

# CLASS OF 2020 PHASE III STUDENT HANDBOOK

# April 29, 2019 – May 22, 2020 Class of 2020

### TABLE OF CONTENTS

Introduction2
Overview of Phase III
USMLE Step 2 Clinical Knowledge (CK) & Clinical Skills (CS)4
Match Advisor5
Phase III Schedule
Required Phase III Courses7
Global Health/International & Language Rotations8
Research/Scholarly Activity Requirement9
Electronic Residency Application Service10
National Residency Matching Program11
General Match Information12
Letters of Recommendation14
Curriculum Vitae (CV)16
Personal Statement17
Interviews18
Interviewing Tips19
Thank you Letters & Letters of Interest21
Budgeting for Interviews22
Awards23
Graduation25
APPENDIX A: CV Template & Sample26
APPENDIX B: The Personal Statement29
APPENDIX C: Sample "Noteworthy Characteristics"
APPENDIX D: Scholarly Activity
APPENDIX E: Policy for Hooding
APPENDIX F: Graduation Checklist35
Phase III Credit Request Form – Instructions
Phase III Credit Request Form37
Course Change Request – Add/Drop Form
VLSO/VSAS – Add/Drop Form
Course Add Request – Research Elective40
Phase III Student Evaluation41
Research/Scholarly Project Evaluation Form42

### INTRODUCTION

Phase III is an opportunity to finalize your career choice, to perfect your residency application, and to broaden your educational opportunities. The purpose of this handbook is to give you important information about the many key events that occur in Phase III. This guide is intended as a resource but does not replace one-on-one counseling and advisement. You already have a Match Advisor, you'll be meeting with Dr. Hickey or Dr. Vigil for your Dean's Letter (aka the Medical Student Performance Evaluation), and you are always welcome at the Office of Medical Student Affairs (OMSA) for counseling and advisement.

Phase III has a great deal of flexibility to allow you the opportunity to individualize your schedule while meeting graduation requirements. The requirements take up 8 rotations out of 14 possible rotational time slots. To facilitate this process, Drs. Hickey and Vigil met with your class in January 2019 and explained the Phase III requirements, provided guidance on scheduling around other activities such as USMLE Step 2 CK and CS, and described the residency application process.

#### **OFFICE OF MEDICAL STUDENT AFFAIRS**

The Office of Medical Student Affairs can either help you or point you in the direction of assistance for logistical and advisement issues in Phase III. The OMSA team is always willing to see you, even on short notice. Please contact the office to schedule an appointment (<u>HSC-OMSA@salud.unm.edu</u> or call 505-272-3414).

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# **OVERVIEW OF PHASE III**

The main tasks to be accomplished in Phase III include the following and are covered in individual sections in this handbook:

- USMLE Step 2 CK and Step 2 CS
- Meeting with your Match Advisor
- Completing requirements for graduation
  - 4 required courses
    - Medicine in New Mexico, Comprehensive Ambulatory Care, ICU, Sub-Intern
  - 4 elective courses
- Scheduling Sub-Intern and away rotations
- The scholarly activity requirement
- Electronic Residency Application Service ERAS
- Letters of recommendation, CV, personal statement
- Interviewing
- National Residency Matching Program The Match

# USMLE STEP 2: CLINICAL KNOWLEDGE (CK) & CLINICAL SKILLS (CS)

- Regardless of specialty, you must pass both exams prior to graduation. It is strongly encouraged that you take Step 2 CS and Step 2 CK early, depending on your Step 1 score, and in any case, before <u>November 2<sup>nd</sup></u>. The turn-around time for grading Step 2 CS can be as long as 12 16 weeks. Because having a passing score is a requirement for graduation, you must take Step 2 CS no later than November 2, 2019 to allow the exam to be graded and the score posted.
- If you are applying to a **competitive** specialty,
  - and you did average to below average on Step 1, consider taking Step 2 EARLY, i.e., before August. This helps you decide:
    - Are you competitive for this field?
    - To how many programs do you need to apply and interview?
    - Should you consider a back-up specialty?
- If you are applying to a **competitive** specialty,
  - and you aced Step 1, it is less important when you take Step 2 CK, but make sure to take it before November 1<sup>st</sup> so that the score will be posted prior to programs ranking applicants.
- If you are applying to a less competitive specialty,
  - and you did below average on Step 1, consider taking Step 2 CK EARLY, for the reasons listed above.
  - and you did average or better on Step 1, then it is less important when you take Step 2, but make sure to take it before November 1<sup>st</sup>. Many programs will not rank an applicant if there is not a passing Step 2 CK score available.
- Please note: Step 2 CS is offered only on certain dates and in certain locations.
   In order to take the exam by November 2<sup>nd</sup> of your fourth year, you will need to REGISTER in April before all the dates are taken.

Reporting Schedule - Step 2 CS		
Testing Period	Reporting Start Date	Reporting End Date
November 4 – December 31	January 30, 2019	February 20, 2019
January 1 – January 26	March 6	March 27
January 27 – March 23*	April 24	May 22
March 24 – May 18*	June 19	July 17
May 19 – July 13	August 14	September 11
July 14 – September 7	October 9	November 6
September 8 – November 2**	December 11	January 8, 2020
November 3 - December 31	January 29, 2020	February 19, 2020

Reporting Schedule - Step 2 CS

\*No Step 2 CS exams will be delivered March 22 through March 30.

\*\*Last day to take CS to be certified for the 2020 Match is November 1, 2019. We recommend you take CS WELL BEFORE THAT DATE!!

# MATCH ADVISOR

You have been assigned a Match Advisor. This is the clinician who will help you with advisement during Phase III. If you change your mind about your specialty choice, please let us know and we will assign to you another Match Advisor.

Your Match Advisor will:

- Assist you with Phase III schedule changes.
- Advise you on your competitiveness for the specialty.
- Review your CV and personal statement.
- Counsel you about which programs to consider, who to ask for letters of recommendation, and where to do audition/away rotations, etc.
- Help you develop a rank list.

Meet with your Match Advisor:

- January / February

Receive advice about your competitiveness for the specialty. In order to advise you, your Match Advisor needs to know how you have done in Phase II, Phase I (less important), and on your USMLE Step 1. (Don't feel embarrassed – let your Match Advisor know how you've done academically.)

- June/ July

Review your CV and personal statement with your Match Advisor. Discuss with your Match Advisor the number of programs to which you plan to apply and the actual programs that you're considering applying to. Your Match Advisor can help ensure that you have adequate breadth and depth to your list of programs.

#### - September / October

If you receive more than 15 – 20 offers for interview, you may want to meet again with your Match Advisor to help you select how many and which interview offers to accept.

#### - October 15

If you have been invited to fewer than eight programs to interview, contact your Match Advisor and Drs. Hickey or Vigil to strategize.

 December / January Meet with your Match Advisor to discuss your rank-ordered list of the programs where you interviewed.

# PHASE III SCHEDULE

Below are some general guidelines about your Phase III schedule. Note: This guidance assumes that you have narrowed your choice of specialty to one or two choices. You have already chosen a schedule, but you may make changes during the year. Keep in mind, you may not take time away from required rotations or some electives to interview.

Scheduling Sub-Internship and "Away" rotations in your chosen specialty:

- Schedule a Sub-Intern rotation (if available) in the specialty by September so that you may request a letter of recommendation from that program.
- If you have identified a program in which you are very interested, consider doing an away or "audition" rotation the audition is both for you and for the program.
- If you haven't identified such a program, it is often instructive to do an away rotation if your personal circumstances allow it.
- Away rotations arranged through the Visiting Student Learning Opportunities Program/Visiting Student Application Service (VLSO/VSAS) must be added to your schedule (submit a VLSO/VSAS Add/Drop Form to OMSA, see page 39 of this handbook). Away rotations not arranged through VSLO/VSAS must be approved by CSPE (submit a Phase III Credit Request Form, see page 36 of this handbook). Do not wait until the last minute to do this. In addition, students who have had academic or professionalism issues might not be approved for away rotations.

(<u>https://students-residents.aamc.org/attending-medical-school/article/visiting-student-learning-opportunities/</u>)

- You usually do not need to do more than one Sub-Intern rotation in your chosen field. However, you may certainly do more than one if you like and if scheduling permits.
- If you are vacillating between 2 (or more) fields, complete a Sub-Intern, ICU, or clinical rotation in each specialty before September to help you determine your final choice. If this doesn't help, it's possible that you will need to apply to two specialties.

# **REQUIRED PHASE III COURSES**

- You must spend a minimum of 4 weeks in each of the following rotations:
  - ICU rotations that qualify are listed in the Phase III Clerkship Catalog
  - SUB-Internship rotations that qualify are listed in the Phase III Clerkship Catalog
  - Medicine in NM CLNS 910 (arranged through the Preceptorship Office)
  - Comprehensive Ambulatory Care CLNS 605
- 4 elective rotations that are each 4 weeks in length
- Don't forget to schedule these! The required Comprehensive Ambulatory Care rotation is particularly important to schedule and complete as it is only offered six times during Phase III!
- In general, it doesn't matter when you take these required courses, but it is nice to have a lighter schedule at the end of the academic year.
- Non-catalog courses and courses at other institutions must be approved in advance. In some cases, you may need to petition CSPE for approval prior to starting away rotations. You will be required to submit a Phase III Credit Request Form, <u>see page 36</u> of this handbook.

## **GLOBAL HEALTH/INTERNATIONAL & LANGUAGE ROTATIONS**

- Strongly consider doing an international or an immersion language rotation. This may be your last opportunity to go to another country to work, and it will give you tremendous perspective on healthcare in general, healthcare in another country, and healthcare in our own country.
- Many specialties (e.g. OB-GYN) have very large percentages of Spanishspeaking patients that you will care for in residency. Attaining some degree of language fluency will help you connect to your patients and take better care of them.
- Completing a Spanish language elective during Phase III is a great opportunity to enhance your language skills, put them to use in a clinical setting, and travel internationally. These electives can be approved for credit towards graduation. Should you choose to pursue a Phase III language elective, below are some things to consider:
  - UNM doesn't provide specific courses in this area. These electives generally include international stay and travel. Students are required to do all the research and planning for the trip, stay, and language school attendance. The internet and other medical students can be a great resource. OMSA can offer some assistance as well.
  - Be sure to account for all aspects regarding the experience. You will be responsible for all costs incurred (travel, accommodations, language school tuition, meals, etc.).
- <u>A Phase III Credit Request Form (see page 36 of this handbook) must be</u> <u>completed 6 months prior to the experience. Phase III credit will not be</u> <u>granted after the fact.</u>
- You'll need to fill out the Phase III Credit Request Form (see page 36) and attach a description of the program you plan to complete. A brochure or a print-out from the internet is also beneficial to include. Keep in mind that the rotation should be a minimum of 4 weeks in duration and should provide at least 20 hours of "work time" per week. The completed form should be submitted to OMSA.
- While many students opt for a Spanish language elective, you may choose any language or country that you feel will enhance your medical school experience and your future practice.

## **RESEARCH/SCHOLARLY ACTIVITY REQUIREMENT**

The Office of Undergraduate Medical Education (UME), located in Fitz Hall Room 106, can assist with most stages of the scholarly activity requirement. UME is also the administrative home for student scholarly activity. Please send all your inquiries about the scholarly activity requirement to Dr. Paul McGuire (<u>PMcGuire@salud.unm.edu</u>). Additionally, review the Student Research Handbook for detailed information about deadlines.

The final research product accompanied by a mentor evaluation is due March 1, 2020. (See page 42 for the mentor evaluation form.) The final research requirement may be met in ONE of three ways:

- Write a paper describing your research results and submit to UME, abstracts of which will be circulated at the UNM SOM. OR
- 2. Write a paper for publication and submit a copy of that paper to UME, abstracts of which will be circulated at the UNM SOM. OR
- 3. Present your research in a scientific forum orally or in poster format.

The Western Student Medical Research Forum in Carmel, California, which is traditionally held every year in January/February (<u>http://www.wsmrf.net/</u>) and UNM SOM's Medical Student Research Day, usually held in mid-April, are excellent venues at which you may present your research findings. Funding may be available to assist you as you present your research at a regional or national conference.

Please do not wait until the last minute to complete this critical requirement. Remember, the Research Elective (CLNS 901), with a grading option of CR/NC, can count towards elective credit.

### **ELECTRONIC RESIDENCY APPLICATION SERVICE**

(https://www.aamc.org/students/medstudents/eras/)

The Electronic Residency Application Service (ERAS) is the service that most students use to apply for residency. ERAS was developed by the Association of American Medical Colleges (AAMC) to transmit electronically the residency applications, personal statements, recommendation letters, Medical Student Performance Evaluation (MSPE), transcripts, and other supporting credentials from medical schools to residency program directors. In May, OMSA will give you a token to allow you to access the online application and so that you may begin to submit your application documents. These tokens permit students to manage their applications from any computer with an internet connection. Register promptly with ERAS so that OMSA can upload important documents to your application.

PLEASE NOTE: Registering with ERAS does not register applicants with the NRMP nor does registering with the NRMP register applicants for ERAS. YOU MUST REGISTER FOR BOTH PROGRAMS!

#### Important Date for ERAS and NRMP

The most important date on these two lists will be in <u>September 15, 2019</u>. That is when program directors at the residency programs you are applying to can download your application. Plan to have your entire ERAS application completed by that day <u>AND</u> to have at least 1 (but preferably 2) of your 3 letters of recommendation uploaded into ERAS. Most specialties begin inviting applicants for interviews in September. You are more likely to be invited for an interview if your file is complete.

ALL important ERAS dates will be published on their website: <a href="https://www.aamc.org/students/medstudents/eras/">https://www.aamc.org/students/medstudents/eras/</a>

### **NATIONAL RESIDENCY MATCHING PROGRAM**

(<a href="http://www.nrmp.org/">http://www.nrmp.org/</a>)

The National Residency Matching Program (NRMP) is the program most students use to find residencies. The NRMP has certain deadlines each year and it is important to be aware of them. Deadlines are normally published in June. Below is a <u>tentative</u> timeline.

#### 2020 MAIN RESIDENCY MATCH® EVENTS

<u>2019</u> SEPTEMBER 15 Registration opens at 12:00 p.m. ET

OCTOBER 1 Medical Student Performance Evaluations released to programs

#### **NOVEMBER 30**

Applicant Early Registration Deadline at 11:59 p.m. ET Applicants registering after November 30 will be charged a **\$50 late fee** 

#### <u>2020</u>

JANUARY 20 Rank order list entry begins at 12:00 p.m. ET for all users

#### MARCH 16

Match Week begins Applicants find out whether they matched Program Directors find out whether all positions filled The Match Week Supplemental Offer and Acceptance Program<sup>®</sup> (SOAP<sup>®</sup>) begins with release of the List of Unfilled Programs

#### MARCH 19

Program directors receive their Confidential Roster of Matched Applicants SOAP concludes at 5:00 p.m. ET

#### MARCH 20

Match Day! Results released at 1:00 p.m. ET

The NRMP has an informative and user-friendly website. Check their website (<u>http://www.nrmp.org/</u>) for official and finalized timelines or call 1-866-617-5837 for more information.

# **GENERAL MATCH INFORMATION**

#### Applying to Residency Programs

The information contained in this section is not a definitive "how-to" guide for your residency application. Rather, this is an overview of some of the activities and institutions involved in applying to residency. The UNM School of Medicine will provide additional advising about the residency application process as you advance through Phase III.

The residency application process begins early in the summer of the senior year. Although the National Residency Matching Program (NRMP) encourages participating programs to use the Electronic Residency Application Service (ERAS) and most do, some programs may have their own forms. Programs require a variety of materials from applicants, including:

- Medical School Performance Evaluation ("MSPE" or "Dean's Letter") required by all programs
- Medical school transcripts
- USMLE scores
- Personal statement
- curriculum vitae
- Letters of recommendation (generally three, maximum of four)
- Photograph

All programs require an interview. The student should complete his/her application and research the program before the interview, bearing in mind that the program will select the students that they will rank during the match process.

#### National Residency Matching Program (NRMP)

#### Website: <u>http://www.nrmp.org/</u>

There are several matching programs available, and which one(s) you will participate in will depend on your specialty area. The largest of the match programs is the National Residency Matching Program (NRMP), which uses a web-based system for registration, ranking, and dissemination of match results. Applicants and programs register for the match, complete their rank order lists online, and can obtain their match results via the internet. There is a wealth of information about the NRMP Match and the Match process on the website, and students are encouraged to review this information thoroughly prior to registering for the Match.

#### San Francisco Matching Program

Website: <u>https://www.sfmatch.org/</u>

The San Francisco Matching Program, or SF Match, functions in a parallel fashion to the NRMP. The SF Match serves most residency programs in the specialties of **Neurotology, Ophthalmology, and Plastic Surgery**. Typically, deadlines for these programs are earlier than the NRMP, increasing the importance of being prepared and applying early in the fourth year of medical school. Further information about the SF Match and programs it represents can be found on their website.

#### American Urological Association (AUA) Match

Website: <u>https://www.auanet.org/</u>

Urologists have their own residency matching process, run by the AUA. Generally, deadlines for these programs are earlier than the NRMP, increasing the importance of being prepared and applying early. Additional information about this match is available from their website.

#### Military Match - Health Professions Scholarship Program

Websites: <u>http://www.airforce.com/healthcare/</u> <u>http://www.goarmy.com/amedd/education/hpsp.html</u> <u>http://www.navy.com/joining/college-options/hpsp.html</u> <u>http://militarygme.org/3.html</u> <u>http://militarygme.org/4.html</u>

The HPSP offers prospective military physicians a paid medical education in exchange for service as a commissioned medical officer. Programs are available in the U.S. Air Force, U.S. Army, and U.S. Navy. (HPSP opportunities are not offered by the U.S. Marine Corps as it receives its medical services from the U.S. Navy.) Students are placed on inactive reserve status during their medical training. Before a medical school graduate can receive a license to practice as a physician, they must complete a oneyear internship. Many internships are included as a part of a residency program. All HPSP students must apply for a military internship along with a residency, but not all will be placed in the military system. Those who are not placed in a military internship must then apply for a civilian program. The military "match" occurs before the civilian "match" so that those not selected for military GME still have time to apply for civilian GME. Results are released in mid-December. Exact dates and deadlines can be found on the service-specific websites.

# American Medical Association Fellowship and Residency Electronic Interactive Database Access

#### (AMA-FREIDA)

Website: <u>https://freida.ama-assn.org/Freida/user/search/programSearch.do</u>

An on-line searchable database designed to help students find a graduate medical education program most suited to their needs. All ACGME accredited graduate medical education programs are included in the database program, as well as Board-approved combined specialty programs, such as internal medicine/pediatrics. FREIDA includes basic information about each program and information relating to the faculty, educational environment, work environment, and compensation/benefits offered by each program, and users can search for training programs by selecting specialties, states, or training institutions. As a supplement/alternative to FREIDA, the directory of programs participating in the NRMP Matching Program, including addresses and telephone numbers as well as additional information regarding residency training, is available on the web at http://www.nrmp.org for students who are registered with the NRMP to participate in the Match. Note that the NRMP site will <u>not</u> include programs participating in the San Francisco Match.

### LETTERS OF RECOMMENDATION

- In general, you will need three letters of recommendation. Your match advisor will help you identify appropriate letter writers.
- The most important attributes of the authors are that they know you reasonably well and that they have a good opinion of you. Less important, but something to consider, is their academic level. Chairs and residency program directors across the country, so it may be helpful to get letters from them. However, the most important thing is that they can write a strong **supportive** letter, no matter where they are in the academic food chain. In addition, it is wise to get a letter from at least one faculty member at UNM who is in the specialty to which you are applying.
- Before you make your actual requests for letters of recommendation, make sure you have finalized your personal statement and your CV, as these are important items to give to your letter writers, no matter how well they know you. These documents make it easier to write a more personalized letter.
- Do not submit more letters than are requested by the individual program.
- Do not solicit letters from residents or fellows. Although they may know you well, their recommendations will not be as influential as those of faculty members.
- Request letters **at least** six weeks before they are due to give faculty members plenty of time to write the letter. Ideally, letters should be written and uploaded to ERAS by September 1<sup>st</sup>, but it is okay to upload letters after that date.
- Approximately two weeks before the letters are due, contact the Office of Medical Student Affairs and verify that they have been electronically transmitted. If a letter has not yet been submitted, contact the faculty member and politely remind him/her of the deadline. (OMSA can facilitate this polite reminder as well.)

#### Instructions for letter writers

- All letters of recommendation must be uploaded by the letter writer (or his/her designee) using the ERAS Letter of Recommendation Portal (LoRP). Medical schools cannot upload letters of recommendation (LoR).
- Your letter writer will be emailed instructions for the LoRP and given a unique identifier for his/her LoR.
- Technical specifications can be found on <u>https://www.aamc.org/eras/lorp</u>.
- If you (or your letter writers) have additional questions, please contact the ERAS HelpDesk by email <u>ERASLoRP@aamc.org</u> or by phone 202-862-6249.

- Please ask the letter writer to address the letter to "Dear Program Director"; individualized salutations are not necessary.
- Mark the FERPA acknowledgement, i.e., "I waive..." OR "I do not waive my right to see this letter."
- If "waive" is checked, you waive your right to see this letter under the "Family Educational Rights and Privacy Act (FERPA)." You acknowledge that this letter is for the specific purpose of supporting your application for residency.

# **CURRICULUM VITAE (CV)**

- Most of the information traditionally included in the CV is provided in the standard ERAS format. However, it is good practice to have a formal CV for later use with applications for employment, licensure, or board certification.
- Standard formats for CVs exist. (Please see APPENDIX A).
- CVs should include the following information:
  - Name
  - Local address, e-mail address, and telephone number
  - Permanent address and telephone number
  - Medical school (indicate date of anticipated graduation)
  - Undergraduate degree (indicate if you graduated with honors)
  - Employment ONLY IF
    - it is unique or specifically relevant to your medical career
    - you've had full-time employment between college and medical school
  - DO NOT list part-time jobs from high school or college or summer jobs
  - Honors (e.g., Dean's List, Phi Beta Kappa, Alpha Omega Alpha, scholarships); indicate whether a specific scholarship is based on need vs. merit
  - Organizations and leadership positions
  - Scholarly Activity always include research mentor, specific purpose or title of research project(s), and dates
    - Research
    - Quality Improvement
    - Curriculum Development
    - Patient Safety Protocols
    - Publications/oral presentations/poster presentations
  - Extracurricular activities during medical school with a short explanation of what you did
  - Language Fluency
  - Personal Interests

# **PERSONAL STATEMENT**

There are many approaches to personal statements. (See APPENDIX B for examples.) In general, a relatively straightforward one page, single-spaced document that articulates your reasons for applying to the specialty is appropriate. This is probably *not* the time for interpretive poems, etc. If you really want to be different, OK... but you may be taking a risk.

#### Some Ideas

- Brief description of anything interesting about your background
- Explanation of why you originally became interested in medicine
- Explanation of why you developed a specific interest in your specialty of choice
- Description of extracurricular activities consider discussing your research project and/or any community service during medical school
- Discussion of what makes you unique as an individual and a good choice for a residency training program
- Discussion of your future plans
  - Private practice vs. academic medicine
  - Type of private practice (solo, group, multispecialty group)
  - Interest in fellowship training

### **INTERVIEWS**

- The prime interviewing months for the regular Match are November, December and January. Less competitive specialties like Pediatrics, Family Medicine, Internal Medicine, and Psychiatry tend to interview earlier. Competitive specialties, like the surgical sub-specialties, OB, and Radiology tend to interview later, but there are exceptions. It is a good idea to take *at least* one (maybe two) of these months off for interviews and schedule the other month with a lighter rotation or one with no weekends so that you may interview. Do not plan to leave a required rotation (Sub-Intern, ICU, Medicine in NM, or Comprehensive Ambulatory Care) to do interviews.
- Most students interview at approximately 8-12 programs. If your application is strong, you may interview at fewer and if your application is not quite so strong, you may interview at more. Competitiveness of the specialty and location where you are applying enters into the equation.
- Interviewing expenses can be added to your financial aid budget.

Develop a list of questions for every interview. Your list might include the following questions:

- How many residents from the program have been accepted for fellowship training in the last three years?
- Is there protected didactic time for residents?
- Does the department provide an allowance for purchase of textbooks or attendance at medical meetings?
- Does the department require that a research project or other scholarly activity be completed during residency training? What type of administrative and laboratory support is available for resident research projects?
- Do the residents and faculty members seem to have good camaraderie?
- What are the strong points of the program? What are the weak points of the program?
- Is any faculty turnover expected, particularly at senior administrative levels (i.e., chairperson, program director, or division director)? If so, what impact will these personnel changes have on residency training?
- Have any residents left the program in recent years? If so, what was the explanation for their departure?
- Does the program have a parental leave policy?
- What career opportunities are available for the applicant's partner?

### **INTERVIEWING TIPS**

- Be consistently respectful and courteous to the administrative staff who schedules your interview. A negative comment from an administrative assistant can sabotage an otherwise excellent application.
- Consider participating in mock interview experiences (TBA).
- Schedule your interviews carefully. Be aware of the dangers of inclement weather in certain states in late November through January. (If you plan to drive to your interviews, be certain that your car is in good working condition.)
- Be certain that you are on time for the interview. If you are unavoidably detained, speak directly to the residency coordinator and inform her/him that you will be late.
- Dress professionally. Extremes of dress may attract unwanted attention.
- During the interview, the most important rule is to be yourself. Be relaxed, animated, and attentive throughout the interview process.
- Be certain that you have several questions to pose to each faculty member and resident with whom you interview. Do not hesitate to ask the same questions of different interviewers. Try your best to avoid the appearance of indifference or fatigue.
- Do your homework. Have some knowledge of the program you are visiting and be able to explain why you chose to apply to that institution. Go to the program's website to learn more about the program before your interview.
- Throughout the interview, be on your very best behavior. Do not check your phone, chew gum, slouch in your chair, or say "yeah" or "nah" when talking with the interviewers. Avoid assuming too great a familiarity with the residents. Avoid overly casual comments. Avoid any appearance of impropriety such as cursing, ordering an alcoholic drink at lunch, or flirting with another medical student or resident.
- Be humble. Avoid any trace of arrogance.
- Avoid inconsistencies in your responses to different interviewers.
- At the conclusion of the interview, inquire whether you are expected to communicate again with the residency program director. Some residency directors will expect you to contact them if you remain interested in the program. Others do not expect further communication prior to the Match.

- If you decide to cancel an interview, be certain to notify the program director's office by telephone. Be sure you speak with a real person (not just a recorder). Failure to notify a program is an extremely discourteous act, which deprives another applicant of the opportunity for an interview and inconveniences faculty members and administrators who have set aside time to meet with you. It also reflects on the reputation of your medical school and may jeopardize the ability of future applicants from UNM to secure an interview.
- If the program has an activity, for example a dinner with the residents the night before the interview, make every effort to attend.
- Jot down some important notes to yourself after the interview to help jog your memory and help you remember the unique features of this program. Apps like 'The Match Prism' may help you keep track of things you like and do not like about each program.

### THANK YOU LETTERS & LETTERS OF INTEREST

- Should I send a thank you letter? Talk to your Match advisors. Thank you letters are expected for some specialties, but others do not want a thank you letter. Programs do different things with thank you letters, but generally, they are put in your file. When ranking decisions are made and the question comes up about your interest in the program, they might go to your file and decide that you were or were not interested based on whether you sent a thank you letter. It is a good idea to send one. (Sending a thank you by email is also fine.)
- To whom should I send it? Send it to the Program Director. You probably do NOT need to send a letter to everyone you interviewed with. On the other hand, if you felt a particular connection with a resident or a faculty member, it will not hurt to send an additional thank you/email to that person. If you do send a thank you letter to more than one person at a program, make sure you write a different letter (this is another reason not to write ten letters...these letters are often shared and duplicate letters look bad.)
- Should I send a letter/email of interest around ranking time? This is also probably a good idea. Some words of caution: NEVER tell a program that you will rank it #1 unless you absolutely mean to do that and cannot imagine any situation in which you might change your mind. Something like "I'm very interested in your General Surgery Program and I will rank it among my top programs" is safer. It is okay to let a program know that you will rank it #1, but only if you actually do that. Finally, do not believe that you will definitely match at a program, no matter what the Program Director (or anyone else in the program) says.

### **BUDGETING FOR INTERVIEWS**

Interviewing for residency programs is an expensive undertaking. Your total financial outlay will depend upon the number of programs to which you apply and their proximity to your home. Listed below are reasonable estimates for lodging, food, airfare, application fees, and clothing.

-	Average expense for one night in a comfortable hotel	\$75
	(Hotels in large cities may be almost twice as expensive)	
-	Average expense for breakfast, lunch, and dinner	\$30
-	Average airfare for a single trip	\$300-\$400
	(Assume midweek travel with departure from Albuquerque)	
-	Average cost of a single-day car rental	\$30
-	Average cost per mile for travel by automobile (gas, oil, tolls)	\$25
-	ERAS fee (dependent upon number of applications)	\$250-\$500
-	Preparation and printing of resume and photograph	\$100

#### Please consider the following suggestions for reducing your expenses.

- To obtain the lowest airfare, try to make your airline reservation at least 14 days in advance.
- If air travel is required, try to group together as many interviews as possible. As long as you depart from, and return to, the same location, additional stops in between may be relatively inexpensive.
- Inquire as to whether the department you are visiting has any discount arrangement with a nearby hotel or any arrangements for staying with alumni or residents.
- Please be aware that low interest loans are available to assist with interview expenses and relocation expenses. Contact the financial affairs officer for further information.
- Paid expenses may also be added to your financial aid budget. In early September, SOM Student Financial Aid Office will contact students via e-mail regarding this process.

### AWARDS

Many medical student awards are given in the third and fourth years of medical school. These awards highlight not only academic achievement, but also dedication to community service, the underserved, and other various disciplines.

#### Alpha Omega Alpha (AOA) Medical Honor Society

Phase I and Phase II grades are averaged in July to determine class ranking. Students who are in the top 25% of the class are eligible and considered nominated to AOA. Up to 1/6 of the class may be selected for AOA. All eligible students are sent a letter of nomination signed by the Councilor. Nominated students must submit a current CV with extracurricular activities and leadership positions highlighted. The Councilor and the AOA Election Committee will convene for the final vote and all nominees will be notified of their status in writing in late August or early September.

#### Gold Humanism Honor Society (GHHS)

The mission of the Gold Humanism Honor Society (GHHS) is to recognize individuals who are exemplars of humanistic patient care and who can serve as role models, mentors, and leaders in medicine. GHHS honors medical students, residents, fellows, role-model physician teachers, and others who demonstrate excellence in humanistic clinical care, leadership, compassion, and dedication to service. Students are nominated by their peers in their third year of medical school and are elected to the honor society based on a review of their CV and essay submission.

#### Other Awards

- The Alumni Outstanding Medical Student Research Award (William Scott Hays Award) is given to a senior student who has a record of outstanding research. Criteria for the award include number of projects; local, regional, or national oral and/or poster presentations; and publications.
- The School of Medicine Service Award recognizes dedication and sustained participation in UNM SOM educational committees including CSPE, CC, and/or Admissions. All students participating in these committees are identified and their contributions are rated.
- Academic Awards in Phase II Clerkships are presented by each of the seven required Phase II Clerkships to the best student for that year. Each clerkship determines its own eligibility criteria but it generally includes GPA, interest in the field, evidence of service to the field, research contributions, etc.
- The Alumni Community Service Award is presented to a senior student who has an outstanding record of community service. The student must be in good academic standing but the focus of the award is on service, not academic performance. Faculty may nominate students or students may self-nominate or nominate peers with a narrative describing service to the community.

- The Alumni Humanitarian Award is presented to a senior student who has an outstanding record of reaching out to fellow students or community members in humanitarian works and service. This student has gone the extra mile to help others. Faculty may nominate students or students may self-nominate or nominate peers with a narrative describing service.
- The Alumni Award for Assistance to the Underserved is presented to a senior student who has demonstrated an ongoing commitment to improving quality of life for the underserved, through service work or involvement in advocacy, or both. Faculty may nominate students or students may self-nominate or nominate peers with a narrative describing achievements.
- The Alumni Award for Leadership is presented to a senior student who has attained a leadership position either within the School of Medicine or in a community organization and who has used the position to promote community service or service to the School of Medicine. Faculty may nominate students or students may self-nominate or nominate peers with a narrative describing service to the community.
- The Max Bennett Service Award is presented to the senior student who has provided outstanding service to medical education at the School of Medicine. Faculty may nominate students or students may self-nominate or nominate peers with a narrative describing service to medical education. Service can include work on committees and/or participation in interest groups and other medical school projects (e.g., yearbook, graduation, etc.)

## GRADUATION

*Graduation Requirements*: Your graduation from medical school depends on completing all the requirements listed in the Promotions Policy. This checklist will be helpful to you in ensuring that you have completed all requirements within the appropriate period.

*Complete all paperwork before you graduate.* The Graduation Checklist can be found in Appendix E. An updated checklist will be sent to you in January of your fourth year.

*Hooding at Convocation*: You may select any individual with an MD, PhD, JD, or equivalent post-graduate **doctoral** degree to place your hood at the graduation ceremony. Many students ask family members and friends, but also please consider selecting a faculty member who mentored you during medical school. The hooding policy is in Appendix D.

*Walking at Convocation:* If you have not completed the requirements for graduation, you may not be able to walk across the stage at convocation. The policy appears in the web-based handbook on the OMSA website. Please make an appointment with Dr. Hickey as early as you become aware that you may not complete all requirements by convocation.

**Posting of Degree and Diplomas:** Please keep the following timeline in mind: Your degree will be posted to your transcript 4-6 weeks after convocation. Your diploma will be printed and available 3-4 weeks after that. For a more specific time line, please contact the Office of Medical Student Affairs.

# APPENDIX A: CV TEMPLATE & SAMPLE

A *curriculum vitae* is a handy document to create and keep updated from here on out. You will enter all the same data into your ERAS CV, but you need to have a hard copy of your CV for the following reasons:

- To assist those who will write your letters of recommendation
- You will need to have an updated CV as you apply for residency, fellowships, research grants, faculty appointments, etc.

Attached please find a CV template for use by University of New Mexico School of Medicine students. If any of the suggested categories are not pertinent for you, simply delete them.

Please do not get too stressed out about your CV. No one expects it to be long...honest! In fact, if it is too long and you do not have something like a PhD or some reason to have a long CV, it might actually come across as pompous.

For assistance in constructing your CV and to review samples of other CVs, go to the AAMC's Careers in Medicine website: <u>www.aamc.org/cim</u> (Click on "Land Your Residency", scroll down to "Residency Application" and click on "Applying". Scroll down to "Writing a *curriculum vitae*" and click on the link. There are CV samples on page 2 of that particular link.)

#### General instructions

- Number each page following the first page
- When listing dates, do so chronologically and place the most recent *first*
- Always, always, always use spell check
- Have someone proofread for grammatical errors and spelling
- Share the draft of your CV with friends and relatives
- Revise as necessary
- Edit and prepare your final CV
- Bring your CV with you to your Dean's Letter meeting

## JOE Q. MEDICAL-STUDENT

12345 First Street • Albuquerque, New Mexico 87111 Phone 319-123-3455 • Email JQMedicalStudent@salud.unm.edu

EDUCATION

August 2015 - present University of New Mexico School of Medicine Albuquerque, New Mexico

• Doctor of Medicine, anticipated May 10, 2019

August 2011 – May 2015 University of New Mexico Albuquerque, New Mexico

• Bachelor of Science, Biology, *cum laude* 

September 2010–January 2011 University of New Mexico Albuquerque, New Mexico

• Emergency Medical Technician-Basic

#### LICENSURE AND BOARD CERTIFICATION

USMLE Step 1	2/28/16	Pass: 208
USMLE Step 2 CK	6/14/17	Pass: 237
USMLE Step 2 CS	4/20/17	Pass

PROFESSIONAL EXPERIENCE

Fall 2008-present Lippincott Williams & Wilkins Reviewer

• Review texts and manuscripts that are being edited for publishing

February 2008-February 2009 University of Iowa Hospitals and Clinics Pathology Externship

• Rotated on surgical pathology, autopsy, and electives including hematopathology, cytopathology, and immunopathology to gain fundamental experience in pathology

June 2003-August 2004 Sacajawea Girl Scout Camp, Boone, IA Camp Medical Staff

• Distributed prescription medications to campers, treated basic medical needs as necessary, and organized medical information for staff and campers

#### TEACHING EXPERIENCE

September 2016-May 2017 University of New Mexico School of Medicine Medical Student Tutor Tutored second-year medical students in their pathology course and in their preparation for USMLE Step 1 exam.

#### RESEARCH & PUBLICATIONS

Romero A, D'Angelo J, Combs S, **Medical Student JQ**, Hegyi M, Clark R, Coffman B. Jelly doughnuts in childhood may increase the likelihood of adult obesity. Abstracted in Journal of Fine Eating 2014; 13: S9. Oral abstract (*or poster*) presentation at the American Association of Fine Eating annual conference, San Diego, Ca, 2014.

**Medical Student JQ**, Moran RM. Cake vs. filled doughnuts — What is the best predictor of adult obesity? Manuscript in preparation (or data collection in progress or data analysis in progress...)

#### SERVICE AND VOLUNTEER ACTIVITIES

President, Pediatric Interest Group, 2014-2015

• Organized a faculty resident panel on careers in pediatrics, facilitated a series of films and discussions about poor access to care in pediatric patients, and organized a lobby day for medical students on pediatric health issues

Member, Committee on Student Promotions and Evaluations 2015-2017

• Served as a student member, participating in discussions on students with academic difficulty and professionalism issues

Volunteer, Erin Trujeque Memorial Golf Tournament, 2014-2015

• Volunteered in this Children's Cancer Fund of New Mexico fundraising event, a program that assists with the needs of pediatric cancer patients and their families and provides scholarships for students who have been treated for childhood cancer.

Volunteer, Hardhats for Healthy Kids Volunteer, NM Department of Health, 2015

• Participated in a program that distributed free bicycle helmets and gave bicycle, skateboarding, and ATV safety education programs in communities across NM.

#### PROFESSIONAL MEMBERSHIPS

2015 - Present	Member, American Medical Association
2015 - Present	Member, New Mexico Medical Association
2016 - Present	Member, American College of Obstetrics and Gynecology

#### ACADEMIC HONORS AND AWARDS

Nominated to Alpha Omega Alpha Honor Society, 2018 Henrietta Blanchard award for best research poster, American Cancer Society, 2016 Travel scholarship for one-month externship experience in Zambia, 2015

#### HOBBIES AND PERSONAL INTERESTS:

Bowling, koshomatsu-ryu karate, motorcycle riding, reading, playing bass guitar

#### LANGUAGE FLUENCY:

English, Spanish

# **APPENDIX B: THE PERSONAL STATEMENT**

Included in this appendix are samples of two well-written personal statements.

For assistance in writing your personal statement, please go to the AAMC's Careers in Medicine website: <u>www.aamc.org/cim</u> (Click on "Land Your Residency", scroll down to "Residency Application" and click on "Applying". Scroll down to "Writing your personal statement" and click on the link.)

#### Personal Statement Example #1

Salvador, my Spanish teacher in Guatemala, was always coming up with innovative ways to teach me grammatical concepts. One morning, we were discussing how nouns ending in "-ma" are actually masculine, a concept that he demonstrated to me with his made-up word "trilemma". He told me, "El trilemma de la vida es lo que queremos, debemos, y podemos hacer." The trilemma of life exists between what we want, need, and are able to do. Family medicine is the answer to my trilemma - it is what I want, need, and can do for the rest of my life.

*Es lo que quiero hacer. It is what I want to do.* I want to spend my career caring for diverse populations of patients. I truly enjoy my interactions with everyone from 30-second-old newborns to teenage girls seeking contraception to nonagenarians with heart failure. I want the opportunity to care for my patients over time, to get to know them as people and encourage healthy living when they are well before I have to intervene when they are sick. In addition, I want to be part of a specialty where patients are seen in the context of their communities, for this is such a critical aspect of health.

*Es lo que debo hacer. It is what l need to do.* I need a career that will allow me to combine my idealistic worldview with individual patient care. My mentors in family medicine have been the best role models for me in terms of balancing public health advocacy with one-on-one connections with patients. Throughout all of medical school, I have been active in local and national efforts to increase access to healthcare. People often ask me how I have the time to lobby the legislature for healthcare access bills or to work with my school's administration to reform our regulations for medical student and physician interactions with pharmaceutical companies. My answer is that my advocacy work is what drives me and is therefore not an "extracurricular" activity at all. As much satisfaction as I gain from individual patient interactions, I also know that I need to be working for change on a greater scale.

*Es lo que puedo hacer. It is what I can do.* Family medicine is something I can do for the rest of my life. My personality is that of a generalist and I am excited by the broad scope of medical knowledge required by family physicians. During my clerkships, my curiosity was piqued by everything from pediatrics to gynecology to cardiology to emergency medicine, and I will thrive on the challenge of continuing to gain expertise in all of these fields. I possess the endurance required to become comfortable managing patients of every age with any disease, for this can be a daunting and exhausting task. After graduating college, I rode my bicycle from Seattle to Boston to benefit a children's health program and there were certainly daunting and exhausting challenges along the way. But this adventure reminded me of how much I love to work hard, take everything in, and enjoy the journey, and so far my path through medicine seems quite similar.

Yes, family medicine is indeed the answer to my life's trilemma. I want to serve diverse, underserved populations. I need to balance public health advocacy with patient care. I am able to think broadly and commit myself to lifelong learning.

#### Personal Statement Example #2

I applied to medical school with the simple goal of becoming a forensic pathologist! No, keep reading; this is not a mix up. I really enjoy the technical aspects of dissection involved in a post mortem examination. As an autopsy technician during college, I took great pride not only in being one of the most efficient employees, but also in perfecting my dissection techniques. It wasn't until I began my clinical years of medical school, however, that I could appreciate how much I enjoyed interaction with patients and the satisfaction of providing preventative and therapeutic care—the kind of care that cannot be given to a deceased patient!

I have found that the ability to talk to a patient, find out what is wrong, and then come up with a solution to that problem is quite a gift. I believe that Obstetrics and Gynecology is the specialty that will provide me with the opportunity to interact with patients in a setting designed to prevent illness. It is also the ideal specialty choice for someone interested in surgical approaches to gain beneficial treatment results. In a single day, I can counsel a teenage patient on contraception options, perform a hysterectomy on a middle-aged woman, and then deliver a loving couple's first baby! Only Obstetrics and Gynecology has the ability to incorporate preventative medicine, family planning and the satisfaction of being able to treat many problems common to women of all ages.

In order to become the best physician possible, I am eager to train in an environment that will allow me to cultivate excellent clinical and surgical ability. This means a program that will support my learning while giving me a chance to spread my wings and test my limits. I learn best when I am doing, and when I can in turn teach others what I know. I will be an asset to any team that I become a part of, both in my work ethic and in my ability to communicate with others, as well as my willingness to adapt and grow.

I have grown during medical school because of the things that I learned in the classroom, but also because of the projects that I have taken on outside of my curricular obligations. As the clinic manager for the SRCH during my first year of medical school, I learned to appreciate the roles of other healthcare professionals to the healthcare team. I coordinated the services of the pharmacist, nurses, and social workers as well as student and faculty volunteers in a weekly, after-hours clinic for indigent patients. This experience broadened my perspective and will be an asset as I embark on my new career. During my second year, I learned valuable techniques in mindfulness based relaxation, as I became a facilitator for the first Peer Led Stress Reduction course to be offered at our school. Through this program, I found a way to deal with the stresses of school and was able to share them with my colleagues. I also know that these techniques will prove to be helpful to many of my future patients.

Can a person who applied to medical school with the exclusive intention of performing autopsies as a career decide that she would rather help bring life into the world? Absolutely! I have been on a path in the last three years that has led me through varied experiences that have convinced me that my destiny is to practice Obstetrics and Gynecology. I know that this is a specialty that will allow me to make a difference in the lives of women and their loved ones during every stage of life.

# **APPENDIX C: SAMPLE "NOTEWORTHY CHARACTERISTICS"**

#### Example #1

- Student X experienced some family and personal issues in the first year of medical school, requiring him to repeat the first year. Upon his return, he passed all course work and will be graduating on time with his new cohort.
- Student X participated in an innovative, nationwide pilot program called Education in Pediatrics Across the Continuum. The program focused on providing students an indepth, longitudinal exposure to many relevant topics in pediatrics. Additionally, she focused on leadership and throughout medical school, she was an active participant in the Pediatric Medicine Interest Group, and served as its President in 2017.
- Student X was elected Director of Breaking Barriers, a program dedicated to diving into cultural and societal aspects of medicine, identifying barriers to healthcare, and strategies to break through these barriers. The events were well attended by all members of the health science faculty, staff, and students and included topics on substance abuse and healthcare considerations for the veteran population.

#### Example #2

- Student X was born in Zomba, Malawi, the son of a cross-cultural psychology professor. Student X's interests are unique and varied: he was an Eagle Scout, a yo-yo master, a restorer of a 1970 Karmann Ghia convertible, a chicken farmer, and a triathlete.
- He is interested in psychiatry with a focus on children and adolescents. He reports that his most rewarding volunteer experience during medical school was being a Big Brother to a 14-year-old boy from a single parent home.
- Student X would like to return to Africa to help orphans of war, those with AIDS, and other trauma victims. Student X will bring a unique and humanitarian focus to his future residency program

#### Example #3

- Student X grew up in rural southern New Mexico, but she did not let that keep her from playing competitive soccer, accumulating thousands of miles traveling for soccer trips and earning a national 3v3 championship title.
- Student X has engaged in impressive service during medical school, spending every Wednesday night at the Student Run Clinic for the Homeless for the first and second years of school. She also led a stress reduction class and was invited by the senior associate dean of the medical school to address "Student initiated volunteerism" to a local high school.
- Her outstanding personal qualities include a tremendous work ethic, loyalty, humility and a willingness to learn and try things she has never done. She will bring her great energy and enthusiasm to her residency.

#### Example #4

- Student X grew up running down a dirt road in a small town in rural New Mexico. With one parent in medicine and another in education, he developed a passion for both.
- He has taught calculus, biochemistry, anatomy, CPR, and theology. He used the cameras he bought to make ski videos to film a documentary to raise money for orphans. He's served food, delivered furniture, and run clinics for the homeless. He's written essays on autism to aid in grants and awareness. He made a vaccine. He coached soccer. He smuggled Bibles into religiously oppressed countries. He still buys CDs, and he is an autonomous, eager learner.
- He's always wanted to be the historical "country doctor", the man committed to his community, both in his practice and beyond, with a humble love for people. He will bring his sharp mind and unalloyed heart to his residency.

# **APPENDIX D: SCHOLARLY ACTIVITY**

Scholarly Activity will be documented in your Dean's Letter.

Please include the following information for a <u>single project you would like</u> <u>highlighted</u>:

- Mentor's Name:
- Mentor's Title:
- Mentor's Department:
- Title of Scholarly Project:
- Brief Summary of Scholarly Project:

If you presented a poster of your project, please list the following:

- Conference Name:
- Conference Date:

If you published (or submitted a manuscript for publication), please include the entire citation in standard format:

• Romero A, D'Angelo J, Combs S, Medical Student JQ, Hegyi M, Clark R, Coffman B. "Jelly doughnuts in childhood may increase the likelihood of adult obesity." *Journal of Fine Eating*. 2014; 13: S9.

\*If you do not submit this information, we will not include it in your Dean's Letter.

# **APPENDIX E: POLICY FOR HOODING**

#### Background

The policy for hooding graduates at Convocation has been to allow any individual with a doctoral degree (e.g. JD, PhD, MD) to hood the graduate. The following justification is in the policy: "The hooding ceremony is part of the academic process of conferring the doctoral degree." Students are given the opportunity to find a "hooder" and if they do not specify an individual, then the Ervin W. Lewis Clinical Teaching Award recipient will hood them.

#### Philosophy

Meaning of the hooding ceremony: Transition from student to physician, an induction into the profession of medicine by those who were mentors for the student, not necessarily those who emotionally supported them. The value of recognizing those who emotionally supported students was also emphasized. At most institutions, a single member of the faculty hoods all graduates. At some institutions, students may choose a member of the faculty or an MD to hood them.

#### Policy

Any individual with a doctoral degree: MD, PhD, PharmD, JD, or DVM will be eligible to hood medical student graduates at convocation.

# **APPENDIX F: GRADUATION CHECKLIST**

#### CHECKLIST FOR GRADUATING MEDICAL STUDENTS

<b>AAMC Questionnaire</b> – You should have received an email from the AAMC with a unique link to access the questionnaire. IF you need the email resent, please contact <u>GQ@aamc.org</u> .
Graduation paperwork: Submit to OMSA by noon on Friday, March 27, 2020.
<b>Student Loan Borrower Exit Counseling</b> : The SOM Financial Aid Office conducts group meetings to advise borrowers of their rights and responsibilities and to provide information about numerous repayment plan options. Sessions will begin in April and students will be informed of the dates via email.
Forwarding Address - Update your mailing address and personal email address in LoboWeb.
Academic File – Review academic file, and, if necessary, contact faculty to request that delinquent evaluations be sent to the OMSA immediately. ALL course evaluations must be received by OMSA prior to graduation.
Lockers – Remove personal belongings from main hospital and Pavilion lockers no later than April 1, 2020.
Library - Return all books and materials to the Health Science Center Library.
Holds – Make sure all holds, financial or otherwise, are removed from your UNM records and accounts. The registration hold will be removed once you graduate.
Transcript – Go to <u>http://registrar.unm.edu</u> to request your final official UNM transcript from the Records and Registration Office and to learn about fees and procedures. Ask that your request be held until final grades and degree are posted.
Diploma – OMSA will notify you when your diploma is ready for pickup in the office. If you are unable to pick it up, please provide a mailing address at the time of notification and we will have it sent to you.
*ID Badge - Return your HSC/SOM photo ID badge to the SOM Office of Medical Student Affairs. [If you match to a residency at UNMH, you will be issued a new Resident ID badge.]
HSCLink/Outlook Email – Stop by the HSC Library Help Desk to cancel your email account and network access. [If you match to a residency at UNMH, you do not need to cancel email services.]



# **PHASE III CREDIT REQUEST FORM – INSTRUCTIONS**

Students are not restricted to the courses listed in the UNM Clerkship Catalog and are encouraged to initiate educational experiences here or at other institutions. However, in order to ensure that such programs have educational merit, <u>all</u> non-catalog experiences must have CSPE approval. Requests must be submitted 45 days in advance of the start of the rotation.

To request approval of a non-catalog experience, the student must:

Complete the Phase III Credit Request Form.
Provide a written description of the course. This should be detailed and must include a description of the rotation, what the student will be doing, responsibility for patient care, requirements for papers, exams, reading, etc.
Present the Phase III Credit Request with Sub-Internship or ICU Credit Request (if applicable) and course description to the appropriate UNM School of Medicine department chair for review and signature approval. Retroactive requests for Sub- Internship or Intensive Care Unit credit will not be considered by CSPE.
Submit the signed paperwork to the OMSA <u>at least 45 days in</u> <u>advance of the beginning date of the course.</u> The request is reviewed in that office and in the Office of Undergraduate Medical Education before it is forwarded to CSPE for consideration.

The student will be notified by e-mail of CSPE's decision regarding the request.

Note: A student who takes a non-catalog course without the required prior approval of the Committee of Student Promotions and Evaluation will not receive credit for the course, regardless of the grade given by the course instructor.

#### Following approval:

- 1. If you signed the form, the course will automatically be added to your schedule.
- 2. If you did not sign, complete a Course Change Request in OMSA. Department approval signature is not required. Instead, note on the signature line "Approved by CSPE."
- 3. <u>Before leaving for your externship, request an evaluation form from OMSA to take with you to your rotation.</u>

Credit for a course will not be given until a completed UNM Phase III Evaluation form with a passing grade is received in OMSA.



# PHASE III CREDIT REQUEST FORM

This form is required for all electives completed away from UNM.

Student Name:	ID#:
Phase:	Date:
Student must complete each section	
I. Course Information:	
Course title:	
University/Location:	

Instructor's na	ame/department: _		
Dates:	to	Overall Length: 🗌 4 weeks	🗌 8 weeks
Credit Type:			
🗌 Clir	nical Elective	🗌 Non-Clinical Elective	
🗌 Suk	o-Internship (This ty	ype requires additional paperwork.	)
🗌 Inte	ensive Care Unit (Th	his type requires additional paperw	ork.)
🗌 Oth	ner (Please explain)	):	

- II. Course Description: A detailed course description must accompany this request.
- **III. Department Approval:** Student must obtain UNM departmental approval before submitting request to the Office of Medical Student Affairs.

Name of UNM Phase II Clerkship/Rotation Director

Signature

Date

IV. Course Change Request: If approved, this course will be added to the student's class schedule. If the student chooses not to have this course added at approval, or if the rotation is cancelled, the student will need to complete a Course Change Request to drop it at a later date.

Student Signature	Date
OMSA Use Only OMSA signature: UME signature: CSPE signature:	Yes / No Date: Yes / No Date: Yes / No Date:

Rev 12/29/18



# **COURSE CHANGE REQUEST – ADD/DROP FORM**

Student Name:	ID#:
Class of:	Today's Date:
A	DD
Course Name:	
Course Number: CLNS: Co	ourse Dates:to
Dept. Signature:	Date:
For OMSA use only: CRN: DB:	INB:
·	
	OP
Course Name:	
Course Number: CLNS: Co	ourse Dates:to
Dept. Signature:	Dato
For OMSA use only: CRN:	DB: INB:

Rev 12/29/18



# VLSO/VSAS – ADD/DROP FORM

Please submit at least 30 days prior to the start of your Away Rotation

Student Name:		ID#:
Class of:		Today's Date:
	ADD	
Course Name:		
Course Dates:	_to	
Location:		
For OMSA use only: CRN:	DB:	INB:
	DROP	
Course Name:		
Course Dates:	_to	
Location:		
For OMSA use only: CRN:	DB:	INB:

Rev 12/29/18



# **COURSE ADD REQUEST – RESEARCH ELECTIVE**

Student Name: \_\_\_\_\_ ID#: \_\_\_\_\_

Class of: \_\_\_\_\_ Today's Date: \_\_\_\_\_

Circle One: 901 902 903					
Course Number: CLNS:		to			
Agreed upon expectations and/or goals t	for evaluation (please sun	nmarize):			
Student Signature: Research Mentor Name: Research Mentor Signature:	Date:				
	DB:	<i>INB:</i> Rev 12/29/18			



## **PHASE III STUDENT EVALUATION**

Student Name:	ID#•
	ID#.

Rotation:		

Dates: _	through	

#### Evaluations are due TWO WEEKS after completion of the rotation. Please return to the Office of Medical Student Affairs (hsc-OMSA@salud.unm.edu).

Overall Evaluation	<b>Overall Evaluation</b> : Choose one of the following grades to describe the student's						
performance: Outstanding, Good, Satisfactory, Fail, or Incomplete. Check only one grade.							
Note: The grade of "I" is only given when circumstances beyond the student's control have							
prevented compl							
Grade: For all class					901 Research		
					lective ONLY		
	□S			□ CR			
90-100 80-89%	70-79%	Below 70%	Incomplete	Above 70%	6 Below 70%		
Expectations:	-	1					
	Minimal	Inconsistent	Consistent	Always	Not		
	<10%	10-50%	51-90%	>90%	Observed		
Professionalism:							
Reporter:							
Interpreter:							
Manager:							
Educator:							
<b>Narrative Evaluation:</b> Be as detailed as possible in your narrative. Explain "above" or "below" expectations; cite student's strengths and areas of needed improvement. Please attach additional pages for extended comments.							
Amount of Contact:							
Recommended remedial work/suggestions for improvement:							

Evaluator Signature: This evaluation must be signed by the evaluator for OMSA to accept it.

Faculty Attending Name: \_\_\_\_\_

Faculty Attending Signature: \_\_\_\_\_\_ Date: \_\_\_\_\_\_

For OMSA use only: CRN: \_\_\_\_\_ 🗆 DB 🗆 INB By: \_\_\_\_\_

*Date:*\_\_\_\_\_ Rev 12/29/18



# **Research/Scholarly Project Evaluation Form**

#### FINAL PROJECT MENTOR EVALUATION FORM

Please make relevant changes to the form as suits the particular project. Complete, sign, and submit to the Office of Undergraduate Medical Education in Fitz Hall Room 106 or email directly to Dr. Paul McGuire (<u>PMcGuire@salud.unm.edu</u>). Thank you!

Student Name	Mentor				
	Name				
Title of Project					
Format of	1. Oral or poster presentation				
Final Project	2. Scholarly paper submitted to UNM SOM				
	<ol> <li>Author or * major co-author of manuscript submitted for publication (*one of first three authors)</li> </ol>				

Using the five point scale below, please evaluate the students' project performance:						
1=Unacceptable; 2=Marginal; 3=Acceptable; 4=Very Good; 5=Outstanding						
	1	2	3	4	5	
A. Theoretical Understanding						
B. Data Collection Performance						
C. Data Analysis Performance						
D. Intellectual Curiosity						
E. Organizational Ability						
F. Motivation & Perseverance						
G. Integrity						
Overall Grade: Credit No Credit						
Faculty Recommendation for Distinction in Research: If yes, please give						
reasons.						
Comments:						

Signature of Faculty Mentor

Date