

Five Lessons Learned during Residency and Fellowship Interviews

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As the interview season in the medical community comes and goes, medical students and residents alike travel throughout the country to make their case for a coveted spot in a field of choice, be it within residency or fellowship programs. For the uninitiated, it is a unique process to say the least. In a competitive field such as orthopaedics, applicants often interview at a dozen or more training programs. The cost of travel is almost exclusively upon the applicant, including lodging and transportation within each city. It can be a time consuming, expensive experience.

Nearing the end of my fourth residency year, I have essentially completed my interview schedule. The process of coordinating, traveling, and interviewing during clinical rotations can be stressful. Yet thanks to this challenging experience, I learned five undervalued and priceless lessons.

Allow your opinion to form. When I traveled the country twice to evaluate programs, I did not know what I truly wanted. And that is okay. Sure, you may know of some good places to live or that you definitely do not want to travel to different hospitals while training. But you almost certainly will not have a completed checklist before the interview. Part of the process, painful as it may be, is to discover what you want. Each interview yields various reactions to certain elements. Some programs that I did not like were useful in helping decide what I *did not* want in my education.

Visit with current trainees. All directors believe that they own the best program in the country and will capitalize on the greatness of the associated curriculum, instructors, and community. But program directors are not residents or fellows. Ask these students about their happiness, fun at work, and liked or disliked aspects of the training. Residents and fellows will often be very honest and present a perfect look into life on the front lines. The pre-interview dinners are usually an excellent time to gather information.

Be your best advocate. The application process prohibits collusion. Do not believe anything said about how to be accepted at programs. The stress is not worth your energy. However, nothing prevents you from letting a program director of your interest. This can be expressed in your interview or an email once you make your decision. Program directors want people who want to be there. They will not know unless you tell them.

Find the perfect fit. It is okay to be greedy during the process of selection. Search for a place where you can truly be happy. Residency is difficult enough without working alongside challenging personalities or in a city that you do not like. Each program is not for everyone.

Blind yourself to names. This lesson is the most challenging to learn, I think. Do people in the real world care if you trained at Famous Hospital X? A little, and mostly in the academic community. If this career path is your goal, then the name of the program may be worth considering. But also consider this—as of 2014, only 13.5% of orthopaedic surgeons practice in an academic setting.¹ Furthermore, the prestige of your training program only matters until someone meets you or sees your work. I would strongly advise you to pick a program that suits your needs, instead of choosing one that you can simply tolerate but employs someone famous. Orthopaedic surgery, and probably every other medical specialty, is no different at Famous Hospital X than Community Hospital Y. I have been to both. The educational resources are mandated by the Accreditation Council for Graduate Medical Education and will not differ dramatically among programs.

I used these five principles to help select my residency program, and I have never regretted it. I am confident that each will aid my selection process for a fellowship as well. That is, forming an opinion throughout the experience; exchanging a word or two with actual students of the program; taking initiative in expressing your interest to the director; compromising your desires only to a certain extent; and understanding that a name means little compared to reality can effectively guide the applicant to the best program *for the applicant*. The Match is a daunting time for anyone. I hope that the lessons I have learned will help future students in considering programs to further their medical education.

Reference

1. AAOS Department of Research and Scientific Affairs. Orthopaedic Practice in the US 2014. American Academy of Orthopaedic Surgeons. Published January 2015. <http://www.aaos.org/2014OPUS/>. Accessed 28 March 2016.