

INTERVIEWING GUIDELINES, TIPS, AND TECHNIQUES – PART I

Possibly the most important bit of advice to offer regarding the interview is “Be Yourself.” Remember that while you are being evaluated you also are evaluating the program — it’s called the “Match” because not only does the program select you, but more importantly, you select the program.

Make sure you're not rushed the day of the interview. If possible, try to arrive the night before to get a good night's sleep and allow for possible airline delays or missed connections.

Consult the residency coordinator for assistance, since many programs may have arrangements for discounted rates at local hotels, and some may offer lodging with residents or students.

While some interviews may be scheduled prior to the release of the MSPE , most will occur during the months of November, December, and January; **however, for competitive specialties and competitive programs, it is important to have all other application-related information in the hands of programs well before November 1. Decisions regarding who will be invited for interviews may be dependent upon early review of your dossier.**

The first step to successful interviewing is preparation. If possible, ask in advance about the interview format and whether there are any materials that you need to make available beyond the ERAS submissions.

Approach the residency interview process from several perspectives.

1) What is the value of the interview to my decision making? What can you gain from your visit to a residency program?

You can clarify factual information from brochures, web sites, or talking with advisors. Prior to your visit, review those areas you need more information.

Try to assess how you will “fit in.” This information probably is best acquired by discussions with residents. It’s essential that you have some personal time with current residents in the program. During your discussions with residents, look for a balanced assessment of their program and experiences. Most residents should neither appear completely ecstatic about the program, nor turned off by the experience. Some griping about incidents and day-to-day problems or frustrations is universal. More troublesome would be the perception of deep-seated discontent or dissatisfaction with the program.

Details about levels of resident responsibility, autonomy, faculty support and supervision, as well as nurturing by the program should be obtained from house staff. How do they feel about the future? Does the environment suggest camaraderie, esprit de corps, cut-throat competition, mutual support, or isolation among the residents? What have been some of the “best” experiences or rotations in the program, and why, and what have been the “worst” experiences or rotations in the program, and why? Where problems have

been encountered (and they exist in all programs), do residents perceive that the administration is aware and committed to improvement? What is the quality of residents' didactics/supervision by faculty?

Call schedules, salaries, benefits, etc. should have been mentioned in published data. If not, these can be clarified during your visit. Although they are important items, inquiry must be handled carefully in order to avoid leaving a perception that you are overly materialistic. If you must ask questions regarding salary, you should not do so until the conclusion of your interview, after you have had time to build rapport with the interviewers and after they have had ample opportunity to initiate discussion over these areas themselves.

What will it be like to live here? This can be especially important if you consider moving to a very different part of the country. The residents with whom you meet can provide valuable information. If there is some down time during your day, this also can be information which you may be able to discuss with the administrative staff. What's their take on the community? What do people do in their off time? What's the social life of a resident in their program like? Administrative staff may have some uniquely valuable perspectives to share.

2) What does a program want to gain from the interview?

Although each interviewer will have his or her own perspective, the major purpose of the interview is to assess what you are like as an individual and how you might fit into the program. For most disciplines, the era of using the interview to assess knowledge, problem-solving skills and clinical ability, for the most part, is over. By the time you come for the interview, most programs have a pretty good dossier of information from your transcript, USMLE scores, MSPE, and LORs. The interview then can be used to provide reassurance that you appear as you are advertised.

Clinical medicine requires dedication, some sacrifice, and hard work. Do you seem to possess these qualities? Do you appear self-motivated? Some of these characteristics should have been described in your letters, but also can be brought out during the interview. The program, too, wants to try to assess how you will fit in with their current complement of residents. Will the stature of the program be enhanced if you are brought on board?

3) What can you do to make the best impression?

- Appear interested, not distracted, bored or depressed.
- Maintain reasonable eye contact during the interview.
- Dress professionally. Remember, most faculty have conservative and somewhat traditional views of physicians. Some students believe that you should wear a dark suit with a white shirt, while others believe that you will merely blend in with all the other applicants in this dress. Just don't get carried away if you want to

dress in a more memorable way.

- Confirm your interview date and time with the program one week prior to the interview date.
- Be punctual. If you are not sure of the layout of the campus, go early or call in advance and get directions. Give yourself at least a 30-minute cushion to account for unexpected traffic, trouble finding a parking spot, locating the office, etc. If you are unavoidably detained, call and notify the program. Common courtesy always leaves a good impression. (Make sure you are always carrying the name and phone number of your contact person in the program.)
- Recognize that it is natural to be somewhat nervous. Experience will make successive interviews easier. Relax and enjoy the opportunity to find out about programs (you are the buyer), and to let them find out about you.
- Try to learn the names and positions of the people with whom you will be visiting. Many programs will provide an agenda for the day's event, ideally with such information included. If it's not clear with whom you will be meeting, ask one of the staff people. Make sure you at least know the name of the department Chairman and Program Director.
- Sign up for a frequent flyer program if you're not already a member. By the end of your interviews, you may have earned yourself a free trip, or you may be able to pay for the airfare for your final interview with the earned miles. (Sometimes the American Medical Student Association [AMSA] helps with travel discounts or loans for medical students on the interview trail. Look for this information as you begin to make travel arrangements.)
- Wear a suit on the airplane. That way if your luggage is lost, you will still have a suit to wear to your interview.
- Carry your paperwork (extra copies of CV's, transcripts, etc.) with you on the plane; do not check them.

INTERVIEWING GUIDELINES, TIPS, AND TECHNIQUES – PART II

Be prepared for questions: The list of possible questions you may be asked is infinite and you may be able to anticipate many. Here are some you may want to be prepared to address.

- Why do you want to go into _____?
- How did you become interested in (or learn about) our program?
- What are you looking for in a program?
- Where do you see yourself in 5-10 years? What are your future plans?
- Tell me about yourself.
- Where else have you applied?
- What are your strengths and weaknesses? (You should never say that you have no weaknesses. Whichever weakness you elect to disclose to the interviewer(s), put a spin on it to make it positive. Talk about how you have worked to overcome deficiencies.)
- What do you do with your spare time?
- Tell me about your research.
- Why should we take you over other candidates?
- What are your plans if you don't match?
- How would you handle an incompetent colleague?
- Tell me about your most interesting case.
- What has been your biggest challenge in medical school? (Descriptions of how one has handled and overcome difficulties can provide information about one's character.)
- Anticipate questions about highly visible current events, especially those related to medicine.
- What do you think will be the most/least enjoyable aspect of this specialty?
- What qualities do you respect in a mentor?
- Who is your hero?
- With which patients do you have trouble dealing?
- What are the major deficiencies in your medical school training? (Hey, you're from OU, so there must have been none.)
- What do you think the future holds for medicine? For this specialty?
- What error(s) have you made in patient care?
- How have you been employed, and what have you learned from such jobs?
- What are your professional / personal goals?

INTERVIEWING GUIDELINES, TIPS, AND TECHNIQUES – PART III

It's also a good idea to come to the interview armed with some questions of your own.

- Where do graduates of this residency go (Both geographically and types of jobs)?
- What programmatic changes have been made in recent years?
- Are any substantial changes anticipated in the near future?
- What are some of the major research interests within this department?
- What are the major strengths and weaknesses of this program? (This is an appropriate question, but be careful. It might be better to ask “What are the biggest challenges facing the program?” or “What are your strategic plans for the program over the next few years?”)
- How much time is spent in lectures, seminars, and other didactic sessions?
- How do your graduates do on the specialty board exam?
- How do you like living in _____?
- What percent of the residents go on to fellowships?
- Do residents have any difficulty landing the fellowship (or post-residency job) of their choice?

And maybe some questions to address to residents (many of the above are appropriate).

- How satisfied are you with your decision to do your residency here?
- How do you assess the commitment of the Department/Program to education?
- What is the structure of the formal educational program (seminars, conferences, etc.)?
- Are residents given protected time from clinical duties for educational activities?
- What is the most frustrating part of your residency?
- How much “scut work” do you do?
- What is the best part of your residency?
- Do you operate with an attending on every case?
- How is call? How much call is there? Do you have good support from “above”?
- Does an outside attending directly admit? Or are most patients seen in the ER first?
- How is the cost of living in _____?
- What is the nature of elective opportunities? Are “away” electives available?
- What is the proportion of inpatient to outpatient experiences?
- Do the fellows run the service?

- Are there any call-free months?
- Describe the average workload.
- How are weekends covered? Any “golden weekends?”
- How has the program coped with the 80 hour work week and day off stipulations of the Accreditation Council for Graduate Medical Education?
- What is the working relationship with the faculty?
- How much responsibility / autonomy are you given?

INTERVIEWING GUIDELINES, TIPS, AND TECHNIQUES – PART IV

Make sure you discuss the SCM's Community Medicine focus and your Bedlam L experience.

- Discuss your experience working at Bedlam E and especially Bedlam L. Talk about what you learned working with your patient panel and how it has better prepared you to be a resident.
- Be prepared to talk about the mission and focus of the School of Community Medicine.
 - This involves the positives of our school such as understanding how our community can affect our health outcomes, overcoming barriers to care,
 - Also, be prepared for the misconception of the SCM being a primary care school. If you are applying to a residency other than primary care mention topics/issues you've learned that will make you a better resident because of the Community Medicine knowledge you've gained.

After the Interview:

A short time after you complete your visit to a program, and while your impressions are still fresh, make some notes about the strengths and weaknesses you perceived. If some facet of the visit was particularly powerful, make sure you annotate this as well. Consider sending a personalized "Thank You" letter to the main players you encountered during the visit. Reflect positively on the features that you found most appealing about the program and your assessment about how you think you would fit in. You should not make statements that "I plan to rank your program Number 1."

Enjoy the process of seeing and evaluating new and different environments.