

ANESTHESIOLOGY

Specialty: Anesthesiology

Advisor for Specialty (if you had one): Dr. McNulty

Did you use: ERAS

Number of programs applied to: 12 Was this number sufficient? Yes

Number of interviews attended for specialty: 8 Was this number sufficient? Yes

Interview season (month/year): 11/05 to 1/06

Typical structure of interview day: Intro lecture, 3-4 1/2hr interviews with attendings or chief residents, tour, lunch with residents.

Popular topics covered in the interviews: Current events, my interests, my history, lots of questions asked by me.

Some difficult questions/unusual tasks (tying knots, etc.): Pretty straight forward really. Mostly very low-key.

How did you prepare for your interviews? Program website

Did you do an away rotation in your specialty field? Yes. Did you find this helpful as an applicant? Yes, gives you a chance to see how things are done somewhere else

Additional comments/advice: Keep it realistic and go with your gut.

Specialty: Anesthesiology

Advisor for Specialty (if you had one): N/A (Students can see Dr. McNulty if they want an advisor.)

Did you use ERAS or SFMatch or Other: ERAS

Number of programs applied to: ~15 Was this number sufficient? Yes

Number of interviews attended for specialty: 9 Was this number sufficient? Yes

Interview season (month/year): 11/2005 to 1/2006

Typical structure of interview day: Brief orientation/welcome; Tour of hospital; Occasionally a tour of the O.R. (required changing to scrubs or putting on bunny suits); Lunch; Interviews (either before or after lunch). Some programs had a dinner with the residents on the evening prior to the interview.

Popular topics covered in the interviews

-Why anesthesiology?

-Interests outside of medicine?

-Interesting cases that you have seen?

-Plan for 10 years from now?

-Research experience? (research not required; only a common topic because I had done research).

Some difficult questions/unusual tasks (tying knots, etc.):

-Not difficult, but I always hated the "Tell me about yourself" question.

-Why would you be an asset to our program?

-What qualities do you have that will make you a good anesthesiologist?

How did you prepare for your interviews? I went into the interviews knowing what I would say for all of the common questions (listed above). More importantly, I prepared by reviewing the program's website (or whatever info I had on the program) and coming up with questions to ask the interviewer (some interviews were 30 minutes of "Do you have any questions for me?").

Did you do an away rotation in your specialty field? Yes. One away rotation (Penn) done in Oct/Nov of 4th year (well after the application process had started). Too late to ask for letters of recommendation, but it was worth it because it allowed me to see how the program compares to Jefferson. Also, gave me a chance to see how happy the residents were with the program. I was able to interview while on the rotation so I didn't have to come in on a regular interview day.

Specialty: Anesthesiology

Advisor for Specialty (if you had one): Dr. Stephen McNulty

Did you use ERAS or SFMatch or Other: ERAS

Number of programs applied to: 5 Was this number sufficient? Yes, but I only did so after I had Dr. McNulty review my CV and advise me how many programs to apply to.

Number of interviews attended for specialty: 5 Was this number sufficient? Yes

Interview season (month/year): 11/2005 to 1/2006

Typical structure of interview day: Intro to the program. Rotate through 3 or 4 faculty interviewers (often including the Chair and residency program director). Lunch. Tour. Interview day generally begins 7-8:00 am and ends by 2:00 pm, even at really big academic programs.

Popular topics covered in the interviews: Mostly very conversational. Interviewers will usually start with biographical questions. (Where are you from? Etc.). May ask about something from your CV or personal statement. In general, they try to identify a personal interest or experience that you can talk about fluently. For example, I got lots of questions about past research and my interest in travel, international health and foreign language because my CV was heavy on that. At some of my best interviews, I even ended up talking about things like opera and Latin American literature. In general, they are not trying to test medical knowledge; instead they want to gauge how good you are at communicating and interacting with people. I get the feeling they also want to know how engagingly and extensively you can talk about a topic that you know well.

Some difficult questions/unusual tasks (tying knots, etc.): Most are very friendly. Tougher ones I encountered (and only two people asked these, see program specific info below).

Can a surgeon tell the difference between a nurse anesthetist and an anesthesiologist while they're doing a case?

If you were running a hospital, why would you hire an anesthesiologist instead of a nurse anesthetist?

What happens if a surgeon disagrees with an anesthesiologist about whether a patient should go to the OR?

Do you know what medical students recently cited in a survey as the most important factor in their specialty choice?

Were you ever in a situation where you felt like you needed help but didn't call for it in time? What did that teach you?

How did you prepare for your interviews? I asked other applicants and residents that I met on other interviews (including internship interviews) about what their experience interviewing at such and such a program was like. I asked in particular about their experience meeting with individuals like chairs and residency program directors who everyone interviews with. This yields very useful information and you should do this for all the programs you are most interested in.

Did you do an away rotation in your specialty field? Yes, at UW. Very helpful to develop connections.

The chief resident and attending in charge of med students helped me out by spreading good rumors about me before my interviews. One of my interviewers didn't even get to meet me, but had worked with me and filled out an interview evaluation for me anyways (a long story as to why).

Additional comments/advice: Program Specific Advice (I only applied to west coast programs)

Stanford: My primary interviewer revealed some useful secrets to me: It is your first full 30 minute interviewer who is most important at Stanford because he or she will be the one who presents your file to the committee while the rest of your interviewers only review your file as auxiliaries. He also told me the Chairman interview is not actually very important (and is always very brief). Also, he let me know that I would get an email, sent to a small number of applicants, at the end of interview day saying that they are almost certainly going to get in if they rank Stanford first. If you get this email, you are in very good shape at this program!

UCSF: At this one, everyone is going to spend 30 minutes with the most famous anesthesiologist in the world, Dr. Ronald Miller (their chairman). Gulp! Seriously, although there were rumors

that he's intimidating, I actually found him to be surprisingly nice and he asked no tough questions whatsoever. The only way you can mess this one up is if you defeat yourself with your own anxiety! Dr. Miller and the program director, Dr. Rosen, are known for being poker-faced and many people commented that it didn't seem like they would let you know whether they liked you or not. With that in mind, just be yourself and don't try to impress. They are conversational interviewers like almost everyone else. Also, the interviews at UCSF almost always go overtime, so don't be alarmed if you find yourself held up and half an hour behind schedule: everyone rotates through the same four interviewers, and you're all in the same boat.

UCLA: The chairwoman, Dr. Kapur is also a celebrity in the field because she is president of ABA. She is big on the concept of leadership in anesthesia and likes asking about applicant's leadership experience in extracurricular activities, jobs, research etc.

UCSD and UW: UW grades interviewees on a scale of 1 to 6 for several qualities, including academic competence, personal qualities, and interest in the UW program. If you get straight 6s, they will send you a letter in late January and tell you this puts you in the top 20% or so of the interviewees.

My very first interview was with a very tough UW interviewer (you will not meet him – he was not on the residency selection committee, and it's a long story how I ended up getting him). He absolutely mopped the floor with me, asking the tough questions I mentioned above. When I was unable to satisfy him, he then “gave me the answers” that he was looking for. I felt terrible afterwards, but every other interviewer I had was great (And unlike him, they were actually on the committee! Which is the only way I managed to score straight 6s).

As it turned out, this demoralizing experience proved to be very useful many months later at the coda of my season. The only other tough interviewer I ever met was Dr. Piyush Patel at UCSD, and he asked almost the exact same questions! This time I scored a home run by providing the answers my UW interviewer gave me (Basically: anesthesiologists are doctors and anesthesiologists are nurses. Anesthesiology is a dynamic medical field and the leadership of doctors is needed to constantly improve perioperative medicine and our contributions to other medical fields. Anesthetists do great and necessary work but it takes physicians, not technicians, to be able to understand the total perioperative medical context of more complex patients and cases. When surgeons and anesthesiologists disagree, the anesthesiologist is responsible as a consulting clinician for asserting his viewpoint from the perspective of perioperative specialist. But ultimately, you must decide whether you trust the viewpoint of your clinical partner, the surgeon, and whether you wish to stay involved in the case.) He was very pleased with these answers and let me know it. Moral of the story – a bad interview is not the end of the world, and can be a really useful experience if you take advantage and learn from it!

May future applicants in your specialty contact you for advice? Email: Alex.lee@jefferson.edu
