

**University of Maryland  
School of Medicine**

*Residency  
Application  
Manual*



# Table of Contents

Introduction.....	3
Background Information.....	4
Application and Match Systems.....	4
ERAS.....	4
NRMP.....	5
Early Application and Match System.....	5
Urology Application and the Early Match System.....	6
Federal Services/Military Early Application and Match Systems.....	7
Army.....	7
Navy.....	7
Air Force.....	7
CaRMS.....	7
Couples Match.....	8
Shared Residency.....	8
Timeline for Application.....	9
Writing the MSPE.....	10
Getting Advice.....	11
Letters of Recommendation.....	12
Transcripts.....	13
Photos.....	14
CV.....	15
Personal Statement.....	18
Application Process.....	19
Final Steps in the Match.....	22
Scrambling.....	24
Important Dates and Deadlines.....	28

## Introduction

One of the most important decisions of a physician's career is the selection of a graduate medical education program following medical school (residency, fellowship and/or research associate position). Whereas medical school provides you with basic training leading to the MD degree, postgraduate training tends to mold you into the kind of practicing physician you will be. Although the process and mechanics of choosing a particular specialty and residency program begins in the third year, it is not too early to be aware of what is coming and to plan appropriately along the way.

Residency positions in particular specialties (*e.g.*; ophthalmology, radiology, dermatology, surgical subspecialties and some others) have become extremely competitive. Even in less competitive fields, *specific* programs may be very difficult to obtain. Planning ahead together with early career exploration may improve your chances of obtaining the field and program that you desire. If you desire to pursue one of the more competitive specialties, it would be beneficial to speak early with advisors in that field to enhance your credentials.

In the first and second years of medical school, you should begin to gain exposure to different specialties to gain an understanding of the nature of their work and the competitiveness and qualifications for matching. This exposure can be accomplished through joining interest groups, shadowing, mentors, big sibs and other venues. The Association of American Medical Colleges also has a Careers in Medicine website devoted to helping students choose careers. Each of you has received a password to access the site through OSA (please call or come in if you have lost it), and you may visit their site at <http://www.aamc.org/students/cim/start.htm>. In addition, students are encouraged to meet with Dr. Martinez for individual career counseling. Appointments may be made by calling 410-706-7476."

The formal process begins for most students in the third year. During the third year you will rotate through a number of specialties. The pressure to come to a branching point of selecting specialty options begins here as you will be asked to select your senior rotations and electives. Although at this stage the process may seem overwhelming, there is much support around to help guide you at various stages. The Office of Student Affairs conducts workshops in analyzing the decision-making process for interested junior students and makes available information you will need to make informed career decisions. Department chairs and other faculty members, as well as upper class students and house officers, serve as excellent resources. Identifying a mentor in your field of interest as early as possible would be extremely helpful.

The following references are recommended for interested students:

- Iserson, K.V.: "Getting Into a Residency: - A Guide for Medical Students," Columbia, SC, Camden House.
- Miller, L.T. and Donowitz, L.G. "Medical Student's Guide to Successful Residency Matching." Baltimore, Williams and Wilkins (1997)
- Taylor, A.D.: "How to Choose a Medical Specialty." Philadelphia, PA, WB Saunders Co. (1986)
- Miller, G.D.: "Where Do I Fit In?" *The New Physician*, July/August 1986. pp. 18-19

## Background Information

The Match is the process by which you are matched to a residency position. Completing The Match constitutes a binding agreement between you and a residency training program. The applications are completed through a centralized process, and your application includes a personal statement, official transcript, letters of recommendation, **Medical Student Performance Evaluation (MSPE)**, formerly the Dean's Letter, and the centralized electronic application. Programs review all applications and invite selected students for interviews. Some will review materials as they arrive and begin scheduling interviews right away, so send your application materials early. Others wait until the MSPE is sent out on November 1st each year. The process culminates in February, when students and programs send a list of their rank order choices to a central computer. The computer then matches students and programs according to their highest choices.

Shawan Pearson is the OSA staff member responsible for facilitating your fourth-year residency application process and Match experience. Her phone number is 410-706-7476, and her email address is [spearson@som.umaryland.edu](mailto:spearson@som.umaryland.edu). Shawan's office hours are from 8 a.m. until 5:00 p.m.

## Application and Match Systems

There are several different application and match systems. The systems you will use are determined by the specialty to which you are applying. You might have to use more than one type of application or match system. The major ones are described below:

The **Electronic Residency Application Service Application System (ERAS)** is used to distribute application materials to programs. Information about ERAS is on the web at [www.aamc.org/eras](http://www.aamc.org/eras). As of this writing, the following specialties will use ERAS:

1. \*Anesthesiology
2. Child Neurology (Neurology)
3. \*Dermatology
4. \*Emergency Medicine
5. \*Emergency Medicine/Family Medicine
6. \*Family Medicine
7. \*Internal Medicine
8. \*Internal Medicine/Dermatology
9. \*Internal Medicine/Emergency Medicine
10. \*Internal Medicine/Family Practice
11. \*Internal Medicine/Pediatrics
12. \*Internal Medicine/Physical Medicine & Rehabilitation
13. \*Internal Medicine/Psychiatry
14. \*Neurology
15. \*Neurological Surgery
16. \*Nuclear Medicine
17. \*Obstetrics and Gynecology
18. \*Orthopaedic Surgery
19. \*Otolaryngology
20. \*Pathology-Anatomic & Clinical
21. \*Pediatrics

22. \*Pediatrics Dermatology
23. \*Pediatrics/Emergency Medicine
24. \*Pediatrics/Physical Medicine & Rehabilitation
25. \*Pediatrics/Psychiatry/Child & Adolescent Psychiatry
26. \*Physical Medicine & Rehabilitation
27. \*Plastic Surgery
28. \*Psychiatry
29. \*Psychiatry/Family Practice
30. Psychiatry/Neurology
31. \*Radiation Oncology
32. \*Radiology-Diagnostic
33. \*Surgery-General
34. \*Transitional Year
35. Urology
36. \*Vascular Surgery (Integrated)

\* Indicates specialties that participate with the National Resident Matching Program (NRMP)

“**Tokens**” are electronic codes that allow you to register and access MyERAS (your personal workstation in ERAS) online. Tokens will be available on or about **July 1**, and will be emailed to you. This number will be used one time only to access the MyERAS application at which time the AAMC ID Number will be assigned. Once you obtain your token from the OSA, you should go to the MyERAS website and click on register. After registering you will be assigned an AAMC ID #. We **strongly recommend** that you place the number in a safe place as you will need it several times during the course of this process. Please let Shawan Pearson know if you will be applying to programs outside of ERAS, and you will need to send her addresses to mail your MSPE and transcripts. For these programs, you are responsible for requesting the appropriate application materials and sending all supporting materials directly to them. Your letter writers should be supplied with mailing labels to send letters of recommendation directly to these programs.

The National **Residency Matching Program (NRMP) Match System** is popularly called “The Regular Match.” This is the computer program by which students and programs rank each other and then are matched. It is used by students to enter a match list in **February** and is the match system used by the majority of specialties. The NRMP website is [www.nrmp.org](http://www.nrmp.org). Early Application and Match System (aka **The San Francisco Match** or The “Early Match”) uses both a computer based common application system and a computer based matching system. It is used by the following specialties:

1. Neurosurgery
2. Child Neurology & Neurodevelopmental Disabilities
3. Neurotology
4. Ophthalmology
5. Plastic Surgery (to enter after 3 years of general surgery)

It is called the “Early Match” because the application and match schedules happen earlier than those of the “Regular Match.” It is called the “San Francisco” match because the administrative offices are in San Francisco. Information about early match specialties is available on the web at [www.sfmach.org](http://www.sfmach.org).

**Urology Application and Early Match System:**

The Urology Match uses both a computer based common application system and a computer based matching system. It is also an early match, managed by the Urology Matching Program. Match registration and application information for urology are available on the web at [www.auanet.org](http://www.auanet.org). Some urology programs now use ERAS.

Also, for further information regarding the urology match contact:

The Urology Residency Matching Program  
1000 Corporate Boulevard  
Linthicum, MD 21090  
Phone: 1-866-RING AUA (1-866-746-4282), ext. 3913  
Fax: 410-689-3939  
E-mail: [resmatch@auanet.org](mailto:resmatch@auanet.org)

**Federal Services/Military Early Application and Match Systems:**

The U.S. Air Force, Army and Navy do not participate in the NRMP, but make their own appointments directly. Since the number of military appointments available is insufficient for the number of candidates applying, students must participate in the NRMP simultaneously to protect themselves. The military will announce their results in time for you to withdraw from the NRMP. Please contact the appropriate branch of the Armed Services to obtain information about application deadlines and procedures.

**Army:**

The Army will use the ERAS application system for all program applications. For further information and details about the application process, please visit <http://www.armymedicine.army.mil>.

**Navy:**

The Navy sends students information regarding the match during Year III. Students should make sure that the Navy has their current mailing address and e-mail information. The Navy will use the ERAS application system for all PGY I applications. For further information and details about the application process, please visit <http://www-nshs.med.navy.mil>

**Air Force:**

For applications and information, visit <http://www.afpc.randolph.af.mil>.

**Canadian Early Application and Match System (CaRMS):**

U.S. and Canadian students are permitted to participate in both matching programs. As the CaRMS match is run earlier, students participating in both programs **must agree to accept the Canadian program to which they are matched**. Their names will be automatically withdrawn from the NRMP Match if they match under the CaRMS. Those not matched by the CaRMS will remain in the NRMP Match. The CaRMS furnishes a listing of all dual participants to the NRMP for appropriate withdrawals. To contact the Canadian match:

Canadian Resident Matching Service  
2283 Saint Laurent Blvd., Suite 110  
Ottawa, Ontario,  
Canada K1G 5A2  
Tel.: (613) 237-0075  
(877)CARMS-42  
FAX: (613) 563-2860  
E-mail: [carmsmail@carms.ca](mailto:carmsmail@carms.ca)  
Website: <http://www.carms.ca>

**Couples/Partners Match:**

There is a system by which you can enter your match lists as part of a couple. This will insure a match in the same geographic area. Each partner enrolls individually in the Match and indicates in the NRMP system that they want to be in the Match as a part of a couple. The NRMP allows couples to form pairs of choices on their primary rank order lists. The couple will match to the most preferred pair of programs on the rank order lists where each partner has been offered a position. For details, check the NRMP website at: [www.nrmp.org](http://www.nrmp.org).

**Shared Residency:**

The NRMP has a mechanism whereby a pair of applicants who wish to share a single, full-time residency position may do so through the Match, subject to the approval of residency directors. Check in **F**ellowship and **R**esidency **E**lectronic **I**nteractive **D**atabase **A**ccess (FREIDA) to see if programs you like have shared residencies listed. You can also call programs directly; many programs don't list shared residencies but will help to accommodate interested students. For details, check the NRMP website at: [www.nrmp.org](http://www.nrmp.org).

## Timeline for Application

1. Research programs of interest and find out their requirements and deadlines (Spring of Junior year)
2. Have your photos taken by Illustrative Services (Spring of Junior year)
3. Receive your token via email from the OSA on or about July 1<sup>st</sup>
4. Register on MyERAS
5. Register for your Match
6. Create your Profile and MyERAS application
7. Write personal statements, request letters of recommendation, and authorize transmission of your USMLE and transcripts. Your goal should be to have everything uploaded into ERAS by October 1<sup>st</sup>.
  - a. Request USMLE transcripts online and Letters of Recommendation from attendings. Allow at least six (6) weeks for letters to reach OSA. It is your responsibility to make sure that the letters reach OSA before your program deadlines.
8. Select programs of interest
  - a. Sometime in August, you may begin selecting and applying to residency programs.
9. Assign documents to programs
  - a. Assign all documents (except MSPE, transcript and photo) to each individual program. (Do this as documents are available instead of waiting for everything to be in for a given program.)
10. Certify and submit your MyERAS application
  - a. Applicant Document Tracking System (ADTS): This is a function that allows you to track your supporting documents
11. Apply and pay for programs.
12. Check the status of your application.
13. Keep your profile current. Send any new information directly to programs (Step 2 scores, sub-internship grades/evaluations)

Check the Applicant Document Tracking System (ADTS) to follow your documents. If they have not been uploaded and you believe they were delivered to OSA, then check with Shawan Pearson [spearson@som.umaryland.edu](mailto:spearson@som.umaryland.edu) or 410-706-7476.

## Writing the MSPE

In **spring** of your third year, all rising seniors will be asked to schedule a meeting with one of the academic deans in OSA to review the residency application process. It is recommended that you schedule this appointment for **June, July or beginning of August**. **It is suggested that you make this appointment in a timely fashion if you prefer to meet with a particular dean as slots do fill.** The person you meet with will write your MSPE. However, Dr. Parker reads all letters and signs off on all the letters before they are uploaded to ERAS.

If you have not decided on a specialty, the meeting may serve to facilitate the decision making process. We can explore with you some of the things that may be important to you in a specialty, and recommend resources (people, websites, reading) to help with the decision making process. We will also review your senior year plans, discuss the process of obtaining letters of recommendation, and explain the function of the Medical Student Performance Evaluation (MSPE). You may also discuss the content and style of your personal statement and ask the MSPE writer to read a draft. We suggest asking a faculty member in your chosen specialty to review your personal statement as well. You will also receive instruction from OSA staff about the Electronic Residency Application Service (ERAS).

Please contact one of the deans listed below to schedule an appointment to discuss your MSPE. You will be asked to submit a draft curriculum vitae (CV) before scheduling this meeting. If you have questions about the format and/or content of your cv, please schedule an appointment with Dawn Roberts at 410-706-7689 or [droberts@som.umaryland.edu](mailto:droberts@som.umaryland.edu) and she will assist you.

Dr. Donna Parker	410-706-7476
Dr. Gina Perez-Madrinan	410-706-7476
Dr. Joseph Martinez	410-706-7476

**Medical Student Performance Evaluation (MSPE)** was formerly known as the "Dean's Letter" and is a summary and evaluation of your performance while in medical school. It is neither a letter of recommendation nor a self evaluation. Every medical school writes an MSPE for each graduating student. It is a required part of every residency application. The MSPE has a standardized format which allows us to describe your character as a person, summarize your academic career and highlight your best qualities. It includes in full the summative comments as they appear in clerkship evaluations. If there have been serious academic difficulties or disciplinary problems, we must explain them. The letter attempts to present an honest evaluation of your performance in medical school and your assets for residency application. Information directed toward your choice in a specialty is not incorporated in the MSPE, but rather in Letters of Recommendation from the clinical faculty of that specialty. MSPE's follow a basic format, but every attempt is made to personalize them as much as possible.

After meeting with you and reviewing all of the data, your chosen writer crafts the first draft of your MSPE. It is edited and signed by the Associate Dean for Student Affairs for consistency across all writers. Every student will be permitted to read the letter before it goes out and may return to review it one more time if any changes are required. Students may submit changes to correct factual errors, punctuation, etc. If you have questions or concerns about the narrative sections, these should be addressed directly with your letter writer. Any changes in content of the junior and senior evaluations must come directly from the clerkship directors and preceptors. We suggest that you read your clerkship evaluations as they come in and contact directors as soon as possible (and certainly within 6 weeks of receiving grades) to discuss issues with evaluation content. School policy states that evaluation revisions do not have to be considered after that time. The national release date for the MSPE is **November 1**. Our timetable has all drafts available for student review during the **first week of October** with final versions prepared by **mid-October**. With these time constraints, we will attempt to include evaluations from July and August rotations. If September evaluations are submitted in a very timely manner, we may be able to include them as well. Any crucial evaluations that do not make it into the letter may be hand carried to interviews or mailed/mailed to programs. Students elected into AOA and/or the Humanism Honor Society will automatically have this notation in their MSPE. Students who complete CAPP or Medical Spanish will automatically have this noted in their MSPE.

### Getting Advice

For those of you who signed up for a mentor, he/she is a good place to start. Hopefully they will be able to answer questions themselves and/or refer you to colleagues in your specialty of choice for more information. Any member of the faculty can help you to think about your career plans. Try to talk to as many people as possible to learn as much as possible about specialties of interest to you. You should talk to any and all faculty, residents and consultants during clerkships to learn as much as possible from them. Most specialties encourage you to meet with the Program Director in that residency for advice as well. This faculty member can be very helpful in reviewing your scholastic record and personal characteristics to assess your competitiveness for the chosen specialty and for specific programs. They can also give guidance on strategies to improve your application and recommend numbers and locations of programs for application based upon their assessment. They will usually like to have a copy of your personal statement, CV and transcript for review.

It may be beneficial to attend one of the Careers in Medicine Brown Bag Lunches on Fridays. You'll get the chance to hear an informal talk from physicians from a variety of disciplines, practice settings, and backgrounds. You'll also learn what their branch of medicine does, what the training for that field involves, and what a typical day in their life is like. You are also encouraged to shadow a physician in your fields of interest to better understand the field.

## Letters of Recommendation

A letter of recommendation is a letter you request recommending you to the programs of your choice. You will need several letters of recommendation for your application. You may save as many letters as you like in ERAS, but each program requests a specific number – usually **3** or **4**. Send only that number, no more, no less. Some programs request that one of the letters be from the Department Chair. Our departments know of this requirement and schedule appointments with students to craft a Chairman’s Letter. For the other letters, choose someone who knows you and your work and can write passionately about your candidacy. If there is an attending in the third year you had a great experience with, ask them if they would be comfortable writing you an LOR. Your LOR’s become an important reflection of your academic performance and serve as a source of information on your non-cognitive qualities. It is important to identify faculty members who are in a position to state your suitability for a career in that specialty. You will want to request a letter from a rotation in which you did well, one that relates to your chosen field and/or one that is specifically requested by the program. Some programs will put stock in letters from nationally known faculty, and our program directors should be able to alert you to that. When you identify a faculty member you think will write you a good letter, it is acceptable to ask if he/she would be willing to write a letter. Indicate that you will contact them again close to the time of application to confirm their ability to assist you.

When the time comes for you to request the written letter, set up meetings with the faculty you have chosen to refresh their memories about who you are and what you did. Send them a copy of your personal statement and CV.

### **Download the cover sheet from our website**

[http://medschool.umaryland.edu/osa/pdf/Cover\\_letter.pdf](http://medschool.umaryland.edu/osa/pdf/Cover_letter.pdf) .

**(the cover sheet gives instruction to the letter writer/faculty member, resident, etc.)**

**and give to the letter writer.** If you are able, we suggest setting a date to pick up the letter and hand carry to OSA to be scanned into your ERAS application. Request that the letter be given to you in a signed, sealed envelope. If you are going to be out of town, you may have the LOR mailed to the OSA. You might need to gently remind your letter writers several times of deadline constraints. To check if the letter has been received, you should go the Applicant Document Tracking System in MyERAS. Keep in mind that this system only works if you have selected and applied to your programs.

**OSA personnel cannot review these letters and make decisions/suggestions about which letter should or should not be used. OSA also cannot proof the letters for typos, grammar, etc.**

After the Match, consider sending thank you notes to your letter writers and ultimately let them know where you will be going for your residency.

## Transcripts

Every residency application requires a copy of your transcript. **It is a good idea to check SURFS to make sure that your transcript is up to date during the early stages of your application process and to perform a final review before it is scanned into ERAS.** Any grades listed as “NM” for “no mark” or “I” for incomplete should be addressed with the course director immediately because transcripts will not be updated once they are scanned. All grades received to date will have been placed on your transcripts. On the SURFS transcript the "I" stands for inclusion and "E" stands for exclusion of a course grade for GPA purposes. The Office of Student Affairs does not use the calculations indicated in SURFS to calculate GPAs. Although these codes show on the SURFS version of the transcript, the codes are not displayed on the official version of the transcript. OSA calculates GPAs by using a weighted system, and is used for in house purposes only. GPAs are not made public. If your GPA is requested for any reason, you should put n/a on the form.

We will have **2 transmittal dates** for transcripts. The first will be in the **first week of September**. You should choose this date if you have an **early match** or feel that having your transcripts in early will help you in a **competitive match**. The downside of the early transmittal is fewer grades on the official transcript.

The second transmittal date will be around **October 1<sup>st</sup>**. You should choose this date if you are waiting for **junior grades** for clerkships done late, additions of **Honors grades** to the junior clerkships or if you are waiting for **critical grades** from July and/or August senior rotations to appear on your transcript.

In either case, all grades that are in OSA before **mid-October** will appear in your MSPE and will thus be available to residency programs when those are transmitted on November 1<sup>st</sup>. Transcripts will be scanned once, so please take some time to consider which date would be best for you.

## Photos

Illustrative Services will be providing professional photographs of you for your use in the residency application process. Arrangements have been made with photography to have your photos taken in MSTF, Room 357. This should be done in the Spring of your junior year and no later than September 14<sup>th</sup>. The ERAS program will not allow the residency program to download your photograph until you are offered an interview. It is your decision as to whether you include one in your original application, but we strongly recommend it. Certainly, after you have been granted an interview you will want to supply the program with a photo. After all, you want them to remember you! Extra pictures are also handy for licensure applications, National Boards, Step II applications and other types of interviews. You may visit the Illustrative Services website at <http://ome.umaryland.edu/photo/photography.shtml> to check their pricing for photos or use any source that is convenient. We will use those photos to upload to ERAS. Please contact the Photography Department (410-706-7808) to set up a time to have your photo taken. Don't forget to inform them that you are a fourth year student requesting a digital photo for residency application. The photo should be a hard copy of a wallet/passport size (no larger than 2.5" x 3.5").

## Curriculum Vitae (CV)

We will request a CV from you in May of Junior year for our use during the MSPE process. Dawn Roberts at 410-706-7689 or [droberts@som.umaryland.edu](mailto:droberts@som.umaryland.edu) will collect these and will be available for consultation in their preparation. ERAS will request much of this data, but it will not be a straight upload of your CV. However, it will be great to have it completed and reviewed to use as a reference. This document should typically be 1-2 pages in length. However, if you have a previous career and a number of publications, it may be as long as it needs to be without unnecessary padding (to be described below). Within all sections, list items in reverse chronological order, i.e. most recent to most distant.

An academic CV differs from a commercial résumé in a number of ways: they are more conservative and fonts are of a standard type, such as this (Times New Roman) consistent size, normally 10 -12 point. You may want to occasionally use bold or italics for headings, etc., but don't overdo it. Avoid a glitzy appearance. The CV need not state a purpose, as the residency program will be well aware of that. In general, do not include paragraphs describing the nature of prior employment. It is not necessary to refer to letters of reference (e.g., "References available on request") since you will include them anyway with your application. Keep margins to one inch on all sides, and leave enough white space that the material is easily read.

After a heading containing your name (without degrees) address, phone, and e-mail address, there are a number of sections, generally ordered and named as follows: Education, Honors and Awards, sections describing Extracurricular Activities, including organizations and offices held, Prior Work Experience, etc. These would be named as appropriate to your experiences. Then list publications and presentations, and finally, any personal information you would like to add (e.g., hobbies, language skills, etc.).

For medical school, indicate that your degree is "expected (date of graduation)." All educational experiences and other activities should include inclusive dates. People look for holes in your life, and there should be no extended period of time unaccounted for. It is better to say that you worked at McDonald's for a year (and what's wrong with that?) than to have them wonder whether you were in jail. Include activities in which you participated before medical school, including your college years. Even certain pre-college achievements (e.g., high school valedictorian, Eagle Scout) may be relevant. Programs are likely to be interested in any evidence of organizational activity, athletics, leadership, community service, medically related activities (whether paid or volunteer), research (whether or not you published) and extended travel for any reason. If your activities were done under the auspices of an institution (e.g., your college) include that.

If you list publications, include complete bibliographies in an accepted journal style, including all authors with last names followed by first initials, year of publication, title, name of publication, and, as necessary, volume and pagination. Do not bold your own name. They will assume that you were one of co-authors, and they will find you. For this purpose, it is appropriate to list papers as "submitted for publication" if that is in fact the case, but any stage before that should not be included (e.g., "in preparation") as that may be seen as an empty promise.

## SAMPLE CV

---

Joan E. Student  
Current Rank, Department (if any)  
University of Maryland School of Medicine

July 25, 2008

65 Stone Pine Road  
Baltimore, MD 21201  
410-236-1234 (phone)  
410-455-1407 (fax)  
[joanstudent@school.maryland.edu](mailto:joanstudent@school.maryland.edu)  
Native French  
Fluent in Spanish

*\*Do not include personal information such as social security number or date of birth\**

### Education

- 1999-2003 University of Altoona  
B.S. in Biology, *magna cum laude*
- 2003-2007 University of West Kisouri  
M.S., Kisouri Cancer Institute  
Area of Study: Natural Sciences, Molecular Oncology  
*Thesis Topic: Processing Antigen and Expression of Growths of Melanocytic Origin*  
*Thesis Advisor: Dr. John Teacher*
- 2007-2011 University of Maryland School of Medicine,  
M.D. expected May, 2011.

### Post-Graduate Education and Training

- 2001-2002 University of Maryland Medical Center  
Baltimore, MD  
*Residency,*  
*Department of Radiation -Oncology I would use an example of residency training here since that is what most of our students will do next.*

### Certification

- 2000 - Present American Red Cross, CPR and AED certified
- 2001 National Registry of Emergency Medical Technicians  
Certified EMT-1/99

### Military Service

1990-1994 Lieutenant Colonel, United States  
25th Infantry Division, headquartered at Schofield Barracks, Hawaii

### Employment History

\*Paid positions

- 2000 - 2003 Martial Arts Center  
Bethesda, MD  
*Black Belt Instructor* – taught black belt to studying martial artists.
- 2001-2002 University of Maryland School of Medicine, Department of Obstetrics and Gynecology  
*Administrative Assistant* – Assisted with administrative duties in clinic.
- 2002-2003 University of Maryland School of Medicine, Department of Medicine  
*Research Training Fellow* - Investigated the role of an ATP-binding cassette (ABC)-transporter (ABCG4) in cholesterol transport using DNA/RNA isolation, southern/northern blots and RT-PCR.
- 2003-2004 University of Maryland School of Medicine  
*Teachers Assistant* – Department of Orthopaedics

### Professional Society Memberships

2003- Present Member, Maryland State Medical Society (Med Chi)

2006- Present Member, American Medical Association

### Honors and Awards

\*List only named scholarships. List why you received each honor, award or scholarship.

- 2005 Gamma Delta Phi Microbiology Honors Society, University of West  
Kisouri –For excellent academic performance in microbiology
- 2006 Scholarship, University of Maryland School of Medicine, Department  
of Orthopaedics-For exceptional performance in orthopaedics
- 2009 Humanism Award, University of Maryland School of Medicine - For  
professionalism
- 2009 Alpha Omega Alpha Honor Medical Society – For high academic  
standing, leadership & professionalism
- 2010 Phi Beta Kappa National Honor Society, University of Maryland  
School of Medicine – For exceptional academic performance

### Clinical Activities (if applicable)

\*\*Keep details brief and in lists instead of paragraphs of text

- 2002-2003 Clinical Intern, Psychology Department, Park Cancer Institute  
Philadelphia, PA

Spent 2, 6 month rotations  
Consultant and liaison in neuropsychology and inpatient psychology.  
Specific concentration on epilepsy, traumatic brain injury (TBI) and neuromuscular disease.  
Carried 6 long-term cases.

### Research Activities

2008-2009 National Institute of Geriatric Health Undergraduate Research Fellow  
Mentor: Douglas Teacher, M.D., Department of Psychology, University of Maryland Medical Center  
Collected data on the relationship between the age of a patient and attitudes toward health.

### Institutional Service

\*You can list a brief statement describing any outcomes or major accomplishments which you contributed to as a result of your affiliation.

2009-2010 Chair, American Medical Association Maryland, Student Chapter  
2009-2011 President, University of Maryland School of Medicine Student Council

### Service with Local and National Organizations

2000-2002 Convener, Gordan Conference, Baltimore, Maryland  
2001-2002 Examiner, American Board of Internal Medicine  
2001-2002 Primary Representative, The Association of American Medical Colleges (AAMC) Organization of Student Representatives  
2002-2005 Ad Hoc Reviewer, *Journal of Biological Chemistry*  
2003-2004 Member, Alcohol and Toxicology Study Section, NIH  
2004-2005 Editorial Board Member, *Journal of Neuroscience*  
2005-Present Member, Membership Committee, American Board of Physicians

### Extracurricular Activities

2007-2008 Treasurer, University of Maryland School of Medicine, Complementary Medicine Interest Group  
2009-2010 Member, University of Maryland School of Medicine International Medicine Interest Group

### Volunteer Experience

1999-2004 Participated in Race for the Cure in Baltimore, Maryland  
an event to raise awareness of breast cancer  
2003-2005 Tutored high school students in science and math, Frederick High School  
2004-2009 Assisted freshman and sophomore college students with biology and chemistry at the University of Maryland College Park

Hobbies and Interests -Arctic travel, tenor saxophone, basket weaving

### Teaching Service

\*Unpaid only-paid should be listed under employment

- 2003-2004 Teaching Assistant for University of West Missouri  
Cardiovascular Physiology  
Integrative Physiology Course (MPHY501.601) teaching undergraduate students.  
50, 1st year undergraduate students - 3 contact hours/wk
- 2009 Second Summer Education Program Teaching Scholar for July 2009 in Immunology and Cardiovascular pathophysiology for the University of Maryland School of Medicine

### Grant Support

#### Active Grants

9/7/07- Present (Sub-Investigator, 20%)  
Symphony of Knowledge Education  
Funding Source: Robert Jacob Money Foundation  
Principal Investigator: James Doe Science  
Amount of Grant: \$26,546

#### Pending Grants

#### Completed Grants

06/01/08 - 06/15/09 (Co-Principle Investigator, 10%)  
"Effects of Aspirin on Hypertension"  
NIH/NIA R01 AB12345  
Principle Investigator: Jane Doe Science  
Annual Direct Costs: \$100,000  
Total Direct Costs: \$500,000

### Patents, Inventions and Copyrights

\*Only include patents that have received a number

Publications Our students have a lot of poster presentations. Where would those go, and what is the format?

\*Publications should be numbered within each section, single spaced and in chronological order

Comment [D1]: They are listed under 'proffered communication'

#### Peer-reviewed journal articles

1. Wang, B.B., **Student, J.** (2004). Critical Structural Motif for the Inhibition of Catalytic Topoisomerase. *Journal of American Chemistry*. 14, 3221-3226.

#### Non-peer-reviewed journal articles

1. **Student, J.** (2008). Crisis decision theory: Decisions in the face of negative events. *Psychological Bulletin*, 134(1), 61-76.

Web based journal articles is there a special format for these?

1. **Student, J.E.** (2003, June). "Placebo" versus "meaning": The case for a change in our use of medication. *Prevention & Treatment*, 6(1). doi:10.1037/1522-3736.6.1.67c

#### Books

1. **Student, J.E.**, C. W. Doe, and L.E. Gates. *A Look Ahead: Biology in the 21<sup>st</sup> Century*. Baltimore, MD: Washington UP, 2002.
2. Darling, C.W., **J.E. Student**, and L.B. Gates. *A History of Used Chemistry Books in Cambridge, England*. Cambridge, Eng.: Cambridge UP, 2008.

#### Book Chapters

1. **Student, Joan E.** Chapter 3. *The Science of Diminished Capacity: Selected Works, 1972-2000*. By Charles Darling. Hartford: Capital Press, 2003. ii-ix.

#### Abstracts and/or Proceedings

1. Ritvo P, **Student J**, Matthew A. Chemical-based intervention is associated with better psychological status in stem cell transplant patients. *Psychosomatic Medicine*, 2001; 63: 101

#### Other Brief Communications

1. **Student, Joan**. Interview. *Seniors: What Keeps Us Going*. With Linda Lazaris. Natl. Public Radio. WNYC. New York. 11 July 2003.

#### Published Multimedia

1. *Creation vs. Evolution: "The Scientific Battle."* DVD. Dir. **Joan E. Student**, PBS Video, 2009. (MLA) 58 min.

#### Major Invited Speeches

1. **Student, Joan**. "The Decadence: The Year 2000." Humanities Division Lecture Series. Kisoroi Community College, Hartford. 12 Dec. 2001.  
Johnson, Biff G. Keynote speech. Scientific Conf. on Living Sports Medicine. Kisoroi Auditorium, Hartford. 12 May 2003.

#### Proffered Communications

\*Oral or poster presentations

1. Clark, J. **Student, J.** 2002. Notes on the pollination ecology of two Maryland thistles. Baltimore Academy of Sciences, 61st Annual Meeting.

## Personal Statement

Talk with the program director in the specialty in which you are applying and ask them what they look for in a personal statement. If you are applying for a preliminary year and a residency, you will need only one personal statement, focused on the residency specialty.

The primary issue is why you want to go into that field. That should go pretty close to the beginning of the statement. The readers are busy, and if that's what they want to know you have to make that accessible to them. You can write about other things after that. A suggested structure might be:

- (1) Why you chose this field.
- (2) Why you think you will be good at it. This might include any biographical history you might like to include, plus any mitigating circumstances in your qualifications. Avoid being too defensive, though. Some things of that nature might be best explained in your MSPE if you wish.
- (3) Some projection into your future, of both a professional and personal nature, if you wish. You may not want to be too specific about sub-specialty aspirations, though. People like to see an open mind.

Keep it to less than one page single spaced. One inch margins all around, spaces between paragraphs, indent paragraphs, standard font (e.g., Times New Roman) 10-12 point. You don't want it to look too cluttered. Poignant stories are nice, but basically keep it short and to the point.

Have a number of people read your statement to get their reactions, especially faculty members in the type of program to which you are applying. Also, people who know you well, on whom you can count for honest feedback, and who can make any necessary corrections in syntax and grammar.

If you are deciding between two or more specialties, it is sometimes helpful to write a personal statement for each. If you can't see the real differences among them, others who read your statements may be able to tell you where the passion is.

## APPLICATION PROCESS

Register for the Match:

“San Francisco” Match registration information is at [www.sfmarch.org](http://www.sfmarch.org). All students registering for that Early Match should also register for the “Regular” match.

Urology Match registration information is at [www.aunet.org](http://www.aunet.org). All students registering for the Urology Match should also register for the “Regular” match.

Military Match information is at the websites listed previously. All students registering for the Military Match should also register for the “Regular” match.

The “Regular” Match is run by the National Resident Matching Program in Washington, D.C., better known as the **NRMP**. All students seeking an internship and/or residency must register. To register for the “Regular” match, students must complete a web-based Student Agreement Form found at [www.nrmp.org](http://www.nrmp.org). Click on the Match Site button at the top of their page, then on “Register for the NRMP Matches” link and follow instructions. You may withdraw from the match until **mid-February**. Completing the match application form creates a contract binding you to one year of service in the program(s) to which you are matched.

Identify Programs:

To find out where you want to apply, search the web or write directly to hospital programs for information and applications. Use postcards. Names and addresses of program directors are found on the web at [www.ama-assn.org/go/freida](http://www.ama-assn.org/go/freida). **FREIDA** (Fellowship and Residency Electronic Interactive Database Access) is an online database with information about salaries, benefits, call schedules and the like. Some hospitals have provided more information than others, but we encourage everyone to review the program. FREIDA is sometimes out of date, so it’s a good idea to double check information you get from FREIDA. One source is on the web at [www.CareerMD.com](http://www.CareerMD.com). This is an online database that provides current and accurate information on every residency in the country, daily updated and maintained by program directors themselves. Also, on the web at [www.aamc.org/careersinmedicine](http://www.aamc.org/careersinmedicine) you may logon and go to the Specialty Pages section from main Profile page. The Graduate Medical Education Directory (the “Green Book”) is available for purchase online at [www.ama-assn.org/go/meded](http://www.ama-assn.org/go/meded), and we also have copies in OSA. It has information about residency programs including numbers of positions per program and contact name and address information.

### Apply to Programs:

Apply to programs that are of interest to you. Discuss your choices with the program director in that specialty, OSA faculty and other appropriate faculty to develop the best list of programs possible. For most residencies, it is reasonable to examine perhaps to **20** programs at first. You should apply to as many programs as needed to insure that you end up with **at least 7** programs on your rank order list. Not all programs will invite you for an interview, so monitor your applications and apply to more programs if necessary.

**More competitive residencies may require applications to more programs and ranking of more programs.**

### Go on Interviews:

After reviewing your applications, interested programs will invite you to interview. There is no better way to evaluate a program than by visiting and talking with residents and faculty. This can be expensive, so discrimination should be used in selecting the hospitals you visit. Explore super saver air fares early to maximize savings. Interview schedules vary greatly between hospitals and specialties. Generally, the “early matches” interview in **October and November**, and all other “regular match” specialties interview **November through January**. You should try to plan a month off and/or an elective during popular interview months. Confirm your interview **two weeks** in advance. Plan your interview time wisely. If you decide not to interview at a program you have already accepted, please contact the program director and cancel as soon as possible. If you find it necessary to interview during an elective or other rotation, you must have permission from your attending before leaving. Not every program is able to interview every student. If you are especially interested in a program that has not offered you an interview, it is a good idea to find out if their refusal to interview you is based on an incomplete file.

Appropriate dress is an essential part of any interview. We suggest dressing in a professional and neat manner. Hair should be well groomed, and body jewelry of any kind kept to a minimum. Clothing should be clean, pressed and in good repair. Gentlemen should consider a two piece suit. The suit need not be expensive, but should be well cut and tailored. If you do not have a suit, wear a sport coat and coordinating slacks. Be sure shoes are polished, and wear dark dress socks. Wear a conservative tie. Ladies should consider a two piece suit with a simple blouse that is not too revealing or a well-tailored dress. Choose low-heeled pumps as you may be doing a bit of walking.

Review material obtained about the program the night before interviewing. On interview day, have with you copies of your CV, personal statement, application, board scores, transcript and an extra picture. Most programs will not ask for an additional copy of your documents; however it does not hurt to have them with you just in case. You may also bring transcripts with updated grades and evaluations from key rotations that came in after your MSPE was prepared. Bring a note pad or portfolio and a good pen. This will be helpful to write impressions immediately after the interview because much of what you hear will quickly be forgotten. Don't forget a little money (parking, food, etc.).

Evaluate Programs:

While you are at each program, consider:

1. What is the quality of the residents and the variety of their backgrounds? The commitment, esprit and competence of the residents reflect the quality of the training program.
2. What is the Board pass rate for the residents?
3. What do the residents do at the completion of their training? Fellowship and/or job placement?
4. How committed are the program director and the department chair to the residency program?
5. Are there sufficient mentors and advisors for the residents?
6. Most good training programs have students as part of the ward team. How committed are the residents to teaching students? What is the quality of the student group? How much of your time would you actually have for teaching?
7. What is the quantity and quality of research? How much teaching do investigators do? Are research opportunities available to clinical housestaff?
8. Try to look at a weekly schedule of rounds, conferences and teaching sessions. Determine their quality and variety. Do the residents tell you that they are able to attend the conferences?
9. What is the rotation schedule and call schedule like?
10. What is the quality of the radiology and pathology departments and the clinical labs?
11. What are the breadth and depth of specialty consultative services?
12. What is the direct patient responsibility of the residents? What are the volume of patients seen and the mix of patients?

You may consider second visits to programs of particular interest to further clarify important aspects for you. These visits will usually occur in **late January**. Remember that the most important determinant of the type of program you seek is your own interest. The search for an internship reflects your individual needs. Network with our graduates about their experiences with interviewing at different programs and during residency.

Many students send thank you notes to programs, so write down the interviewers' names and the names of the residents who took you to lunch/dinner, etc. for thank you notes later. It is also very thoughtful to thank the program coordinator/secretary. Whether to write and what to write is up to you, but we suggest that you do as it has become fairly routine. Some programs, against the rules of the match, try to coerce students to divulge their first choice. Since you want to leave all options open until the very end of the application process, a good non-committal reply might be: "You are one of my top choices." Feel free to call OSA if pressure from a program becomes a problem. You may also receive letters from programs after your interviews expressing their strong interest in you. You may even receive verbal assurances from the program director that he or she is going to rank you highly. This is a recruiting method. It leads to great harm if it gives you unrealistic expectations or encourages you to limit the list of places that you either rank or interview. Do not let such promises encourage you to limit the programs you rank.

If there is someplace you have interviewed and subsequently have decided that you definitely do not want to go, do not enter that program on your rank order list. If you would happen to Match there, you would be obligated by contract with the National Residency Matching Program to go.

### *Final Steps in the Match*

#### **Early Matches:**

If you are applying in the early matches, check the relevant web sites or match systems to find out about match systems and time lines.

#### **NRMP Matches:**

The process of entering a match list takes place from **late January through mid-February**. This will be done on the NRMP Webpage [www.nrmp.aamc.org](http://www.nrmp.aamc.org).

In **mid-January**, you will receive instructions needed to complete your Rank Order List (ROL). This is a list of all programs you want to go to if you Match. The list is entered in descending order, with your **top choice listed first**. Programs also submit Rank Order Lists to the NRMP. The NRMP uses a special algorithm to evaluate both lists and determine the Match. The matching algorithm uses a Rank Order List submitted by applicants and another submitted by residency programs to match applicants with programs. The algorithm is “applicant proposing,” which means it initially attempts to place each applicant into the position the applicant prefers most, according to the applicant’s Rank Order List. The process continues trying to place the applicant into a position in order of the applicant’s preference until the applicant is matched or until the applicant’s list of preferences is exhausted. The NRMP has an online handbook describing the process in detail.

The average number of Matched applicants ranked an average of seven (7) programs. The average number of Unmatched applicants ranked an average of five (5) programs. Please keep this in mind when you are filling out your ROL. The more places you rank the better chance you have of matching. However, do not rank a program that you definitely do not want to go to as you will be obligated.

If you really want to go to a specific program, list it first. That program may not get its top ten choices, and you might be number eleven. Don’t overestimate yourself. No matter how sure you are that you will Match at your top choice, list additional programs. You cannot be penalized for listing additional programs. Those applicants who only list one or two programs are much more likely not to Match.

**Categorical (C) programs:**

These programs provide full training and lead to eligibility for Board certification when completed. These programs include the first or internship training year.

**Advanced Specialty (S) programs:**

These programs begin in the second or third postgraduate year (i.e., don't include the internship year), and in combination with the appropriate preliminary program, lead to eligibility for Board certification. They require either 1 or 2 years of preliminary (internship) training in general surgery, medicine, pediatrics or a transitional program (see below). Check your specialty for specific requirements.

**Preliminary track (P) programs:**

These programs provide one year (and in some cases, two) of training in a single specialty such as general surgery, medicine or pediatrics.

**Transitional programs:**

These programs are a type of one-year preliminary (P) program. They differ from a preliminary year in medicine, surgery or pediatrics because they provide training in multiple specialties over the course of the year.

## Scrambling:

### **PREFACE**

Learning that you have not matched into your chosen specialty is one of the most stressful events of medical school. Students sometimes feel angry, frustrated, or that they are a failure. These are all normal feelings. However, there are multiple reasons for not matching: Some specialties are so competitive that even good students are routinely unable to obtain spots; students may have been limited by geographic or family reasons; students may not have applied to a sufficient number of programs or gone on enough interviews; and some students simply have unrealistic expectations given their academic history. The good news is that the majority of students who scramble are able to obtain a spot for the next year. This may not always be in their chosen specialty: it may be necessary to perform a preliminary or transitional year, then reapply. Some students will choose to take a year off to do research and strengthen their application.

On Monday morning of Match Week, the Office of Student Affairs will be notified of the names of their unmatched students. Monday at noon, applicants will be able to find out if they are matched or unmatched via the web or via the NRMP Voice Response System (with NRMP code and PIN numbers). If you are unmatched, contact the OSA immediately.

The Office of Student Affairs is here to help guide you through this stressful time. We can assist in sorting out why you did not match, estimate your chances of scrambling into a spot in that residency, or assist you in making alternative plans. What follows is a rough roadmap of the process. We will be with you to help, and wish you all of the best.

## Monday of Match Week

- Review your MSPE - you may be able to add in new evaluations.
- E-mail your ERAS application to OSA: this will be converted to a PDF file along with your letters of recommendation, MSPE, and personal statement. This can then be e-mailed by OSA to programs that do not accept ERAS during the scramble.
- Some program directors will want to meet with you this afternoon rather than Tuesday morning.
- Discuss your scramble strategy with one of the deans in OSA: you should have a main strategy (which could be attempting to scramble into your initial specialty) and a back-up strategy (which may be a preliminary year, a different specialty, or a year off to do research, etc).
- Review the “Regional Statistics by Specialty.” You won’t know the actual programs with unfilled spots until Tuesday, but this list gives the total number of unfilled spots in each specialty in each region (Western, Central, Southern, Northeastern) of the country. This gives you an idea of how difficult it will be to obtain a residency position in the specialty of your choice.
- If you have an advisor in your specialty, or are friendly with the chair or program director, let them know that you did not match, ask for their advice, and confirm their availability for scramble day.

## Tuesday of Match Week – “Scramble Day”

Meet with OSA staff at \_\_\_ AM in room \_\_\_\_ . You may bring your significant other, or anyone else that could offer advice or support.

At 11:30 AM, the “List of Unfilled Programs” is released. OSA will Xerox this list and provide each student with a copy. The list shows what programs in each residency are unfilled, how many spots they have available, and how they wish to be contacted (ERAS, e-mail, fax, phone). This list is updated hourly on the NRMP website, though it is up to the individual program to notify NRMP when they have filled a spot.

Take your list to the person that your chosen specialty has designated to help you. This may be the chair, program director, other faculty member, or administrative assistant. OSA will have a list of contacts. If the program is not providing anyone to assist you, OSA will be your contact person.

You may not contact programs before 12 noon – **THIS IS A MATCH VIOLATION AND CARRIES SIGNIFICANT CONSEQUENCES.**

At noon, contact the programs you are interested in, by the manner they have designated. If they want applications faxed or e-mailed, OSA will send the PDF file that was created on Monday. You cannot e-mail these packets yourself because they contain letters of recommendation which you have waived your rights to review.

Most of the faculty contacts here will prefer the student to initiate the contact with programs. Then, if the program wishes to speak with a faculty member, they will take the phone. Some faculty may choose to actually make the calls themselves.

Each program you contact will be different: some will only tell you to send your application for their review, while other program directors will actually get on the phone and conduct a “mini-interview” which may or may not be followed by a verbal offer. More often than not in this day of electronic applications, programs will take some time to review the applications and make offers to the person that they perceive is the best candidate. This is especially true for a competitive specialty with only 1 spot to fill. A less competitive specialty with numerous spots to fill will be more likely to offer positions over the phone to the first people that show interest.

If an offer is made over the phone, it is OK to ask the program if they are willing to hold that spot for you for a short time. If they are NOT willing to do that, you may need to make a decision immediately or risk losing the spot. Verbal offers will be

followed by faxed contracts that must be signed and returned. **THIS IS A LEGAL DOCUMENT AND REPRESENTS A ONE-YEAR COMMITMENT TO THAT PROGRAM. RENEGING ON THIS CONSTITUTES A MATCH VIOLATION.** It is also immoral to verbally accept an offer and then continue to pursue other offers, even if you haven't yet signed the contract.

□ If you accept a position, let OSA know so that they can make up an envelope for Match Day.

### **Wednesday of Match Week**

-Scramble continues as necessary

### **Thursday of Match Week - Match Day!**

- If you have successfully scrambled into a spot, an envelope will be ready for you just like the rest of your classmates. Please note, this entire process is confidential – your classmates need not know that you scrambled unless you choose to tell them.
- Relax, and enjoy the day – you've earned it!

## *Important Dates and Deadlines*

Spring of junior year	Get info on residency programs of interest
June/July/August	Meet with OSA dean regarding MSPE
July 1 <sup>st</sup>	Tokens available
	Register with ERAS and your match
August	Begin applying to specific programs
	Gather documents
	Write personal statement
	Have photo for ERAS completed
Mid September	Review transcripts and report discrepancies
October 1 <sup>st</sup>	Have all documents uploaded into ERAS
Early October	Review MSPE for errors
November 1 <sup>st</sup>	MSPE's released to programs
November – January	Interview
Late January	Second look visits
February	Submit match list
March	Scramble and Match