSURD but if you live in denial about the ridiculousness and decide you refuse to be attached to your device, you may miss out on invites, so be prepared for that possibility.

Away rotations are an underrated resource!

Speak with faculty mentors in your field, and most importantly the recently graduated class of MS4s that matched into your specialty.

Try to talk to somebody who is actively involved in the application process (Dr. Hirose did this for me, but asking your sub I mentors who is most involved can be helpful too) I think there is a lot of old information out there about how many / which programs to apply to that isn't always accurate. I felt most confident after talking to some people who interviewed/vetted candidates this year about where I stood in terms of competitiveness at other programs. Set up meetings with mentors EARLY (like late spring/early summer) to make sure you have time to make all the decisions you need to and discuss them with your mentors they can be really tough to get meetings with or even get emails from as things get busier later in the summer Come up with some way of ranking/keeping track of your impressions as youre on interviews (I used a google spreadsheet). Even though I initially had a numerical/objective score rating system that I used to rank programs, I also kept a running draft of a rank list based on completely subjective stuff/ the "vibe" I got from each program... my eventual rank list looked way more like the subjective draft than the objective one.

Talk talk talk to your advisors and upperclass people. Very critical to know what's to come and what to look into.

Residents and co applicants are some of the best sources of "truth" in the residency application process for surgery. I found that they were much more forthcoming about both pros and cons than program leadership. Nearly all programs will train you to be a good surgeon, so emphasize environment, research, and quality of life when choosing a program.