

The content of the Transitional Year program is specifically stipulated by the ACGME in the program requirements for the Transitional Year. During the 12 months of the program, at least 24 weeks of the curriculum must be in disciplines that offer fundamental clinical skills, that is, emergency medicine, family practice, internal medicine, obstetrics and gynecology, pediatrics or surgery. Fundamental clinical skills are further defined as developing competencies in obtaining a complete medical history, performing a complete physical examination, the ability to define a patient's problems, the ability to develop a rational plan for diagnosis, and the implementation of therapy based on the etiology, pathogenesis and clinical manifestations of various diseases.

In addition, Transitional Year programs are required to provide no fewer than eight weeks of electives. Transitional Year programs must also have at least a 4-week rotation in emergency medicine and a 4-week experience in ambulatory care.

As stated previously, Transitional Year residency programs are independently accredited by the ACGME. This is of some importance to the resident in that any program so accredited will have to meet minimum standards in order to maintain accreditation.

The other option, completion of one year of a residency in another acceptable specialty residency, is not independently accredited by an external organization, and consequently provides a more variable experience. The quality of these experiences can be and in many cases is exceptional. The quality, however, is more dependent on the underlying quality of the parent program and the integrity of the institution where the parent program is located. For example, there is no defined curriculum for one year of an internal medicine program. While this could include a variety of experiences, even including electives in such rotations as surgery and pediatrics, it is equally possible that it could include only ward medicine and intensive care unit opportunities.

The decision to enter a particular CBY program is frequently predicated on a number of issues. Geography is frequently important, as residents wish to minimize their potential number of moving experiences, or wish to remain close to a significant other, spouse, or family. Frequently, residents will also choose to match a first-year program close to their ultimate categorical program choice. For those residents who are not confined by these constraints, there are a number of good choices available. In the 2006 NRMP match the following positions were available. The 2006 NRMP match offered designated positions in transitional year, preliminary surgery, and preliminary medicine. It is unknown how many students opted for a single year in other programs. Ninety-four Transitional Year programs offered 759 positions, with 748 or 98.6 percent filling. Two hundred seventy-nine preliminary surgery programs offered 1,234 positions with 748 or 60.6 percent filling. Two hundred eighty-five preliminary medicine programs offered 1,943 positions with 1,749 or

90 percent filling. As you can clearly see there are a variety of available choices.

Numerous sources are available on the web to assist the student in making his/her choice. An incomplete but useful list follows:

1. <http://www.ahme.org/councils/ctypd.html>
2. Search Google for "preliminary medicine" and "preliminary surgery"
3. <http://www.ama-assn.org/ama/pub/category/2997.html>
4. www.scutwork.com

CHAPTER 11

ERAS: The Application Process

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The Electronic Residency Application Service (ERAS), provided by the American Association of American Medical Colleges (AAMC), allows applicants, Deans' offices, and other credentialing organizations to submit materials electronically to residency programs and program directors. It allows for electronic transmission of medical school records, letters of reference and other credentials, such as USMLE/COMLEX scores, for application to fellowship, osteopathic internship and residency programs. Anesthesiology residency programs began using ERAS in 2001. Use of ERAS is not mandatory and is independent of the National Residency Matching Program ("match") process. However, it is the preferred method of application by most programs. Few programs in the country still accept "paper" applications.

Prior to using the ERAS system, students can research programs and contact them for information regarding requirements and processes. It is important to note that ERAS does not set program application deadlines. These are set by the individual residency programs.

Fees for applications are based on the number of programs selected per specialty. The fee schedule can be found on the ERAS website. The system can automatically calculate fees. Payments may be made online.

There are four components of ERAS:

- *The MyERAS Website* – This is where the candidate completes the application and personal statement, selects programs and assigns documents to be received by those programs.
- *The Dean’s Office Workstation (DWS)* – This is where the Designated Dean’s office uses software to create ERAS tokens that candidates use to access MyERAS; also to add supporting documents to the application, e.g., transcripts, photos, Dean’s letters and letters of recommendation.
- *Program Director’s Workstation (PDWS)* – This software is used by program staff to receive, evaluate and rank applications.
- *The ERAS PostOffice* – This is a central bank of computers that transfer applications. The candidate can track his or her file on the ERAS PostOffice through the Applicant Data Tracking System (ADTS).

The first action is to contact the Dean’s office. Each office follows its own procedure for applications, including the schedule for distributing materials, downloading applicant files, scanning transcripts, attaching documents, processing letters of recommendation and sending files to programs. RESPECT DEADLINES. Do not assume they can transmit files at the last minute.

The usual process for applications through ERAS is listed below (*approximate dates/exact information can be found on the ERAS website*):

The ERAS Post Office closes on May 31 every year to prepare for the next application season. Records are NOT maintained from year to year, i.e., all servers are purged of all applications and supporting documents.

Applicants work mainly with the MyERAS website, which has the following areas:

1. **Account** – Gateway to the entire application service; candidates can review checklist for progress on application; update profile with new contact information; check messages from programs.
2. **Application** – Contains the majority of information about the candidate; includes educational and work experience, honors, published papers, etc.; can be completed in multiple sessions, but once certified and submitted, cannot be altered. Twelve pages.
3. **Documents** – Candidates create their personal statement; identify individuals for letters of recommendation; release COMLEX or USMLE transcripts.
4. **Programs** – Search for and select programs to receive application materials; assign USLME/COMLEX transcript, personal statement and letters of recommendation to individual programs.

The ERAS website (<http://www.aamc.org/students/eras/start.htm>) contains detailed information as does the Dean’s office. Good luck!

Date	ERAS	Candidate/Applicant
Late June	Applicant manuals available for download on ERAS website	Obtain MyERAS tokens from Dean’s office
July 1	MyERAS website opens	Begin working on applications
July 15	Osteopathic internship programs contact ERAS PostOffice to download applications	Apply to osteopathic internship programs
September 1	ACGME programs contact ERAS PostOffice to download applications	Apply to ACGME-accredited programs
November 1	Dean’s letters are released	
December	Military match	Military match
January	Urology match	Urology match
Late January	Osteopathic match	Osteopathic match
March	NRMP match results	NRMP match
May 31	ERAS closes until next year	