

Hints for students in the PM&R application and interview process

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Introduction

Many years of hard work have brought you to this point. Your ERAS application for residency training deserves a lot of attention to detail. PM&R programs receive hundreds of applications each year and must be selective about who they will interview. These hints represent the collective thoughts of program directors and attending physicians who have read many applications over the years.

Personal statement

There are many ways to approach the personal statement. These are some ideas, not an outline.

Remember that this is your chance to clearly express who you are and what you want and to tell the reader why/how you stand out from the crowd. Spend a lot of time on this part of the application until you feel confident that it reads easily, is interesting, and is a sincere expression about you. Consider having friends, colleagues, or family read it and offer their thoughts. The reader should want to meet you after reading your statement.

Keep it to one page, with reasonable font and margins.

Make it flow. It should be a piece of writing, not a list. Tell your story or use a theme to keep it interesting. Just like any good piece of writing, it is helpful to introduce a central idea early on, expand the idea with colorful examples, then sum it all up and finish strong.

Write about what you feel passionate about and relate it to why you want to go into PM&R /will be a good psychiatrist. You don't have to make up a dramatic reason for choosing this specialty- that can sound contrived.

Let yourself come through, but do not be too offbeat; you are applying in the medical profession.

Show, don't tell. In other words, if you think you are a smart, compassionate person and a good team player, do not write, "I am a smart, compassionate person and a good team player...". This comes off as arrogant and nobody will believe you. Instead, give a (hopefully colorful) example that demonstrates these traits.

Do spell and grammar check it more than once. "Paraplegic" and "Tetraplegic" are adjectives, not nouns.

Content suggestions:

- What drew you to PM&R (this can include experience with disabled children, working with seniors, family, and or memorable relationships)
- Describe some clinical exposure in PM&R
- Describe long term goals, if you have them

If you have something unusual/negative (e.g. unexpected leave of absence, failed USMLE) about your application, you might want to address it in your personal statement. You can use this as a

way to describe your approach to self improvement or overcoming obstacles; definitely be prepared to discuss it in your interview). If you fail to explain discrepancies in your training it can raise a red flag, and might tip a program toward passing over your application. It is much better that you address it up front in your personal statement, than to leave it for the interview.

Anything in your personal statement becomes fair game for an interview question. Be honest. Only include things you feel familiar with/comfortable in discussing. In response to an interviewer's question, it's not good form to say: "It's in my personal statement."

CV

The list of hobbies should be true, current hobbies, not something you did once; you will get asked about them in the interview.

Use a professional photograph, not one from a booth in the bus station. Dress professionally for it. If your picture is unprofessional, the program may think that you are unprofessional.

Letters of recommendation

No family friends, even if you did a rotation with him/her.

No employers unless you were employed by a good research scientist who you think will write you a strong letter.

Get 3 letters from attending physicians, especially one in PM&R. DO NOT use a resident, chief resident, or fellow.

Choose letter writers who know you well and think highly of you. This seems obvious but too often people choose "big name" letter writers who write poor letters. These don't help your case. Do ask the writer if they feel they know you well enough to write a strong letter. This gives them the opportunity to decline (you do NOT want a lukewarm letter). If your letter writer thought you were going into orthopaedics or anesthesiology, he/she may mention this in the letter. It will look really bad to the PM&R program director reading it to realize that it was intended for a different specialty.

Board scores have some importance, but letters of recommendation weigh heavily in the evaluation process. If all a letter writer can say is to recite your board scores, then that writer doesn't know you well enough to write a letter. Ask for letters of recommendation during your rotation, don't wait until 6 months later, and expect the attending to remember much about you.

Give your letter writers your CV and personal statement; you can also give them the attached recommendations for content in letters of recommendation. Many attending physicians write letters, but do not participate in the recruitment process, and are unaware of what residency programs find helpful in a letter of recommendation.

Interview day

Read the program's website in advance. If you know who will interview you, consider looking up their specific areas of interest on the program website (this will really impress some interviewers as long as you don't Google them and tell them things you know about their personal life- then they might think you are creepy). In general, you know you will meet with the Program Director.

Be prepared to discuss:

Research: if you put it on your application, expect detailed questions about it.

PMR exposure

Your 5 year plan/long term goals; however, you do not have to commit to a plan before you've been exposed to all of PM&R
How you spend your free time
Leadership roles; what have you actually done that demonstrated leadership skills?
Your strengths and weaknesses
What makes you unique as an applicant?
How do you learn best?
Who are your role models?

Be prepared with some questions for each interviewer.

If you do not intend to go to your interview, call/email the program coordinator as soon as possible; the program may be able to interview someone else that day and you will not have wasted the time of faculty who are reviewing your application. In PM&R, the residency coordinators talk to each other!

Group activities: even if you are shy, it's important to interact with other applicants and residents from the program.

Check out this website for more advice on preparing for an interview:

<http://www.ama-assn.org/ama/pub/about-ama/our-people/member-groups-sections/minority-affairs-consortium/transitioning-residency/the-residency-interview-making-most-it.shtml>

Suggestions for authors of letters of recommendation for PM&R applicants

Dear letter writer: These are some features that Physical Medicine and Rehabilitation residency directors find helpful in letters of recommendation.

The letter should be more of an academic recommendation than a character reference. Specific examples of performance are more helpful than vague praise. It is less helpful to re-iterate facts from the CV and more valuable to include a description of the student's performance that can't be gleaned from a CV or Dean's letter.

Suggestions for content:

Describe rotation experience and its objectives

- Duration

- Setting: outpatient, inpatient, private office, community / county / or tertiary care hospital or research activity

- Other trainees on the rotation: residents, students

- Workload for the student

Degree to which student mastered objectives

- H&P

- Patient presentations

- Differential diagnosis and management

- Research progress

- Professionalism and humanistic qualities, work ethic

- Ability to work with others and ability to work independently

Describe any original presentations or examples of leadership by the student

Rate overall performance on the clerkship/elective or in the lab; would you be pleased to have the student in your program?

There is no rule on length but 2-3 paragraphs should suffice

Proofread and print on formal letterhead; letters on blank stationery raise a red flag about authenticity.