

The Latecomers' Applicant Guide for Emergency Medicine Residency

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This guide is intended to be used by medical students who have decided to apply to Emergency Medicine residency "later" than some of their peers.



General Overview and Definitions

Some students enter medical school already knowing which specialty they want to pursue. Many other students enter undecided and utilize their time in clinical rotations to help them determine what residency and career is the best fit. The field of emergency medicine (EM) is often defined as an advanced rotation in medical school, meaning that it can not be completed until the fourth year or until other prerequisite rotations such as medicine or surgery are already completed. It is possible that after completing the EM rotation, students who were previously undecided on speciality may now wish to pursue a career in EM or students who had previously been on track to apply into another speciality may want to change course and apply into EM. The student who chooses to enter EM in the latter clinical years, such as late 3rd year or early 4th year, are defined as "latecomers" to the field and these students may face some unique challenges.

A second population of "latecomers" are those who discover EM after the application season. This can be students who applied in something else but did not match and now are interested in EM or physicians who matched into a different specialty but now want to switch into EM. These applicants face similar hurdles to those of other latercomers as well as those faced by the "re-applicant" and they should review the Re-Applicant Applying Guide as well.

Challenges that Latecomer Students May Face

Before you read about the specific recommendations for latecomer students, it is helpful to understand the nuances of applying to Emergency Medicine. Please reference the EMRA and CORD Advising Guide for general application advice.

Obtaining an Away Rotation and SLOEs:

One of the major hurdles that a latecomer student must overcome is obtaining an away rotation. This was identified by EM advisors in a survey of CORD members¹ as the single biggest obstacle for latecomer students. A visiting subinternship at an outside institution with an associated SLOE (standardized letter of evaluation) has become an expectation for an EM bound applicant. Additionally, the timeline for the rotation to be completed is quite short as the SLOE is ideally uploaded to ERAS when the Electronic Residency Application Service (ERAS) opens and application review begins. Many of these visiting rotation opportunities will fill with students in the spring or early summer



leading to a paucity of available spots for a latecomer student. There is also a subset of students who commit to more than one visiting rotation, limiting spots for students who decide later in medical school to enter the field of EM. While expectations for the number of SLOEs has changed in recent years, most strive to obtain 2 SLOEs. Lack of 2 SLOEs by the time of application review can result in it being marked as incomplete, which may limit interview invites.

Latecomers who chose to switch to EM post-match may also struggle in obtaining the recommended 2 SLOE's when they apply to EM. If the decision to switch into EM is made because the student did not match into a different speciality, the student should aim to complete EM rotations in the spring prior to graduation, if possible. It is also important that these students review how to best spend the year prior to re-applying (see Re-Applicant Guide).

If a student matches into a different speciality and later decides to switch into EM, obtaining SLOEs can be more complicated. If this decision is made early enough, EM rotations should be pursued prior to graduation to avoid conflict with clinical responsibilities of the non-EM training program. If the student makes this decision after already starting a non-EM training program, they should reach out to the local EM program director for advice.

What can you do to increase your chances of an away rotation?

- Allow for flexibility in timing and scheduling as students may cancel previously arranged rotations.
- Use the <u>EMRA Clerkship Match website</u> to see which institutions have availability.
- If there is a certain program(s) of interest, reach out to that program specifically to see if there are any spots available.
- Be flexible with where you complete the away rotation. It doesn't have to be your dream program to fulfil this requirement. Also, doing an away rotation at your dream EM program is not a requirement to match at that program. Rather, it is more important that programs see that you can do well on a rotation outside of your home institution.
- Be mindful of the fact that while many rotations use the VSLO applications, there
 are still many programs that require an individual application via the registrar's
 office.



Perceived Lower Commitment to EM:

The SLOE includes a specific section on ranking the student's commitment to the field of Emergency Medicine. Students who decide later in medical school, or afterwards, to enter the field may have less EM activity or be ranked as having lower commitment to the field. Approximately 15% of CORD members who responded to a survey regarding latecomers to EM¹ said that students who are latecomers to EM are generally marked in the "lower commitment" category when compared with their peers, some of whom have been decided on EM since before entering medical school. Additionally, when reviewing the application as a whole, residency programs may take note of fewer EM related activities or research. It is important to have a trusted advisor review your CV and residency application.

What can you do to show your commitment to EM?

- Prepare a clear, honest and meaningful explanation regarding the decision to change specialty choice to EM. Use your personal statement as an opportunity to explain your commitment. Consider addressing the journey that led you to discovery of EM as the specialty for you, then describe the characteristics you bring to the table that make you well suited for the specialty.
- You may question whether to include involvement in non-EM related activities, such as other specialty interest groups, on your application. In general, we advocate including these activities to demonstrate engagement and involvement in medical school, added to the context you will provide in your personal statement describing your journey towards discovering EM.
- Consider joining national organizations such as EMRA, ACEP or SAEM and attend national meetings, if able. These meetings typically have residency fairs where you can get a chance to meet faculty at residency programs face to face. Involvement in these organizations can also help gain a greater understanding of the field of EM.
- Get involved locally with your home institutions EMIG, EMRA and similar organizations.

Getting appropriate advising and securing an EM advisor:

Student career advising oftentimes will begin in the pre-clinical years and continue through match day or graduation. The later that students identify as EM bound the



more challenging it can be to obtain EM specific application and career advice. This problem is further compounded by the fact that many students decide later within medical school to pursue EM, limiting the time of available advisors.

How can you get appropriate EM focused advising?

- Reach out to EM advisors at your program as soon as you are considering EM, even if you aren't fully committed.
- Use resources on the <u>CORD</u> and <u>EMRA</u> websites as a guide.
- If your medical school doesn't have specific EM advising you should reach out to other advisors at schools with an EM residency program.

So...What about application plans?

If you were not able to obtain 2 SLOEs, consider obtaining letters from other rotations that can show off your skill in a similar environment to the Emergency Department (ED) including community EDs, ICU rotations, or trauma surgery rotations.

While delaying graduation by a year to facilitate obtaining everything needed to apply into EM is an option, it is expensive and a majority of CORD survey respondents¹ advise students to apply to EM during their graduation year from medical school rather than delaying applying for residency. Obviously this will not be possible for students who decide to switch after not matching into another specialty or after starting a non-EM training program.

Many advocate that the latecomer student has a back-up plan in place in case they do not match in EM. Applying to the original or intended specialty choice may be a good option. Another option would be to apply to a transitional or prelim year at an institution where there is also an EM program, as there may be an opportunity to transition to EM after the first year of post-graduate training. The back-up plan options available and their relative merits are discussed in detail in the Re-Applicant Guide and the No Match Monday Guide.

Students should also apply strategically to residency programs and should give consideration to newer programs. The number of EM residencies is rapidly growing and the competition for interview offers at newer programs is typically less competitive. It is also strongly recommended to use the EMRA Residency Match website to determine which programs would be more likely to interview you based on their requirements for



grades, Step scores, number of SLOEs, etc. A program should be considered a non-viable "reach" application if an applicant does not meet the requirements they share in <u>EMRA Match</u>.

Summary:

While applying to EM as a latecomer is more challenging, it is certainly possible. Keep in mind the following during this journey:

- Obtain a mentor as soon as you start considering EM, even if you aren't 100% committed.
- Work with your mentor and available resources on websites such as <u>EMRA</u>
 <u>Clerkship Match website</u> to increase your chances of obtaining rotations and SLOEs.
- Use your personal statement to tell the story of how you became interested in a career in EM.
- Work with your mentor to apply strategically and make a back-up plan.

References:

 Council of Emergency Medicine Residency Directors Advising Students Committee in Emergency Medicine. (2019). [CORD ASC-EM Advising Addenda Study]. Unpublished raw data.

