



THE UNIVERSITY OF
CHICAGO

UChicago Medicine

Pritzker School
of Medicine

2019-20 Residency Process Book



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Advising Calendar

April-June 2019	First Meeting with Career Advisor <ul style="list-style-type: none"> Individual 30-60 minute meeting with your career advisor to discuss specialty choice and fourth year schedule
April-July 2019	MSPE Meeting & Advisor Meetings <ul style="list-style-type: none"> Schedule your Medical School Performance Evaluation (MSPE) meeting with Dr. Fromme Continue to meet with your Career Advisor to finalize specialty choice and develop an application strategy Meet with your specialty advisor to discuss program selection Work on your personal statement and CV Ask for LORs
June-August 2019	Personal Statement Check-In with Career Advisor <ul style="list-style-type: none"> Review and finalize your personal statement with your Career Advisor's input (can be done over email)
May 30 and June 5, 2019 5 pm, J-103	Optional Workshop: <i>Optimizing Your Personal Statement</i> <ul style="list-style-type: none"> Choose only one workshop date
June 3, 2019 5 pm, BSLC	MS4 Class Meeting #1: <i>Residency Application Overview</i> <ul style="list-style-type: none"> Review the timeline for the residency application process Learn details and strategy for assembling your application
July 8, 2019 5 pm, BSLC	MS4 Class Meeting #2: <i>ERAS Overview</i> <ul style="list-style-type: none"> Learn the logistics of applying for residencies via the Electronic Residency Application System (ERAS)
August-September, 2019	Program List Meeting with Career Advisor <ul style="list-style-type: none"> Schedule a 30-minute meeting with your Career Advisor to review your program list for depth and breadth Practice interview strategies
September 25, 2019 5 pm, BSLC	MS4 Class Meeting #3: <i>Interviewing for Residency</i> <ul style="list-style-type: none"> Learn tips from UCM Program Directors on how to interview successfully Learn about the Alumni Residency Hosting Program
December 1, 2019	Deadline to take Step 2
January-February, 2020	Rank List Meeting with Career Advisor <ul style="list-style-type: none"> Schedule a 30-minute meeting with your Career Advisor to discuss strategies for finalizing your rank list
January 20, 2020 5 pm, BSLC	MS4 Class Meeting #4: <i>Preparing Your Rank List</i> <ul style="list-style-type: none"> Learn how to enter your rank list and strategies for finalizing it
February 19, 2020	Submit your Rank List by 8 pm CST
March 20, 2020 10 am	Match Day!

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Web Resources

Careers in Medicine

www.aamc.org/cim

ERAS (Electronic Residency Application Service)

www.aamc.org/eras

FREIDA

www.ama-assn.org/ama/pub/education-careers/graduate-medical-education/freida-online.page

NRMP (National Residency Matching Program)

www.nrmp.org

AUA (American Urological Association)

www.auanet.org

San Francisco Match

www.sfmach.org

USMLE (United States Medical Licensing Exam)

www.usmle.org

NBME (National Board of Medical Examiners)

www.nbme.org

Military Match

www.militarygme.org

Visiting Student Application Service (VSAS)

www.aamc.org/students/medstudents/vsas

Glossary of Terms

Advanced (PGY-2) Residency Positions: An “advanced” or PGY-2 position does not commence until 1-2 years after the match and requires completion of 1 or more years of preliminary training. The following specialties offer advanced positions (some of these may also have programs which offer categorical positions): anesthesiology, dermatology, neurology, ophthalmology, PM&R, radiation oncology, and radiology. Programs in neurosurgery, orthopaedic surgery, plastic surgery, and urology are advanced programs which “bundle” in a preliminary year in general surgery and do not generally require a separate preliminary application process.

Career Advisor: One of eight faculty members assigned by the Pritzker School of Medicine to assist you in the application process. A Career Advisor provides counseling and feedback in the career selection and implementation process, navigation of the match process, and review of application materials, including the personal statement and ERAS application.

Categorical Residency Positions: A “categorical” position is one which offers full residency training required for board certification in that specialty. You do not need a preliminary year for these programs.

Early Match: Ophthalmology, urology, and all residency programs run by the military are early match programs. Applicants in ophthalmology apply and match through the San Francisco Match (<http://www.sfmarch.org/>), while applicants in urology apply via ERAS and match via the American Urological Association (<http://www.auanet.org>). Ophthalmology applications are due in July and urology applications in September. Rank lists are submitted in December/ January, and match results are posted in January.

ERAS (Electronic Residency Application Service): ERAS is a service that transmits applications, letters of recommendation, Medical Student Performance Evaluations (MSPEs), medical school transcripts, USMLE transcripts, and other supporting documents from you and your designated dean’s office to residency program directors using the internet. ERAS begins transmitting applications on September 15.

LORs (Letters of Recommendation): Anywhere between 3-6 LORs are necessary for an application to residency, depending on the program and number of specialties to which a student applies. Applicants should ask for LORs no later than 6 weeks in advance of submitting their application and they should ask a physician with a good sense of their clinical ability, clinical performance, and personal interests.

Match Day: Match Day is held on Friday of the third week in March. All US seniors open their match envelopes from the NRMP at 12:00 pm Eastern Standard Time to find out into which residency program they have matched.

MSPE (Medical Student Performance Evaluation): A letter of evaluation (not recommendation) which describes a student’s performance in medical school. The MSPE includes an assessment of both the student’s academic performance and professional attributes. It is released to residency programs on October 1.

MSPE Director: The MSPE Director is responsible for meeting with all fourth-year medical students, overseeing the construction of each student’s MSPE, and reviewing the MSPE with the student.

MSPE Survey: Rising fourth-year students receive this online survey in the spring of the third year. The survey helps students prepare for the initial meeting with the MSPE Director, which is held sometime between May-July. Some of the information provided by the student feeds directly into the MSPE. Other information (eg. specialty selection, letter of recommendation writers’ names) is used to help the career advising team best advise students throughout the application process.

NRMP (National Resident Matching Program): The NRMP (<http://www.nrmp.org/>) conducts a residency match that is designed to optimize the rank ordered choices of students and program directors. On Friday of the third week of March, the results of the match are announced. With the exception of early match programs, all residency programs use the NRMP. The applicant registration deadline is the end of November and the Rank Order List deadline is the end of February.

The NRMP is not the same as ERAS. You use ERAS to submit your application; you use the NRMP to submit your rank list.

PGY: Post-graduate year. PGY-1 is an intern position; PGY-2 or higher is a resident position.

Preliminary Residency Positions (PGY-1): A “preliminary”, or PGY-1, position offers only 1-2 years of training prior to entry into advanced specialty programs. Many internal medicine and surgery training programs offer preliminary positions in addition to categorical positions. Transitional year programs are also considered preliminary programs.

ROL (Rank Order Lists): Rank order lists are the lists of programs in order of preference submitted by applicants to the NRMP before the deadline (last week of February). Matched applicants consistently have longer ROLs than unmatched applicants; in 2018, the average number of ranked programs for matched U.S. applicants was 12.5.

SLOE (Standardized Letter of Recommendation): Some specialties, like emergency medicine and plastic and reconstructive surgery, require a SLOE from an applicant’s home institution. Check with your specialty advisor to see if this applies to you.

SOAP (Supplemental Offer and Acceptance Program): SOAP is a program administered by the NRMP that begins on the Monday of Match Week. Through the SOAP, students who have not matched to a residency program can submit additional applications through ERAS in an effort to obtain a residency position.

Specialty Advisor: A faculty member from the specialty to which you will apply. You choose this person based on the recommendations of the department and your own familiarity with the faculty member. This advisor provides “specialty care” in the match process, including constructing a list of programs, identifying letter of reference writers, and reviewing rank lists for breadth and depth.

Transitional Residency Positions: A “transitional” position is an alternative to a preliminary year. It offers a mosaic of experiences in surgery, medicine, pediatrics, and more, and is for people who want broader exposure to clinical issues. It may be a good option for those seeking specialties that support other disciplines, like radiology or anesthesia.

VSAS (Visiting Student Application Service): VSAS is an AAMC service that helps streamline the process of applying for away rotations. Through VSAS, students are able to submit one single application for an away rotation. Check the VSAS website (<https://www.aamc.org/students/medstudents/vsas>) to find a list of participating institution. VSAS also provides a centralized location for managing offers and tracking decisions.

Honors & Awards

(Taken from the 2019-20 Academic Guidelines)

Graduation with Honors

The Honors and Awards Committee, consisting of selected faculty, course directors and clerkship directors, is appointed by the Dean for Medical Education. The committee, chaired by a faculty member designated by the Dean for Medical Education, is charged with determining selection of students for graduation with Honors and designation of specific awards at graduation.

Determination of Graduation with Honors is at the discretion of the Honors and Awards Committee using a holistic review process. Generally, only 10% of the graduating class receives the “Graduation with Honors” designation.

A student may receive a designation of Graduation with Honors on the diploma if so designated by the Academic Honors Committee. In order to qualify for Graduation with Honors, students must have:

1. Demonstrated academic excellence during their years at the University of Chicago Pritzker School of Medicine.
2. Demonstrated outstanding professionalism during their years at the University of Chicago Pritzker School of Medicine.
3. Performed significant research while enrolled as a student in the medical school. Ordinarily, such research will have led to either publication of results in scientific journals, presentation of the research project at professional meetings, or presentation at the Senior Scientific Session in May of senior year.

Other Graduation Awards

The Pritzker School of Medicine awards several specific named awards to graduating students, as well as several departmental awards. Each award has specific criteria. Such designations are decided by the Academic Awards Committee, with consultation from the departmental chair or representative, when appropriate.

Departmental representatives may also designate awards to members of the graduating class who demonstrated outstanding proficiency in their respective departments/sections.

Alpha Omega Alpha

The University of Chicago is home to the Illinois Beta Chapter of Alpha Omega Alpha, the national medical honor society. Election to the chapter occurs in the early fall of Pritzker students’ fourth year.

To ensure that the selection of students to AΩA is fair and inclusive, a committee, appointed by the Dean for Medical Education, identifies through a holistic review process the top quartile of the class, who are considered AΩA-eligible. From the eligible group, 1/6 of the class is then selected for membership in AΩA by a separate AΩA selection committee. The AΩA constitution calls on the committee to consider not only scholastic achievement but also capacity for leadership, professionalism, a strong sense of ethics, and a commitment to service in the school and community, along with outstanding achievement in research.

Gold Humanism Honor Society

In 2005, the Pritzker School of Medicine established a Gold Humanism Honor Society (GHHS) chapter to recognize our students for their humanistic attributes. The GHHS seeks to recognize medical students who have demonstrated exemplary attitudes and behaviors characteristic of the most humanistic physicians. The

election process is based upon the recommendations of third-year peers of the Pritzker School of Medicine and from the GHHS Selection Committee deliberations. The selection committee is composed of a broad array of individuals who interact with students in a variety of settings: clerkship administrators, nurses, residents, faculty, and medical school staff.

Requirements for Graduation

(Taken from the 2019-20 Academic Guidelines)

Assignment of Credit Units in the Fourth Year

The fourth year experience at the Pritzker School of Medicine is intended to consolidate the knowledge, skills, and habits that students will need to be successful residents and practicing physicians and consists of both required and elective experiences. In total, students must complete a minimum of 1200 units of work over the course of the year.

Required and elective courses are assigned units based on:

- Intensity of workload
- Comparability to other Pritzker courses
- Time commitment
- Curricular priority

Units for standing courses and clinical experiences are assigned by a committee (Associate Dean for Medical School Education, Pritzker Registrar, Executive Director of Medical School Education and Director of Medical Education) and are reviewed and approved by the Curriculum Steering Committee. All new elective proposals are reviewed in detail by the Curriculum Steering Committee and are assigned credit units by that committee.

Required experiences include a minimum of 525 units:

- Subinternship (150 units)
- Emergency Medicine Clerkship (150 units)
- Scholarship & Discovery (100-300 units)
- Scientific Basis of Medical Practice “Selectives” (150 units total)

If a student has deferred either Family Medicine or Neurology to the senior year in order to do subspecialty electives the third year, the student will receive 125 units for that clerkship in the senior year.

The remainder of the senior schedule is comprised of elective courses and clerkships, teaching assistantships, mentored independent study, and offsite rotations.

Determination of Units for Away Rotations

Students may do up to three months of electives at outside institutions. Students work with their career advisors to choose off-site rotations that will enhance their career and learning goals. They fill out a form that includes a detailed description of the off-site rotation, including learning goals, assessment methods, time commitment, and responsibilities. The form is signed by the student's career advisor. A committee consisting of the Associate Dean for Medical School Education, the Pritzker Registrar, the Executive Director of Medical School Education and Director of Medical Education assign credit units based on comparable courses or clerkships at Pritzker. Sometimes additional information is required from the student or the school in order to assign appropriate units. If a student believes that the unit assignment is not appropriate, the student has the opportunity to ask for additional review and to provide additional information and details about the proposed experience.

Determination of Units for Independent Study Electives

Students may work with faculty members to create independent study electives for research, basic science, or clinical experiences. Students fill out an online Independent Study Form that is signed by the faculty member

with whom they will be working. This form requires a detailed description of the proposed experience, including learning goals, time commitment, and evaluation methods. Credit units are assigned in a manner parallel to that for away rotations.

Specific Requirements for Graduation

- ☐ Successfully complete all coursework, as determined by the departments and the Committee on Academic Promotions.
- ☐ Demonstrate professionalism and ethical conduct in all personal and professional actions and interactions, as determined by departments, medical school administration, and the Committee on Academic Promotions.
- ☐ Complete fourteen (14) quarters of full-time enrollment and full tuition payment.
- ☐ Register for and record a score for the United States Medical Licensing Examination (USMLE) Steps 1 and 2 (CK and CS). Students are responsible for meeting NBME deadlines.
 - Step 1 is usually taken during the spring quarter following the completion of all second year courses.
 - Step 2 (CK and CS) **must** be taken by **December 1*** of the senior year.
 - Students may not receive the MD degree from the Pritzker School of Medicine if these exams are not completed as required.
 - If a student fails the Step 1 exam, he or she should notify Dr. Woodruff immediately, and retake the exam prior to beginning the residency application process.
- ☐ Complete all core course requirements by **April 30** of senior year.
- ☐ Complete all course evaluations following each course, clerkship or elective.
- ☐ Discharge all financial obligations to the University at least four weeks prior to the June Convocation date.
- ☐ Apply to graduate no later than the first week of the quarter in which the degree is expected (Spring Quarter of fourth year).

Upon successful completion of the curriculum of the Pritzker School of Medicine, the student is recommended to the Board of Trustees of the University of Chicago for the degree of Doctor of Medicine.

**While the deadline for Step 2 (CK and CS) remains December 1, recent data from across the country suggests it may be optimal to take Step 2 CS between the middle of July and the end of the first week of September. Testing in this time frame allows failing students to retake the exam in time for the residency program ranking process.*

Scheduling Fourth Year

to accomodate residency interviews

Basic Principles

- It is not acceptable to miss days during sub-internship rotations, basic science selective courses or third year clerkships that were deferred. If this cannot be avoided, it should be kept to a minimum and always with permission from the Course or Clerkship Director. For instance, a one month selective meeting 5 days/week has a total of 20 class days; therefore, every two days missed is 10% of the class time. If you need any days off to interview during rotations, **you must ask the course director** first. Be aware that there is no guarantee that you will be given any of these days away from the rotation.
- Keep October, November, early December or January open (e.g. no class/clinical responsibilities), if at all possible, for interviews.
- Incorporate studying for and taking Step 2 into your schedules. All students must take Step 2 exams by December 1. You do not want to take either test “cold.” Remember that Step 2 CS is based on a checklist of clinical skills, so review the checklist prior to taking the test.
- Use the fourth year efficiently, especially time after Match Day to complete graduation requirements.
- If applying in “early” match (military, ophthalmology, and urology), keep September–December flexible.
- If applying to dermatology, neurosurgery, orthopaedics, or emergency medicine, plan to keep November–February flexible.

Specifics

- Emergency medicine rotation provides some limited flexibility. Students select from a template schedule with a required didactic/simulation series and clinical “shifts.” If you miss any of the didactics, the time must be made up in another month to fulfill the requirements of the rotation. Similarly, if you miss shifts during the month, they must be made up in order to complete the rotation. Making shift changes with other students or arranging to complete missed shifts or didactics at a later time must be cleared in advance with the clerkship directors.
 - **Note:** Shifts cannot be front or back loaded. You must attend the Emergency medicine orientation on the first day of the rotation. Alternate orientation arrangements cannot be made.
- Electives that provide maximum flexibility during the fourth year include readings, research, and independent study preceptorships. These may be good courses in which to enroll during peak interview times. This is also the perfect time to study for Step 2.

Fourth Year Schedule Examples

“Normal” Schedule (for majority of programs):

July, August (September)	Sub-I's/Work on residency application
September 15	Submit ERAS application
September/October	Study for and take Step 2
October -January	Interviews
December 1	Deadline for Step 2CK & CS
January/February	Emergency Medicine rotation

“Early Match” Schedule (for those applying in the military, urology, or ophthalmology matches) keep September – November flexible):

July, August (September)	Away rotations/Residency Application
September-November	Study for and take Step 2/Interviews
September 15	Submit ERAS application
September-December	Interviews
December 1	Deadline for Step 2 CK & CS
January/February	Sub-I's/Emergency Medicine rotation

“Selective Specialties” Schedule (for those applying in dermatology, emergency medicine, neurosurgery, orthopaedic surgery, plastic surgery, or radiation oncology; interview days are not flexible and tend to be later in the season):

July	Study for and take Step 2
July, August (September)	Away rotations
September 15	Submit ERAS application
October/November	Sub-I's
December 1	Deadline for Step 2CK and CS
November-February	Interviews
Post-Match	Emergency Medicine rotation (Or schedule this July-August)

Away Rotations

A fourth year student may spend a maximum of three months during the fourth year on off-campus rotations. Students choose to do away rotations as a way to learn more about a particular program or specialty. Most programs do not require fourth year off campus rotations; however, some specialties expect medical students to participate in away rotations prior to applying for residency. These specialties include: dermatology, emergency medicine, orthopaedic surgery, ophthalmology, otolaryngology, neurosurgery, plastic surgery, PM&R, radiation oncology, and urology. Away rotations should not be taken lightly. Prior to applying for away rotations, students should discuss their options with their career advisor.

Timing of Applications

- While the overwhelming majority of away rotation experiences open for applications in February and March, there are a small number, especially in emergency medicine and ophthalmology, which open for applications before the New Year.
- Application deadlines vary by medical school/medical center, but generally they begin in February and end in April.

Resources for Program Information

- Many away rotations now use the AAMC Visiting Student Application Service (VSAS) (<http://www.aamc.org/vsas>). If you are applying to a VSAS school, email Registrar Maureen Okonski (mokonski@bsd.uchicago.edu) to receive authorization and begin the process.
- If the institution does not participate in VSAS, look for visiting student information on the medical school's website.

Materials Needed

Applications vary by each school or program, but in general students will need the following:

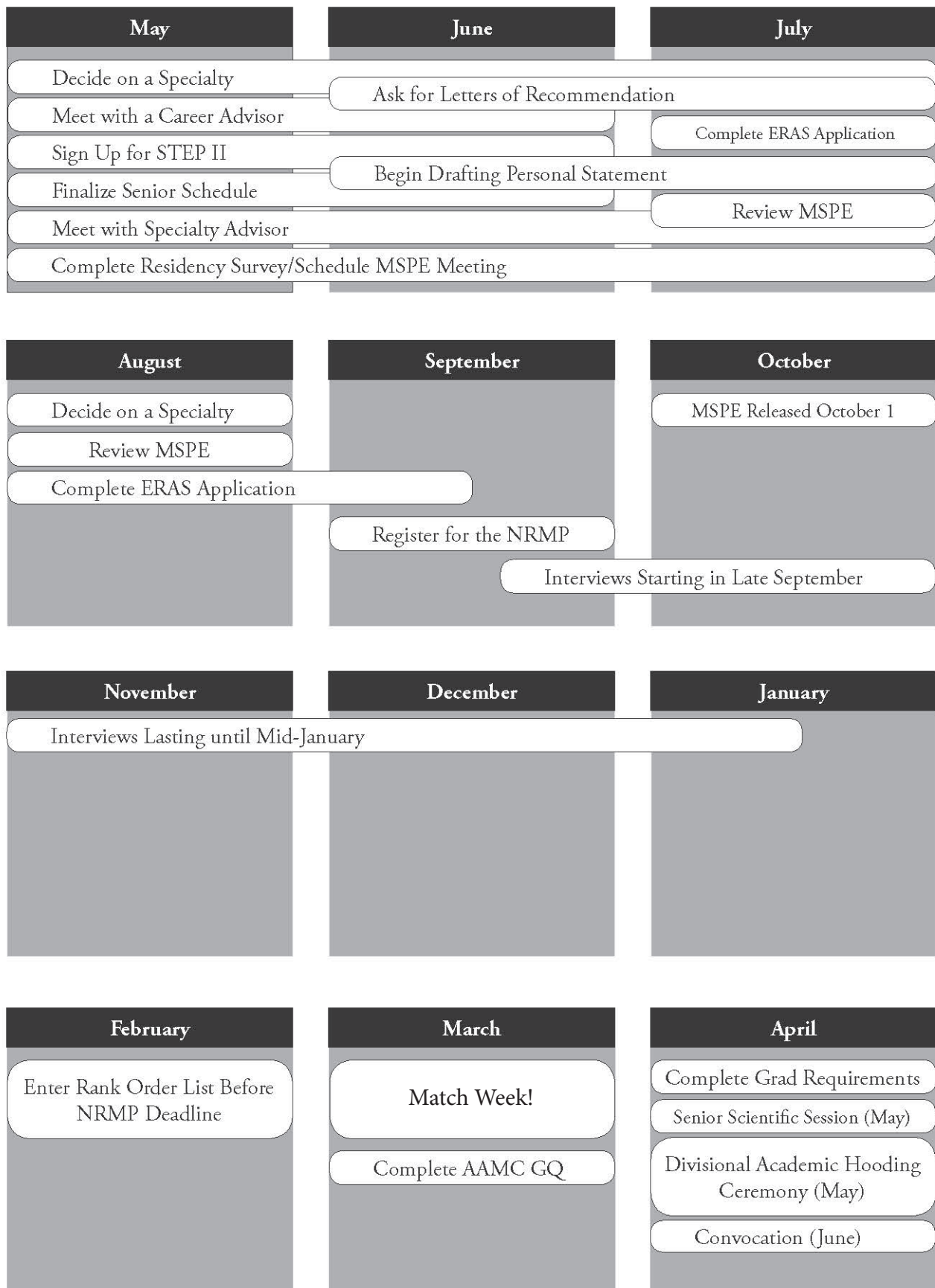
- Letter of Good Standing: Email Jill Kelly (jkelly@bsd.uchicago.edu)
- Curriculum Vitae (CV): see sample in this book on page 32 or on our website
- Photo: Email Jill Kelly if you would like to use your photo from the UCID
- Letter of Recommendation (LOR) from faculty: Only sometimes required

Away Rotations & Credits

The Associate Dean for Medical School Education approves all off-campus rotations and assigns credits. Below is the process for assigning credits:

1. Submit an **Off-Campus Rotation Application** (on our website) with supporting documentation to Jill Kelly. Make entries directly into form and then print. Do not print and fill out manually.
2. You will be informed by e-mail about disposition of application and number of units awarded.
3. Upon approval, forward the **Institutional Evaluation Form** (on our website) to the person evaluating your performance during the off-campus rotation.
4. Complete post-rotation evaluation.

Timeline: Regular Match



Checklist: Regular Match

April–June 2019

- ☐ Work toward narrowing your specialty choice.
 - Attend departmental seminars and use electronic resources (<http://www.careermd.com>; Careers in Medicine: www.aamc.org/cim; FRIEDA: <https://www.ama-assn.org/go/freida>)
 - Take advantage of the remaining months that seniors are here and talk with them about the programs they visited, ranked, and did not rank.
 - Select a **specialty advisor** and meet with them to discuss career decisions and senior year plans, including whether you need to arrange an away rotation.
- ☐ Determine whether you want or need to complete any away rotations. Review information on other medical schools' websites, paying attention to deadlines for applications.
- ☐ Finalize senior schedule.
 - Most interviews will occur in October, November, December and January, so keep your schedule light and flexible during those months. Please refer to guidelines for the Fourth Year Schedule on page 12.
 - Lottery results will be available by May 7, 2019.
 - Sign up for Step 2 CK & CS. **Step 2 CK & CS must be taken by December 1!** (Schedule Step 2 CS early, as dates may fill up.) *While the deadline for Step 2 (CK and CS) remains December 1, recent data from across the country suggests it may be optimal to take Step 2 CS between the middle of July and the end of the first week of September. Testing in this time frame allows failing students to retake the exam in time for the residency program ranking process.*
- ☐ Career advising.
 - Mid-May through the end of June: **meet with your assigned career advisor** to review career choice, senior year organization (elective/selective choices, flexible time for interviews), MSPE noteworthy characteristics, letter writers, CV, personal statement, and specialty advisor.
 - Set up a time to meet with the MSPE Director between late April and July to discuss your MSPE and residency application.
 - If you are doing an away rotation or will be off campus for part of the summer, notify Rebecca Silverman (rsilverman@bsd.uchicago.edu) **as soon as you know when you will be gone**, so she can help schedule your MSPE meeting.
- ☐ Get started on your personal statement. Get lots of feedback on your statement from your career advisor and your specialty advisor, in that order. For extra help, attend one of Dr. Woodruff's *Optimizing Your Personal Statement* workshops: May 30 and June 5, 2019 (choose one), 5 pm, J-103.
- ☐ Attend the **MS4 Class Meeting #1: Residency Application Overview on June 3 at 5:00pm in the BSLC.**

July–August 2019

- ☐ Attend the **MS4 Class Meeting #2: Overview of ERAS on July 8 at 5:00pm in the BSLC.**
- ☐ Start filling out your ERAS application (a token to allow you to register will be emailed to you in June).
 - Update your CV (see page 32 for an example).

- Identify faculty who will write your letters of recommendation (LORs). Remember, letter writers will need your CV and a draft of your personal statement. You should give your writers at least 6-8 weeks to complete their letters by September 1, so **ask them before mid-July**. Download a Letter Request Form from ERAS and email it to your letter writers so they can upload their LOR directly to ERAS.
- Have your photograph taken for use on your application and for the graduation composite photo. See page 19 for details.
- ☐ Choose programs to which you wish to send applications.
 - Apply to enough programs so that you have **choices**. It is better to cancel interviews than to not have enough scheduled.
 - Ensure that you have a list of programs that is long enough to cover the categories of Dream Programs, Hope Programs and Safety Programs.
- ☐ MSPE Review
 - In July/August, you will be contacted when your MSPE is ready for review. Please schedule your MSPE review time within 2 days of being notified. **If you will be gone in the fall, it is very important that you notify Rebecca Silverman** (rsilverman@bsd.uchicago.edu) as soon as you know when you will be gone, so she can help schedule your MSPE meeting.

September–October 2019

- ☐ Complete ERAS application and apply! More and more programs are selecting students for interview on a first-come, first-served basis. **ERAS opens on September 15.**
 - Complete ERAS early, but not hastily. Your ERAS application cannot be changed once it is submitted.
 - The dean's office will begin to upload documents (Pritzker transcript) after you have registered for ERAS. Your LOR authors will upload your letter based on the Letter Request Form you have sent them. All MSPEs will be uploaded in advance of the October 1 release date.
 - Register for the NRMP (<http://www.nrmp.org>).
 - Check ERAS regularly to monitor the status of your LORs.
- ☐ Attend the **MS4 Meeting #3: Interviewing for Residency on September 25 at 5:00pm in the BSLC.**
- ☐ If you are doing an away rotation in August or September, be sure that all of your letter writers have been contacted, that you have reviewed your MSPE, and have taken your photo before then.
- ☐ Prepare to interview.
 - Meet with your career advisor to discuss interview strategies and consider doing a “mock interview” in September or October.
 - Accept interviews quickly, within 1-2 days. Spots will fill up.
 - Develop a calendar for the interview dates you have accepted.
 - Contact the Alumni Residency Hosting Program to stay with a graduate of Pritzker and save money on the interview trail (link is on the Residency section on our website).
 - Contact students who have graduated and who are in the various programs in which you are interested to determine whether they can give you any insights or suggestions. If you need help getting in touch with alumni, contact Rebecca Silverman.
- ☐ Save money by using **UChicago discount programs** when you rent cars, purchase plane tickets, and stay at hotels (link is on the Residency Resources page of our website).

- As a University of Chicago Student, you have access to a discount program that is established at specific vendors. The list of hotels, car companies and airline companies is not long, but it's worth peeking at if you are interested in cutting costs this interview season.
- Visit <http://finserv.uchicago.edu/purchasing/travel/uchicagodiscountprograms.shtml>.

October–December 2019

- ☐ Interview!
- ☐ The MSPE will be released to program directors on October 1 per requirements for all US medical schools.
- ☐ Take Step 2 CK & CS **by December 1, 2019**.

January–February 2020

- ☐ Attend the **MS4 Class Meeting #4: Constructing Your Rank List on January 20 at 5:00pm in the BSLC**.
- ☐ Release your Step 2 scores in ERAS once they are received.
- ☐ Decide on your rank order list.
 - Meet with your career advisor after you are done interviewing to discuss how to rank your programs.
 - Ensure that you have sufficient programs to rank (generally, 10-12; see the Specialty Pages section for more precise data), and that you have an adequate backup plan (discussed with advisors).
 - In early January, discuss your highest choices with your career advisor & specialty advisor of your intended discipline.
- ☐ Enter your Rank Order List.
 - Certify your final Rank Order List by February 14, 2020, to be assured that your list will be in if the server crashes on final submission day later in the month. You can change your ROL up until the final deadline, but the servers get very slow in the last week. Print out a copy of your certified ROL for your records.
- ☐ Sign up for the Senior Scientific Session, scheduled for May 2020.
- ☐ All students must complete the AAMC Graduation Questionnaire (available February 2020).
- ☐ Fill out your Match Results Release Survey.

March 2020

- ☐ **Plan on being on campus for all of Match Week.**
 - On Monday, March 16, 2020*, the Pritzker School of Medicine will receive information about students who have not matched. We will contact unmatched students by phone (and at their homes) at 10:00 am. The list of unfilled programs will be posted and ERAS will open in SOAP (Supplemental Offer and Acceptance Program) mode.
 - Throughout the week, the Pritzker staff, deans, and career advisors will work with SOAP students to secure a residency position.
 - On **Friday, March 20**, the Match results will be distributed for release at 11:00 am CST. This event is followed by a party, sponsored by the Alumni Association.

- ☐ Two to three weeks following the Match, students will receive contracts from their matched programs.

April–June 2020

- ☐ Fill out licensure and verification paperwork, available on our website.
- ☐ Prepare to move.
- ☐ Check your transcript for completion.
- ☐ Consider whether you want to continue disability insurance through your residency years.
- ☐ Plan on participating in all senior events: Senior Scientific Session, Student/Faculty Recognition Dinner, Divisional Academic Ceremony, and Convocation (schedule available online).
- ☐ Graduate in mid-June.

** Dates and times subject to final confirmation by NRMP.*

ERAS/Graduation Photos

UChicago Creative has set up five Pritzker portrait sessions during the summer. These dates were chosen because they are conveniently after shelf exams, and were spread out to accommodate both people on sub-I's and people on away rotations.

Therefore, if you are doing an away rotation later in the summer, prioritize getting your portrait taken early.

Sessions are held at the Edelstone Center at 6030 S. Ellis Ave. on these dates:

1. May 10, 12-2
2. May 24, 12-2
3. June 13, 3-5
4. July 19, 2-4
5. August 2, 2-5

How to sign up:

- Navigate to <http://uchicagocreative.schedulista.com/> and choose the date that works best for you

Once you have your portrait taken, you will sit down with the photographer and choose your favorite. The photographer will distribute them to you for uploading into ERAS, and Rebecca will receive them for the graduation composite.

Tips:

- Men, wear a coat and tie; women, wear a suit coat or blouse
- Do not wear white
- People with long hair should wear a color top that contrasts
 - Dark hair—a medium to medium light toned shirt
 - Light hair—a medium to darker color shirt
- Make-up helps, as the camera lights can wash out skin tone

Timeline: Early Match

May Decide on a Specialty Sign up for STEP II Meet with Specialty Advisor Meet with Career Advisor Complete Residency Survey/Schedule MSPE Meeting	June Begin Drafting Personal Statement 	July Submit Applications
August Review MSPE 	September Interviews Starting in Late September 	October MSPE Released October 1
November Interviews Lasting until Mid-December 	December Submit Rank Order List 	January Receive Rank Results
February (If Necessary) Enter Rank Order List Before NRMP Deadline 	March Match Week! Complete AAMC GQ 	April Complete Grad Requirements Senior Scientific Session (May) Divisional Academic Hooding Ceremony (May) Convocation (June)

Checklist: Early Match

Military, Ophthalmology, Urology

Note: Pay attention to the checklist for the regular match too. It may be important for your PGY-1 (preliminary) position.

April–June 2019

- ☐ Work toward narrowing your specialty choice.
 - Attend departmental seminars and use electronic resources (<http://www.careermd.com>; Careers in Medicine: www.aamc.org/cim; FRIEDA: <https://www.ama-assn.org/go/freida>)
 - Take advantage of the remaining months that seniors are here and talk with them about the programs they visited, ranked, and did not rank.
 - Select a **specialty advisor** and meet with them to discuss career decisions and senior year plans, including whether you need to arrange an away rotation.
- ☐ Determine whether you want or need to complete any away rotations. Review information on other medical schools' websites, paying attention to deadlines for applications.
- ☐ Finalize your senior schedule.
 - Most interviews will occur in October, November, December, and January, so keep your schedule light and flexible during these months. Please refer to guidelines for the Fourth Year Schedule on page 12.
 - Lottery results will be available by May 7, 2019.
 - Sign up for Step 2 CK & CS. **Step 2 CK & CS must be taken by December 1!** (Schedule Step 2 CS early, as dates may fill up.) *While the deadline for Step 2 (CK and CS) remains December 1, recent data from across the country suggests it may be optimal to take Step 2 CS between the middle of July and the end of the first week of September. Testing in this time frame allows failing students to retake the exam in time for the residency program ranking process.*
- ☐ Career advising
 - Mid-May through the end of June: **meet with your assigned career advisor** to review career choice, senior year organization (elective/selective choices, flexible time for interviews), MSPE noteworthy characteristics, letter writers, CV, personal statement, and specialty advisor.
 - Set up a time to meet with the MSPE Director between late April and July (**before any away rotations**) to discuss your MSPE and residency application.
 - If you are doing an away rotation or will be off campus for part of the summer, notify Rebecca Silverman (rsilverman@bsd.uchicago.edu) **as soon as you know when you will be gone**, so she can help schedule your MSPE meeting.
- ☐ Get started on your personal statement. Get lots of feedback on your statement from your career advisor and your specialty advisor, in that order. For extra help, attend one of Dr. Woodruff's *Optimizing Your Personal Statement* workshops: May 30 and June 5, 2019 (choose one), 5 pm, J-103.
- ☐ Ask for **letters of recommendation (LORs)**. Students applying in Ophthalmology should begin asking for LORs in June; ideally, all Ophthalmology applications are submitted by August.
 - Update your CV (see page 32 for an example).
 - Identify faculty who will write your letters of recommendation (LORs). Remember, letter writers will need your CV and a draft of your personal statement. You should give your writers at least 6-8 weeks to complete their letters, so **ask them before mid-June**.

- ☐ Attend the **MS4 Class Meeting #1: Residency Application Overview on June 3 at 5:00pm in the BSLC.**

July–August 2019

- ☐ Attend the **MS4 Class Meeting #2: Overview of ERAS on July 8 at 5:00pm in the BSLC.**
- ☐ Start filling out your ERAS application (a token to allow you to register will be emailed to you in June).
 - Download Letter Request Forms from ERAS and email it to your PGY-1/preliminary application letter writers so they can upload their LOR directly to ERAS.
 - Have your photograph taken for use on your application and for the graduation composite photo. See page 19 for details.
- ☐ **Complete Specialty Match applications** and register for the specialty matching programs.
 - For **Military** (generally): apply through ERAS and match through the military. Check the instructions provided by your branch of service. Military match results available in mid-December.
 - For **Ophthalmology**: apply and match through the San Francisco Match (www.sfmarch.org) for your categorical programs and ERAS/NRMP for your preliminary programs. Applications are due at the beginning of September, though you are encouraged to submit your application by August. The rank deadline for the SF Match is in early January.
 - For **Urology**: apply through ERAS and match through the AUA (www.auanet.org). Submit your ERAS application on September 15. Deadline for rank lists at the AUA is in early January.
- ☐ MSPE Review
 - In July/August, you will be contacted when your MSPE is ready to be read. Please schedule your MSPE review time within 2 days of being notified. **If you will be gone in the fall, it is very important that you notify Rebecca Silverman** (rsilverman@bsd.uchicago.edu) as soon as you know when you will be gone, so she can help schedule your MSPE meeting.

August–October 2019

- ☐ Choose programs to which you wish to send applications.
 - Apply to enough programs so that you have **choices**. It is better to cancel interviews than to not have enough scheduled.
 - Ensure that you have a list of programs that is long enough to cover the categories of Dream Programs, Hope Programs and Safety Programs.
- ☐ **PGY-1 (preliminary) programs**: For those applying via the San Francisco Match, all PGY-1 applications should be made through ERAS. Do not neglect your preliminary year applications; these programs can be competitive. ERAS opens on **September 15**.
 - Complete ERAS early, but not hastily. Your ERAS application cannot be changed once it is submitted.
 - The dean's office will begin to upload documents (graduation photo and Pritzker transcript) after you have registered for ERAS. Your LOR authors will upload your letter based on the Letter Request Form you have sent them. All MSPEs will be uploaded in advance of the October 1 release date.
 - Register for the NRMP (<http://www.nrmp.org>).

- ☐ If you are doing an away rotation in August or September, be sure that all of your letter writers have been contacted, that you have reviewed your MSPE, and have taken your photo before then.
- ☐ Attend the **MS4 Meeting #3: Interviewing for Residency on September 25 at 5:00pm in the BSLC.**
- ☐ Prepare to interview.
 - Meet with your career advisor to discuss interview strategies and consider doing a “mock interview” in September or over the phone if you are away.
 - Accept interviews quickly, within 1-2 days. Spots will fill up.
 - Develop a calendar for the interview dates you have accepted.
 - Contact the Alumni Residency Hosting Program to stay with a graduate of Pritzker and save money on the interview trail (link is on the Residency section on our website).
 - Contact students who have graduated and who are in the various programs in which you are interested to determine whether they can give you any insights or suggestions. If you need help getting in touch with alumni, contact Rebecca Silverman.
- ☐ Save money by using **UChicago discount programs** when you rent cars, purchase plane tickets, and stay at hotels.
 - As a University of Chicago Student, you have access to a discount program that is established at specific vendors. The list of hotels, car companies and airline companies is not long, but it’s worth peeking at if you are interested in cutting costs this interview season.
 - Visit <http://finserv.uchicago.edu/purchasing/travel/uchicagodiscountprograms.shtml>.

October 2019–January 2020

- ☐ Interview!
- ☐ The MSPE will be released to program directors (both via ERAS and via the SF Match) on October 1 per requirements for all US medical schools.
- ☐ Take Step 2 CK & CS **by December 1, 2019.**
- ☐ Decide on your rank order list.
 - Since you will have to submit a rank order list before the January 22 MS4 class meeting about constructing your rank list, meet individually with your career advisor or Dr. Woodruff after you are done interviewing to discuss how to rank your programs.
 - Ensure that you have sufficient programs to rank (generally, 10-12; see the Specialty Pages section for more precise data), and that you have an adequate backup plan (discussed with advisors).
 - Discuss your highest choices with your career advisor & specialty advisor of your intended discipline.
 - Urology and ophthalmology rank list deadlines are typically in **early January**. Know your deadlines!
- ☐ **Match Day** for early match specialties (PGY-2 spots) is in mid-January!

February 2020

- ☐ For PGY-1 programs: release your Step 2 scores in ERAS once they are received.
- ☐ For PGY-1 programs: enter your Rank Order List in ERAS.
 - Certify your final Rank Order List by February 14, 2020, to be assured that your list will be in

if the server crashes on final submission day later in the month. You can change your ROL up until the final deadline, but the servers get very slow in the last week. Print out a copy of your certified ROL for your records.

- Submit your rank list even if it is just a formality (ie. if your PGY-2 position includes a PGY-1 position). This is required of all US seniors.

☐ Sign up for the Senior Scientific Session, scheduled for May 2020.

☐ All students must complete the AAMC Graduation Questionnaire (available February 2020).

March 2020

☐ **Plan on being on campus for all of Match Week.**

- On Monday, March 16, 2020*, the Pritzker School of Medicine will receive information about students who have not matched. We will contact unmatched students by phone (and at their homes) at 10:00 am. The list of unfilled programs will be posted and ERAS will open in SOAP (Supplemental Offer and Acceptance Program) mode.
- Throughout the week, the Pritzker staff, deans, and career advisors will work with SOAP students to secure a residency position.
- On **Friday, March 20**, the Match results will be distributed for release at 11:00 am CST. This event is followed by a party, sponsored by the Alumni Association.

** Dates and times subject to final confirmation by NRMP.*

☐ Two to three weeks following the Match, students will receive contracts from their matched programs.

April–June 2020

☐ Fill out licensure and verification paperwork, available on our website.

☐ Prepare to move.

☐ Check your transcript for completion.

☐ Consider whether you want to continue disability insurance through your residency years.

☐ Plan on participating in all senior events: Senior Scientific Session, Senior Skit, Student/Faculty Recognition Dinner, Divisional Academic Ceremony and Convocation (schedule available online).

☐ Graduate in mid-June.

Everything You Wanted to Know About Applying to Residencies

but were afraid to ask...

....about the MSPE:

- **What is the MSPE?**

The MSPE (Medical Student Performance Evaluation, formerly known as the Dean's Letter) is a letter of evaluation describing performance in medical school—not a letter of recommendation. It contains a summary of a student's academic activities, clerkship narratives, and awards. Some residency programs wait to receive the MSPE before inviting applicants to interview, but many do not. In terms of importance to selection committees, it is of value, but not of the highest priority. The MSPE is intended to be supportive in nature, but it also provides the residency selection committee with an accurate picture of a student's ability.

- **Why do we have two MSPE meetings? How do I schedule them?**

Your first meeting with the MSPE director lasts one hour, and is intended for the MSPE Director to get to know you as a person. You will discuss your interests, motivations, challenges, and experiences. Not everything you discuss will be included in your MSPE, but it will be used to inform how we piece together all of your information. This happens earlier in the summer, from April through July.

The second MSPE meeting happens in late summer (July through August) and is shorter, usually lasting 10-15 minutes. You must arrive 20 minutes early to retrieve a paper copy of your MSPE from Rebecca Silverman, and a red pen to mark up any typos or content errors. You will then review your markups with the MSPE Director. The MSPE is not distributed to students electronically, and you are not allowed to retain a copy, which is why these reviews must be done in person.

To schedule your initial MSPE meeting, go to the Residency Resources page of Pritzker's website and click "Sign up for your MSPE meeting".

- **If a student is elected to ΑΩΑ or to Gold Humanism Honor Society, will that information be included in the MSPE?**

Yes. The Selection Committees meet in late August/early September and students are notified at the conclusion of that meeting. This is sufficient time to include this information on applications and in the MSPE.

- **Does the MSPE discuss my specialty choice?**

The MSPE does not stipulate the specialty you have chosen. It is intended to be generic, since some students may be applying to more than one specialty; it is also used by graduates who are reapplying for other specialties. The MSPEs are not rewritten at that time.

- **After the MSPE is written in draft form, will I be able to review it and suggest revisions?**

Yes, you will be able to review your MSPE (see above). You will be notified via email when it is ready for

review. Revisions will be largely in the form of correcting any inaccurate factual data.

- **Who sends out the MSPE?**

The MSPE for students applying through ERAS will be transmitted electronically to the designated programs on October 1. For students applying through the San Francisco match, the Pritzker School of Medicine will upload the MSPEs to the SF Match portal on October 1. No MSPEs will be released before October 1.

....about letters of reference (LORs):

- **How many letters of recommendation should I ask for?**

Three letters of recommendation are required and no more than four are allowed. Often, one of the three should be from the Department Chair in your specialty. Please check with the individual disciplines for their specific requirements (see pages 64-121). You will need a minimum of three letters for both an advanced specialty, as well as a preliminary year application if you are applying in a discipline which requires preliminary training. You will need three letters for your preliminary application and 3-4 for the advanced program, totaling 6-7 letters.

- **Whom should I ask?**

The best letter writers are those faculty members who know you well and can strongly support your application. Clinical letters are preferred. Research letters can be used as supplemental letters but not as primary letters.

- **How do I get a Chairman's Letter if s/he doesn't know me?**

Nearly all specialties want specific information about a student's ability to perform in the specialty of choice, and this information is conveyed through the departmental chairman's letter. It is best to contact the secretary in the department to determine (1) if the Chairman sends a letter, and (2) what process has been established for completing this process. Internal Medicine, Medicine-Pediatrics, General Surgery, and Obstetrics & Gynecology require a chairman's letter. Most surgical sub-specialties also require a letter from the section chief. (see pages 64-122 for specialty specific information).

- **When should all my letters be in?**

Generally, faculty members upload their letters directly to ERAS within 6-8 weeks of being asked by students. Begin asking your letter writers in June/July. Aim to have all letters in by September 1.

- **What do I do if my letter has not been uploaded, I can't get in touch with my letter writer, and it is well after the 4-6 week period?**

Please let your career advisor or Rebecca Silverman know. We will advise you on your next steps or follow up on your behalf.

- **Do I need to have all my letters of reference uploaded before I can apply?**

No, you can send in your application even if the letters haven't been received yet. We will let you know when letters arrive so that you can assign them to programs. Please also check ERAS to track the status of your

letters.

- **Do I have to designate all my letters to certain programs at the time that I apply?**

No, you can apply without designating any letters at all. You can apply with a few letters designated and add letter writers later.

....about transcripts:

- **Who sends out transcripts and what do they cost?**

Students do not need to obtain a Pritzker transcript. We will arrange with the Registrar to get your transcript and either upload it to ERAS or to the San Francisco Match website.

- **How do I send my USMLE Transcript and how do I update it when my Step 2 score is available?**

ERAS participants will be able to electronically request that their scores be sent directly from the NBME. When Step 2 scores become available, students will have to retransmit the USMLE transcript in ERAS. Students applying via the San Francisco Match need to request that an original copy of their NBME score report be sent directly to Rebecca Silverman.

- **If my programs ask for my college transcript, can I photocopy the one the Pritzker School of Medicine has on file?**

No. The undergraduate programs must be contacted individually, and an official transcript requested from them. Students participating in ERAS must ask the undergraduate institution to send a hard copy to the programs. Undergraduate transcripts cannot be transmitted via ERAS.

- **If I am asked where I rank in my class, where can I get this information?**

You cannot, since class ranking is not possible under our pass/fail grading system.

....about preliminary years (PGY-1's):

- **What types of post-graduate positions are there?**

Advanced Residency Positions: An “advanced” position does not commence until 1-2 years after the match and requires completion of 1 or more years of preliminary training. The following specialties offer advanced positions (some of these may also have programs which offer categorical positions): anesthesiology, dermatology, neurology, ophthalmology, PM&R, radiation oncology, and radiology. Programs in neurosurgery, orthopaedic surgery, plastic surgery, and urology are advanced programs which “bundle” in a preliminary year in general surgery and do not generally require a separate preliminary application process.

Categorical Residency Positions: A “categorical” position is one which offers full residency training required for board certification in that specialty.

Preliminary Residency Positions: A “preliminary” position offers only 1-2 years of training prior to entry into advanced specialty programs. Many internal medicine and surgery training programs offer preliminary

positions in addition to categorical positions. Transitional year programs are also considered preliminary programs.

Transitional Residency Positions: A “transitional” position is an alternative to a preliminary year. It offers a mosaic of experiences in surgery, medicine, pediatrics, and more, and is for people who want broader exposure to clinical issues. It may be a good option for those seeking specialties that support other disciplines, like radiology or anesthesia.

- **How do I apply for preliminary or transitional positions?**

You apply through ERAS, like you would for any other position.

- **How do I know if I need a preliminary or transitional position?**

Here is a chart of post-graduate position requirements by specialty:

Specialty	PGY-1 Needed
Anesthesiology	Some programs require PGY-1
Child Neurology	No
Dermatology	Yes
Emergency Medicine	Some programs require PGY-1
Family Medicine	No
General Surgery	No
Internal Medicine	No
Internal Medicine & Pediatrics	No
Interventional Radiology	Some programs require PGY-1
Neurological Surgery	No
Neurology	Yes
Obstetrics & Gynecology	No
Ophthalmology	Yes
Orthopaedic Surgery	No
Otolaryngology	No
Pathology	No
Pediatrics	No
Physical Medicine & Rehabilitation	Yes
Plastic & Reconstructive Surgery	No
Psychiatry	No
Radiation Oncology	Yes
Radiology	Yes
Urology	No
Vascular Surgery	No

....about personal statements and CVs:

- **Should I write a different personal statement for every program I apply to?**

There is no need to tailor your personal statement to each specific program, but it should be tailored to reflect your residency specialty choice. If you are applying to advanced specialty programs, you will also need to modify your personal statement for preliminary or transitional programs explaining what you hope to gain through preliminary year training.

- **Why do I need to work on a CV since I will be creating one in ERAS?**

You need to give a CV to your letter writers, and it is helpful at this stage in your career to have an up-to-date professional CV to bring on interviews and for your future accomplishments.

- **What information should my CV contain? How long should it be?**

The CV should be as long as you need to include important information about your academic, research, and work experience—for both undergraduate and medical school. Do not sacrifice readability by trying to squeeze all the information on one page. An example is included in this book on page 32.

....about document management in ERAS:

- **Can I change my personal statement and letters of reference even after I have assigned them to programs?**

Personal statement: Once you have sent a personal statement to a program, you may no longer make changes to that specific document. If you want to make a change, you must un-assign the original document, create a new personal statement, and assign the new document. However, un-assigning a personal statement does not erase it from a program's records. A program may already have downloaded and printed a hard copy of your file. Do not assume they will not be able to reference your original document in the future.

Letters of Recommendation: Once an LOR is made available in ERAS and you have assigned it to a program you have applied to, you will not be able to un-assign that specific LOR from those programs.

There are dangers associated with “over-tweaking” your application. You have put a lot of thought already into writing your personal statements and in selecting your letter writers. A last-minute change may not be as well thought-out as the choices you have already made. Finally, programs will see your changes and may interpret your behavior as indecisive.

Interview Tips

Before the Interview

- ☐ Try to set up your interviews from October onwards; plan on interviewing between then and mid-January.
 - See if you can schedule the interview on a day when you can attend morning rounds or a teaching conference.
- ☐ Establish your priorities for a good residency-training program.
 - Know the latest developments in the specialty that you're interested in and what types of people they are looking for.
- ☐ If possible, schedule several interviews for programs lower on your list first in order to familiarize yourself with the interviewing process.
- ☐ Research the program as much as possible before the interview.
- ☐ Treat everyone with respect—especially Program Assistants. They are the gatekeepers to the programs.
- ☐ Confirm the interview date and time in advance.
- ☐ Plan for enough time—if necessary, arrive the night before. Leave extra time to navigate unknown city streets and buildings. Beware of winter snowstorms.
- ☐ Plan for sufficient time before the interview to gather your thoughts.
 - Review your application, personal statement and CV.
 - Prepare a list of questions that you want to have answered. Different specialties demand that different questions be asked. It is imperative to gather the information that you need to assess the program.
 - Spend some time on personal reflection. Give some thought to who you are, both as a doctor and as a person; what you like and dislike; why you are in medicine and what you want out of your residency.
- ☐ Save money by using UChicago discount programs when you rent cars, purchase plane tickets, and stay at hotels.
 - As a University of Chicago Student, you have access to a discount program that is established at specific vendors. The list of hotels, car companies and airline companies is not long, but it's worth peeking at if you are interested in cutting costs this interview season.
 - Visit <http://finserv.uchicago.edu/purchasing/travel/uchicagodiscountprograms.shtml> or check out the link on Pritzker's Residency Resources webpage.

During the Interview

- ☐ Be on time.
- ☐ Get the names (including spellings and pronunciation) of the interviewers from the departmental secretary so that you know with whom you will be meeting.
- ☐ Begin by smiling. Look the interviewer in the eye, greet them by name, and offer your hand for a firm handshake.
- ☐ Show enthusiasm for the residency program.

- ☐ Be assured and look confident.
- ☐ Be an active listener.
- ☐ Ask intelligent, well thought-out questions. (This requires insight and preparation.)
- ☐ Be yourself.
- ☐ Present yourself as a team player.
- ☐ Be friendly to everyone, from the receptionist to program assistant to residents.
- ☐ Turn your phone off.
- ☐ Do not throw your home program “under the bus.” You will be given an opportunity to say bad things about your medical school/hospital, but think of constructive rather than destructive answers. Complaining is never attractive and does not give the impression that you are a team player.
- ☐ If an interviewer asks “taboo” questions (plans to marry, have children, support of your spouse) it is okay not to respond. You can say you had not thought of that question before, that it is not an issue for you right now, or that it is a topic you need to consider with your spouse/partner/family/etc.
 - Visit the NRMP website (<http://www.nrmp.org/code-of-conduct/>) to learn more about illegal or coercive questions. If you are concerned that you were asked an illegal question, you can always get in touch with Dr. Woodruff to discuss it.
- ☐ Try to use as many examples to back up your statements as you can. Using real-life stories gives the committee a better feel for your personality.

After the Interview

- ☐ Immediately after the interview, write down your impressions of the interview, including topics covered and names of interviewers.
- ☐ If you are interviewing at many programs, prepare a checklist in advance that you can use for all the interviews.

Pritzker Sample CV

Kai R. Doe

HOME ADDRESS

Street address
Chicago, IL ZIP
Phone #
Email

SCHOOL ADDRESS

Pritzker School of Medicine
924 E. 57th St., Room 104
Chicago, IL 60637-5415
(773) 702-1939

EDUCATION

2016-present	The University of Chicago Pritzker School of Medicine. MD, June 2019 (anticipated)
2015-2016	Gaucher College. Post-baccalaureate pre-medical program
2009-2013	University of Michigan. BS, Biology, graduated <i>summa cum laude</i>

HONORS AND AWARDS

2019	Selected for membership to Gold Humanism Honor Society
2019	Selected to teach Clinical Pathophysiology and Therapeutics (top 25 students)
2017	Joseph P. Kirsner Research Award for Excellence
2017	Volunteer of the Year Award, New Life Volunteering Society Free Clinic
2013	Departmental Honors for Senior Thesis

WORK EXPERIENCE *(Only include if you took years off between college and medical school)*

2013-2015	Project Assistant, Aon Corporation, Chicago, IL <ul style="list-style-type: none">Organized and facilitated transition of files for new clientsAssisted Project Managers with day-to-day account management
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RESEARCH EXPERIENCE

<i>Start-end date</i>	<i>Institution, Department of XX, Name and degree of mentor; "Title of project."</i> <ul style="list-style-type: none"><i>Brief description of project</i><i>Use action verbs to start each bullet point when possible</i>
2017-present	University of Chicago, Department of Medicine, Section of General Internal Medicine, Julie Oyler, MD; "Quality of Care for Hospitalized Vulnerable Elders and Post-Discharge Mortality." <ul style="list-style-type: none">Researched post-discharge mortality among elderly patientsSelected to participate in the NIH-funded Pritzker Summer Research ProgramReceived the Joseph P. Kirsner Research Award for Excellence at the 2016 Pritzker Summer Research ForumExpanded project to investigate geriatrics patients through longitudinal Scholarship and Discovery experience (Quality and Safety Scholarship track)
2012-2013	University of Michigan, Department of Neuroscience, Melissa S. Times, PhD; Honors research thesis: "Sensory and motor cortical interactions in complex voluntary movements." <ul style="list-style-type: none">Recruited volunteers for researchCollected and analyzed data

PUBLICATIONS/ABSTRACTS

Last first middle initials of authors as listed in the paper. Your name underlined. Title of article. Journal. Publication date; vol (issue): pages. PMID: ID number

Peer-Reviewed Journal Articles

Brown M, Doe J, Pincavage AT, Prochaska M, Dahlstrom M, Beitling K, Oyler J. Post discharge mortality among elderly patients. *Journal of the American Geriatrics Society*. 2017 Oct; 135(11): 218-223. Cited in PubMed; PMID: 24384104.

Doe J, Oyler J. Quality of Care for Hospitalized Vulnerable Elders and Post-Discharge Mortality. *Journal of Hospital Medicine* (e-pub ahead of print). 2019 July; in press.

Oral Presentations

Oyler J, Doe J. (2018) Quality of Care for Hospitalized Vulnerable Elders and Post-Discharge Mortality. Society of General Internal Medicine Conference; Orlando, FL.

Poster Presentations

Doe JR, Oyler J. (2018) Hospitalized Vulnerable Elders and Post-Discharge Mortality: An Analysis. Society of Hospital Medicine Conference; Chicago, IL.

Doe J. (2013) Sensory and motor cortical interactions in complex voluntary movements. University of Michigan Undergraduate Scientific Session; Ann Arbor, MI.

TEACHING EXPERIENCE

<i>Year</i>	<i>Title, Course Institution: Course directors (with degrees after their names) • Duties (use action verbs to start each bullet point, when possible)</i>
2019 (anticipated)	Peer Educator, Clinical Pathophysiology and Therapeutics University of Chicago Pritzker School of Medicine Course Directors: Scott Stern, MD, and Aliya Husain, MD <ul style="list-style-type: none">Selected to teach review sessions for required second-year medical coursePositions only offered to the top 25 students in the class
2012	Teaching Assistant, Introductory Biology – Genetics University of Michigan Course Organizer: Charles Darwin, MD <ul style="list-style-type: none">Conducted student review sessions for the genetics portion of the undergraduate biology courseGraded tests, prepared lecture presentations, and conducted literature reviews for course director

INSTITUTIONAL SERVICE

2016-2017	Emergency Medicine Student Interest Group, Pritzker School of Medicine <ul style="list-style-type: none">Coordinated school-wide events to promote the field of Emergency Medicine
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- 2011-2012 President, University of Michigan School Government, Ann Arbor, MI
- Led the executive branch of the student government
 - Reported on student affairs to the University Chancellor's office
 - Oversaw budget, programming, and programming initiatives

COMMUNITY SERVICE

- 2016-2018 Board Member, New Life Volunteering Society Free Health Clinic, Chicago, IL
- Medical volunteer for student-run health clinic
 - Served as treasurer of the student board
 - Coordinated grant submissions and fundraising events
 - Provided essential administrative help around the clinic
- 2014-2015 Field Organizer, Habitat for Humanity, Chicago, IL
- Participated in weekly planning meetings and quarterly trips to build housing for low-income populations in rural areas of the Midwest

HOBBIES & INTERESTS

Fluent in Spanish; completed the 2016 Chicago Marathon and the 2014 New York Marathon; play guitar.

CV Tips

- List everything in reverse chronological order
- Use action verbs to start each bullet point
- Be consistent with punctuation
- Be detailed: use numerical data whenever possible (eg. “interviewed 40 volunteers” or “taught 35 students”)
- Use the word “anticipated” if something has not happened yet and definitely will happen (do not use it if you are hopeful that something will happen, but do not know for sure)
- Do not list publications that have been submitted; only list them if they have been accepted, are in print, or have been published
- Only list hobbies that show initiative, perseverance, or skill (eg. sports, cooking, language fluency)
- Do not list hobbies that would show a Program Director that you may be distracted (eg. social media, fantasy football, trying out different bars, playing video games)

Sample ERAS Application

MyERAS Application

General Information

Name: *Doe, Kai R.* Applicant ID: *2019106027*
Previous Last Name: AAMC ID: *13909272*
Preferred Name:
Most Recent Medical School: *University of Chicago Division of the Biological Sciences The Pritzker School of Medicine*
Email: *rsilverman@bsd.uchicago.edu* USMLE ID:
Gender: *Male* NRMP ID:
Birth Date: *10/10/1991* Participating in the NRMP Match: *Yes*
Birth Place: *Palm Springs, CA* Participating as a Couple in NRMP:
Citizenship: *U.S. Citizen*

Self Identification:

Multiracial

Present Mailing Address:

*924 E. 57th St.
Ste 104
Chicago, IL 60614
Preferred Phone #: 773-702-3333
Alternate Phone #:
Mobile #:
Pager #:
Fax #:*

Permanent Mailing Address:

*924 E. 57th St.
Ste 104
Chicago, IL 60614
Phone: 773-702-3333*

Military Service Obligation/Deferment? *No*

Other Service Obligation? *No*

Misdemeanor Conviction in the United States? *No*

Felony Conviction in the United States? *No*

Limitations? *No*

Medical Licensure

ACLS:
PALS:
BLS:
DEA Reg. #: *None*
Board Certification: *No*
Medical Licensure Suspended/Revoked/Voluntarily Terminated? *No*
Ever Named in a Malpractice Suit? *No*
Past History? *No*

State Medical Licenses

Type	Number	State	Exp. Date
<i>None</i>			

Medical Education

Institution & Location	Dates Attended	Degree	Date of Degree
<i>University of Chicago Division of the Biological Sciences The Pritzker School of Medicine United States</i>	<i>08/2016 - 06/2020</i>	<i>Yes, M.D.</i>	<i>06/2020</i>
Medical Education/Training Extended or Interrupted? <i>No</i>			

Medical School Honors/Awards

Peer Educator for winter 2019 Clinical Pathophysiology and Therapeutics (offered to top 25 students in the class); Summer Research Program Joseph P. Kirsner Research Award for Excellence (2017)

Membership in Honorary/Professional Societies

Student Member, AAMC

Education

Education	Institution & Location	Dates Attended	Degree	Degree Date	Field of Study
<i>Undergraduate</i>	<i>University of Michigan Ann Arbor, MI</i>	<i>08/2009 - 05/2013</i>	<i>Yes, B.A.</i>	<i>05/2013</i>	<i>Biology</i>
<i>Other</i>	<i>Gaucher College Towson, MD</i>	<i>07/2015 - 06/2016</i>	<i>No</i>		<i>Post-baccalaureate pre-medical program</i>

Current/Prior Training

Institution, Location, & Training Type	Program Director	Program Supervisor	Dates Attended	Month(s)	Discipline
<i>None</i>					

Experience

Experience	Organization & Location	Position	Dates	Supervisor	Average Hours/Week
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Experience

Experience	Organization & Location	Position	Dates	Supervisor	Average Hours/Week
<i>Work Experience</i>	<i>Aon Corporation, Chicago, IL, United States</i>	<i>Project Assistant</i>	<i>06/2013 - 06/2015</i>	<i>Dana Levinson, MPH</i>	<i>40</i>
<p>Description:</p> <div>Organized and facilitated transition of files for new clients. Assisted project managers with day-to-day account management.</div> <p>Reason for Leaving:</p> <div>Matriculated into a post-baccalaureate program.</div>					
<i>Volunteer Experience</i>	<i>University of Chicago Pritzker School of Medicine, Chicago, IL, United States</i>	<i>Peer Educator</i>	<i>05/2018 - 12/2019</i>	<i>Scott Stern, MD, and Aliya Husain, MD</i>	<i>15</i>
<p>Description:</p> <div>Selected to teach review sessions for required second-year medical school course. Positions only offered to the top 25 students in the class.</div> <p>Reason for Leaving:</p> <div>Anticipated to start in Fall 2019</div>					
<i>Volunteer Experience</i>	<i>New Life Volunteering Society, Chicago, IL, United States</i>	<i>Medical Student Volunteer</i>	<i>09/2016- 05/2017</i>	<i>V. Ram Krishnamoorthi, MD, MPH</i>	<i>5</i>
<p>Description:</p> <div>Volunteered on Tuesday nights at this local community clinic drawing blood work, updating EMRs, evaluating patients, and helping with referrals.</div> <p>Reason for Leaving:</p> <div>Entered clerkship year.</div>					

Experience

Experience	Organization & Location	Position	Dates	Supervisor	Average Hours/Week
<i>Volunteer Experience</i>	<i>Pritzker Emergency Medicine Student Interest Group, Chicago, IL, United States</i>	<i>Member</i>	<i>09/2016 - 05/2017</i>		<i>5</i>
<p>Description:</p> <div>Coordinated school-wide events to promote the field of emergency medicine.</div> <p>Reason for Leaving:</p> <div>Entered clerkship year.</div>					
<i>Volunteer Experience</i>	<i>Habitat for Humanity, Chicago, IL, United States</i>	<i>Field Organizer</i>	<i>08/2014 - 07/2015</i>	<i>Jane Addams</i>	<i>10</i>
<p>Description:</p> <div>Participated in weekly planning meetings and quarterly trips to build housing for low-income populations in rural areas of the Midwest.</div> <p>Reason for Leaving:</p> <div>Entered post-baccalaureate program.</div>					
<i>Volunteer Experience</i>	<i>University of Michigan Student Government, MI, United States</i>	<i>President</i>	<i>07/2011 - 05/2012</i>		<i>15</i>
<p>Description:</p> <div>Led the executive branch of the student government. Reported on student affairs to the University Chancellor's office. Oversaw budget, programming, and special initiatives.</div> <p>Reason for Leaving:</p> <div>Graduated.</div>					

Experience

Experience	Organization & Location	Position	Dates	Supervisor	Average Hours/Week
<i>Volunteer Experience</i>	<i>University of Michigan, MI, United States</i>	<i>Teaching Assistant</i>	<i>08/2012 - 12/2012</i>	<i>Charles Darwin, MD</i>	<i>10</i>
<p>Description:</p> <div> <i>Conducted student review sessions for the genetics portion of the undergraduate biology course. Graded tests, prepared lecture presentations, and conducted literature reviews for the course director.</i> </div> <p>Reason for Leaving:</p> <div> <i>Semester ended.</i> </div>					
<i>Research Experience</i>	<i>The University of Chicago Department of Medicine, Chicago, IL, United States</i>	<i>Research Assistant</i>	<i>12/2017 - 08/2019</i>	<i>Julie Oyler, MD</i>	<i>10</i>
<p>Description:</p> <div> <i>Researched post-discharge mortality among elderly patients. Selected to participate in the NIH-funded Pritzker Summer Research Program and received the Joseph P. Kirsner Award for Excellence.</i> </div> <p>Reason for Leaving:</p> <div> <i>Project ended.</i> </div>					
<i>Research Experience</i>	<i>University of Michigan Dept. of Neuroscience, MI, United States</i>	<i>Research Assistant</i>	<i>08/2012 - 05/2013</i>	<i>Melissa Times, PhD</i>	<i>10</i>
<p>Description:</p> <div> <i>Recruited volunteers for research on sensory and motor cortical interactions in complex voluntary movements. Collected and analyzed data.</i> </div> <p>Reason for Leaving:</p> <div> <i>Graduated.</i> </div>					

Experience

Experience	Organization & Location	Position	Dates	Supervisor	Average Hours/Week
Research Experience	University of Michigan Dept. of Neuroscience, MI, United States	Research Assistant	07/2012 - 12/2012	Richard J. Smith, PhD	10

Description:

Assisted Prof. Smith in the Department of Anthropology with a research study involving dentition in early hominids. Collected and analyzed data. Assisted in carbon dating of selected specimens.

Reason for Leaving:

Engaged in another research project.

Publications**Peer Reviewed Journal Articles/Abstracts**

Doe K, Pincavage A, Oyler J, Prochaska M. Journal of the American Geriatrics Society. Post-discharge mortality among elderly patients. 2018, Oct; 135(11): 218-233.
 Cited in PubMed; PMID: 22223333.
 Pub Status: Published.

Peer Reviewed Journal Articles/Abstracts(Other than Published)

Doe K, Lee W. Journal of Hospital Medicine. Quality of Care for Hospitalized Vulnerable Elders and Post-Discharge Mortality. 2019, Jun; Pub Status: Accepted.

Poster Presentation

Doe K. (May, 2013). *Sensory and motor cortical interactions in complex voluntary movements* Poster presented at: University of Michigan Undergraduate Scientific Session; Ann Arbor, MO, USA.

Doe K, Oyler J. (June, 2018). *Hospitalized Vulnerable Elders and Post-Discharge Mortality: An Analysis* Poster presented at: Society of Hospital Medicine Conference; Chicago, IL, USA.

Oral Presentation

Doe K, Oyler J. (May, 2019). *Quality of Care for Hospitalized Vulnerable Elders and Post-Discharge Mortality* Oral Presentation presented at: American Geriatrics Society; Orlando, FL, USA.

Language Fluency

Language	Language Proficiency	Proficiency Description
English	Native/functionally native	<i>I converse easily and accurately in all types of situations. Native speakers, including the highly educated, may think that I am a native speaker, too.</i>
Spanish/Spanish Creole	Basic	<i>I speak the language imperfectly and only to a limited degree and in limited situations. I have difficulty in or understanding extended conversations.</i>

Hobbies & Interests

Running marathons and local road races; playing guitar and piano; travel photography.

Other Awards/Accomplishments

None

Certification

I certify that the information contained within the MyERAS application is complete and accurate to the best of my knowledge. I understand that any false or missing information may disqualify me from consideration for a position; may result in an investigation by the AAMC per the [attached policy](#) (PDF); may also result in expulsion from ERAS; or if employed, may constitute cause for termination from the program. I also understand and agree to the [AAMC Web Site Terms and Conditions](#) and to the [AAMC Privacy Statement](#) and the AAMC Policies Regarding the Collection, Use and Dissemination of Resident, Intern, Fellow, and Residency, Internship, and Fellowship Application Data ([attached policy](#), PDF) and to these AAMC's collection and other processing of my personal data according to these privacy policies. In addition, I consent to the transfer of my personal data to AAMC in the United States, to those residency programs in the United States and Canada that I select through my application, and to other third parties as stated in these Privacy Policies.

Certified by: *Doe, Kai*

Date:

Sample ERAS Application in CV Format

Doe, Kai R. (13909272)

Curriculum Vitae

Doe, Kai R.
AAMC ID: 13909272

Present Mailing Address

924 E. 57th St.
Ste 104
Chicago, IL 60614
Preferred Phone: 773-702-3333
Alternate Phone:
Mobile Phone:
kdoe@uchospitals.edu

Permanent Mailing Address

924 E. 57th St.
Ste 104
Chicago, IL 60614
773-702-3333

Medical Education

University of Chicago Division of the Biological Sciences The Pritzker School of Medicine, United States
08/2016 - 06/2020
M.D., 06/2020

Education

Undergraduate - University of Michigan, Ann Arbor, MI
Biology
08/2009 - 05/2013
B.A.; 05/2013

Other - Gaucher College, Towson, MD
Post-baccalaureate pre-medical program
07/2015 - 06/2016

Membership and Honorary/Professional Societies

Student Member, AAMC

Medical School Awards

Peer Educator for winter 2019 Clinical Pathophysiology and Therapeutics (offered to top 25 students in the class);
Summer Research Program Joseph P. Kirsner Research Award for Excellence (2017)

Volunteer Experience

05/2019 - 12/2019
University of Chicago Pritzker School of Medicine, Chicago, IL, United States
Peer Educator, Scott Stern, MD, and Aliya Husain, MD

Average Hours/Week: 15

Selected to teach review sessions for required second-year medical school course. Positions only offered to the top 25 students in the class.

09/2016 - 05/2017
New Life Volunteering Society, Chicago, IL, United States
Medical Student Volunteer, V. Ram Krishnamoorthi, MD, MPH

Average Hours/Week: 5

Volunteered on Tuesday nights at this local community clinic drawing blood work, updating EMRs, evaluating patients, and helping with referrals.

Curriculum Vitae

Volunteer Experience

09/2016 - 05/2017

Average Hours/Week: 5

Pritzker Emergency Medicine Student Interest Group, Chicago, IL, United States
Member,

Coordinated school-wide events to promote the field of emergency medicine.

08/2014 - 07/2015

Average Hours/Week: 10

Habitat for Humanity, Chicago, IL, United States
Field Organizer, Jane Addams

Participated in weekly planning meetings and quarterly trips to build housing for low-income populations in rural areas of the Midwest.

07/2011 - 05/2012

Average Hours/Week: 15

University of Michigan Student Government, Ann Arbor, MI, United States
President,

Led the executive branch of the student government. Reported on student affairs to the University Chancellor's office. Oversaw budget, programming, and special initiatives.

08/2012 - 12/2012

Average Hours/Week: 10

University of Michigan, Ann Arbor, MI, United States Teaching
Assistant, Charles Darwin, MD

Conducted student review sessions for the genetics portion of the undergraduate biology course. Graded tests, prepared lecture presentations, and conducted literature reviews for the course director.

Work Experience

06/2013 - 06/2015

Average Hours/Week: 40

Aon Corporation, Chicago, IL, United States
Project Assistant, Dana Levinson, MPH

Organized and facilitated transition of files for new clients. Assisted project managers with day-to-day account management.

Current/Prior Training

None

Research Experience

12/2017 - 06/2019

Average Hours/Week: 10

The University of Chicago Department of Medicine, Chicago, IL, United States
Research Assistant, Julie Oyler, MD

Researched post-discharge mortality among elderly patients. Selected to participate in the NIH-funded Pritzker Summer Research Program and received the Joseph P. Kirsner Award for Excellence.

08/2012 - 12/2012

Average Hours/Week: 10

Curriculum Vitae

University of Michigan, Ann Arbor, MI, United States
Research Assistant, Jeffrey Gordon, MD

Recruited volunteers for research on sensory and motor cortical interactions in complex voluntary movements. Collected and analyzed data.

07/2010 - 12/2010

Average Hours/Week: 10

University of Michigan, Ann Arbor, MI, United States Research
Assistant, Richard J. Smith, PhD

Assisted Prof. Smith in the Department of Anthropology with a research study involving dentition in early hominids. Collected and analyzed data. Assisted in carbon dating of selected specimens.

Publications

Peer Reviewed Journal Articles/Abstracts

Doe K, Pincavage A, Oyler J, Prochaska M. Journal of the American Geriatrics Society. Post-discharge mortality among elderly patients. 2018, Oct; 135(11): 218-233.
Cited in PubMed; PMID: 22223333.
Pub Status: Published.

Peer Reviewed Journal Articles/Abstracts(Other than Published)

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Oral Presentation

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Hobbies & Interests

Running marathons and local road races; playing guitar and piano; travel photography.

Language Fluency

Language	Language Proficiency	Proficiency Description
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Spanish/Spanish Creole	Basic	<i>I speak the language imperfectly and only to a limited degree and in limited situations. I have difficulty in or understanding extended conversations.</i>

Sample ERAS LOR Request Form



ERAS Letter of Recommendation (LoR) Request

ERAS Application Season: 2019

ERAS Letter ID: 75PT2UUE3

I am requesting that you submit my Letter of Recommendation (LoR) to the Electronic Residency Application Service (ERAS), which transmits my LoR(s) to the residency programs to which I am applying.

; ERAS Letter of Recommendation Portal (LoRP)

The Electronic Residency Application Service (ERAS) Letter of Recommendation Portal (LoRP) is a centralized service that allows LoR Authors to upload LoRs for applicants applying to ERAS residency programs.

ERAS has established a set of guidelines that should be reviewed prior to writing and uploading LoRs using the LoRP.

For more information about the LoRP guidelines, additional resources, and to access the LoRP login, please visit https://www.aamc.org/services/eras/282520/lor_portal.html.

- Review the information below. If any information is inaccurate, contact the applicant directly so they can make corrections.
- Login to the ERAS LoRP to upload this letter using the unique **ERAS Letter ID** above.

; Applicant Details

Name Doe, Kai
AAMC ID 13909272
Preferred Phone Number 773-702-3333
Preferred Email doek@uchospitals.edu

; LoR Details

LoR Author Name H. Barrett Fromme, MD, MHPE
LoR Author Title/Department Professor of Pediatrics
Specialty to which this letter will be assigned Preliminary Programs

Waive rights to view this letter

This applicant has indicated that they WAIVE their right to view this letter now and in the future under the Family Educational Rights and Privacy Act (FERPA). The applicant has acknowledged that this letter is for the specific purpose of supporting my application for residency.

Writing a Personal Statement

- ☐ **Use your personal statement to introduce yourself to your interviewer.**
 - Be sincere and help the interviewer know what's important to you.
 - Include only the information that you want to discuss.
- ☐ **Write a focused essay, about four paragraphs in length, that covers the basics.**
 - The first paragraph should introduce the reader to you (Who Am I?).
 - The second paragraph should let the reader know how you arrived at your choice of the specialty.
 - The third paragraph should confirm why you think this choice is right for you, and could include such things as research, extracurricular or work experiences that are pertinent.
 - The fourth paragraph should inform the reader what you see as your long-term goals, or how you see yourself in this specialty. If your goals are not clearly defined at this point, it is worth stating that fact.
- ☐ **Your starting point in writing does not have to be the “Who Am I?” section.** This is the most difficult part to write. Start with the ending paragraph—that will potentially be one of the easier ones to write.
- ☐ **Your goal should be to write a well-crafted statement that is both original in its presentation and grammatically correct.**
 - These are difficult pieces to write. If you can't be original, your secondary goal is to achieve a fresh quality about it.
 - Articulate your personal drive in as eloquent language as you can provide.
 - The writing should flow. Include the proper use of punctuation.
 - No one expects you to be a poet or a novelist. The most important thing is to write a concise, clear statement about yourself.
- ☐ If you explain your reasons for entering the field of medicine, do so to inform the reader of points beyond the career choice. **It's unnecessary to tell the reader “Why I Wanted To Go Into Medicine.”** You are well on your way to becoming a physician and will be within six months of receiving your MD degree.
- ☐ **If you repeat accomplishments already listed on your CV, they should be germane to your personal/professional growth.** You want the emphasis in order to encourage the reader to bring this up in the interview.
- ☐ **Use your own words rather than rely on quotes; your own thoughts are more powerful.** Students have been hung up in writing personal statements because they are intent on developing the whole document around some favorite quote. If you can make it work, fine, but don't get mired down hanging onto a quote. If possible, develop a theme that carries you through the document.
- ☐ Make the statement easy to read. **The interviewers will normally have about two minutes to get through the information.** Use paragraph breaks to encourage reading. One solid page of type is formidable to someone who just has a few moments to read what you wrote.
- ☐ **Show your document to lots of people.** The hard work invested in this is worth it for the feedback.
- ☐ **Do NOT plagiarize your personal statement.** Program directors are increasingly adept at using software to determine if the language in an applicant's personal statement comes from sources other than the applicant. It is also increasingly common for programs to receive identical personal statements from more than one applicant. This same issue also affects thank-you notes. Your written work should reflect only your own effort.
- ☐ **Your statement should be about one page.** Arial 12-point font with one inch margins most closely replicates how ERAS will format the statement.

Sample Personal Statement #1

Years ago, I was involved in a junior version of the Rube Goldberg Competition. Participants in this annual national engineering contest work within a set of parameters to design the most creative device possible that accomplishes a basic task such as placing a ball into a cup. My team always did well. However, it is the countless hours spent brainstorming, exciting energy exchanges, and creative engineering solutions that I am most fond of. The exhilarating rush of working with a team to generate a detailed plan for a problem and adapting it as new challenges arose was indescribable. Even then, I knew that I wanted a career that recreated that “rush.” I found what I was looking for in Internal Medicine.

My fascination with Medicine began with my father. Over a decade ago, he suffered a “widow maker” heart attack. Thanks to the prompt medical care he received at the hands of skilled physicians, he survived. Since that day, I have curiously observed as my father’s physicians have worked to scientifically and strategically optimize his health. My father’s ongoing journey has been an inspiration for my career as well as my research interests. It has been a privilege applying the lessons I have learned from him about patient care to the care of my own patients. For instance, as a student, it is a powerful feeling to know that the trust you have forged with a shy twenty-two year old has freed him to speak candidly with you about his sexual history—particularly when the subsequent testing is diagnostically revealing. The full story of this young man’s HIV diagnosis highlights the dedication, teamwork, and professionalism necessary to effectively address the complexities in Medicine. Wielding a knowledge base of great breadth and depth, my residents and attendings in Medicine effortlessly addressed a multitude of medical and social issues with confidence and compassion. These are the physicians I want caring for my own father and the kind I aspire to become.

Communicating with my patients the fine points of their hospital course has been one of the most gratifying aspects of working clinically. In the research realm, I cherish opportunities to discuss with colleagues the details of my findings. Exchanging ideas on the unsolved mysteries underlying ischemia-reperfusion injury and therapeutic hypothermia evokes a visceral sensation that is identical to the thrill I discovered years earlier as a tennis instructor; dissecting and developing the techniques of novices over months and years as they evolve into budding tennis players has been incredibly rewarding. In the hospital, I have been able to achieve this same sense of satisfaction by working to enhance my patients’ awareness of their health problems. Coming from a family of teachers, it is the abundance of opportunities to teach, educate, and thereby impact the lives of others that draws me to the field of Internal Medicine.

It has been over ten years, but I still feel a surge of adrenaline when I reflect upon my Rube Goldberg days. The patience, dedication, optimism, and leadership that this humbling experience demanded are the same qualities that are exercised daily by my mentors in Medicine. After residency, I hope to pursue an academic career in which I can coach the next generation of physicians while continuing to research my interest in improving outcomes following cardiac arrest and resuscitation. It is invigorating to know that I am on the cusp of a career that will routinely recreate that Rube-Goldberg-“rush.” Thus, it is with great enthusiasm that I look ahead to my next chapter in training as a resident in Internal Medicine.

Sample Personal Statement #2

I spent my holiday visits home from college watching my mother care for her dying father. My grandfather suffered from Parkinson's. While his mental faculties remained intact, the rigidity with which he moved during the simplest task left a lasting impression on me. These visits were admittedly marked with a sense of dread as I was forced to confront the struggles of aging and dying. The frailty of the human body so starkly apparent in my grandfather, I repeatedly questioned how there was not more we could do to preserve or restore neurological function as our bodies grow old. None of these things seemed to unnerve my mother. I watched her care for my grandfather with ease, showing no expression other than one of confidence, or perhaps, acceptance.

Inspired by grandfather's struggle against neurodegenerative disease, neuroscience is what ultimately brought me to medicine. My academic studies, however, did not immediately direct me to become a physician. After graduating with degrees in math and economics, I worked as a researcher and programmer at a public policy research firm. I managed and analyzed data for health and education organizations such as Centers for Medicare & Medicaid Services. While I knew I contributed to important work, I wanted to do more to tangibly help people and impact health. I wanted to do something that I truly loved. I resolved to pursue medicine, enrolling in a post-baccalaureate pre-med program at American University while continuing to work full-time. Resuming school while working full-time was daunting, but I was motivated by the prospect of applying my training and experience in public policy to advance patient care.

As a medical student, my work quickly started to revolve around neuroscience and neurosurgery. I spent the summer after my first year working in an epilepsy lab, where I wrote code for computational models of neural networks in order to understand how seizures propagate. This was an opportunity to apply the quantitative and analytic skills that I had developed in my previous work experience. Following the completion of my third year, I took a year off from medical school to expand my investigative career in neurosurgery. During this time, I initiated and contributed to several projects with my mentor, Dr. Sandi Lam. We used large administrative databases to investigate clinical neurosurgery questions that were otherwise difficult and expensive to study in individual, smaller institutions. For example, we analyzed national data from an insurance claims database to study predictors of success for endoscopic third ventriculostomy in children with hydrocephalus. Using another database, we published a study examining risk factors for venous thromboembolism in children with traumatic brain injury.

These experiences have culminated in a love for neurosurgery. The direct application of technical skills to alleviate neurological impairment has great personal and academic appeal for me. As my grandfather so clearly embodied, the nervous system enables the body's most basic functions as well as the complex behavior that define us as individuals. I was struck by the impact I could have as a neurosurgeon in helping patients retain their identity and independence. I am also aware that operations of this order have extremely high stakes and require a lifelong commitment to training and honing one's craft. I cannot imagine spending my life doing anything else. I offer a deep analytical foundation and intend to build on this throughout my career, in the operating room and through healthcare outcomes research.

Sample Personal Statement #3

I continue to find myself amazed by the dramatic recoveries made by patients after reconstructive surgeries. Seeing my patients walking pain-free the day of their arthroplasty surgeries convinced me to pursue a career in orthopaedic surgery. Even though I decided to become an orthopaedic surgeon during my third year of medical school, my decision was grounded in experiences prior to medical school. My cousin was born with cerebral palsy, and I have seen him go through multiple botox injections, tendon release and lengthening surgeries, and the subsequent spica casts. I remember the painful rehabilitation he went through, but at the same time, I saw the progress he made following these procedures. These experiences had introduced me to orthopaedic surgery and its potential for healing patients, but participating firsthand in the treatment and care of patients affirmed that orthopedic surgery is the right career for me.

Research has been a significant part of my life thus far. I have participated in several research internships, from working on oncoproteins to investigating the potential side effects of the drug sibutramine. I took away important lessons from all of these research experiences and applied to and participated in the Howard Hughes Medical Institute - National Institutes of Health Research Scholars Program. This program gave me a year-long opportunity to conduct research at the NIH. Working with Dr. Bradford Wood, I investigated the use of liposomes to improve the delivery of thrombolytic drugs. I started my project from the ground up, made a significant amount of progress, and gained experience presenting at a national conference. Most importantly, I found that I have the patience, persistence, creativity, and curiosity that a career in academic medicine will satisfy.

During my year away from medical school, I also shadowed Dr. Benjamin Potter, an orthopaedic surgeon, at the Walter Reed Army Medical Center (WRAMC). Once a week, I assisted on oncology or trauma surgeries and saw patients in the clinic. Over six months, I saw complex trauma that very few hospitals see. What impressed me most was that despite the gruesome injuries sustained by soldiers deployed to Afghanistan and Iraq, nothing fazed the orthopedic surgeons. In every case, they went to work meticulously repairing and reconstructing shattered bones, charred flesh, and severed nerves. My time at WRAMC reinforced the unique capability that orthopedic surgeons have not only to heal patients but to mend them.

Throughout my life, I have tried to broaden my understanding by taking part in a variety of activities. Each of these experiences has not only enhanced my knowledge, but all together they have guided me in choosing my career path. I see myself becoming an academic orthopaedic surgeon who balances clinical practice with research. I realize that achieving such a balance is difficult, but I have been fortunate in working with physicians and research mentors who effectively balance these two aspects of modern medicine. I aim to one day join these physicians at the cutting-edge, helping to improve clinical medicine and patient care.

Information Provided in the Medical Student Performance Evaluation (MSPE)

(Taken from the 2019-20 Academic Guidelines)

The Pritzker School of Medicine provides each student with an MSPE letter when applying for post-graduate training to supplement the transcript.

The letter is intended to provide a fair summary of student performance. It includes a review of student's academic history, including a summary of the clinical skills sequence, third-year clerkship summaries, and the listing of the clerkship internal designators. The Pritzker School of Medicine retains some latitude in editing departmental comments in order to provide accurate information about student performance. Any disciplinary sanctions imposed during medical school will be included in the MSPE. The MSPE will include information about required remediation of academic performance, as appropriate. Pritzker-sponsored honors and awards, participation in research projects, community service work, summer activities, and other relevant activities may be mentioned. Reference to academic performance during the basic science years will occur when warranted.

The Pritzker School of Medicine does not use a numeric ranking system. Generalized descriptors given to each student including "exceptional performer," "outstanding," "excellent," "very good," and "good" are based on a holistic review of scholastic achievement in the third year curriculum, scholarly work, and institutional and community service. The MSPE appendix includes two graphs showing 1) the distribution of clerkship internal designators within the class and 2) the distribution of summary designators within the class.

Sample MSPE and Appendicies



Pritzker School
of Medicine

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<http://pritzker.uchicago.edu>

MEDICAL STUDENT PERFORMANCE EVALUATION

Kai Doe

October 1, 2019

NOT REAL STUDENT DATA

Identifying Information

Kai Doe is currently a fourth year medical student at the University of Chicago Pritzker School of Medicine in Chicago, Illinois.

Kai matriculated at the University of Chicago Pritzker School of Medicine in Summer 2016 and has distinguished himself in the following activities as a medical student.

Noteworthy Characteristics

- Kai is remarkably passionate about improving health care access for underserved patients, and focused on this passion by serving as a leader in one of our school's student-run free clinic, and also through volunteering at other free clinics.
- Kai demonstrates an incredible drive to discover and has sought answers to challenging issues through research, and most recently has been piloting a project in which he combines his interests in Ophthalmology, research and service, as he implements an efficient method of screening for Glaucoma in high-risk populations.
- Kai is committed to mentorship and has sought out opportunities to work with youth in Chicago's South Side community, via pipeline programs including the Health Professions Recruitment and Exposure Program (HPREP) and the Pritzker School of Medicine Experience in Research Program (PSOMER).

Scholarship and Discovery:

As a part of the Pritzker curriculum, all students are required to participate in Scholarship and Discovery, a longitudinal scholarly program that incorporates core coursework, research, electives, service activities, and dissemination of scholarship with the goal of providing each student with an advanced level of knowledge and expertise in a given track. Kai selected the Healthcare Delivery Sciences Track through which he investigated the topic of "Examining 1-year reoperation rates as a quality indicator across surgical subspecialties."

Academic History

Transfer student: Not applicable

Initial Matriculation in Medical School: Summer 2016

Expected Graduation from Medical School: Spring 2020

Extensions, Leave(s) of Absence, Gaps or Breaks: NA

Dual/Joint/Combined Degree: NA

Selected Honors/Awards

Membership in the Gold Humanism Honor Society (GHHS), 2019: The GHHS honors senior medical students for "excellence in clinical care, leadership, compassion, and dedication to service." Election to the GHHS is a peer-nominated honor that demonstrates Kai's superior commitment to the fundamental values that underlie the medical profession.

Academic Progress

Preclinical/Basic Science Curriculum:

The Pritzker School of Medicine uses a Pass/Fail grading system. Kai received passing grades in all courses in Years 1 and 2.

The following summary evaluation was submitted regarding Kai's performance in the two year Clinical Skills course sequence:

Kai worked during the course to develop his writing and presentation skills. By the end of the course he wrote and presented a complete H&P with all required elements. I should mention that he also demonstrated excellent knowledge of pathophysiology and underlying medical states. He was ready to proceed to the clinic.

Professionalism:

The following comments were made about Kai's professionalism:

- "Kai's presentations were excellent and very composed, especially for a third year. His professionalism was a real asset!"
- "He demonstrated outstanding professionalism and worked well on the team. He also accepted and incorporated feedback well."
- "A true team player, he readily and regularly took on important patient care tasks and completed them. He conducted himself professionally at all times."

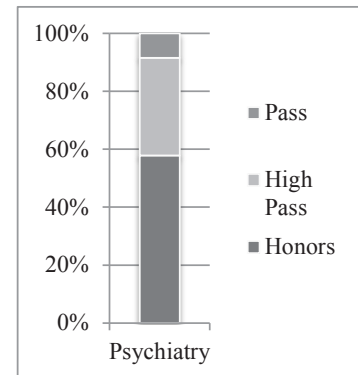
Core Clinical Clerkships and Elective Rotations:

The following summaries are edited for length and grammar. The clerkships are presented in chronological order. If the student took a year off, the graphs represent the year in which they completed their clerkships.

Clerkship #1 -- Psychiatry (Pass):

Overall grade composition: Clinical Performance: 67%; Shelf Exam: 33%; OSCE: P/F

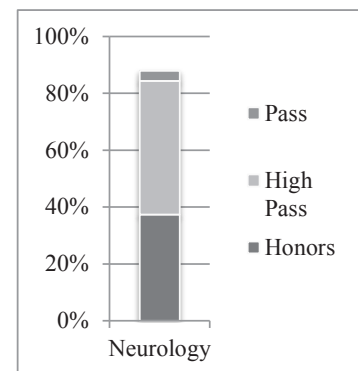
Kai's overall performance in the Psychiatry clerkship was very good. Kai did a good job while on his psychiatric rotation. His knowledge improved as the month progressed, and his clinical skills with patients stood out as a strength. He communicated well with the patients he worked with on the consult service and was able to connect with them easily. As he saw more patients his confidence improved. He demonstrated outstanding professionalism and worked well on the team. He also accepted and incorporated feedback well. His interest in learning and his interpersonal strengths will prepare him well for residency.



Clerkship #2 -- Neurology (High Pass):

Overall grade composition: Clinical Performance: 50%; Shelf Exam: 25%; OSCE: 25%

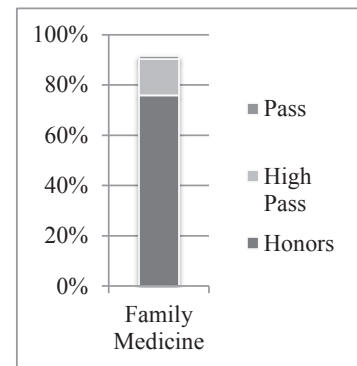
Kai's overall performance in the Neurology clerkship was excellent. Kai performed well in the Neurology Clerkship. He displayed an excellent level of clinical knowledge, and was well-read and well-prepared, with great participation in discussion sessions. His clinical reasoning was strong, with progress in knowledge of neuroanatomy and localization skills. His patient presentations were logical and focused. He was developing the ability to generate a broad differential diagnosis. In discussion sessions, he thoroughly considered relevant possible diagnoses and weighed appropriate management strategies. His communication and interpersonal skills were strong, with a very good bedside manner. He was very enthusiastic in participation, making great efforts to see a wide range of cases. He was developing into an excellent physician.



Clerkship #3 -- Family Medicine (Honors):

Overall grade composition: Clinical Performance: 50%; Professionalism: 20%; Shelf Exam: 15%; OSCE: 10%; Reflection Participation: 5%

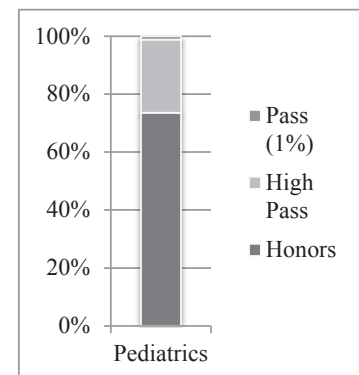
Kai's overall performance in the Family Medicine clerkship was outstanding. It was a pleasure having Kai on the Family Medicine Clerkship this past September. Kai's key strengths were his professionalism and communication skills. His preceptor shared, "Kai's presentations were excellent and very composed, especially for a third year. His professionalism was a real asset!" His clerkship director was impressed by Kai's reflections about the patient-physician relationship and creating a positive mindset when caring for patients, no matter their background. Kai was able to describe the core principles of Family Medicine in his reflections which we know will further inform his development. Kai earned a grade of honors on our clerkship because of his stellar overall performance. We wish him the best.



Clerkship #4 -- Pediatrics (Honors):

Overall grade composition: Clinical Performance: 60%; Shelf Exam: 25%; General Care Nursery: 10%; Case Log Completion: 5%

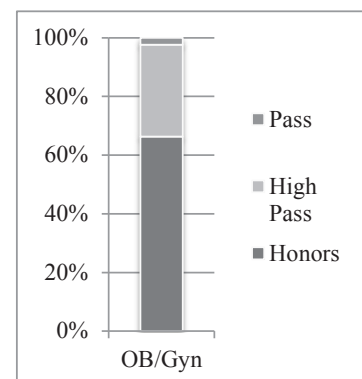
Kai's overall performance in the Pediatrics clerkship was outstanding. Kai had a great knowledge base for a third year student, certainly above average for his level of training. Kai was able to report his physical exam findings with great accuracy, and was particularly skilled at his inpatient exams, often tracking changes in findings over the course of a patient's stay to justify whether or not they had improved clinically. He demonstrated good differentials from the beginning, and his ability to generate an appropriate plan that was agreeable to the other members of the team really improved over the course of the rotation. Kai was accepting of feedback and was able to use it to make improvements during his clerkship. When presented with a patient who had a new diagnosis, he would often come to rounds the next day knowing the disease process at an attending level. Kai did a fine job of connecting with his patients and their parents, which in turn helped his ability to obtain excellent patient histories. He was a phenomenal team player on the inpatient component. One of his interns remarked he had a "sense of responsibility to the team that was awesome." A true team player, he readily and regularly took on important patient care tasks and completed them. He conducted himself professionally at all times. In sum, Kai performed extremely well on his Pediatrics clerkship. He was an incredibly quick and dedicated learner, both in terms of medical knowledge and in incorporating feedback into his daily practice. He was a trusted team member, and he had a warm and calm bedside manner. It was a pleasure to have him rotate with us.



Clerkship #5 -- Obstetrics and Gynecology (Honors):

Overall grade composition: Clinical Performance: 50%; Shelf Exam: 25%; OSCE: 15%; Case Presentation: 5%; Case Log Completion: 5%

Kai's overall performance in the Obstetrics and Gynecology clerkship was outstanding. Kai demonstrated outstanding medical knowledge. He seemed well-read and prepared to discuss OB/GYN topics and was always eager to learn more. Kai demonstrated outstanding H&P and technical skills. He was able to proficiently perform all aspects of a physical exam on a pregnant patient. He was thoughtful and precise with skin closure and able to two-hand knot tie. He was able to deliver a baby with minimal assistance. Kai demonstrated outstanding clinical reasoning. He gave concise presentations with appropriate attention paid to pertinent positives and negatives. When he was following laboring patients he would go see them independently, present, and write notes all without being asked. His enthusiasm and thoughtfulness was impressive. Kai demonstrated outstanding professionalism - he always arrived on time and

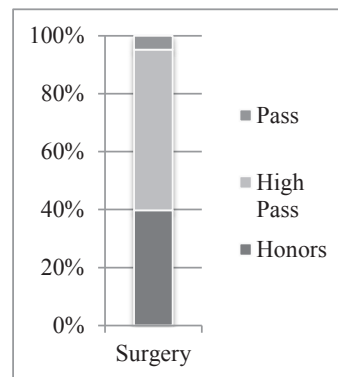


was enthusiastic. His encounters with staff, patients, and team members were consistently professional. Kai was an active, engaged, and hardworking student. He went out of his way to ensure that he was involved, and he developed good rapport with patients. He showed interest in learning and was well integrated into the team during his time on Labor and Delivery. He had a nice ability to integrate clinical knowledge with patient care and to contribute to the team. He was a fast learner and sought to incorporate feedback. Overall, Kai was an outstanding student during his OB/GYN rotation. He was notably hard-working, personable, and intelligent. His ability to excel on a team will enable him to become a leader in whatever field of medicine he chooses.

Clerkship #6 -- Surgery (High Pass):

Overall grade composition: Clinical Performance: 60%; Shelf Exam: 20%;
OSCE: 7%; Oral Exams: 10%; Case Log Completion: 3%

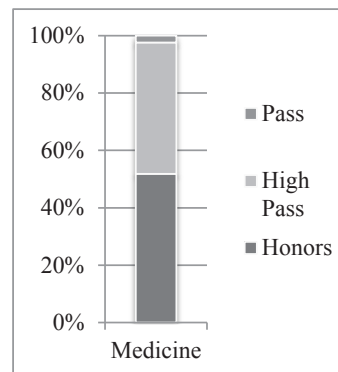
Kai's overall performance in the Surgery clerkship was excellent. He had a good fund of knowledge that he could apply in his day-to-day activities. He did a great job of synthesizing preclinical course work and applying it to clinical problems encountered in the wards and clinics. Kai took good histories from patients in the clinics and presented the information clearly and succinctly. He picked up technical skills quickly. Kai understood the disease processes and did a reasonable job of answering questions in the O.R. and in the clinics. He took responsibility for his education; he read about the patients that he saw and took initiative to give presentations on topics of his personal interest. He was a good communicator. He was able to effectively communicate with his patients as well as their families, staff, and faculty. Kai was a very good member of his teams. He was hardworking and willing to go the extra mile to assure that the work was done each day. He conducted himself in a professional manner at all times. He was respectful to his patients as well as staff and faculty. Kai was reliable, punctual, and sympathetic to his patients. He was genuinely interested and engaged. He was "super kind" and pleasant, and easy with whom to work. Kai will be an excellent resident and physician.



Clerkship #7 -- Medicine (Honors):

Overall grade composition: Clinical Performance: 65%; Shelf Exam: 15%;
OSCE: 15%; Case Presentation: 5%

Kai's overall performance in the Medicine clerkship was outstanding. His understanding of the scientific basis of medicine as it applies to the practice of medicine was at a level expected for his stage of training. Kai's clinical skills were excellent. His presentation skills were excellent. Kai's differential diagnoses were logical and thoughtful, as were his treatment plans. He took problems he encountered and used these as opportunities for learning. He used his day-to-day work to grow his fund of knowledge. He frequently included primary research in his assessments and plans. Kai has a strong sense of how to connect and support each patient. He took the time to explain to each patient the details of complex procedures and pathophysiology. Patients clearly trusted him as a bridge to the clinical team. He took the lead on his patients. He was a good team player who was always willing to help. Kai took his responsibilities very seriously. He was reliable regarding his tasks and demonstrated the highest level of integrity. Kai's performance put him among our top students.



Summary

Clerkship Grades:

(H=Honors; HP=High Pass; P=Pass)

Clerkship #1 - Psychiatry: **P**
Clerkship #2 - Neurology: **HP**

Clerkship #5 - Obstetrics and Gynecology: **H**
Clerkship #6 - Surgery: **HP**

Clerkship #3 - Family Medicine: **H**
Clerkship #4 - Pediatrics: **H**

Clerkship #7 – Medicine: **H**

Kai is deeply passionate about community service and has spent much of his medical school career dedicated to advancing the health of underserved patients on the South Side of Chicago. His ultimate aim is to become an expert in his field so that he can best serve high-risk patients locally and globally, and has a goal to provide support for clinical services in Nigeria in the future. True to his aim, Kai is adept at combining his research and service interests, and has found many opportunities to be involved in projects and grants that specifically focus on underserved populations. Motivated and hardworking, he approaches his goals with a quiet determination and a positive attitude. Kai is flexible enough to withstand challenges or unexpected setbacks that come his way, and is the type of person that a teammate could rely on to "weather the storm." This positivity and focus, combined with his other-centered nature and deep passion for equitable healthcare, will make him the rock of any residency program. Our holistic evaluation of Kai's performance in our curriculum, in scholarship, and in service demonstrates that he is an excellent candidate for your residency training program.

The University of Chicago's evaluation system was not designed to provide information comparing one student to another and for that reason no ranking regarding Kai Doe can be provided. The grading system is pass/fail and there are no class rankings. The curriculum has been designed for a competency-based evaluation system. The students are measured by their achievement of the competency, not in terms of comparative performance. Descriptors provided for the third-year clerkships reflect the degree to which Kai has attained the competencies taught in that clinical experience. For that reason, we encourage review of this evaluation letter in its entirety.

Sincerely,



H. Barrett Fromme, MD, MHPE
Professor of Pediatrics
MSPE Director, Pritzker School of Medicine



Halina Brukner, MD
Professor of Medicine
Interim Dean for Medical Education

Attachments: MSPE Appendices

*MSPE language subject to change.

20XX Medical Student Performance Evaluation Appendices

NOT REAL STUDENT DATA

Appendix A – Pre-Clerkship/Basic Science Performance

The University of Chicago Pritzker School of Medicine has a Pass/Fail System. Therefore, no graphic representation of the student's performance relative to his or her peers in pre-clerkship/basic science courses can be provided.

Appendix B – Clinical Clerkship Performance

The University of Chicago Pritzker School of Medicine utilizes a Pass (P) / Fail (F) grading system, with the exception of the core clinical clerkships, including clerkships deferred to the fourth year:

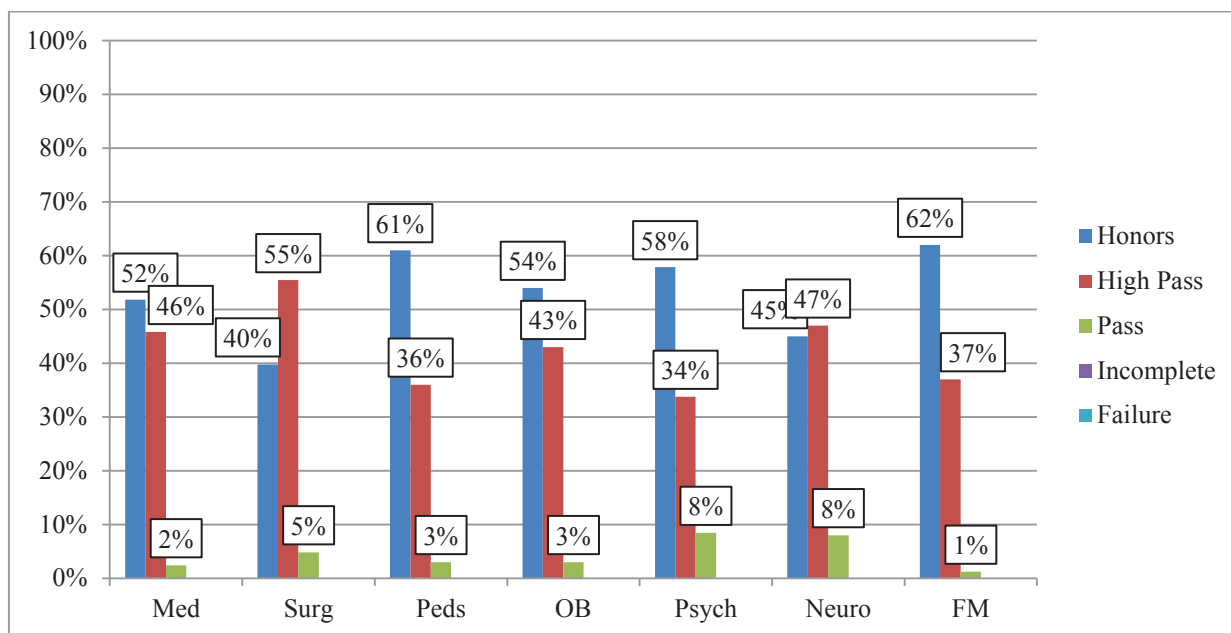
- Internal Medicine (12 weeks, including electives)
- Surgery (12 weeks, including electives and a separate 2 week Perioperative Care rotation)
- Pediatrics (6 weeks)
- Obstetrics and Gynecology (6 weeks)
- Psychiatry (4 weeks)
- Family Medicine (4 weeks)
- Neurology (4 weeks)

During the third year, students are given grades for the seven required core clerkships (Honors, High Pass, Pass, or Fail) based on the extent to which they meet or exceed a given competency. In each of these clerkships, clinical performance is evaluated by the clerkship directors as to the extent to which the student achieves the performance objectives of the clerkship. Accordingly, this evaluation system does not assume a normal distribution of grades as students are assessed against performance objectives, not each other. The distribution of the internal designators by clerkship for the Class of 20XX is outlined below.

	Honors	High Pass	Pass	Incomplete	Failure	Total
Medicine	52%	46%	2%	0%	0%	100%
Surgery	40%	55%	5%	0%	0%	100%
Pediatrics	61%	36%	3%	0%	0%	100%
Obstetrics-Gynecology	54%	43%	3%	0%	0%	100%
Psychiatry	58%	34%	8%	0%	0%	100%
Neurology	45%	47%	8%	0%	0%	88%
Family Medicine	62%	37%	1%	0%	0%	92%

Because the third-year core clerkships do not conclude until the end of June, the University of Chicago Pritzker School of Medicine is not able to capture performance evaluation data from fourth-year clinical electives and sub-internships in time to report prior to the MSPE release date.

**University of Chicago Pritzker School of Medicine
Class of 20XX Clerkship Distribution**



Appendix C – Professional Attributes

Professional attributes are considered in the Pass/Fail designation and addressed in the clinical performance evaluation summaries prepared by the Clerkship Directors. Therefore, no graphic representation of the students' professional attributes relative to his or her peers can be provided.

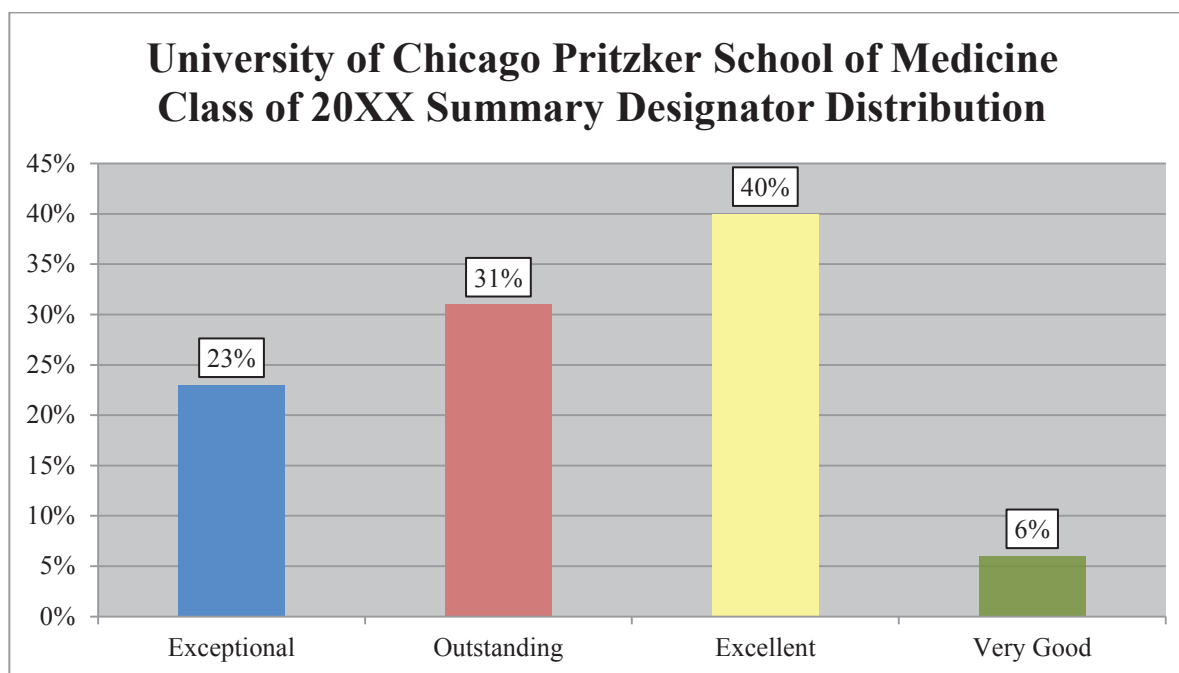
Professional attributes assessed in the clerkships include the extent to which students:

- Demonstrate enthusiasm, interest, and self-motivation
- Pursue self-directed learning
- Exhibit responsibility, integrity, and caring in establishing trusting relationships with patients and family members
- Interact appropriately and respectfully with other health professionals
- Are punctual and prepared

Appendix D – Overall Comparative Performance

In evaluating our students for residency, students receive a summary designator based on their performance during their clerkship rotations. Below is the distribution of these designators for the Class of 20XX.

Exceptional	23%
Outstanding.....	31%
Excellent.....	40%
Very Good.....	6%
Good.....	
Acceptable.....	



Appendix E – Medical School Information Page

Specific Programmatic Emphases of the Medical School and its Educational Programs:

Mission Statement: “At the University of Chicago, in an atmosphere of interdisciplinary scholarship and discovery, the Pritzker School of Medicine is dedicated to inspiring diverse students of exceptional promise to become leaders and innovators in science and medicine for the betterment of humanity.”

Pritzker attracts and recruits culturally diverse student leaders with strong academic backgrounds and personal accomplishments. The curriculum emphasizes the importance of humanistic care and skills of critical analysis. With the exception of the clinical clerkship year, Pritzker operates on a Pass/Fail grading system to encourage students to develop teamwork skills, to discover and develop their unique talents, and to promote cooperative learning through focused curricular and co-curricular activities.

These medical education programs include the following:

- Integration of basic science and clinical medicine across the four years of the curriculum.
- Students who are enrolled in a joint MD/PhD program at the University of Chicago participate in a longitudinal curriculum designed to provide enhanced training in fundamental concepts and scholarly skills.
- The Scholarship & Discovery component of the Pritzker curriculum reaffirms the core mission of the University to generate new knowledge to improve human life. The cornerstone of Scholarship and Discovery is the completion of a mentored scholarly project by the time of graduation, focusing on one of five scholarly tracks: **(1) Scientific Investigation (Basic Sciences, Clinical Research, or Social Sciences), (2) Medical**

Education, (3) Healthcare Delivery Sciences (formerly Quality and Safety), (4) Community Health, and (5) Global Health. Guidance is provided by core faculty throughout the students' time at Pritzker. During the first year, students participate in coursework and throughout subsequent years, students also participate in activities related to their scholarly track, including a focused scholarly block to work on their research. Examples of additional scholarly activities include advanced elective coursework, conference participation, or track specific activities (i.e. a service-learning project for Community Health, out-of-country rotations for Global Health, serving as a Teaching Assistant for Medical Education, etc.). During the fourth year, students either complete their scholarly project or continue their advanced training in their scholarly area with guidance from faculty Track Leaders. All students, including MD-PhD students who are exempt from the Scholarship and Discovery requirement, are encouraged to disseminate their work at the Pritzker Senior Scientific Session and share their findings with a broader regional and national audience whenever possible.

- Summer research training supporting over **75%** of the students to explore their research aptitudes before entering the second year. The experience often serves as a scholarly foundation from which students continue their scholarly work throughout their medical school tenure, often resulting in dissemination via presentation or publication.
- Clinical experiences with patients and standardized patients beginning the first quarter of medical school aided by the formative feedback provided by review of recorded patient encounters with full-time faculty preceptors.
- A comprehensive group of required core clerkships beginning in the third year and combining ambulatory and inpatient experiences taught by full-time faculty together with highly selected residents to promote and model clinical proficiency.
- Opportunities to participate in MD/PhD and MD/MBA programs, master degree programs (MPP, AM, MS, JD) and research “year off” experiences.
- An extensive array of co-curricular activities that provide the arena for students to develop further their altruism, leadership, professionalism, and self-care.
- Integration of humanism in medicine through programs such as the First Year Orientation and White Coat Ceremony, Gold Humanism Honor Society Induction Ceremony, and Student Clinician Ceremony. In these and other student programs, upperclassmen and residents model a mentoring demeanor promoting collegial approaches to medical education.

Average Length of Enrollment (Initial Matriculation to Graduation):

The average duration of enrollment was approximately **4.6 years**.

Of the 83 students anticipated to be in the graduating Class of 20XX, **20** took more than 4 years to complete medical school:

- **10** students completed joint MD/PhD training, which added an average of **4.4** years to their medical education.
- **1** student completed joint MD/MBA training at University of Chicago.
- **1** student completed a Master's program in Harris School of Public Policy at University of Chicago.
- **7** students participated in additional scholarly and clinical experiences for an additional year. Of these 7 students, 2 obtained support via Pritzker Fellowship, 1 obtained a NorthShore Fellowship.
- **4** students chose to utilize the Extended Curriculum Option to decompress an academic year for personal, family and/or medical reasons.

Guidelines for Medical Schools Regarding Academic Transcripts:

The Pritzker School of Medicine is compliant with the AAMC “Guidelines for Medical Schools Regarding Academic Transcripts.”

Description of the Evaluation System Used at This Medical School:

Please see Appendix A, B, C, and D.

AOA Membership

The University of Chicago is home to the Illinois Beta Chapter of Alpha Omega Alpha, the national medical honor society. Election to the chapter occurs at the beginning of Pritzker students’ fourth year.

To ensure that the selection of students to AΩA is fair and inclusive, a committee, appointed by the Dean for Medical Education identifies the top quartile of the class, who are considered AΩA-eligible. From the eligible group, 1/6 of the class is then selected for membership in AΩA. The AΩA constitution calls on the committee to consider not only scholastic achievement but also capacity for leadership, professionalism, a strong sense of ethics, and a commitment to service in the school and community, along with outstanding achievement in research. The selection of AΩA eligible students is based on:

- 1) Clerkship performance, as determined by clerkship evaluations;
- 2) Research, leadership, and institutional activities.

The process by which students are selected for AΩA is reviewed at least every other year to track progress towards achieving fair and unbiased selection.

Medical School Requirements for Successful Completion of the USMLE Step 1 and Step 2 for Promotion and/or Graduation

To graduate from the University of Chicago Pritzker School of Medicine, students must have registered and taken Step 1, Step 2 (CK) and Step 2 (CS) of the USMLE exam. Passing the exams is not required for graduation.

Medical School Requirements for Successful Completion of Objective/Observed Structured Clinical Evaluation (OSCE) at Medical School.

Observed Structured Clinical Evaluations (OSCEs) are used for formative feedback during the first- and second-year Clinical Skills course, both throughout the course and during the assessment

in the final exams. Following the third year, all students participate in a required Clinical Performance Exercise (CPX) which simulates USMLE Step 2-CS. The CPX experiences are for self-assessment and feedback. All third year core clerkships include an Objective Structured Clinical Evaluation that students must complete.

Utilization of Narrative Comments from the Medical School Course, Clerkship, or Elective Director in the Composition of the MSPE.

The narrative comments from the seven required third-year clerkships have been edited for length but not for content.

Process of MSPE Composition at the Medical School.

The Medical Student Performance Evaluation is prepared by the Medical Student Performance Evaluation Director. Administrative support is provided by the Manager of Communications and Student Services, the Office Administrator, and the Curriculum Management Assistant.

MSPE Review by Students.

Students at the Pritzker School of Medicine are permitted to review the MSPE letter in its entirety prior to its transmission and can request changes for factual information only.

Residency Application Information by Specialty

The information in the following pages comes directly from UChicago Medicine Program Directors, edited only for grammar. It is updated annually.

Preliminary Programs

PGY-1

These programs require a separate application in addition to your specialty application.

Program Director at UCM

John McConville, MD

NRMP Data

Source: Results and Data: 2018 Advance Data Tables (NRMP publication)

Number of positions offered	1,883
Number of positions filled by US Applicants	1,370

Letters of Recommendation

Number of letters recommended	3
Chair/Chief's letter required?	Yes
Number of letters from within the specialty	1
Number of letters from external institutions	N/A

The student should identify an internal medicine advisor. This is usually a faculty member that the student has had a chance to interact with previously as either a supervising clinical attending or preceptor. This advisor will provide advice regarding the application process and serve as co-author for the Chairman's letter. The Office of the Chairman of the Department of Medicine will edit/co-author this advisor's letter. The other two letters of recommendation should be from faculty who observed your clinical performance.

Personal Statements

Internal medicine programs are looking for thoughtful, sincere personal statements that relay enthusiasm for preliminary training in medicine. The statement should demonstrate attention to detail and organization. It should be clear that the applicant put effort into the statement. Write humble essays which contain information about interests and career plans. Program directors read the personal statement to make sure that the applicants are levelheaded, so avoid taking unusual measures to be noticed, as it runs the risk of alienating some percentage of readers.

A poorly written personal statement may lower your rank or prevent you from receiving an interview. A well-written personal statement is unlikely to raise your ranking but it will help you in receiving an interview and give you a chance to have a meaningful discussion during your interview.

In many cases, you do not need to write an entirely new personal statement for preliminary applications. Often, it is enough to substitute the final paragraph of your advanced program personal statement with a paragraph that outlines enthusiasm for preliminary training. A classic strategy for this paragraph is to outline the benefits of internal medicine training for your chosen career path.

Application Timing

When do programs begin reviewing applications?	As soon as ERAS opens in September
When do programs begin offering interviews?	End of September

Pritzker students send in an average of 16.4 applications for preliminary programs and receive a mean of 4.1 interviews (2018-19 PSOM survey data).

Every program has a different process for reviewing applications, but many programs begin reviewing applications shortly after the applications become available. You can minimize the risks of being lost in an incomplete application pile by getting the bulk of your application completed by mid-September.

Providing a cohesive application in which the personal statement, letters of recommendation, the CV and the interview are concordant regarding interests and career plans is to your advantage. Planning the content of these items in this manner provides programs with a strong sense of candidate professionalism and sophistication regarding career interests. You can help letter writers contribute to this concordance by asking prospective letter writers in person if they would write a letter and then, when the answer is affirmative, sit and discuss your career plans and accomplishments. Doing this over a final or draft personal statement and CV helps a lot.

Interview Advice

Scheduling

The average number of interviews a preliminary medicine-bound student from Pritzker schedules and executes during a season is ~7. It is not always possible to schedule interviews by geography to save money on travel, because students do not have control over when invitations are offered. Do not attempt to reschedule interviews multiple times. Always be polite in discussions with administrators at a program.

Interview day

Be on time. Be polite. Display humble behavior (avoid anything that may be interpreted as arrogance). Prepare for your interviews by learning about the program through the web or other information materials. Ask questions that reflect you've studied the program (i.e. do not ask questions that are easily answered by the website or program materials). Do not talk poorly of your own institution as this is a "red flag" to the interviewer. Such students come across as either "not loyal" or extremely needy.

Post-Interview Advice

Is it common practice for applicants to contact their #1 program to let them know they are ranking them first?

Yes, but it will not affect rank. It is not expected that you communicate about your intentions. It is unlikely to change your rank, but it does make your application stand out in ranking discussions. If you are going to tell a program it is number one on your rank list, make sure that it is the only program you are saying this to (it is unprofessional to tell more than one program that you are ranking them first, and program directors do talk with each other).

Transitional Programs

PGY-1

These programs require a separate application in addition to your specialty application.

Program Director at UCM/NorthShore University HealthSystem

Shashi Bellam, MD (sbellam@northshore.org)

Advisor for Transitional Programs

James Woodruff, MD

NRMP Data

Source: Results and Data: 2018 Advance Data Tables (NRMP publication)

Number of positions offered	1,086
Number of positions filled by US Applicants	772

Letters of Recommendation

Number of letters recommended	3
Chair/Chief's letter required?	No
Number of letters from within the specialty	N/A
Number of letters from external institutions	N/A

Personal Statements

Transitional programs are looking for thoughtful, sincere personal statements that relay enthusiasm for medicine. The statement should demonstrate attention to detail and organization. It should be clear that the applicant put effort into the statement. Write humble essays which contain information about interests and career plans. Program directors read the personal statement to make sure that the applicants are levelheaded and sincerely interested in learning about general patient care during their transitional year, so avoid focusing exclusively on advanced training goals and ideally note some aspects of general patient care training which would be meaningful for future advanced training.

A poorly written personal statement may lower your rank or prevent you from receiving an interview. A well-written personal statement is unlikely to raise your ranking but it will help you in receiving an interview and give you a chance to have a meaningful discussion during your interview.

In many cases, you do not need to write an entirely new personal statement for transitional applications. Often, it is enough to substitute the final paragraph of your advanced program personal statement with a paragraph that outlines enthusiasm for transitional training. A classic strategy for this paragraph is to outline the benefits of transitional training for your chosen career path.

Application Timing

When do programs begin reviewing applications?	As soon as ERAS opens in September
When do programs begin offering interviews?	As soon as ERAS opens in September

Pritzker students send in an average of 10 applications for transitional programs and receive a mean of 4.3 interviews (2018-19 PSOM survey data).

Every program has a different process for reviewing applications, but many programs begin reviewing applications shortly after the applications become available. You can minimize the risks of being lost in an incomplete application pile by getting the bulk of your application completed by mid-September.

Providing a cohesive application in which the personal statement, letters of recommendation, the CV and the interview are concordant regarding interests and career plans is to your advantage. Planning the content of these items in this manner provides programs with a strong sense of candidate professionalism and sophistication regarding career interests. You can help letter writers contribute to this concordance by asking prospective letter writers in person if they would write a letter and then, when the answer is in the affirmative, sit and discuss your career plans and accomplishments. Doing this over a final or draft personal statement and CV helps a lot.

Interview Advice

Scheduling

The average number of interviews a transitional year-bound student from Pritzker schedules and executes during a season is ~6. It is not always possible to schedule interviews by geography to save money on travel, because students do not have control over when invitations are offered. Do not attempt to reschedule interviews multiple times. Always be polite in discussions with administrators at a program.

Interview day

Be on time. Be polite. Display humble behavior (avoid anything that may be interpreted as arrogance). Prepare for your interviews by learning about the program through the web or other information materials. Ask questions that reflect you've studied the program (i.e. do not ask questions that are easily answered by the website or program materials). Do not talk poorly of your own institution as this is a "red flag" to the interviewer. Such students come across as either "not loyal" or extremely needy.

Post-Interview Advice

Is it common practice for applicants to contact their #1 program to let them know they are ranking them first?

No and it will not affect rank. It is not expected that you communicate about your intentions and programs are instructed to limit post-interview communication with applicants. Communicating with a program will not change your rank, but does make your application stand out in ranking discussions. If you are going to tell a program it is number one on your rank list, make sure that it is the only program you are saying this to (it is unprofessional to tell more than one program that you are ranking them first, and program directors do talk with each other).

Anesthesiology

Categorical and Advanced

Some programs are advanced and require a separate application for a PGY-1.

Program Director at UCM

Junaid Nizamuddin, MD

Recommended Specialty Advisors

In selecting a specialty advisor, try to find someone with whom you feel you can develop a close relationship: someone with whom you feel comfortable and candid. A faculty member who has mentored you in a research project or who knows your clinical work is ideal. Potential advisors could include:

- Dan Rubin, MD (Clerkship Director)
- Junaid Nizamuddin, MD (Residency Program Director)
- Jennifer Banayan, MD (Medical Student Interest Group Director)
- Allison Dalton, MD
- David Glick, MD
- Jerome Klafta, MD
- Mohammed Minhaj, MD, MBA
- Peter Nagele, MD
- Sarah Nizamuddin, MD
- Michael O'Connor, MD

USMLE Data

Sources: UCM Program Directors and 2018 Charting Outcomes in the Match (NRMP publication)

Min. Step 1 score for UCM program	See below*
Mean Step 1 score of US matched applicants (NRMP)	232
Does Step 2 CK influence rank?	Yes
Min. Step 2 score for UCM program	See below*
Mean Step 2 CK of US matched applicants (NRMP)	244
Mean number of contiguous ranks of matched US applicants (NRMP)	14.7

*There is not necessarily a “minimum” USMLE Step 1 score necessary to match in anesthesiology. Many high-profile academic programs will not give consideration to candidates with USMLE Step 1 scores less than 230. However, while anesthesiology continues to be a competitive specialty, there are over 1,000 positions offered in the Match and there are many programs across the country that vary in how competitive they are. It is imperative that a student interested in anesthesiology meet with a faculty advisor to review their entire individual application (USMLE scores, academic grades/standing, extracurricular activities, etc.) so they can be guided as to the programs at which they will be the most competitive candidates.

Should applicants do away rotations?

No. The question of whether to pursue an away rotation is largely dependent on the applicant. In most cases we do not recommend that an applicant do an away rotation, but we will counsel each individual student based on their academic record and where they desire to train.

Research

Research experience is almost always a good thing! Be prepared to discuss all aspects of projects you have been involved in during your interviews. According to data from the NRMP, the mean number of research

experiences for US seniors was 2.2 and the mean number of publications/presentations/abstracts was 2.5.

Letters of Recommendation

Number of letters recommended	3
Chair/Chief's letter required?	No
Number of letters from within the specialty	1
Number of letters from external institutions	N/A

A strong letter of recommendation should come from someone with whom you have worked with closely and have developed a strong rapport. Your letter writer should be someone who can write about your attributes in a highly favorable fashion.

Letters from medicine and surgery are often well received. It is more important that the letter conveys the unique attributes of the applicant than that it comes from a specific specialty. The most important aspect of a LOR is that it can convey to the program the most positive attributes of the applicant. Thus it is less important what specialty or who the letter comes from, but that it can provide good perspective as to the candidate's strengths.

Personal Statements

The personal statement should reflect why the candidate has chosen a career in anesthesiology and what the candidate's future goals are. Personal statements should be well written—no grammatical errors or spelling mistakes, which demonstrate a lack of attention to detail. Most personal statements will not help candidates, but can hurt them.

Have a couple of trustworthy people review the statement—not only for grammar, but also to ensure that it reflects positively on the applicant. Again, one's advisor is key to helping in this process.

Application Timing

When do programs begin reviewing applications?	As soon as ERAS opens in September.
When do programs begin offering interviews?	As soon as ERAS opens in September.

Most programs begin reviewing applications as soon as they are made available. MSPEs are not released until October, and by that time most programs have already scheduled the vast majority of their interviews. Having your application completed by the time ERAS opens to programs is ideal. The UCM program does not usually start offering interviews until mid-October, after MSPEs are released.

There are over 1,000 positions in Anesthesia every year so there is a lot of variety in program types. While the competitive applicant will have many strong attributes beyond just performance on standardized exams, many programs use USMLE scores to screen applicants for interviews. For example, if an applicant's Step 2 CK score is far lower than the Step 1 score, or if there is a failing score, that would preclude most programs from offering an interview to the applicant.

Realize that students have matched with scores that are lower than what is listed above; the key is to apply to and interview at programs where you will be most competitive—this is where an advisor is invaluable in guiding you in the right direction. Meet with your advisor early and often!

Interview Advice

Be yourself! Be honest and relaxed. If you try to be someone different it will not reflect well.

Be prepared to answer questions about your application (CV, Personal Statement, etc) but also be prepared to demonstrate that you are prepared to ask questions specifically about that program. Look up the program on the internet to find out more about it prior to your interview to help you prepare.

Post-Interview Advice

Is it common practice for applicants to contact their #1 program to let them know they are ranking them first?

There is no expectation that a student communicate to a program that it is their #1 choice and it will not affect how a program will rank the candidate. If you are going to write a thank you note, be honest. Do not tell three different programs they will be your #1 choice—this will end up reflecting poorly on you.

Child Neurology

Categorical

Residents start in pediatrics for 2 years before transitioning to child neurology in PGY 3-5.

Program Director at UCM

Chalongchai Phitsanuwig, MD

Recommended Specialty Advisors

In selecting a specialty advisor, try to find someone with whom you feel you can develop a close relationship: someone with whom you feel comfortable and candid. A faculty member who has mentored you in a research project or who knows your clinical work is ideal. Potential advisors could include:

- Chalongchai Phitsanuwig, MD (Residency Program Director, Child Neurology)
- Douglas Nordli, MD (Chief, Pediatric Neurology)
- Nicola Orlov, MD (Associate Program Director, Pediatrics)

USMLE Data

Sources: UCM Program Directors and 2018 Charting Outcomes in the Match (NRMP publication)

Min. Step 1 score for UCM program	200
Mean Step 1 score of US matched applicants (NRMP)	233
Does Step 2 CK influence rank?	Yes
Min. Step 2 score for UCM program	201
Mean Step 2 CK of US matched applicants (NRMP)	246
Mean number of contiguous ranks of US matched applicants (NRMP)	11.8

Should applicants do away rotations?

Away rotations are not required. We only recommend rotations where you are strongly interested in a program and will perform exceedingly well. This experience can be very beneficial, but could potentially hurt you as well if you do not perform at an exceptional level.

Research

Having research is desirable, but not required.

Letters of Recommendation

Number of letters recommended	3
Chair/Chief's letter required?	No
Number of letters from within the specialty	At least 1
Number of letters from external institutions	N/A

Applicants should ask a physician with a good sense of the applicant's clinical ability, as well as a personal knowledge of the applicant's interests and performance history.

Personal Statements

Be sure to clearly state your rationale for entering the specialty. Explain gaps in training or education, and explain aspects of the academic record that could be perceived negatively.

Application Timing

When do programs begin reviewing applications?	As soon as ERAS opens in September.
When do programs begin offering interviews?	October (through November)

There is no separate application for pediatrics required by the UCM program, though this may vary for other institutions.

Interview Advice

Candidates should be polite and professional throughout the interview—to all staff, faculty, and residents; this is critical. Candidates should be able to articulate why they want to enter the specialty, the institution, and what their career goals are. It is important to do your homework before the interview.

Post-Interview Advice

Is it common practice for applicants to contact their #1 program to let them know they are ranking them first?

It is common, though it may not affect your ranking.

Dermatology

Advanced

Requires a separate application for a PGY-1 via the NRMP.

Program Director at UCM

Sarah Stein, MD and Adena Rosenblatt, MD, PhD

Recommended Specialty Advisors

In selecting a specialty advisor, try to find someone with whom you feel you can develop a close relationship: someone with whom you feel comfortable and candid. A faculty member who has mentored you in a research project or who knows your clinical work is ideal. Potential advisors could include:

- Christopher Shea, MD (Rotation Director)
- Sarah Stein, MD (Program Director)
- Adena Rosenblatt, MD, PhD (Associate Program Director)
- Diana Bolotin, MD, PhD (Acting Section Chief)
- Keyoumars Soltani, MD
- Yu-Ying He, PhD
- Marla Hoffman, MD
- Kemi Onajin, MD

USMLE Data

Sources: UCM Program Directors and 2018 Charting Outcomes in the Match (NRMP publication)

Min. Step 1 score for UCM program	235
Mean Step 1 score of US matched applicants (NRMP)	249
Does Step 2 CK influence rank?	Yes
Min. Step 2 score for UCM program	N/A
Mean Step 2 CK of US matched applicants (NRMP)	256
Mean number of contiguous ranks of US matched applicants (NRMP)	9.3

Should applicants do away rotations?

One to two away rotations can be helpful if the applicant is potentially interested in a residency position at the visited site and can make a positive, stand-out impression during the rotation.

Most applicants arrange to take at least two months of dermatology electives. We recommend going to away rotations in August-September of your MS4 year in order to include those experiences in your residency application.

Research

Research is desirable if you are applying in this specialty, though research does not need to be in dermatology.

Dermatology is very competitive and having a first-authored publication is ideal. Among matched US seniors, the average number of research experiences is 3.0 and the mean number of abstracts, publications, etc. is 4.8. Participating in scholarly work is essential to matching in this competitive specialty.

Letters of Recommendation

Number of letters recommended	3
Chair/Chief's letter required?	Section chief letter not required
Number of letters from within the specialty	2
Number of letters from external institutions	Useful if the applicant has worked closely with an individual and can get a strong letter of support.

Letters of recommendation should come from individuals who have observed your clinical performance and/or research initiatives and can write a strong and enthusiastic letter on your behalf.

Personal Statements

Statements should reveal the applicant's personality, and be articulate and engaging. One should avoid eccentric stories that could create a negative impression.

Application Timing

When do programs begin reviewing applications?	After MSPEs are released in October
When do programs begin offering interviews?	November

Dermatology is one of the most competitive specialties. Applicants should apply to numerous programs. Do not limit yourself to a single city or geographic location. Even outstanding applicants typically apply to 40 or more programs. [Editor's note: Pritzker students who matched successfully in this specialty applied to 60-90 programs.]

Interview Advice

Get some notion of who your interviewers are likely to be, and what their program emphasizes. It is a good idea to research the program beforehand and have thoughtful questions in mind.

Post-Interview Advice

Is it common practice for applicants to contact their #1 program to let them know they are ranking them first?

Yes, but it will not affect your ranking. While it is customary for applicants to say that they will rank a program highly, most program directors distrust and discount these statements.

Emergency Medicine

Categorical and Advanced

Some programs are advanced and require a separate application for a PGY-1.

Program Director at UCM

Christine Babcock, MD

Recommended Specialty Advisors

Any student interested in applying in emergency medicine should contact Christine Babcock, MD, or Keme Carter, MD, early in the application process. Potential letter-writers could include:

- Linda Druelinger, MD (Section Chief)
- Christine Babcock, MD (Program Director)
- James Ahn, MD (Associate Program Director)
- Keme Carter, MD (Clerkship Director)
- Paul Kukulski, MD (Assistant Clerkship Director)
- Jared Novack, MD
- Joanna Davidson, MD

USMLE Data

Sources: UCM Program Directors and 2018 Charting Outcomes in the Match (NRMP publication)

Min. Step 1 score for UCM program	See below*
Mean Step 1 score of US matched applicants (NRMP)	233
Does Step 2 CK influence rank?	Yes
Min. Step 2 score for UCM program	See below*
Mean Step 2 CK of US matched applicants (NRMP)	247
Mean number of contiguous ranks of US matched applicants (NRMP)	12.8

*Students with a Step 1 or Step 2 score of 220 or less should meet with Dr. Babcock and Dr. Carter early in the application process to discuss the competitiveness of their application.

Should applicants do away rotations?

Yes. Students should plan to do at least two emergency medicine rotations; one here and one away. The best time to do an away rotation is in August or September, though October is acceptable. Students should always do their University of Chicago rotation before doing their away rotations.

Students should consult with emergency medicine faculty when deciding where to apply for away rotations, as there is quite a bit of nuance in the discussion. It also varies a great deal depending upon the applicant's competitiveness and the region of the country where they would like to train. See the Letters of Recommendation section for advice about getting LORs from away rotations.

Research

Emergency medicine research experience is nice, but is not an absolute requirement. Having some evidence of research/scholarship is helpful for the University-based programs, but is optional in the Community-based programs. According to NRMP data, the US seniors who matched in emergency medicine had an average of 1.8 research experiences and 2.1 publications/abstracts/presentations.

Letters of Recommendation

Number of letters recommended	3
Chair/Chief's letter required?	No
Number of letters from within the specialty	2
Number of letters from external institutions	1

All students applying in emergency medicine will be provided a Section of Emergency Medicine composite letter of reference using the CORD Standardized Letter of Evaluation (SLOE) form. Every SLOE carries the names/positions of: Christine Babcock MD, Program Director; Linda Druelinger, MD, Section Chief; Keme Carter MD, Clerkship Director; Sarah Donlan, MD, Clerkship Site Director (NUH/Evanston); James Ahn, MD, Associate Program Director; and Cliff Rice, MD, Assistant Program Director (NUH/Evanston). Each individual SLOE is authored by 1-2 of the above people per the decision of the group authors (the student will be apprised of who is authoring her/his SLOE).

If you do an away emergency medicine rotation, you must obtain a letter of recommendation. If you fail to obtain this LOR, the assumption will be that you performed poorly.

Students can expect that many programs will wait to see two SLOEs (one from their home institution and one from an away rotation) before offering an interview. It is ideal to have two SLOEs by October 1, when the MSPEs are released.

Standardized Video Interview (SVI)

Developed by the AAMC, the SVI is a video recording that is submitted along with your application; it is a way for program directors in Emergency Medicine to gauge interpersonal communication and professional behavior. Applicants can use any device to record their interview, which consists of six questions presented in text prompts. Applicants are given up to 30 seconds to read the prompts and are then given up to three minutes to record their video responses.

The Career Advising Team and ERAS will provide more detailed information about registering and completing the SVI as the residency application period progresses. In the summer, your Career Advisor will simulate the SVI by asking you to video-record your answers to two sample questions for their review. Your Career Advisor will then sit down with you in person to review your performance, help you hone the content of your answers, and give you feedback on any verbal or physical mannerisms that may need to be addressed.

More information, preparation materials, and registration can be found at <https://students-residents.aamc.org/applying-residency/applying-residencies-eras/aamc-standardized-video-interview/>.

Personal Statements

Your personal statement should cover the following topics:

1. What experiences have informed you in your decision to become an emergency physician
2. The personality characteristics you possess that will allow you to be a successful emergency physician
3. What you plan to do with your training (think lofty thoughts!)

Service and Leadership

While not a requirement to match in a program, emergency medicine programs value experience in service and leadership. Demonstration of involvement and leadership in either or both of these domains will

increase a candidate's competitiveness particularly at University (service and/or leadership) and county-based programs (service). These positions and experiences can be at local, regional or national levels.

Application Timing

When do programs begin reviewing applications?	Late September
When do programs begin offering interviews?	Early to mid-October

Interview Advice

The interview is critical. The emergency medicine Program Director will provide an opportunity for candidates to meet on an individual basis for up to one hour to provide interview guidance. In addition, a member of the program leadership team will be available throughout the interview season to provide follow up meetings/phone conversations to ensure that the student's needs are being met as they progress through the interview cycle. Additionally, all Pritzker and rotating students are scheduled for their University of Chicago interview on a common day at the beginning of the interview season. At the end of the interview day they are given immediate formative feedback about their interview performance from members of the emergency medicine education team. Emailing thank-you notes to the Program Director are optional.

Post-Interview Advice

Is it common practice for applicants to contact their #1 program to let them know they are ranking them first?

If students desire to contact their top program, they should inform **only their top choice** that they are ranking the program #1. The majority of programs appreciate feedback. No program expects to be everybody's #1—so if a program is your #1 choice, tell them. If you like several programs (1-3) a great deal, say so.

Family Medicine

Categorical

Program Director at UCM/NorthShore University HealthSystem

Deborah E. Miller, MD

Recommended Specialty Advisors

Choose someone with whom you feel comfortable. Do not be afraid to get advice from more than one person. All family medicine faculty will be helpful in answering your questions about the specialty. The following faculty can assist you:

- Sonia Oyola, MD (Director of Medical Student Education and Clerkship Director)
- Deborah E. Miller, MD (Program Director, University of Chicago (NorthShore) FM Residency; dmiller2@northshore.org)
- Miriam Whiteley, MD (Associate Program Director, University of Chicago (NorthShore) FM Residency; mwhiteley@northshore.org)
- Fred Martin, MD (Medical Student Director, University of Chicago (NorthShore) FM Residency Medical Student Director; amartin3@northshore.org)
- Janice Benson, MD (Vice Chair, Department of Family Medicine, Faculty in FM Residency); Dr. Benson is often on campus and open to one-on-one sessions with interested Pritzker students.
- Bernard Ewigman, MD, MSPH (Department Chair)

There are other recently graduated family medicine faculty working at University of Chicago. The above faculty can direct you to recent graduates from programs that interest you.

USMLE Data

Sources: UCM Program Directors and 2018 Charting Outcomes in the Match (NRMP publication)

Min. Step 1 score for UCM program	See below*
Mean Step 1 score of US matched applicants (NRMP)	220
Does Step 2 CK influence rank?	See below*
Min. Step 2 score for UCM program	See below*
Mean Step 2 CK of US matched applicants (NRMP)	237
Mean number of contiguous ranks of US matched applicants (NRMP)	11.4

* Failing either Step 1 or Step 2 is a definite red flag. You should address any failed exam in your personal statement. Most programs want applicants to have taken and passed Step 2 CK and CS by the end of the interview season and prior to the rank list submission date. You may not be ranked if your test scores and clinical skills assessment are not available in ERAS. USMLE scores are just one of the criteria that programs will look at when deciding whether to interview and/or rank applicants.

Should applicants do away rotations?

Away rotations are not necessary. Family medicine programs do not require that you do away rotations, but one could help you secure a spot at a desired location. If you do a rotation at a place you might like to match, be prepared to work really hard while you are there. The program will know more about you—both positives and negatives—than the other candidates. It is also a great way to learn about what programs are looking for in applicants and to get the inside scoop on a given program.

Doing an away rotation in family medicine can be a good way to help you see how the specialty differs

across the country. Family medicine experiences can be unique in each community and practice setting (i.e. academic, community, rural).

Research

Research experience is desirable but not required. Different programs may have different requirements. Pay attention to website direction in this area for a particular program. Leading family medicine programs at major academic hospitals will tend to value research experience more than community-based programs but all will appreciate good scholarship and a scholarly approach. If you have done research in a certain area, be prepared to answer questions on its clinical relevance and applicability.

Letters of Recommendation

Number of letters recommended	3
Chair/Chief's letter required?	Not typically; Dr. Oyola's letter is sufficient for your application and is usually what is provided. If you want to request a letter from the Chair, please contact Drs. Ewigman, Oyola, or Benson for assistance.
Number of letters from within the specialty	1
Number of letters from external institutions	N/A

The strongest letters are those from faculty who know a student's clinical work. A student must have at least one letter of recommendation from a family physician to demonstrate their sincere interest in the specialty. Faculty in the Department of Family Medicine can also write you a letter of recommendation and review clinical evaluations you received in family medicine. Talk with your family medicine advisor about who should write your letters of recommendation.

Personal Statements

Family medicine programs are looking for evidence of genuine interest in family medicine and a demonstrated commitment to primary care. A personal statement is one of the important ways programs look at your fit with their residency and your decision to become a family medicine resident. You could also explain any potential "red flags" in your application, and if there are any, what you learned from the experience.

Application Timing

When do programs begin reviewing applications?	September/October
When do programs begin offering interviews?	Shortly after ERAS opens. UCM starts the first week in October.

Programs will continue interviewing into mid-January. Family medicine programs usually will have their rank meetings and submit their list by the second week of February. If you do not get interviews where you had hoped by the end of October, please contact Drs. Benson and Oyola.

Interview Advice

Spend time reviewing the program website prior to your interview. Identify the qualities in a residency program that are really important to you and be sure to ask about them. Recheck their website before

interview day and identify those qualities that are important to the program.

Be on time. Dress appropriately. Do not let the conversation lag; asking the same questions you have asked other interviewers is OK. Plan your questions ahead of time while reviewing family medicine programs and always have some that are specific to the program where you are interviewing. Interview days usually start with an orientation to the residency program and you may think of questions during this orientation. Take notes and write down questions to ask during your interviews. Know which questions are appropriate for the Program Director and which are better suited for faculty or for residents. Remember to be polite and pleasant to all you meet, including administrative and scheduling staff. The interview is an important time for you to decide if this program is good for you. Ask about where recent graduates are in practice and what their common practice characteristics are. This can tell you more about what the program is really preparing you for in scope of practice and usual practice geography. For instance, if doing obstetrics is important to you, you want to know if the training is strong in this area and if graduates are doing obstetrics. Identify before you interview the qualities in a residency program that are really important to you and be sure to ask about them.

Do not check your luggage when you fly (especially not the clothes you will wear to the interviews). Go to any dinners they have after the interviews, as this will help you to decide if these people could be your teachers and colleagues for the next 3 years.

Many residency programs are open to applicants coming back for a “second look”. This “second look” should be completed when you are really interested in a program and want to see more about how the residency functions. If the residency is far away, programs are often happy to schedule for the day after the interview. If you are seriously considering a program, you may want to schedule a “second look” at the same time as your interview. Applicants are sometimes scheduled in the morning with the family medicine inpatient team in the hospital and the afternoon in the outpatient office (“Residency Practice Site”). Some applicants will want to see special aspects of their training areas, such as the birthing areas or the procedure rooms.

The “second look” dinner for all selected applicants generally occurs sometime between mid-January and early February. It is an opportunity to meet more of the residents and faculty. It is not mandatory that you attend especially if you are remote from the program’s location. However, if you have strong interest in a program you should consider attending. If you cannot attend, send regrets, especially to programs that you intend to rank highly.

Post-Interview Advice

Is it common practice for applicants to contact their #1 program to let them know they are ranking them first?

No, but you should feel free to do so if you really are interested. It is important not to overpromise. It is a good idea to send a thank-you note. It can be helpful to re-contact residents who are involved in your interview day or in the program’s selection process.

Keeping in contact with a program you really liked is a good thing, especially when you are making your rank list. Also, do not hesitate to contact a program after your interview day if you think of additional questions.

General Surgery

Categorical

Program Director at UCM

Kevin Roggin, MD

Recommended Specialty Advisors

In selecting a specialty advisor, try to find someone with whom you feel you can develop a close relationship: someone with whom you feel comfortable and candid. A faculty member who has mentored you in a research project or who knows your clinical work is ideal. Potential advisors could include:

- Nora Jaskowiak, MD (Clerkship Director)
- Kevin Roggin, MD (Residency Program Director)
- Konstantin Umanskiy, MD (Associate Program Director)
- Mitchell Posner, MD (Section Chief, General Surgery)
- Stephen Haggerty, MD (Associate Program Director, NorthShore University HealthSystem)
- Peter Angelos, MD
- Melissa Hogg, MD (APD, NorthShore University HealthSystem; mhogg@northshore.org)
- Mustafa Hussain, MD (Associate Program Director)
- Neil Hyman, MD
- Jeffrey Matthews, MD
- Mark Talamonti, MD (NorthShore University HealthSystem; mtalamonti@northshore.org)
- Jennifer Tseng, MD (Associate Program Director)
- Kiran Turaga, MD, MPH
- Michael Ujiki, MD (NorthShore University HealthSystem; mujiki@northshore.org)

USMLE Data

Sources: UCM Program Directors and 2018 Charting Outcomes in the Match (NRMP publication)

Min. Step 1 score for UCM program	244
Mean Step 1 score of US matched applicants (NRMP)	236
Does Step 2 CK influence rank?	Yes
Min. Step 2 score for UCM program	252
Mean Step 2 CK of US matched applicants (NRMP)	248
Mean number of contiguous ranks of US matched applicants (NRMP)	13.1

Programs will look at a wide variety of factors to determine which students to interview, so if your Step 1 scores do not fall into the categories above, it is still possible to match in general surgery. If your Step 1 score is lower than the national mean, it may be a good idea to take Step 2 CK early to show improvement. ERAS 2013 data shows an increasing percentage of AOA candidates applying to general surgery (28%).

Should applicants do away rotations?

Away rotations are not required. General surgery does not require letters from away rotations; however students may want to consider doing away rotations at a program where the candidate knows they would ideally want to match or if they want a surgical experience outside of UCM. Students should talk to their specialty advisor about their options before making this decision. If students decide to do an away rotation, be prepared for the rotation and treat it like an extended job interview.

Research

While research is not required, recent data from the NRMP shows that matched US seniors had an average of 4.3 research experiences and 6.5 publications.

Letters of Recommendation

Number of letters recommended	3
Chair/Chief's letter required?	Highly recommended
Number of letters from within the specialty	3
Number of letters from external institutions	N/A

General surgery programs look for a letter from a prominent, nationally recognized faculty member. There is a myth within the University of Chicago community that all students need to rotate on the Dragstedt service in order to have both Drs. Matthews and Posner write them a letter of recommendation. While personal exposure to the candidate helps, this is not a requirement for writing these letters. All letters should be from surgeons.

Procedure for asking for a Chair's letter:

Contact the Chairman's office and set up an appointment.

Personal Statements

Your personal statement should demonstrate initiative, passion, and a well-grounded approach. Personal statements should be concise and limited to one page.

Additional advice on personal statement:

1. Try to answer the question, "Why do you want to become a general surgeon?"
2. Avoid quotations from famous surgeons.
3. Emphasize that this decision has been well-thought out and properly vetted with your mentors and career advisors.
4. Explain your 5- and 15-year vision of your career in general surgery.
5. Be specific about whether you want to do research and if so, what do you want to investigate.

Application Timing

When do programs begin reviewing applications?	September
When do programs begin offering interviews?	October-December (UCM offers a total of two dates in November and December—rolling offers)

Interview Advice

Be yourself, demonstrate passion for your life's work, have a clear understanding of why you are going into the chosen specialty, and have a plan. Dress conservatively, come with questions, and research the program ahead of time (i.e. know the faculty). Be aware that everyone you talk to may influence the process (including the program coordinators and residents).

Be sure to screen your personal webpages for inappropriate content (i.e. Facebook) prior to the interview.

Also, avoid critically discussing programs with other candidates on the “interview circuit”, and be careful about comments/discussion in online forums that discuss matching in general surgery and specific programs. In addition, avoid text messaging and other informal modes of communication with faculty during the interview process.

Post-Interview Advice

Is it common practice for applicants to contact their #1 program to let them know they are ranking them first?

While it has been common practice to notify programs if they are your #1 choice, this is not required. Make sure you only tell one program if they are your #1 choice; the world of surgery is small, and program directors will often talk to one another.

Internal Medicine

Categorical

Program Director at UCM/NorthShore University HealthSystem

John McConville, MD

Liza Icayan, MD (NorthShore University HealthSystem)

Recommended Specialty Advisors

Students should have an advisor that can provide 1) information about the specialty, 2) information about the logistics of applying to that specialty, and 3) information about the programs around the country in that specialty. Advisors who can tell you about all three aspects of the application process tend to be intimately involved in the application/recruitment process. These people could include:

- Everett Vokes, MD (Department Chair)
- Adam Cifu, MD (Clerkship Director)
- Diane Altkorn, MD (Clerkship Director)
- Amber Pincavage, MD (Clerkship Director)
- Jim Woodruff, MD (Associate Program Director)
- Katherine Thompson, MD (Core Faculty)
- Julie Oyler, MD (Associate Program Director)
- Bill Seiden, MD
- Janardan Khandekar, MD
- Shannon Martin, MD (Associate Program Director)

USMLE Data

Sources: *UCM Program Directors and 2018 Charting Outcomes in the Match (NRMP publication)*

Min. Step 1 score for UCM program	205
Mean Step 1 score of US matched applicants (NRMP)	233
Does Step 2 CK influence rank?	No
Min. Step 2 score for UCM program	N/A
Mean Step 2 CK of US matched applicants (NRMP)	246
Mean number of contiguous ranks of US matched applicants (NRMP)	12.6

In many cases the scores for Step 2 CK are not available, so we cannot even see this number at the time of ranking. If the Step 2 CK number is high (>255), it may be worth reporting to the programs by email, but this will likely only have a small effect.

Should applicants do away rotations?

No. In general, away rotations offer more risk than advantage. There are only a handful of discrete circumstances where away rotations are advantageous. Away rotations are appropriate if 1) you have received advice that the target program would be a “stretch”, or 2) you absolutely need to be at a particular institution because of a personal relationship or proximity to family. Otherwise, away rotations offer greater risk than they are worth. “Stretch” means you are unlikely to get an interview at a program unless you go there and show the program your commitment.

Research

Scholarship (including research) is not required, but often adds strength to your application especially when applying to academic internal medicine training programs. Conducting research in medicine is preferred, but conducting research in any specialty is better than not having any at all. According to NRMP data, of the US seniors who match in internal medicine, the average number of research experiences is 2.3 and the average number of presentations, publications, etc. is 3.2.

Letters of Recommendation

Number of letters recommended	3 (2 + 1 chair's letter)
Chair/Chief's letter required?	Yes
Number of letters from within the specialty	2
Number of letters from external institutions	N/A

Procedure for asking for a Chair's letter:

The student should identify an Internal Medicine advisor. This is usually a faculty member that the student has had a chance to interact with previously as either a supervising clinical attending or preceptor. This advisor will provide advice regarding the application process and serve as co-author for the Chairman's letter. The Office of the Chairman of the Department of Medicine will edit/co-author this advisor's letter.

The other two letters of recommendation should be from faculty who observed your clinical performance.

Personal Statements

Internal medicine programs are looking for thoughtful, sincere personal statements that relay enthusiasm for medicine. The statement should demonstrate attention to detail and organization. It should be clear that you put effort into the statement. Write humble essays which contain information about interests and career plans. Program directors read the personal statement to make sure that the applicants are levelheaded, so avoid taking unusual measures to be noticed, as it runs the risk of alienating some percentage of readers.

A poorly written personal statement may lower your rank or prevent you from receiving an interview. A good personal statement is unlikely to raise your ranking but it will help you in receiving an interview and give you a chance to have a meaningful discussion during your interview.

Application Timing

When do programs begin reviewing applications?	<ul style="list-style-type: none">• As soon as ERAS opens in September (UCM)• October (NorthShore)
When do programs begin offering interviews?	<ul style="list-style-type: none">• End of September (UCM)• November (NorthShore)

Note: Every program has a different process for reviewing applications, but many programs begin reviewing applications shortly after the applications become available. You can minimize your risk of being lost in an incomplete application pile by getting the bulk of the application completed by mid-September.

Providing a cohesive application in which the personal statement, letters of recommendation, the CV and the interview are concordant regarding interests and career plans is to your advantage. Planning the content of these items in this manner provides programs with a strong sense of candidate professionalism and sophistication regarding career interests. You can help letter writers contribute to this concordance by

asking prospective letter writers in person if they would write a letter and then, when the answer is in the affirmative, sit and discuss your career plans and accomplishments. Doing this over a final or draft personal statement and CV helps a lot.

Interview Advice

Scheduling

The average number of interviews an internal medicine-bound student from Pritzker schedules and executes during a season is ~12. It is not always possible to schedule interviews by geography to save money on travel, because students do not have control over when invitations are offered. Do not attempt to reschedule interviews multiple times. Always be polite in discussions with administrators at a program.

Interview day

Be on time. Be polite. Display humble behavior (avoid anything that may be interpreted as arrogance). Prepare for your interviews by learning about the program through the web or other information materials. Ask questions that reflect you've studied the program (i.e. do not ask questions that are easily answered by the website or program materials). Do not talk poorly of your own institution as this is a "red flag" to the interviewer. Such students come across as either "not loyal" or extremely needy.

Post-Interview Advice

Is it common practice for applicants to contact their #1 program to let them know they are ranking them first?

Yes, but it will not affect rank. It is not expected that you communicate about your intentions. It is unlikely to change your rank, but does make your application stand out in ranking discussions. If you are going to tell a program it is number one on your rank list, make sure that it is the only program you are saying this to (it is unprofessional to tell more than one program that you are ranking them first, and program directors do talk with each other).

Internal Medicine and Pediatrics

Categorical

Program Director at UCM

Rita Rossi-Foulkes, MD

Recommended Specialty Advisors

Students can choose advisors from a variety of faculty members in internal medicine or pediatrics if he/she is familiar with med-peds training. Medicine-pediatrics faculty at the institution include:

- Rita Rossi-Foulkes, MD (Residency Program Director)
- Nabil Abou Baker, MD
- Deborah Burnet, MD
- Nicole Bendin, MD
- Vincent DiMaggio, MD
- Maria Dowell, MD
- Cuoghi Edens, MD
- Tina Gupta, MD
- Valerie Press, MD
- Milda Saunders, MD, MPH
- Stephen Schrantz, MD
- Sachin Shah, MD
- Christine Yu, MD
- Anna Volerman, MD
- Phillip Verhoef, MD
- George Weyer, MD

USMLE Data

Sources: UCM Program Directors and 2018 Charting Outcomes in the Match (NRMP publication)

Min. Step 1 score for UCM program	200
Mean Step 1 score of US matched applicants (NRMP)	235
Does Step 2 CK influence rank?	Yes
Min. Step 2 score for UCM program	N/A*
Mean Step 2 CK of US matched applicants (NRMP)	250
Mean number of contiguous ranks of US matched applicants (NRMP)	10.9

* Med-peds programs look for an improvement from Step 1 in the Step 2 CK.

Should applicants do away rotations?

Possibly. Whether or not a student should do an away rotation depends upon the student. If you wish to match at a specific program AND you make a great first impression AND you adapt well to new situations, then consider rotating at the institution where you wish to match. If, however, you are quiet, and take a while to adapt to new situations, then doing an away rotation may not be a good idea. Away rotations can hurt as well as help your chances.

Research

Scholarship (including research) is not required, but adds strength to the application especially if you are applying to academic internal medicine training programs. According to NRMP data, of the US seniors who match in internal medicine-pediatrics, the average number of research experience is 1.9 and the average number of presentations, publications, etc. is 2.3.

Letters of Recommendation

Number of letters recommended	4
Chair/Chief's letter required?	Yes: 1 from Medicine, 1 from Pediatrics
Number of letters from within the specialty	4: 2 from Medicine, 2 from Pediatrics
Number of letters from external institutions	N/A

Med-peds programs look for letters of recommendation from faculty members who have worked closely with students clinically.

Procedure for Asking for Chairs' Letters

Medicine Chair's Letter: Identify a Departmental Advisor in the Department of Medicine. This is usually a faculty member that you have had a chance to interact with previously as either a supervising clinical attending or preceptor. This advisor will provide advice regarding the application process and serve as co-author for the Chairman's letter. The Office of the Chairman of the Department of Medicine will edit/co-author this advisor's letter.

Pediatrics Chair's Letter: Identify a Departmental Advisor in the Department of Pediatrics. This is usually a faculty member that you have had a chance to interact with previously as either a supervising clinical attending or preceptor. This advisor will provide advice regarding the application process and serve as co-author for the Chairman's letter. The Office of the Chairman of the Department of Pediatrics will edit/co-author this advisor's letter.

Personal Statements

The personal statement should demonstrate a strong interest commitment to med-peds as a career as well as clarity in writing and organization. The personal statement should demonstrate that you are adaptable and flexible.

Application Timing

When do programs begin reviewing applications?	As soon as ERAS opens in September
When do programs begin offering interviews?	After the MSPE is released in October

Students should demonstrate a strong record of volunteerism and research. Program directors will be looking for High Pass to Honors grades in the medicine and pediatric core clerkships.

Interview Advice

During your interview, you will want to demonstrate a strong interest and commitment to adult and pediatric medicine. Be sure to convey a strong interest in the program, not just the city or town. Ask informed and interesting questions (review website and written materials). Be prompt, polite and enthusiastic. Visit medpeds.uchicago.edu and www.medpeds.org for more information.

Post-Interview Advice

Is it common practice for applicants to contact their #1 program to let them know they are ranking them first?

Yes. It is not expected that you communicate about your intentions, but if you are extremely interested in a given program, it is wise to send an email to the program director expressing that interest.

Interventional Radiology

Categorical and Advanced

Some programs are advanced and require a separate application for a PGY-1.

Program Director at UCM

Rakesh Navuluri, MD

Recommended Specialty Advisors

Specialty advisors should be a faculty member with whom the student feels comfortable. Potential specialty advisors include:

- Rakesh Navuluri, MD (Residency Program Director)
- Brian Funaki, MD
- Steven Zangan, MD

USMLE Data

Sources: UCM Program Directors and 2018 Charting Outcomes in the Match (NRMP publication)

Min. Step 1 score for UCM program	240
Mean Step 1 score of US matched applicants (NRMP)	246
Does Step 2 CK influence rank?	Yes
Min. Step 2 score for UCM program	N/A*
Mean Step 2 CK of US matched applicants (NRMP)	255
Mean number of contiguous ranks of US matched applicants (NRMP)	5.4

* Step 2 scores could help the applicant if the scores are substantially higher than the applicant's Step 1 score.

Should applicants do away rotations?

Away rotations can be a great opportunity to audition for a program in which you are really interested, but you must be prepared to perform at your best. We have ranked students number one and also kept students entirely off the rank list based on their away rotation performance.

Research

Research that leads to peer-reviewed publications or presentations demonstrates that a candidate understands the scientific method, and has experience in compiling data and synthesizing it into a clinically meaningful conclusion. Additionally, research that is relevant to radiology and/or interventional radiology demonstrates a genuine interest and commitment to the specialty. This can be an important factor in differentiating several very competitive applicants.

Letters of Recommendation

Number of letters recommended	3-4
Chair/Chief's letter required?	No
Number of letters from within the specialty	Minimum 1; 2 is preferable
Number of letters from external institutions	N/A

Letters of recommendation should come from a faculty member who has worked closely with the student clinically. At least one should come from a core specialty such as internal medicine or surgery. Ideally, two letters should come from interventional radiology faculty.

Personal Statements

Your personal statement should explain your motivation for pursuing interventional radiology. It can be also be beneficial to outline strengths that may make you a strong resident and practicing interventional radiologist.

Application Timing

When do programs begin reviewing applications?	Mid-late September
When do programs begin offering interviews?	Mid-late September

Interview Advice

Learn about the program and have thoughtful questions to ask about the program.

When I was interviewing, my secret interview trick was to subtly sell myself to the program by asking the interviewer what qualities they look for in applicants. I would then respond with examples of how I demonstrated those qualities. —Dr. Navuluri

Post-Interview Advice

Thank-you notes or emails are a *must*.

Neurological Surgery

Categorical

Program Director at UCM

Edwin Ramos, MD

Recommended Specialty Advisors

A specialty advisor should be familiar with your academic and clinical achievements. Advisors could include:

- Edwin Ramos, MD (Residency Program Director)
- David Frim, MD, PhD
- Issam Awad, MD
- Peter Warnke, MD
- Bakhtiar Yamini, MD
- Edwin Ramos, MD
- Javad Hekmat-Panah, MD

USMLE Data

Sources: UCM Program Directors and 2018 Charting Outcomes in the Match (NRMP publication)

Min. Step 1 score for UCM program	220
Mean Step 1 score of US matched applicants (NRMP)	245
Does Step 2 CK influence rank?	No
Min. Step 2 score for UCM program	N/A
Mean Step 2 CK of US matched applicants (NRMP)	249
Mean number of contiguous ranks of US matched applicants (NRMP)	16.4

Should applicants do away rotations?

Yes. Most students do two away rotations between July-September. However, this is not a requirement, and some students who have not done away rotations have matched.

Research

While research is not technically required, it can be a huge help and is recommended especially if it is in the neurosciences. Among matched US Seniors, the average number of research experiences is 3.4 and the mean number of abstracts, publications, etc. is 7.4.

Letters of Recommendation

Number of letters recommended	3-5
Chair/Chief's letter required?	No
Number of letters from within the specialty	2-3
Number of letters from external institutions	1-2

Make sure that your letters will be strong and will be from faculty members who have done clinical work with you. Letters from local neurosurgeons are key. It is common for programs to call each other about applicants.

Letters from outside of neurosurgery should come from faculty in neurology or surgery or from a research mentor.

If you would like to request a letter of recommendation from a neurosurgery faculty member, please contact Amy Johnson, Residency and Education Coordinator in the Section of Neurosurgery, at ajohnson1@surgery.bsd.uchicago.edu. Amy will work with the faculty member to secure the letter.

Personal Statements

The personal statement should demonstrate understanding, accomplishment, productivity, uniqueness, and evidence that the applicant will “fit in.”

Application Timing

When do programs begin reviewing applications?	As soon as ERAS opens in September
When do programs begin offering interviews?	September-October (see below)

Invitations to interview are offered as early as the week after ERAS opens and continue throughout October. Almost all programs finish sending out invitations by early November. Applicants are advised to submit applications to programs as soon as possible and prior to ERAS opening, if possible.

Interview Advice

Stay relaxed, smile, and be prepared to articulate your goals and what you want in a residency program.

Post-Interview Advice

Is it common practice for applicants to contact their #1 program to let them know they are ranking them first?

No, but you may express interest in programs that you will be ranking highly. If you do have a favorite program, it helps to send that program a note or email stating your interest in the program. However, if a program asks you to tell them where you ranked them, it is a violation of the NRMP regulations.

Neurology

Categorical and Advanced

Some programs (including UCM) are advanced and require a separate application for a PGY-1.

Program Director at UCM

Helene Rubeiz, MD

Recommended Specialty Advisors

Specialty advisors should be a faculty member with whom the student feels comfortable. Potential specialty advisors could include:

- Shyam Prabhakaran, MD (Chair)
- James Brorson, MD (Co-Clerkship Director)
- Naoum Issa, MD, PhD (Co-Clerkship Director)
- Thomas Kelly, MD (Clinic Director)
- Raymond Roos, MD (Associate Director for Education)
- Christopher Kramer, MD (Neurocritical Care Fellowship Director)

USMLE Data

Sources: UCM Program Directors and 2018 Charting Outcomes in the Match (NRMP publication)

Min. Step 1 score for UCM program	Score criteria not advertised
Mean Step 1 score of US matched applicants (NRMP)	231
Does Step 2 CK influence rank?	Yes
Min. Step 2 score for UCM program	Score criteria not advertised
Mean Step 2 CK of US matched applicants (NRMP)	242
Mean number of contiguous ranks of US matched applicants (NRMP)	11.7

Should applicants do away rotations?

Away rotations are not required.

Research

Research is desirable but not required. According to the NRMP, US seniors who matched in neurology had an average of 3.0 research experiences and 4.8 publications/presentations/abstracts.

Letters of Recommendation

Number of letters recommended	3
Chair/Chief's letter required?	No
Number of letters from within the specialty	At least 1; preferably 2
Number of letters from external institutions	N/A

Neurology programs look for letters from faculty who have worked closely with students clinically.

Procedure for Asking for a Chair's Letter

Although a letter from the chair is not required, if the student has worked with the chair and wants a letter

from him, they can email Dr. Prabhakaran directly at shyam1@uchicago.edu.

Personal Statements

Be sure to state your reason for entering the specialty. The personal statement is used to identify negative and positive traits pertaining to an applicant. We read personal statements closely.

Application Timing

When do programs begin reviewing applications?	September
When do programs begin offering interviews?	October

Neurology programs look at the entire application when deciding who to select for interviews. This includes performance in medical school, LORs, USMLE scores, and the MSPE. An average USMLE performance does not necessarily have a negative impact if other components of the application are strong.

Interview Advice

1. Communication is crucial.
2. Do NOT cancel interviews at the last minute.
3. During the interview, try to be engaging. Show the positive aspects of your personality, and show interest and passion for the specialty.

Post-Interview Advice

Is it common practice for applicants to contact their #1 program to let them know they are ranking them first?

It is common, but may not have an impact.

Obstetrics and Gynecology

Categorical

Program Director at UCM

Adrienne Dade, MD

Recommended Specialty Advisors

The program director and chairman can be a resource for advice but should not have a formal role as an individual student advisor. This relationship could represent a conflict of interest in the overall application process. If desired, prior to the ERAS application submission, the program director welcomes the opportunity to meet with the student individually to review the application.

All faculty members in the department who are involved in the student rotation are willing to be specialty advisors. A faculty member who has mentored you in a research project or who knows your clinical work is ideal. In addition, faculty letters of recommendation can come from the following physicians:

- Ernst Lengyel, MD, PhD (Department Chair)
- Adrienne Dade, MD (Program Director)
- Sabrina Holmquist, MD (Clerkship Director)
- Sangeeta Senapati, MD (NorthShore University HealthSystem Site Director)
- Richard Silver, MD (NorthShore University HealthSystem Department Chair)

USMLE Data

Sources: UCM Program Directors and 2018 Charting Outcomes in the Match (NRMP publication)

Min. Step 1 score for UCM program	236
Mean Step 1 score of US matched applicants (NRMP)	230
Does Step 2 CK influence rank?	No
Min. Step 2 score for UCM program	N/A*
Mean Step 2 CK of US matched applicants (NRMP)	247
Mean number of contiguous ranks of US matched applicants (NRMP)	12.4

* The Step 2 CK is not used to select students for interview because it is not always available at the time that interviews are offered.

Should applicants do away rotations?

Yes, they can do one if desired. However, an away rotation is not essential. It should primarily help you gain more information about a specific program of high interest to you. It should not be considered as an “audition” for residency. An away rotation may be helpful if a candidate has a suboptimal record of USMLE scores and desires to go to a specific program that is competitive. If a student chooses to do an away rotation, this usually happens from August-November. Be sure to shine in your effort if you do an away rotation. Always introduce yourself to the program director and chair of the department that you visit.

Research

Research that results in publications or presentations is particularly helpful for applicants. The research does not need to be done in the field of OB/GYN. According to data from the NRMP the average matched applicant participates in 5.7 research experiences and has published 12.2 publications.

Letters of Recommendation

Number of letters recommended	4: 3 from faculty and 1 from chair
Chair/Chief's letter required?	Yes
Number of letters from within the specialty	1
Number of letters from external institutions	Not required but can be helpful

Letters of recommendation should come from faculty who have worked with students clinically. Letters from any long term mentor or research advisor are also helpful.

External letters are not mandatory as some students do not participate in any external rotations. It is helpful to have a letter from the University of Chicago if the student performed a sub-internship at Chicago. Faculty always review the evaluations from the University of Chicago sub-internship.

Procedure for Asking for a Chair's Letter

Please contact Nancy Martinez, the Chairman's Secretary, to schedule an appointment to meet with the department chair, Ernst Lengyel, MD, PhD. The Chair's letters are better if they are written with personal insight and knowledge of the candidate. Sometimes the letter is co-written by another member of the faculty who knows the candidate in more detail.

Personal Statements

Programs want to see a genuine interest in OB/GYN and to hear you describe at what point you became passionate about a career in women's health. Include unique experiences, personal events and qualities that are relevant to the specialty.

Application Timing

When do programs begin reviewing applications?	September
When do programs begin offering interviews?	October

Submit your ERAS application as early as possible because of the limited number of interview slots.

Interview Advice

Be prepared to explain any inconsistencies in your medical school performance. Be polite and nice to everyone including the administrative staff and residents. Relax! Do not try to over-impress—be yourself. If there are any pre-interview dinners, please do your best to attend. These usually involve being in a social setting with residents and can give you some insight into how the residents interact with you and each other. However, remember this is a part of your interview experience at the institution.

Post-Interview Advice

Is it common practice for applicants to contact their #1 program to let them know they are ranking them first?

Occasionally candidates send emails but this is not an expectation. The Department of OB/GYN does not contact individual candidates after the interview process.

Ophthalmology (SF Match)

Advanced

Requires a separate application for a PGY-1 via the NRMP.

Program Director at UCM

Peter Veldman, MD

Recommended Specialty Advisors

You will want to select a specialty advisor who knows you well. The better they know you, the better they can advise you!

- Kathryn Colby, MD, PhD (Department Chair)
- Peter Veldman, MD (Residency Program Director)
- Hassan Shah, MD (Associate Program Director)
- Asim Farooq, MD (Medical Student Educator)
- Seenu Hariprasad, MD
- James Reidy, MD

USMLE Data

Sources: UCM Program Directors and San Francisco Match website

Min. Step 1 score for UCM program	220
Mean Step 1 score of US matched applicants (SF)	244
Does Step 2 CK influence rank?	Helpful if improved from a low Step 1 score
Min. Step 2 score for UCM program	N/A
Mean Step 2 CK of US matched applicants (SF)	N/A
Mean number of contiguous ranks of US matched applicants (SF)	N/A (UCM recommends ranking at least 11 programs)*

* Percent of applicants with a successful match: US Seniors—86%; US Graduates—65%

Should applicants do away rotations?

It depends. A strong away rotation at the right program can help you get over the top, at that program. The strongest applicants may not need to do away rotations assuming they have great exposure to UCM Ophthalmology (rotations, research/papers, letters etc). If you and your advisor determine that your application is borderline, having some very successful away rotations may be a good strategy for you. Recognize however that away rotations can be challenging (new system, new faculty, local students etc) and you will have to be your best and most engaged self throughout your time there. Because ophthalmology is an early match, and away rotations fill up quickly, advanced planning is important. The purpose of an away rotation is twofold—for you to get a more in-depth look at the program and for the program to get a more detailed look at you.

Research

It is important to have research experience and better yet to have a publication under your belt. However, this research can be done in any field as long as students are able to discuss it during their interviews and they can speak to the experience with authority. Students who are interested in ophthalmology research should contact Dr. Colby at kcolby@bsd.uchicago.edu.

Letters of Recommendation

Number of letters recommended	3
Chair/Chief's letter required?	No, but recommended
Number of letters from within the specialty	1
Number of letters from external institutions	N/A

In a competitive specialty like ophthalmology, the name recognition of your letter writers can play a role in receiving more interview offers. The best letter comes from someone who knows you well and can write a strong personalized letter that articulates your strengths.

Letters from away rotations are not required, but under exceptional circumstances (for example, you spent an extended time at another institution doing research) they may be helpful to your application. Please discuss specifics of your situation with Dr. Colby.

Personal Statements

The personal statement should demonstrate that you are a unique individual, but also a team player. Personal statements should be reviewed for content by Dr. Colby, who is willing to serve as an advisor for any Pritzker student interested in advice about ophthalmology.

Application Timing

When do programs begin reviewing applications?	September
When do programs begin offering interviews?	October for November-December interviews

Ophthalmology participates in the San Francisco Match (www.sfmarch.org), which has an application deadline of early September (you do not want to submit anywhere near the deadline) and a rank deadline of early January. You should apply to at least 45 programs as this was the most clear inflection point for applicants to receive enough invitations. In 2018, the average number of programs applied to was 73 for matched individuals with an average of 12 interview invitations.

Pritzker recommends submitting your application by the end of July/beginning of August. Eighty-three percent of US seniors who submitted rank lists matched successfully in 2018.

To be successful in the ophthalmology match, your rank list should have “reach” programs, reasonable programs, and “safety net” programs. The mix of these will depend on the strength of your candidacy. You should rank every program at which you interview, unless you truly feel you could not train at that program.

Interview Advice

Applicants should be comfortable discussing their strengths and selling themselves. A clear view of why candidates are interested in ophthalmology is a must. Be prepared to speak in depth and validate anything, however minor, that is in your application.

Post-Interview Advice

Is it common practice for applicants to contact their #1 program to let them know they are ranking them first?

Once you have decided on your number 1 program, it is better for either Dr. Colby or Dr. Veldman to reach out to the program.

Helpful Reference

Grubbs JR Jr, Mian SI. Advising Students Interested in Ophthalmology: A Summary of the Evidence. *Ophthalmology*. 2016 Jul; 123(7): 1406-10. doi: 10.1016/j.opthta.2016.04.016.

Orthopaedic Surgery

Categorical

Program Director at UCM

Tessa Balach, MD

Director of Residency Recruitment

Robert Bielski, MD

Recommended Specialty Advisors

A faculty member who has mentored you in a research project or who knows your clinical work is ideal.

USMLE Data

Sources: UCM Program Directors and 2018 Charting Outcomes in the Match (NRMP publication)

Min. Step 1 score for UCM program	248
Mean Step 1 score of US matched applicants (NRMP)	248
Does Step 2 CK influence rank?	No
Min. Step 2 score for UCM program	N/A
Mean Step 2 CK of US matched applicants (NRMP)	255
Mean number of contiguous ranks of US matched applicants (NRMP)	12.5

Should applicants do away rotations?

Yes, you should complete two. You will want to do an away elective and shine there. Away rotations should be done at institutions where you really want to match and have a competitive chance of matching. We recommend doing these in the summer and early fall of your fourth year. Your orthopaedic surgery specialty advisor can help you determine these institutions. Apply for away rotations early (April-May) to avoid being shut out because all available spots are filled.

Research

While research is not required, it increases the chance of matching successfully. According to NRMP data, students who match successfully in orthopaedic surgery are more likely to have done research that has resulted in publication. In 2017, the average number of publications for students who matched in our program was 2.0.

Letters of Recommendation

Number of letters recommended	3
Chair/Chief's letter required?	Yes
Number of letters from within the specialty	1
Number of letters from external institutions	Not required but can be helpful

In general, letters that come from within this specialty are most helpful. The persons reviewing your application are much more likely to know another person in their specialty. If you have done a significant research project with someone who knows your work well, and is outside of that specialty, that can also be

helpful. However, in general, submit letters from orthopaedic surgeons.

Procedure for Asking for a Chief's Letter

Set up a meeting with the Department chair, Dr. Dirschl. He will typically get feedback from faculty members who are familiar with your work.

Personal Statements

Be honest and direct. Do not be too short (only one paragraph) or too long (more than one page). Avoid using poetry or excessive use of quotations. A good personal statement gives the reader insight into the candidate's background and personal story.

Application Timing

When do programs begin reviewing applications?	After the MSPE is released in October
When do programs begin offering interviews?	First week of November

Interview Advice

It is best to do your homework and find out the highlights, or strong points, of the program. You will inevitably be asked why you are interested in that program. Show that you spent time looking at the program's web site and ask about specific features of the program. Avoid generic answers like, "I heard this was a good program".

Be yourself. Students often get too worried about "trick questions". On paper, all of the candidates have great academic credentials. The interview process is about finding people who will fit with the program. Letting the program see who you really are is important.

Thank-you notes are not necessary and are often discarded. If you did a clinical rotation, then an email to one or two faculty members whom you worked with during that rotation, letting them know that you are still interested in the program, can be helpful. An email to the chief resident you worked with on the rotation can also be helpful.

Post-Interview Advice

Is it common practice for applicants to contact their #1 program to let them know they are ranking them first?

No. There is no expectation that a student communicate their preference list.

Otolaryngology (ENT)

Categorical

Program Director at UCM

Fuad Baroody, MD

Recommended Specialty Advisors

In selecting someone as a specialty advisor, try to select someone with whom you feel you can develop a close relationship: someone with whom you feel comfortable and candid. Potential advisors could include:

- Nishant Agrawal, MD (Section Chief)
- Fuad Baroody, MD (Program Director)
- Elizabeth Blair, MD
- Nadia Caballero, MD
- David Chan, MD
- Michael Gluth, MD
- Zhen Gooi, MBBS
- Jay Pinto, MD
- Lou Portugal, MD
- Andrea Shogan, MD
- Dana Suskind, MD

USMLE Data

Sources: UCM Program Directors and 2018 Charting Outcomes in the Match (NRMP publication)

Min. Step 1 score for UCM program	220
Mean Step 1 score of US matched applicants (NRMP)	248
Does Step 2 CK influence rank?	No
Min. Step 2 score for UCM program	N/A
Mean Step 2 CK of US matched applicants (NRMP)	254
Mean number of contiguous ranks of US matched applicants (NRMP)	14.3

Step 2 CK reports can help if a student's Step 1 score is low.

Should applicants do away rotations?

Yes, you should complete two. It is important to do a sub-internship between June and September to be sure you are committed to this specialty. Doing your sub-internship at UCM first and then doing one or two away rotations at other institutions is optimal, but certainly not required. Doing an away rotation gives you a chance to learn about the specialty and a chance to get an outside letter. But most importantly, it is basically an extended interview at programs in which you might be interested. Our Program Director and faculty can help you choose away rotations by giving you information about outside programs.

Research

Research experience is desirable although not a major consideration. According to the NRMP, the US Seniors who matched participated in an average of 3.5 research experiences and published 5.1 abstracts, presentations, and publications. Work in progress is useful even if there are no publications or presentations yet as it supports the candidate's interest.

Letters of Recommendation

Number of letters recommended	3
Chair/Chief's letter required?	Yes
Number of letters from within the specialty	2
Number of letters from external institutions	Not required but can be helpful*

* Typically obtained from the Chair or the Program Director at institutions where away rotations were pursued

If you cannot get three excellent letters, do not apply in ENT. Letters from faculty members in the Department of Surgery or from a research mentor are appropriate.

Procedure for Asking for a Chief's Letter

Set up an appointment to speak with Dr. Agrawal. The letter is a summary of the student's clinical performance during the ENT sub-internship.

Personal Statements

Otolaryngology programs are just looking to see if you are able to write. A poorly written personal statement can hurt an applicant. A newly added option for personal statements for an ENT application is a paragraph describing reasons you are applying to each specific program (i.e. a separate paragraph for each program to which you are applying). This used to be mandatory but is now elective and depends on the programs you are applying to (some mandate it and some do not). Our program does not require such a paragraph.

Application Timing

When do programs begin reviewing applications?	As soon as ERAS opens in September
When do programs begin offering interviews?	October

Note: The UCM program reviews applications in November. This is late relative to other programs. We interview in January and early February.

In order to improve applicants' chances of matching in otolaryngology, it is desirable for them to have a grade of Honors in their surgery rotation. Other useful, but not necessary, accolades are induction into the AOA National Medical Honor Society and strong USMLE Step 1 scores (above 240). A student's performance on the sub-internship is another major factor. In the end, the student's personality should match with the program's personality.

Interview Advice

The interview is the most important part of the process. Applicants should be enthusiastic and prepared to ask good questions. Remember that the interview begins when you arrive and ends when you leave. Be sure to speak to the residents. While you should appear enthusiastic about the program, you really need to consider whether this is the program where you want to spend the next 5 years.

Post-Interview Advice

Is it common practice for applicants to contact their #1 program to let them know they are ranking them first?

Yes. If you have a strong preference for a program, you should feel free to communicate that to them.

Pathology

Categorical

Program Director at UCM/NorthShore University HealthSystem

Aliya Husain, MD

John Lee, MD, PhD (NorthShore University HealthSystem)

Recommended Specialty Advisors

Your specialty advisor should be the person with whom you have common interests or goals and good lines of communication. MSTP students should be matched with research-oriented faculty if their career goals include substantial independently funded research, and MDs should be matched with a diagnostic pathologist. Specialty advisors should be experienced in the appropriate clinical area, have time and “chemistry” with the student, and have a broad view of the field. Potential advisors could include:

- Aliya Husain, MD (Residency Program Director)
- John Lee, MD, PhD (Residency Program Director, NorthShore University HealthSystem)
- Anthony Chang, MD (Associate Program Director)
- Angela Charnot-Katsikas, MD (Associate Program Director)
- Nicole Cipriani, MD
- John Hart, MD
- Kammi Henriksen, MD
- Thomas Krausz, MD
- Husain Sattar, MD

USMLE Data

Sources: *UCM Program Directors and 2018 Charting Outcomes in the Match (NRMP publication)*

Min. Step 1 score for UCM program	210
Mean Step 1 score of US matched applicants (NRMP)	233
Does Step 2 CK influence rank?	Yes
Min. Step 2 score for UCM program	220
Mean Step 2 CK of US matched applicants (NRMP)	242
Mean number of contiguous ranks of US matched applicants (NRMP)	10.7

Should applicants do away rotations?

Possibly. Away rotations are useful if you are interested in going to a specific institution for your residency. However, they are not required.

Research

Research experience is desirable, but not a requirement for our program. According to the NRMP, the US seniors who matched in pathology had an average of 2.5 research experiences and 4.6 publications, presentations, or abstracts.

Letters of Recommendation

Number of letters recommended	3
Chair/Chief's letter required?	No
Number of letters from within the specialty	2
Number of letters from external institutions	Yes (if away rotation was done)

The strongest letters are those written by faculty who have worked clinically with the student. At least two of the three letters should be from a pathologist who worked with the student.

Personal Statements

The personal statement is the only opportunity for you to have a voice. In particular, use this space to state your career goals and what you want from your residency training.

Application Timing

When do programs begin reviewing applications?	As soon as ERAS opens in September
When do programs begin offering interviews?	October

Make sure you have had some experience in pathology. Complete an elective or two. Try to work on a research project. Make sure this is the field that you want to go into.

Interview Advice

Interview widely if you can afford the cost of traveling around. You learn a lot from meeting people and seeing how programs differ. It is a small field. If you make a positive impression, people may remember you when you apply for fellowships or jobs.

We do not require a thank you note, but it is much appreciated and reflects well on the applicant. It also indicates your interest in the program.

Post-Interview Advice

Is it common practice for applicants to contact their #1 program to let them know they are ranking them first?

It is recommended. It is helpful to know that a student is highly interested in us.

Pediatrics

Categorical

Program Director at UCM

Alisa McQueen, MD

Recommended Specialty Advisors

In selecting someone as a specialty advisor, try to select someone with whom you feel you can develop a close relationship: someone with whom you feel comfortable and candid. Potential advisors could include:

- Lolita Alkureishi, MD (Co-Clerkship Director)
- H. Barrett Fromme, MD, MHPE (Associate Program Director)
- Karen Goldstein (Associate Program Director, Director of Primary Care Training)
- Alisa McQueen, MD (Residency Program Director)
- Rochelle Naylor, MD (Associate Program Director, Director of Intern Selection)
- Nicola Orlov, MD (Co-Clerkship Director and Associate Program Director)

For MD/PhD students and for physician-scientists:

- John Cunningham, MD, MSc, MRCP
- Jill DeJong, MD, PhD
- James LaBelle, MD, PhD
- Timothy Sanders, MD, PhD

USMLE Data

Sources: *UCM Program Directors and 2018 Charting Outcomes in the Match (NRMP publication)*

Min. Step 1 score for UCM program	See below*
Mean Step 1 score of US matched applicants (NRMP)	227
Does Step 2 CK influence rank?	Yes
Min. Step 2 score for UCM program	See below*
Mean Step 2 CK of US matched applicants (NRMP)	243
Mean number of contiguous ranks of US matched applicants (NRMP)	12.5

*While our program does not enforce a strict minimum cut off for Step 1 or Step 2, if you have questions regarding the impact of your score on your application, we would be happy to review this with you. Step 2 CK must be passed prior to the start of the program.

Should applicants do away rotations?

Away rotations are not necessary and we do not routinely recommend them. We only recommend rotations where you are strongly interested in a program and will perform exceedingly well. This experience can be very beneficial in giving you insight into a particular program and exposure to a particular pediatric subspecialty, but could potentially hurt you if you do not perform at an exceptional level.

Research

More important than research experience is demonstration of a sustained commitment to a project with a product to show for it. According to data from the NRMP, US seniors who matched had an average of 2.0 research experiences and 2.4 publications, presentations and abstracts. If a project is listed on your CV, be prepared to discuss it.

Letters of Recommendation

Number of letters recommended	3
Chair/Chief's letter required?	No
Number of letters from within the specialty	2
Number of letters from external institutions	N/A

Applicants should ask any physician with a good sense of the applicant's strengths, and personal knowledge of the applicant's interests and performance history. The strongest letters speak to the individual's strengths rather than just recapitulating the applicant's CV.

Procedure for Asking for a Chair's Letter

Chair's letters are only required at a few programs, although they are becoming more common. If a Pritzker student needs a Chair's letter, they should approach Dr. Alkureishi at least one month prior to the deadline. Physician-scientists and MD/PhD students should have a letter from their research mentor.

Personal Statements

Pediatric programs are looking for a description of the person that cannot be gleaned from their ERAS application. Our program uses personal statements to help match applicants and interviewers, though this is not the case everywhere. The personal statement gives you an opportunity to explain gaps in training or aspects of your file that could be perceived negatively. Make sure your personal statement is spell checked, well written, and no longer than one page. An exceptional statement can help an average file and a very poorly written statement could negatively impact a good file. Otherwise, the personal statement has minimal effect.

Application Timing

When do programs begin reviewing applications?	As soon as ERAS opens in September
When do programs begin offering interviews?	As soon as the MSPE is released in October

Interview slots fill quickly. We recommend accepting invitations and scheduling your interviews as soon as an offer is received.

Interview Advice

Being polite and professional to all the staff that the applicant has contact with cannot be over-emphasized enough in pediatrics. Applicants should learn about the features of the program before they visit so that they are well informed and can make the most of their interview day.

While the playful nature of children attracts many applicants to this field, do not fall into the trap of behaving less professionally in efforts to appear more appealing to children. This is still a job interview, and overly casual comments and communication will hurt you.

Post-Interview Advice

Is it common practice for applicants to contact their #1 program to let them know they are ranking them first?

Though we do not change our rank order list based upon applicants' stated intentions, letting a program know of your intention to rank them #1 does not hurt. However, do not assume that lack of communication from a program equals lack of interest.

Physical Medicine & Rehabilitation

Categorical and Advanced

Most programs are advanced and require a separate application for a PGY-1 position.

Program Director at Schwab Rehabilitation Hospital

Michelle Gittler, MD

Recommended Specialty Advisors

In selecting a specialty advisor, try to find someone with whom you feel you can develop a close relationship: someone with whom you feel comfortable and candid. A faculty member who has mentored you in a research project or who knows your clinical work is ideal. Potential advisors could include:

- Michelle Gittler, MD (Residency Program Director; michelle.gittler@sinai.org)
- Cheryl Benjamin, DO (UCM)
- Mary Lawler, MD, PT (UCM)

USMLE Data

Sources: UCM Program Directors and 2018 Charting Outcomes in the Match (NRMP publication)

Min. Step 1 score for UCM program	195
Mean Step 1 score of US matched applicants (NRMP)	225
Does Step 2 CK influence rank?	No*
Min. Step 2 score for UCM program	200
Mean Step 2 CK of US matched applicants (NRMP)	239
Mean number of contiguous ranks of US matched applicants (NRMP)	13.1

*If there is a low Step 1, a strong Step 2 can help.

Should applicants do away rotations?

Yes, they can do one. It is more important to get a strong LOR than an audition rotation at multiple sites.

If you were unable to get a PM&R elective at Schwab and you would like to rotate, please contact Dr. Gittler to arrange a rotation. Also, you may do a PM&R sub-internship at Schwab, or arrange to spend a day or two there, even if you did not rotate there.

Research

Research is recommended, but not required. Bench research is not critical. According to the NRMP, US seniors who matched had an average of 1.9 research experiences and 2.1 publications, presentations, abstracts.

Letters of Recommendation

Number of letters recommended	3
Chair/Chief's letter required?	No
Number of letters from within the specialty	1
Number of letters from external institutions	N/A

It is highly recommended that a student have one strong letter from PM&R physicians from the institution where the student did their PM&R rotation.

Personal Statements

PM&R programs are looking for students to discuss their specific interest in PM&R. Tell a story about unique or interesting experiences, perhaps a story about a patient, that corroborates your interest in PM&R. We reviewed 500 applications this past cycle; use your personal statement to differentiate yourself and make us remember you!

Application Timing

When do programs begin reviewing applications?	October
When do programs begin offering interviews?	October

Interview Advice

Applicants should know a little bit about each program where they plan to interview. During the interview, you should be truthful, honest, and know your own CV. Be engaging!

Post-Interview Advice

Is it common practice for applicants to contact their #1 program to let them know they are ranking them first?

No, but let the program know you're interested—send a thank-you note specific to the program.

Plastic and Reconstructive Surgery

Categorical

Program Director at UCM

Russell Reid, MD, PhD

Recommended Specialty Advisors

Your specialty advisor should be someone who is dedicated to medical education. Potential advisors could include:

- Russell Reid, MD, PhD (Residency Program Director)
- David Chang, MD (Section Chief)
- Rebecca Garza, MD
- Larry Gottlieb, MD
- Raphael Lee, MD
- Patrick Reavey, MD
- Amanda Silva, MD
- Lawrence Zachary, MD

USMLE Data

Sources: UCM Program Directors and 2018 Charting Outcomes in the Match (NRMP publication)

Min. Step 1 score for UCM program	240+
Mean Step 1 score of US matched applicants (NRMP)	249
Does Step 2 CK influence rank?	No
Min. Step 2 score for UCM program	N/A
Mean Step 2 CK of US matched applicants (NRMP)	254
Mean number of contiguous ranks of US matched applicants (NRMP)	13.7

Should applicants do away rotations?

Yes. Usually only one away rotation is necessary; more than three is not necessary.

Research

Students should choose a research project they are interested in, not just one to pad their resume. According to data from the NRMP, US seniors who match in plastic surgery have an average of 3.8 research experiences and 8.1 abstracts, presentations and publications.

Letters of Recommendation

Number of letters recommended	3
Chair/Chief's letter required?	Yes
Number of letters from within the specialty	3
Number of letters from external institutions	2

Procedure for Asking for a Chief's Letter

Set up an appointment to speak with the Section Chief, David Chang, MD. Please contact his executive assistant at 773-795-1240.

Personal Statements

Plastic surgery programs are looking for honesty and a detailed reason why the applicant chose plastic surgery.

Application Timing

When do programs begin reviewing applications?	As soon as the MSPE is released in October
When do programs begin offering interviews?	November 1

Plastic surgery programs are looking for excellent achievements outside of medicine. This includes an interest in sports, literature, etc. Plastics has a great focus on doing well on Step 1. Students interested in this specialty need to become active and engaged early in the application season.

Interview Advice

During the interview, you should be truthful, honest, and know your own CV. Be engaging!

Post-Interview Advice

Is it common practice for applicants to contact their #1 program to let them know they are ranking them first?

No. It is against the policies of the American Council of Academic Plastic Surgeons.

Psychiatry

Categorical

Program Director at UCM

Deborah Spitz, MD

Recommended Specialty Advisors

Your specialty advisor should know about psychiatry departments in other cities. The advisor should have a willingness to meet with students and an enthusiasm for the field. Potential advisors could include:

- Deborah Spitz, MD (Vice Chair for Education and Program Director)
- Michael Marcangelo, MD (Director of Medical Student Education)
- Karam Radwan, MD (Director of Child Psychiatry)
- Zehra Aftab, MD (Assistant Residency Training Director)
- Seeba Anam, MD (Child Psychiatry)

USMLE Data

Sources: UCM Program Directors and 2018 Charting Outcomes in the Match (NRMP publication)

Min. Step 1 score for UCM program	N/A
Mean Step 1 score of US matched applicants (NRMP)	226
Does Step 2 CK influence rank?	Yes
Min. Step 2 score for UCM program	N/A
Mean Step 2 CK of US matched applicants (NRMP)	239
Mean number of contiguous ranks of US matched applicants (NRMP)	10.0

USMLE scores may count differently in various programs. Highly competitive programs may pay attention while less competitive programs will disregard them.

Should applicants do away rotations?

Yes, if there is a specific institution in which you are interested. If you really want to get accepted into a particular away institution, you should definitely do a rotation in that school. This means selecting only one or two places to rotate, as we would NOT recommend that a psychiatry applicant take much Psychiatry in the fourth year. During the fourth year, you need as much medicine or pediatrics as possible. The best time to go on an away rotation is early in the fourth year.

Research

Having research experience is not required, but it is desirable. According to the NRMP, US seniors who matched in psychiatry had an average of 2.1 research experiences and 3.0 publications, presentations, and abstracts.

Letters of Recommendation

Number of letters recommended	3
Chair/Chief's letter required?	No
Number of letters from within the specialty	1
Number of letters from external institutions	N/A

Most letters are generic. A letter with specifics about the applicant, including their specific clinical performance is most helpful. Letters of recommendation from faculty members in medicine and pediatrics are relevant to psychiatry. Letters should come from faculty members who have worked closely with you clinically.

Personal Statements

The personal statement is especially important in psychiatry. We also look at extracurricular activities.

Psychiatry programs are looking for answers to the following questions:

- What attracts this applicant to psychiatry, in as specific a manner as possible?
- What are the applicant's goals in psychiatry?

We want the application to convey something about who the applicant is, what they value, what interests and excites them about the field, and what makes them unique.

In general, highly competitive psychiatry programs do look at scores and grades but still pay a great deal of attention to the personal statement and interview. There are many very good programs in psychiatry which are not so competitive, so it would be very unusual for a Pritzker student not to match in psychiatry, and that might be due to applying only to the most competitive programs.

Application Timing

When do programs begin reviewing applications?	As soon as ERAS opens in September
When do programs begin offering interviews?	October

Interview Advice

We recommend talking to faculty members in psychiatry before going on your first interview. Be prepared to engage with the interviewers. They will want to know who you are and what you are passionate about in the field. Students should be prepared to be asked somewhat personal questions by some interviewers. Some more psychodynamic programs ask about family background and relationships; if you do not want to reveal much, you should not apply to those places. Use the interviews to find out what other programs are “really” like, how the residents feel about the program, and if you will feel comfortable there. Ask questions freely—if you are not happy with the answers, then you probably should go somewhere else even if it is a prestigious program.

Post-Interview Advice

Is it common practice for applicants to contact their #1 program to let them know they are ranking them first?

Yes, but does not affect rank.

Radiation Oncology

Advanced

Requires a separate application for a PGY-1.

Program Director at UCM

Yasmin Hasan, MD

Recommended Specialty Advisors

In selecting a specialty advisor, try to find someone with whom you feel you can develop a close relationship: someone with whom you feel comfortable and candid. A faculty member who has mentored you in a research project or who knows your clinical work is ideal. Potential advisors could include:

- Yasmin Hasan, MD (Residency Program Director)
- Daniel Golden, MD, MHPE (Clerkship Director and Associate Program Director)
- Steven Chmura, MD, PhD
- Stan Liauw, MD

USMLE Data

Sources: UCM Program Directors and 2018 Charting Outcomes in the Match (NRMP publication)

Min. Step 1 score for UCM program	230
Mean Step 1 score of US matched applicants (NRMP)	247
Does Step 2 CK influence rank?	No
Min. Step 2 score for UCM program	N/A
Mean Step 2 CK of US matched applicants (NRMP)	253
Mean number of contiguous ranks of US matched applicants (NRMP)	12.3

Should applicants do away rotations?

Yes, complete two. Be sure to apply early, because summer spots fill early at competitive departments. Feel free to discuss your ideas for away rotation locations with your specialty advisor.

Research

We recommend that at least one of your research projects should relate specifically to radiation oncology. According to the NRMP, the US Seniors who matched in radiation oncology had an average of 4.2 research experiences and 8.3 publications, abstracts and presentations.

Letters of Recommendation

Number of letters recommended	3
Chair/Chief's letter required?	No
Number of letters from within the specialty	2
Number of letters from external institutions	1

Typically, it is a good idea to get at least one letter from a well-known faculty member at an outside institution. It is a good idea to get a mix of letters from nationally prominent faculty members, faculty who know you well, and those who have worked with you clinically.

Personal Statements

The personal statement should be carefully thought-out and well written. Be careful not to send up red flags: things that could be misinterpreted or could be detrimental to your application. It's best to be fairly conservative.

Application Timing

When do programs begin reviewing applications?	October
When do programs begin offering interviews?	October-December

The UCM program waits until after the MSPE arrives to invite students to interviews, but many programs start reviewing applications earlier.

Radiation oncology is highly competitive. We recommend that you have an honest discussion with the program director; Dr. Hasan will be up-front if she thinks you should also apply to other specialties if you do not match in rad-onc. You should consider applying for preliminary medicine internships rather than transitional years. This will provide more flexibility in the event that you do not match in rad-onc.

Interview Advice

Be prepared to have a good explanation of why this is the right field for you. Also be very prepared to discuss your research in depth.

Post-Interview Advice

Is it common practice for applicants to contact their #1 program to let them know they are ranking them first?

No. Candidates should never specifically say that a program is number one; just express strong interest.

Candidates are encouraged to read the article "Taking 'the Game' Out of The Match: A Simple Proposal," found here: <http://www.ncbi.nlm.nih.gov/pubmed/26581129>

Radiology

Categorical and Advanced

Some programs are advanced and require a separate application for a PGY-1.

Program Director at UCM

Seng Ong, MD

Recommended Specialty Advisors

Specialty advisors should be a faculty member with whom the student feels comfortable. Potential specialty advisors could include:

- Osman Ahmed, MD
- Saad Ali, MD
- Melvy Mathew, MD
- Pritesh Patel, MD
- Chris Straus, MD

USMLE Data

Sources: UCM Program Directors and 2018 Charting Outcomes in the Match (NRMP publication)

Min. Step 1 score for UCM program	240
Mean Step 1 score of US matched applicants (NRMP)	240
Does Step 2 CK influence rank?	Yes
Min. Step 2 score for UCM program	See below*
Mean Step 2 CK of US matched applicants (NRMP)	249
Mean number of contiguous ranks of US matched applicants (NRMP)	12.5

*Step 2 scores could help the applicant if the scores are substantially higher than the applicant's Step 1 score.

Should applicants do away rotations?

Away rotations are not required and can help or hurt, depending on the student. If you are really interested in that particular program, it may be a good idea. Remember, you will need to perform at your best.

Research

While research in radiology is not required, it certainly helps. Recent data from the NRMP shows that US seniors who matched in radiology had an average of 2.8 research experiences and 3.9 publications.

Letters of Recommendation

Number of letters recommended	3
Chair/Chief's letter required?	No
Number of letters from within the specialty	1
Number of letters from external institutions	N/A

Letters of recommendation should come from a faculty member who has worked closely with the student clinically. At least one should come from a core specialty such as internal medicine, surgery, OB/GYN or

pediatrics.

Personal Statements

Your personal statement should demonstrate characteristics that show motivation for lifelong learning of radiology.

Application Timing

When do programs begin reviewing applications?	October 1
When do programs begin offering interviews?	October

Interview Advice

Learn about the program and have thoughtful questions to ask about the program. Thank-you notes are highly recommended. Thank-you emails are an alternative to actual thank-you notes.

Post-Interview Advice

Is it common practice for applicants to contact their #1 program to let them know they are ranking them first?

It is recommended but will not affect rank. It is probably in the student's best interest to do so.

Urology (AUA Match)

Categorical

PGY-1 is included in most programs in the AUA Match, but an NRMP rank list for a PGY-1 must still be submitted.

Program Director at UCM

Glenn Gerber, MD, PhD

Recommended Specialty Advisors

Your specialty advisor should be someone on the faculty to whom applicants can relate. Potential specialty advisors could include:

- Arie Shalhav, MD (Section Chief)
- Greg Bales, MD
- Scott Eggener, MD
- Sarah Faris, MD
- Glenn Gerber, MD, PhD
- Mohan Gundeti, MD, PhD
- Gregory Zagaja, MD

USMLE Data

Sources: *UCM Program Directors and the AUA*

Min. Step 1 score for UCM program	240
Mean Step 1 score of US matched applicants (AUA)	N/A
Does Step 2 CK influence rank?	Yes
Min. Step 2 score for UCM program	200
Mean Step 2 CK of US matched applicants (AUA)	N/A
Mean number of contiguous ranks of US matched applicants (AUA)	14.9

Should applicants do away rotations?

Yes, do two. Students should try to do their away rotations in August and September, spreading them between a competitive program and a non-competitive program.

Research

Research is desirable in this specialty, but it does not need to specifically be in urology.

Letters of Recommendation

Number of letters recommended	3
Chair/Chief's letter required?	Yes
Number of letters from within the specialty	2
Number of letters from external institutions	1

Procedure for Asking for a Chief's Letter

Speak with Dr. Gerber to make an appointment with him; the letter will come jointly from Drs. Shalhav and Gerber.

Personal Statements

Urology programs want to know why you are interested in going into urology. Keep it short and direct.

Application Timing

When do programs begin reviewing applications?	As soon as ERAS opens in September
When do programs begin offering interviews?	As soon as ERAS opens in September

Urology participates in an “early match” through the AUA (www.auanet.org) Applicants apply to programs through ERAS, but must submit their rank list through the AUA by early January.

Interview Advice

N/A

Post-Interview Advice

Is it common practice for applicants to contact their #1 program to let them know they are ranking them first?

No.

Vascular Surgery

Categorical

Program Director at UCM

UCM does not have an Integrated (0+5) Vascular Surgery Residency; however, Christopher Skelly, MD is the Program Director of the vascular surgery fellowship and can be used as a resource.

Recommended Specialty Advisors

In selecting a specialty advisor, try to find someone with whom you feel you can develop a close relationship: someone with whom you feel comfortable and candid. A faculty member who has mentored you in a research project or who knows your clinical work is ideal. Potential advisors could include:

- Christopher Skelly, MD (Fellowship Program Director and Section Chief)
- Chelsea Dorsey, MD'10 (Career Advisor; MS3 Vascular Surgery Clerkship Director)*
- Ross Milner, MD (Career Advisor)
- Trissa Babrowski, MD

**Dr. Dorsey is a graduate of an integrated vascular surgery residency.*

USMLE Data

Sources: UCM Program Directors and 2018 Charting Outcomes in the Match (NRMP publication)

Min. Step 1 score for UCM program	N/A
Mean Step 1 score of US matched applicants (NRMP)	236
Does Step 2 CK influence rank?	Rarely
Min. Step 2 score for UCM program	N/A
Mean Step 2 CK of US matched applicants (NRMP)	244
Mean number of contiguous ranks of US matched applicants (NRMP)	16.0

Should applicants do away rotations?

Yes, one or two is appropriate. Students should try to do their away rotations in July, August, and/or September so that a letter of recommendation from that institution can be included in their ERAS application. Keep in mind that most programs only have one residency spot (only a handful of programs now have two spots). As such, your away rotation is an extended interview. If not asked, you should offer to do a case presentation or present your vascular-related research to your team.

Research

Research experience is definitely desirable. Though research within the field is ideal, this is certainly not a must. According to the NRMP data, of US seniors who match in vascular surgery, the average number of research experiences is 4.9 and the average number of presentations and publications is 8.3.

Letters of Recommendation

Number of letters recommended	3
Chair/Chief's letter required?	No
Number of letters from within the specialty	2-3*
Number of letters from external institutions	Not required but can be helpful

* Though letters from vascular surgery faculty are ideal, any other letters included in your application should at least be from within the Department of Surgery or from a research mentor.

Personal Statements

Make sure you are clear about your reason for entering the specialty. This is also your opportunity to give the reader insight into your unique background and personal story. If you are double-applying in another field (e.g. general surgery), make sure your personal statement for the vascular residency is specific to vascular surgery.

Application Timing

When do programs begin reviewing applications?	As soon as ERAS opens in September
When do programs begin offering interviews?	September-October

Applicants are advised to submit applications to programs as soon as possible and prior to ERAS opening.

Interview Advice

Try to attend the social event and/or dinner the night before. It is a bit of a red flag if you do not participate in all activities included in the interview.

Make sure you look up specific information about each program and be prepared to ask a number of questions about that program. Be honest and genuine with your responses. The programs are primarily looking for the applicant who is the best fit so just be yourself!

Be kind and courteous to everyone you interact with (including residents, fellows, program coordinators, etc.). These individuals often have some kind of say in the selection process.

Post-Interview Advice

Is it common practice for applicants to contact their #1 program to let them know they are ranking them first?

Yes, but usually this is done via one of your advisors at UCM. Only communicate this information to one program. It is unprofessional to tell more than one program that you are ranking them #1. Vascular surgery is a small community and program directors do talk to one another.

Class of 2019 Match List

Name	PGY	Institution Name	State	Specialty
<u>ANESTHESIOLOGY</u>				
		Yale-New Haven Hosp-CT	CT	Anesthesiology
		Univ of Chicago Med Ctr-IL	IL	Anesthesiology
		Northwestern McGaw/NMH/VA-IL	IL	Anesthesiology
		Northwestern McGaw/NMH/VA-IL	IL	Anesthesiology
<u>DERMATOLOGY</u>				
	PGY-2	U Michigan Hosps-Ann Arbor	MI	Dermatology
	PGY-2	MedStar Washington Hosp Ctr-DC	DC	Dermatology
	PGY-2	U Michigan Hosps-Ann Arbor	MI	Dermatology
<u>EMERGENCY MEDICINE</u>				
		Henry Ford Hospital-MI	MI	Emergency Medicine
		Emory Univ SOM-GA	GA	Emergency Medicine
		Ohio State University Med Ctr	OH	Emergency Medicine
		Northwestern McGaw/NMH/VA-IL	IL	Emergency Medicine
		Univ of Chicago Med Ctr-IL	IL	Emergency Medicine
		Denver Health Med Ctr-CO	CO	Emergency Medicine
		Univ of Chicago Med Ctr-IL	IL	Emergency Medicine
		Loyola Univ Med Ctr-IL	IL	Emergency Medicine
<u>FAMILY MEDICINE</u>				
		U Illinois COM-Chicago	IL	Family Med/Erie-Swedish
		U Minnesota Med School	ID	Family Medicine
		Family Medicine Res of Idaho	MN	Family Med/N Memorial
		West Suburban Med Ctr-IL	IL	Family Medicine
		Boston Univ Med Ctr-MA	MA	Family Medicine
		Grtr Lawrence Fam Hlth Ctr-MA	MA	Family Medicine
		Northwestern McGaw/NMH/VA-IL	IL	Family Medicine/UIH
<u>INTERNAL MEDICINE</u>				
		NYP Hosp-Columbia Univ Med Ctr-NY	NY	Internal Medicine
		Icahn SOM at Mount Sinai-NY	NY	Internal Medicine
		Univ of Chicago Med Ctr-IL	IL	Internal Medicine
		Massachusetts Gen Hosp	MA	Internal Medicine
		Yale-New Haven Hosp-CT	CT	Internal Medicine
		Univ of Chicago Med Ctr-IL	IL	Internal Medicine
		UC San Francisco-CA	CA	Internal Medicine
		Univ of Chicago Med Ctr-IL	IL	Internal Medicine
		Massachusetts Gen Hosp	MA	Internal Medicine
		Univ of Chicago Med Ctr-IL	IL	Internal Medicine
		Brigham & Womens Hosp-MA	MA	Internal Medicine
		NYP Hosp-Columbia Univ Med Ctr-NY	NY	Internal Medicine
		U Washington Affil Hosps	WA	Internal Medicine
		Univ of Chicago Med Ctr-IL	IL	Internal Medicine
<u>INTERNAL MEDICINE-MD SCIENTIST</u>				
		Univ of Chicago Med Ctr-IL	IL	Int Med/MD Scientist
		Univ of Chicago Med Ctr-IL	IL	Int Med/MD Scientist
		Yale-New Haven Hosp-CT	CT	Int Med/MD Scientist

Name	PGY	Institution Name	State	Specialty
<u>INTERNAL MEDICINE-PEDIATRICS</u>				
		Virginia Commonwealth U Hlth Sys	VA	Medicine-Pediatrics
		U Minnesota Med School	MN	Medicine-Pediatrics
		U Arizona COM-Phoenix	AZ	Medicine-Pediatrics
<u>INTERNAL MEDICINE-PRELIMINARY</u>				
		Univ of Chicago Med Ctr-IL/NorthShore	IL	Medicine-Preliminary
		Univ of Chicago Med Ctr-IL	IL	Medicine-Preliminary
		Zucker SOM-Northwell NS/LIJ-NY	NY	Medicine-Preliminary
		Univ of Chicago Med Ctr-IL	IL	Medicine-Preliminary
<u>INTERVENTIONAL RADIOLOGY</u>				
		UCLA Med Ctr-CA	CA	Interventional Radiology (Integ)
<u>NEUROLOGICAL SURGERY</u>				
		Hosp of the Univ of PA	PA	Neurological Surgery
<u>NEUROLOGY</u>				
	PGY-2	UC San Francisco-CA	CA	Neurology
		Barnes-Jewish Hosp-MO	MO	Neurology
<u>OBSTETRICS-GYNECOLOGY</u>				
		Brown Univ/Women & Infants Hosp of RI	RI	Obstetrics-Gynecology
		U Wisconsin Hospital and Clinics	WI	Obstetrics-Gynecology
		Univ of Chicago Med Ctr-IL	IL	Obstetrics-Gynecology
		U Washington Affil Hosps	WA	Obstetrics-Gynecology
		Univ of Chicago Med Ctr-IL	IL	Obstetrics-Gynecology
		Northwestern McGaw/NMH/VA-IL	IL	Obstetrics-Gynecology
<u>OPHTHALMOLOGY</u>				
	PGY-2	U Minnesota Med School	MN	Ophthalmology
	PGY-2	Univ of Chicago Med Ctr-IL	IL	Ophthalmology
	PGY-2	Harvard/Mass Eye & Ear Infirmary-MA	MA	Ophthalmology
<u>ORTHOPAEDIC SURGERY</u>				
		Henry Ford Hospital-MI	MI	Orthopaedic Surgery
		U Texas Southwestern Med Sch-Dallas	TX	Orthopaedic Surgery
<u>OTOLARYNGOLOGY</u>				
		U Texas Southwestern Med Sch-Dallas	TX	Otolaryngology
<u>PEDIATRICS</u>				
		Childrens Hospital-Boston-MA	MA	Pediatrics
		U Colorado SOM-Denver	CO	Pediatrics
		Northwestern McGaw/Lurie Childrens-IL	IL	Pediatrics
		Univ of Chicago Med Ctr-IL	IL	Pediatrics
		Northwestern McGaw/Lurie Childrens-IL	IL	Pediatrics
		U Rochester/Strong Memorial-NY	NY	Pediatrics
		Univ of Chicago Med Ctr-IL	IL	Pediatrics
<u>PEDIATRICS-HEALTH SERVICES</u>				
		Univ of Chicago Med Ctr-IL	IL	Pediatrics/Health Services

Name	PGY	Institution Name	State	Specialty
<u>PEDIATRICS-RESEARCH</u>				
		Stanford Univ Progs-CA	CA	Pediatrics/Research Trk
<u>PSYCHIATRY</u>				
		U Colorado SOM-Denver	CO	Psychiatry
		U Utah Affil Hospitals	UT	Psychiatry
		NYP Hosp-Columbia Univ Med Ctr-NY	NY	Psychiatry
		UCLA Semel Inst for Neuroscience-CA	CA	Psychiatry
		UCLA Semel Inst for Neuroscience-CA	CA	Psychiatry
		Massachusetts Gen Hosp	MA	Psychiatry
		Northwestern McGaw/NMH/VA-IL	IL	Psychiatry
		Butler Hospital/Brown Univ-RI	RI	Psychiatry
<u>PSYCHIATRY-RESEARCH</u>				
		UCLA Semel Inst for Neuroscience-CA	CA	Psychiatry/Research
<u>RADIATION ONCOLOGY</u>				
	PGY-2	UC San Francisco-CA	CA	Radiation Oncology
<u>SURGERY-GENERAL</u>				
		UC San Francisco-CA	CA	Surgery-General
		Univ of Chicago Med Ctr-IL	IL	Surgery-General
<u>SURGERY-PRELIMINARY</u>				
		Univ of Chicago Med Ctr-IL	IL	Surgery-Preliminary
<u>TRANSITIONAL</u>				
		Hennepin Co Med Ctr-MN	MN	Transitional
		MacNeal Hospital-IL	IL	Transitional
		Presence Resurrection Med Ctr-IL	IL	Transitional
		Univ of Chicago Med Ctr-IL/NorthShore	IL	Transitional
<u>UROLOGY-RESEARCH</u>				
		U Washington Affil Hosps	WA	Urology/Research Trk



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