

Playing the game: a four-year quest to become an emergency resident

Kris R. Lehnhardt, MD

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Introduction

“Playing the game” is a term familiar to both medical students and residency programs. It is best described as taking the required steps to earn the residency position that you desire. It is a phrase that draws feelings of both admiration and loathing from everyone involved. While no one likes “the game,” it is understood by all to be a necessary evil, and is played on both sides. I can only comment on the perspective that I have been privy to: the applicant’s side. Therefore, what follows is the opinion of one medical student who successfully “played the game” and became an FRCPC emergency resident.

Step 1: Setting your goal

Choosing your career path is the most important step in the whole process. Without a clear direction to focus your energies, it is impossible to reach your goal. For those of you who knew this was what you wanted when you entered medical school (or possibly before), this is a simple task. However, for most medical students, it is a difficult process requiring a great deal of work and contemplation.

Given the importance of this decision, it is wise to review career options as early as possible. The best advice is to keep an open mind: there are countless stories of students who fell in love with a specialty that they never thought of as an option before experiencing it. Spending time in first and second year shadowing a variety of physicians will give you a glimpse into the multitude of special-

ties. Clerkships are also valuable, and hands-on experience can drive the decision-making process. The combined knowledge of these efforts will enable you to make a decision about your future and set your goals. Now all you have to do is achieve them.

Step 2: Designing and executing the game plan

To design your game plan, you must first know what needs to be done to achieve your goal — getting an interview with the program that you want. Important steps to consider include networking, research, electives and reference letters.

Networking (a term more familiar in business) means getting to know the right people (i.e., those who make the decisions that will affect you). Generally, these include the program director and members of the selection committee. Not only do you need to know them; more importantly, they need to know you and what you have to contribute. This is probably the hardest part of the game because you may be in unfamiliar territory. Be assured that when they get to know what you have to offer, you will increase your chances of success.

Becoming involved in a research project (preferably in an area that interests you) is an important part of the process. Not only is research an important aspect of academic medicine; it is something that many physicians find intriguing and rewarding — and it looks good on your CV. Once the research is completed, make every effort to publish it where others can see it. Submit it as a poster or oral

University of Western Ontario, Division of Emergency Medicine, London Health Sciences Centre, London, Ont.

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presentation to a scientific meeting (e.g., CAEP or ICEM), or if you are highly ambitious, submit it to a peer-reviewed publication such as *CJEM*. Many programs look favourably on candidates with published research when deciding who to interview.

The next step is choosing your electives. These provide an important opportunity for both candidates and programs to get to know one another. Where you complete your electives is largely determined by your approach to the Canadian Resident Matching Service (CaRMS) process, and there are a number of approaches. First, and perhaps most importantly, try to do electives at schools that will train you to be the best emergency resident possible. Finding these schools involves research: ask for recommendations on the best programs and talk to current residents about their elective experiences. Next, there is the “numbers” game, where you can arrange electives at schools with the most emergency residency positions. The thinking is that if you go to places with more spots and get to know more people, your chances of success will improve. Finally, there is the home field advantage. The thinking here is that program directors will take the candidate they know over the candidate they don’t know, all things being equal. Therefore, be sure to spend some of your elective time at your home school, provided you haven’t spent too much time there already. Whichever approach you use, give it a great deal of thought. These experiences will have a profound impact on your success in getting the interviews that you want.

The final component is reference letters. Who you get letters from is almost as important as what they say. Emergency medicine is a relatively small medical community in Canada, and many physicians know one another. The general principle is that if selection committees receive letters from people they know and respect, they will more likely trust their contents. Make every effort to avoid getting a bad reference, which can be devastating to your application.

Step 3: Interviews

After the game plan has been designed and executed, all you can do is wait for the letters requesting an interview to start pouring in. The next step is to plan your CaRMS “tour.” Depending on how many interviews you receive, you could be flying or driving to every major city across Canada over the course of 14 days. This whirlwind traveling adventure can be expensive, generally costing upward of \$2000 for flights, hotels, food, rental cars, and possibly some beverages as a reward for finishing a grueling interview. However, anyone who has done the tour will tell you that it is worth every penny. Not only is it paramount in

achieving your goal but it is also an opportunity to spend time with the other candidates. In fact, many say that this is the best part of the tour, seeing the same faces everywhere you go, whether at interviews, on flights, in hotels or at local watering holes. The familiarity that develops generates a sense of camaraderie and makes the hectic schedule of the tour both manageable and fun.

Residency interviews are similar to medical school interviews — who you are and what you can contribute are under scrutiny. Everyone remembers the painful, pseudo-psychoanalytical medical school questions whose purpose was to discover not what you would say but how and why you would say it. However, as history is doomed to repeat itself, all residency candidates are once again faced with “What are your strengths and weaknesses?” and “Tell me about a time when you were a leader.” Despite this, much of the interview includes emergency-specific questions that are asked consistently across sites, such as “Why Emergency Medicine?”, “Why the FRCPC program?” and “What are your career goals in Emergency Medicine?”

It is important to remember that these interviews are like any other, so preparation is the key. Dress nicely, be polite, think about what you are going to say before you say it, and make sure to have plenty of water handy. Then, when it is all over, shake hands, say thank you and get on a plane to do it all over again. However, like all good things, this too must come to an end. It is only when the whirlwind tour is over that you’ll be able to look back and reflect on all that has happened over the last two weeks.

Now your part is over. You have played the game as best you can. There is nothing more to do except sit back and wait patiently for Match Day. For those who have not experienced it, there are few things in this world more stressful than Match Day: sitting at a computer, hands sweating, trying to remember how to type your name, anxiously waiting to find out where you will spend the next 2 to 5 years of your life. Match Day is followed by a period of incredible excitement or terrible disappointment. But you quickly realize that, regardless of where you are going or what you are doing, the whole process has been rather anti-climactic. Soon, your life returns to normal, with one very important difference — this game is finally over.

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Correspondence to: Dr. K.R. Lehnhardt, University of Western Ontario, Division of Emergency Medicine, London Health Sciences Centre, Victoria Campus, 391 South St., London ON N6H 4G5; krlehnha@uwo.ca