

How can I succeed in my Sub-I month?

- You don't have to do Sub-I at Uni.
- Know everything about your patients from memory: PMH, indications for their procedures, etc.
- Talk to and examine your patients.
- Understand the significance of data and learn to anticipate the next step, eg "Pt's K+ was 3.2... so we supplemented it."
- Learn to assess patients. Are they doing better, worse, or the same?
- Learn to formulate a plan.
- Show that you are a team player. Help your colleagues. Teach the junior students.
- If there are a lot of students on your team (especially at University), volunteer for a week of night float. This is a great opportunity for one-on-one contact with your resident/intern.
- Face-time with attendings in the OR doesn't necessarily make you look good. Going the extra mile, eg volunteering for night float and taking great care of your patients makes you look good.
- If your patient goes to the OR for emergent procedures, be there. Even if it's off hours.

New work hours

- Intern hours are changing, but medical student hours are unlikely to change significantly.

Visiting electives

- You will get a better flavor for a program if you do a rotation there. It does not guarantee your spot on their rank list.
- They can help you or hurt you. And it only applies for that institution.
- LORs from visiting electives have little value.

Research

- Contact Dr. Schmidt for referral to other faculty for research.
- Research is mildly beneficial. Some programs/fellowships value research highly and some programs do not at all.
- Research experience may expose you to the academic setting and help you formulate career plans.
- Your research mentor may write an excellent LOR.
- Your research may be interesting to talk about during interviews.
 - Make sure you know exactly what your research was about (also be able to discuss anything else in your CV comfortably)
- FYI: IU Surgery does not require or expect research experience, but will accommodate you if you would like to take time off for research during residency. You will not be required to find your own funding for research at IU.

Personal statement

- Describe something about yourself that cannot be gleaned from the rest of your application packet.
- Describe briefly what led you to surgery. Personal experience is helpful.
- Leadership positions
- Artistic experience
- Academic achievements are already documented elsewhere
- Avoid controversial topics
- One page only!!
- Put some personal flavor in there!

Letters of Recommendation (LOR)

- Who: must be a surgeon, more well known is better
 - Opening sentence should document how THEY know YOU. Ideally they know you well and can provide insightful comments.
 - Dr. Canal or Dr. Havlik will provide a chairman's letter. Also Pitt, Nakeeb, etc.
 - Chairman will make one phone call to your top choice program to advocate for your candidacy
 - You may get a letter from a non-surgeon if regarding medically-related extracurricular activities
- How: just ask. Provide your personal statement and CV.
- When: ask them NOW if they are willing. Meet with them in ~August with your personal statement and CV.

Who to talk to for subspecialty surgery (plastics, urology, CV, etc)

- Contact the IU department chairs

How to make yourself the best candidate

- Treat the office staff well on your interview trail! They have a surprising amount of power over your application.
- Work well as a team member
- Get good grades
- Be a good person
- Avoid extremes of physical appearance (eg. Blue hair)
- Solidify that this is really what you want to do.
- You have to be a resident before you can be a fellow. Be dedicated to general surgery.

- The technology you will use as a surgeon hasn't been invented yet. Be malleable.

Where should I apply/interview/rank?

- Look at the match list for previous years and ask people who matched at programs where you are interested for their experiences, POV, advice, etc. After you contact them, you may even be able to stay with them when you interview.
- Apply to about 15 schools. Interview at 10-12 schools.
- Apply and interview at appropriate programs for your academic status – shoot at the right stars.
- Rank only the places where you are willing to go.
- Talk to Dr. Canal or any person on the faculty about programs you are considering. The faculty come from different programs all over the country.
- Don't believe anyone who tells you they will rank you at the top of their list. They won't believe you when you tell them the same.
- Decide whether you want to train at an established vs new program, a community vs academic program, etc. Consider fellowship expectations when choosing a general surgery program (academic is probably better for fellowship programs). Consider the patient population for which you would like to practice (small community vs referral based population). Consider what procedures you would like to do in the future (lap chole's all the time vs trauma vs specialized procedures, etc).
- Pay attention to the location of the hospitals in which you will be working – note the travel time between each hospital and where you plan to live.
- Find out what research requirements/accommodations each program will have.

IU Honors in Surgery Program

- Direct influence on application process: essentially zero
- Indirect influence: will expose you to the research process, may help indirectly

Fourth year planning

- It's not valuable to do too many surgical rotations – do just enough to solidify your interest in surgery (2 or 3)
- ICU rotations are helpful
- Medicine subspecialty rotations are helpful – cardio, etc.
- "Preparation for Surgical Internship" course in April – if you didn't get it, keep April open with an elective you can drop at the last minute and give Rhonda Brock your name.