

It will take your application down a few notches and perhaps cost you a residency position.

We encourage you to get into the lab and participate. Find a mentor and be relentless that you want to do some type of research project and follow through. You will be rewarded for your efforts when you get accepted into an anesthesiology program.

### Some Helpful Hints

Congratulations on deciding to join the field of anesthesiology. You made an excellent decision. Remember to get the basic requirements aligned and then work toward adding extra elements to your resume that will make you an extremely competitive candidate.

To prepare for a successful interview have a trusted professor or mentor give you a mock interview. Gain feedback on your appearance, speech and behavior. You don't want to appear coached, but the last thing you need on interview day is to represent yourself poorly. On the day of your interview dress professionally. You want the interview committee to look at you as a future partner. Smile and act confident. You are an excellent candidate. Listed below is a checklist of items/tasks to be completed prior to the interview in order to look, act and talk like a successful applicant.

### Considerations for Presenting a Positive Image When Interviewing

#### Walk the Walk

1. Subdued mannerisms (no wild hand motions)
2. Manners ("Yes, doctor" and "No, thank you")
3. Firmness of handshake (no limp fish, no weight lifter's grips)
4. Maintain eye contact (don't stare!)
5. Posture (no slouching, small of back against chair)
6. Speaking (not too loud, not too loquacious)
7. Tone of voice (vary pitch, use pauses to keep interest)

#### Talk the Talk

1. Be honest, tactful, respectful
2. Know your personal topics well (research, anesthesia interest)
3. Learn about the program via website, literature, and ask follow-up questions based on that reading

#### Look the Look

1. Appropriate appearance (remove facial piercings or unnatural hair color)
2. Appropriate dress (look professional)
3. Being overdressed may be as bad as sloppily dressed (could look too "slick")
4. Remember your appearance is a nonverbal form of communication

## CHAPTER 8

### Choosing a Residency

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Having made the decision to pursue a career in anesthesia, the next decision to be made is where to go for residency. The National Resident Matching Program (NRMP) match process can be intimidating; however, a systematic approach that assesses your goals as well as your strengths and weaknesses as a learner will help guide you to the correct decision.

#### Self-Assessment

The first fact that needs to be established is that not every person learns best in the same environment, and as such there is no single "best" program. While many people ask "What is the best program," the question should be "What is the best program for ME?" This is an important distinction because it implies that before you can start to examine programs, you must first examine yourself. Looking back over your education to date, where have you had the most success? Where have you encountered difficulty? Do you function best in a small, more intimate setting or in a large group? Are you a very self-directed person or do you function better when you have mentorship and direction? Would you rather be in an urban or a rural environment? These are but a few of the many questions you must ask yourself before you get started. This type of personal introspection is difficult at times, but it is important to be honest and critical if you want to find the best fit. The reality is that you have already accomplished a great deal and passed a number of competitive selections to get to this point. You have developed a set of strategies for learning that have served you well and set you among some of the most educated people in the country. The only thing standing between you and your future career is post-graduate training, and selecting a program that matches well with your personality and learning strategies will be the key to future success. It is often helpful to get an outside perspective from a trusted friend or mentor when considering these issues, but the end result should be a personal list of criteria to use when assessing programs.

#### Identifying Programs

Once your self-assessment is complete, the next step is determining your list of programs to send applications. The simplest way to start this process is to sort programs based on your list of personal criteria. If location is important, then an initial sort by geographic location would be important. If the potential for research or a future academic career is important, you may want

to sort by institutional reputation. Most residency programs have excellent websites that will help you identify important aspects of the program. Keep in mind, however, that these are their websites and are meant to paint the program in a positive light. Statistics from NRMP are helpful in determining the number of programs to visit and are available from their website (<http://www.nrmp.org/>) in the section on data and reports. NRMP data from 2007 suggests that senior United States medical students interested in anesthesiology who ranked eight programs or more had a very high rate of matching in anesthesiology compared to those who ranked a lesser number of programs. If we assume that not every program we visit is one we would rank, then you probably need to interview at more programs than you intend to rank. Depending on your academic statistics and USMLE scores you may have to anticipate sending out even more applications to ensure an adequate number of interviews. Once you have a “wish list” of programs, it is important to sit down with a faculty member or mentor from your home institution who can help you sort them out. As of 2007, there were 131 anesthesiology programs accredited by the ACGME, so it is likely that the faculty at your institution have firsthand knowledge of a large portion of these programs.



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### The Application

The application through the NRMP match process is fairly standard and straightforward, but based on my experience as a program director, I will offer you the following advice about the application process:

1. Make sure your application is as complete as possible on the day the ERAS application process opens (typically on or around Sept. 1). As anesthesia has become more competitive, programs have been offering interviews earlier and earlier and the best application in the world will not get interviews if it is not available relatively early.

2. Have a faculty member, advisor or mentor review your CV and personal statement for content before you submit. I advise my medical students to have a personal statement that gives me insight into who they are (and not why they like anesthesia). In addition, I advise people only to list research and activities where they have made a substantial contribution. Go for quality, not quantity.
3. Have a trusted family member or friend review your CV and personal statement for grammar and spelling. Anesthesia is all about attention to detail and your application is the first impression we have of you.

### The Interview

Once you submit the paperwork the real fun begins. Remember that the interview process is as much for you to evaluate the program as it is for the program to see you. Preparation for your interview starts before you arrive. Start by going to the ACGME website (<http://www.acgme.org/acWebsite/home/home.asp>), click on “Review Committees > Anesthesiology,” and download and review the Common Program Requirements. These requirements are the minimum standard that a program must meet to maintain accreditation. While there are a few specific requirements, such as the requirement for “Forty anesthetics for vaginal delivery” (Section IV Patient care A 5 a (1) (a)), there are others that are vague, and it is in these vague requirements that you can find a measure of a program’s commitment to education. Take for example the requirement 2 D (1), “There must be adequate space and equipment for the educational program ...” How is space allocated for education? Are there sufficient areas to study? Are there resources for education readily available (i.e., library, journals, texts, computers)?

### Accreditation

Periodically, programs are reviewed by the ACGME Resident Review Committee (RRC) for Anesthesiology and reaccredited based on the criteria set forth in the program requirements. At the time this article was written, program accreditation can be from 1 to 5 years, with most programs receiving 4- or 5-year cycles. In addition to an accreditation cycle, programs often receive citations that describe areas where the RRC felt the program was deficient. The citations are accompanied by a recommendation that these issues receive special emphasis prior to the next accreditation cycle. One indication of how a program has progressed and what they have done to improve education is to ask what their accreditation cycle is and how they have addressed any citations they have received.



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### Outside of the O.R.

Beyond the obvious areas of clinic teaching there are several areas where a program can show its commitment to education. Can faculty be promoted in an education or clinical educator track? Are there funds available (endowments, grants, scholarships) for resident research and presentation at meetings? Are the residents engaged in political advocacy (state and ASA resident components)? Do residents sit on departmental or institutional committees? Have they developed any novel or unique rotations for residents outside of the O.R.?

### Personal Fit

Perhaps most importantly is the question of personal fit. When all is said and done, any accredited residency program should be able to help you become a competent anesthesiologist, but not every program will be a fit for your personality. In his book, “The Five Dysfunctions of a Team,” Patrick Lencioni discusses the fundamental aspects of cohesive team function. The foundation is Trust; trust that the team shares the same goals and objectives. In this case, these goals and objectives should focus around concepts of excellence in patient care and excellence in education. Lack of trust results in **Fear of Conflict** and the inability of the team to openly discuss issues of concern. Without effective and open communication there is a **Lack of Commitment**. If your concerns have not been heard, why would you be expected to commit to the plan? Without commitment there can be no **Accountability**, and as a result no one takes responsibility for the education process. Without accountability there can be no **Results**. In this case the results are safe and effective patient care and your education. **Trust, Communication, Commitment, Accountability, and Results**. As you consider each program, ask yourself how the program lives up to these values as they relate to your future as an anesthesiologist.

Did you see these values in their residents, their faculty, their leadership, their curriculum? Did you get the impression that the residents you met would be colleagues you could rely on, or new best friends? Was the program open to critique, willing to make change and responsive to its residents? Was the executive leadership accessible to the residents and open for discussion? Is the department willing and able to make the same commitment to you that you are prepared to make to them? If the answer to these questions is “yes” then you may have just found your new home.

Good luck!

## CHAPTER 9

### Categorical Versus Advanced Programs

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The educational pathway for anesthesiology residency is 48 months and can be accomplished by two distinct approaches. One option is to match into a program that offers 48 months at one site (categorical). The other option is to match at the PGY-2 level (advanced) and choose a PGY-1 year at another site. Each of these choices has advantages and disadvantages that should be considered by each student as an individual.

Many students choose the categorical option for practical reasons. Being at one institution for the entire residency means only having to move once. It also means that at the start of clinical anesthesia (PGY-2), the resident has the familiarity with the hospital that originates from being an intern (PGY-1) in that hospital. Other students choose an advanced program for equally practical reasons. Some students want one more year in the same city as the medical school for personal reasons (e.g., family, significant other). Other students have formed satisfying professional relationships with faculty who also participate in PGY-1 programs, and they prefer to continue these relationships during the legendary “intern” year. Some osteopathic students choose a traditional rotating osteopathic internship to facilitate working in the small number of states that require D.O. physicians to complete an internship approved by the Osteopathic Society.