Is Emergency Medicine for you?

Amy Stubbs MD
Associate Program Director
University of Missouri-Kansas City
Are you a “fit” for Emergency Medicine?

- Broad Knowledge Base
- Desire to see patients of all ages, degrees of illness, and social backgrounds; comfortable with less patient continuity
- Strong systematic problem solving and reassessment skills
- Ability to prioritize and multi-task
- Leadership and teamwork skills
- Strong communication skills (patients, families, healthcare team members)
- Adapt practice based on current needs of the department/patients, ability to deal with high stress and high demands
- Strong procedural skills
Is Emergency Medicine a fit for you?

- Things to consider: the good, the bad, the ugly
  - Lifestyle/schedule
    - Shift work
    - Typical schedule
    - But it’s a 24/7 gig…
  - Work environment
    - Patients
    - Team
    - Colleagues/fellow physicians
  - Career options/longevity
    - Stress/burnout
    - $$
Choosing EM

• The bottom line:
  • You will take care of patients from age 0-100+
  • You will get to make a diagnosis and affect patient lives on a daily basis
  • You get to be a “real” doctor; we still see everyone who walks (or crawls, or wheels etc..) in the door
Personal Statement & Letter of Recommendation

Chris McDowell, MD
Program Director
Southern Illinois School of Medicine
Personal Statement

- Address **Red Flags**
  - Failed Clerkship, Board score, etc.
- Be concise
  - Tell your story- think “elevator talk”
- Highlight intangibles
  - Team work
  - Future career goals (if you know)
- Proofread
  - PDs read hundreds of personal statements
  - Don’t let yours standout for the wrong reasons
SLOE (formally the SLOR)

- Plan for a SLOE from each EM rotation site
  - Red Flag to omit a SLOE from away site
  - Aim for 2-home program and one away

- Ask about the SLOE process when you arrive for your away rotation

- 4 Letter limit
  - Some programs will still accept outside of ERAS
  - Never hurts to have an additional strong SLOE
AWAY ROTATIONS

**Desired Location/Program**

**One Month Interview**

**Goal Be Level of an Intern**

**Prep with EM Shifts, Reading**

SAINT LOUIS UNIVERSITY

Higher purpose. Greater good.™
3 Year versus 4 Year Programs

Douglas Char, MD
SAEM Great Plains Conf
Sept 28, 2013 Springfield IL
Historical Perspective

- 1970s – Birth of specialty training
  - 2 year residency following internship (PGY2-3)
- RRC mandates 36 months of EM training
  - PGY 1-3 or PGY 2-4
  - Balanced Budget Act 1997 capped GME positions
- Today 162 approved EM training program
  - Majority PGY 1-3 (~82%)
  - PGY 1-4 (36 programs)
    - Geographic clustering

The decision about being a 3 vs 4 year format has more to do with GME funding than educational philosophy

http://acgme.org/acgmeweb/tabid/131/ProgramandInstitutionalGuidelines/HospitalBasedAccreditation/EmergencyMedicine.aspx
4 Years Academic Rationale

- 4 year programs are not just “longer 3 year programs”
  - It’s not a year of research
- More time for individual discovery and growth
  - Elective rotations
  - Mini fellowships
  - Research focus
- Emergency Medicine Scope of practice has expanded
- Grooming for academic career

The question to ask is “will I be ready to practice EM (anywhere, any setting) when I complete this training program?!”

- Is one format superior – nobody knows!
Core Curriculum

- All emergency medicine residency programs use a common core curriculum as the basis for their education infrastructure.

- Each program is unique and enjoys specific strengths and opportunities to provide emphases:
  - Patient volume important but..... (size vs acuity)
  - ICU rotations vary (how much autonomy?)...
  - Single site vs multi-site program...

- 3 vs 4 year should only be one factor you consider.
3 vs 4 Considerations

- Differences in formats most often reflect institutional needs, or local philosophies regarding resident education.
- Each format has its advantages and disadvantages, which in all cases are subjective depending on personal preferences and points of view as faculty and residents.
- It is impossible to generalize extensively about differences among programs.
- The most important consideration is how any program uses its resources, including the time each resident has dedicated to this phase of his or her career, to provide valuable and meaningful educational experiences.
Sizing up a Residency Program

Brian Bausano, MD
Associate Program Director
University of Missouri Columbia
Sigmund Freud said it best...

- When making a decision of minor importance, I have always found it advantageous to consider all the pros and cons. In vital matters, however, such as the choice of a mate or a profession, the decision should come from the unconscious, from somewhere within ourselves. In the important decisions of personal life, we should be governed, I think, by the deep inner needs of our nature.
Things of major importance

- Clinical Faculty – Involvement, teaching at the bedside
- Personality of the Program
- 3 vs. 4 year
  - The counterpoint to Doug’s point!
- Does a program tailor to your educational needs?
Things of minor importance...

- Ultrasound
- Toxicology
- Peds EM
- EMS experience
- Electives to suit your needs
- What will the program pay for?

@MizzouEM
The most important thing!!

FOLLOW IT!!
Thank you!

Trust. Pride. Joy. We are family. We are Mizzou.

Trusting in each other, proud of what we do, doing what we love: together as a line of one, serving Missouri’s greatest needs.

@MizzouEM
Interviewing Tips

Hans House, MD
Program Director
University of Iowa
Residency Interview Questions

- So you're about to head off on your first interview. A little nervous, are we? Not to worry, we're here to help!
- First, remember some of the personal and professional traits they are looking for: Enthusiasm, motivation, initiative, communication skills, chemistry, energy, determination, confidence, humility, reliability, honesty, integrity, pride, dedication, analytical skills, and listening skills.
- Next, think of some of the questions that they might ask you - we've given you a head start by listing over a hundred questions you might hear on your interview, so click on the link below to download the list.
- Now, what questions are you going to ask them? We've helped you out there too.
Points to Ponder

• Questions They Will Ask You
• Questions to Ask Residents
• Questions to Ask Faculty
• Questions to Ask the Program Director

http://www.emra.org/uploadedfiles/emra/resources/career_planning/finding_a_job/residency%20interview%20guide.pdf
Making Your Rank List

Putting it all together

Timothy Schaefer, MD
Associate Program Director
University of Illinois College of Medicine - Peoria
Making Your Rank List

- What’s important to you (and your significant other)?
  - Is it a good fit?
    - Would you be happy?
    - Are the residents happy?
  - Location
    - Family, Activities, City
  - Advise from others
  - Prestige/reputation of program
  - Special Interest/focus of training
    - EMS, International Med, Peds, Research, Sim, Trauma, U/S, etc
  - Other?
Making Your Rank List

- Shoot for the stars…
  - Rank YOUR PREFERENCES
- …and…
- …be realistic.
  - How competitive are you?
  - Include all acceptable choices
  - Have a backup plan
• Should you follow-up with the programs?
  • Yes

• Will they follow-up with you?
  • Maybe
Questions