

INTERNAL MEDICINE RESIDENCY COMMON CHARACTERISTICS

- Most intern years are 9-10 months of in-patient call-intensive wards, with 1-2 months of non-call consult or outpatient months and 3-4 weeks of vacation
- Call is usually every 4-5 night. Many programs have a night float system.
- The second and third years are usually about half wards and half consults.
- RRC limits work hours to an average of 80 hours a week with 4 days off each month.
- Because of work-hours issues, external moonlighting is limited or prohibited at most programs.
- Occasionally internal moonlighting is allowed.

RESEARCH

If you have a PhD, a masters or have done a significant amount of research, programs look at this carefully. Dabbling in research (several months, the summer, etc) will not significantly affect your application. Program directors are most impressed with your clinical performance. If you have any research interest, then try to get a taste for it, but don't assume a limited exposure will enhance your application.

RATIOS AND PERCENTAGES

- Ratio of men to women approximates 50:50
- The percentage of IMGs varies widely between programs in the US overall and ranges from 0-100%. Percentage of IMGs in the programs that most NUFMS students attend is <10%.
- Residency programs are 3 years in duration. Fellowship training, pursued by 70% of our NUFMS students is an additional 2-3 years.

VISITING ROTATIONS

- It is interesting to see another part of the country and another program from the inside – however, it is not essential. Most NU students do not do an away rotation at the program they eventually choose.
- An away rotation can give your application a slight boost, but it will not dramatically affect your chances of matching.

TIMING OF YOUR SUB-I

- There are two major reasons to do your Medicine Sub-I in the summer:
 - You want help in discerning your interest in Internal Medicine.
 - You want to impress the Department and letter writers that your clinical abilities are better than you demonstrated during junior medicine and primary care

ADVISORS

- They will help you decide if medicine is for you and to help you plan your senior year. They will review your personal statement.
- If they have worked with you clinically, they may write you a letter of reference. But most will not.
- Advisors give advice. They don't get you into a better program.

LETTERS OF RECOMMENDATION

- The two most important letters are the MSPE and the Departmental letter.
- Other letters are a minor part of your application.

USMLE

- The national average is about **227**. The NUFMS average is **239**.
- If your USMLE score is below 200 or if your score is significantly lower than that predicted by your SF and SBM exams, you should take Part II early. A score under 200 or even 210 might effect a program's decision to interview you. To change their mind, you need to take Part II by the end of September and score 10-20 points higher.



RESOURCES:

BLACKBOARD

For details regarding advising, interviewing, the match process, and other important information about the interview trail:

<http://courses.northwestern.edu/>

**Email Anna-Kate with your netID for access*

NORTHWESTERN RESIDENCY PROGRAM:

For details about Northwestern's Internal Medicine Residency:

<http://www.medicine.northwestern.edu/education/residency>

NEXT MEETING:

FEBRUARY 24, 5:30 PM, PRITZKER AUDITORIUM, FEINBERG 3RD FLOOR

Further Q&A about senior scheduling and preliminary thoughts about assessing residency program quality and your competitiveness.



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NORTHWESTERN UNIVERSITY



INTERNAL MEDICINE CAREER NIGHT

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