

Pre-match survey

Some of the best information regarding choosing careers comes from medical students themselves. The goal of this survey is to provide insight into what inspired fourth year students to choose the field in which they decided to apply. Our hope is that this will give you a sense of what may be exciting about a certain field in medicine, or what might be a good match with what you're looking for in your career and in your life. This survey is meant to be a complement to the post-match survey which provides more nuts and bolts information of how to get into a certain type of residency. It is also designed to give you a jumping point to help you focus your time at the annual career fair where you can hear more about fields that might interest you, and perhaps fields that you weren't thinking of before. All the answers have been taken verbatim from students applying in the different fields.

ANESTHESIA

Gender

Female (2 respondents)

Age Range

27-32

Time at which students decided to go into this field

- Fairly late. ~ July of 4th year after having anesthesia 110 and ICU rotations. I then did some other anesthesia rotations (ob and peds) to test out the idea and get a better sense of the full field.
- I have a family member who is an anesthesiologist and who has tried to convince me to consider anesthesia since I began medical school, but I thought it seemed very boring! I became interested during my surgery rotation, when I had my first real exposure to anesthesiologists. The more I learned, the more excited I became. I shadowed some private practice and UCSF anesthesiologists during winter break of third year, and officially decided early fourth year when I did my core clerkship and loved it.

Other fields students considered

- I started thinking OB/GYN, then thought I would apply in Pediatrics. I liked almost all my rotations and at least briefly considered almost all the core fields.
- I considered neurology, because I think the brain is a fascinating.

Advisors

- I didn't really have formal advising relationships but many department members both in anesthesia and in other fields were very helpful to me (Patty Robertson in OB, Tim Kelly in Peds, Manny Pardo, Andy Infosino, Marty Bogetz and Mark Rosen in Anes.)

- Dr. Bogetz was a close advisor, wrote a letter of rec for me, and helped set up shadowing opportunities. Dr. Rosen, the Residency Director, is very available to students for informational meetings, etc. He also helped me with my personal statement. Dr. Navarro is a great advisor in anesthesia as well.

Personal experiences that influenced the decision to choose this field

Characteristics of this field that make it attractive (training, research, academics, patient care, lifestyle, compensation, etc.)

- Training, technical skills, emphasis on self-sufficiency and being prepared, in touch with many fields, future colleagues, lifestyle (ability to work part-time), potential for varied career (ICU, OR, variety of cases and patients), opportunity to have big patient impact in short time (stressful perioperative period), limited clinic, no outpatient management of chronic disease...

- Anesthesia is an amazing field. You get to work with a very diverse patient population (ranging from premature infants to the elderly) with all sorts of medical problems. It is a very active field, in which you are busy all day, working with your hands, and performing many procedures. You focus on physiology and pharmacology, which are very interesting. It is great to be able to focus on one patient at a time, rather than carrying a team of patients which can get confusing and make you feel like you're not giving your best care to each patient. It's also very attractive because it is very immediate - not sitting around mulling things over, making a small change, waiting to see if it mattered, then maybe making another one. You are constantly on your toes, and when you see a problem, you take action immediately, and you can SEE your actions making a difference in the patient's vital signs or acute condition. It is very rewarding to have such immediate and tangible effects on patient care. There are also a lot of opportunities to specialize (fellowships include pediatrics, cardiothoracic, obstetrics, neurosurgical, transplant, critical care, pain management.) Thus there is a lot of diversity in the field and you can still go in a number of directions. The job market is great though, so fewer people are sub-specializing right now. (The compensation is great, too, another big benefit to this field.) It's great to be trained in very useful skills like airway management and pain relief, which makes you needed throughout the hospital. Ultimately, many of us went into medicine to alleviate suffering in patients, and anesthesia is a great way to be able to do that!

Anesthesia is also a very dynamic field, changing in leaps and bounds. There are amazing research opportunities, and rapid advances in the field. Another great aspect of the field is that you are spared many of the frustrations common to other fields of medicine- including billing, haggling with insurance companies, missed appointments, finding out which drugs are covered by patients' insurance, etc.. Essentially, you go to work and practice medicine all day, and have very little of the frustrating administrative struggles. Overall anesthesiologists are a very happy bunch. Almost every one is very happy in the field, and does not regret their choice. In fact, a good proportion of people who switch residencies or

do another residency after finishing one end up joining an anesthesia program! Very telling! Overall I would describe it as very procedure oriented, incorporating substantial and significant patient contact, very exciting, thought provoking, rewarding, and fun!

Lifestyle that might be expected in this field

- I think this varies extensively depending on whether you choose private practice or an academic setting, but there is a lot of flexibility. When you are on, you're on... and then you go home.

- Anesthesia is one of the most flexible fields in medicine. Because you don't have your own patient base, you can pick up and move on at any time. People often join a group after residency and contract out to staff a hospital's ORs. If you want to be more flexible you could do locum tenens jobs, in which you staff a few weeks here and there at different hospitals, often filling in when other anesthesiologists are on vacation or out sick. Then you could leave many weeks (or months) unfilled to take extended vacations, take care of kids, etc. It's very compatible with raising children and being able to work reasonable hours.

Disadvantages of this field

- Can be boring, can be supremely stressful. There is very limited patient continuity (except in pain service or potentially in the ICU)

- I think it can be lonely, as you are often working alone. You do interact with many people (ie the entire OR team) but if things are busy in the OR you can be on your own. For people who absolutely need constant contact, this might not be the best field for them. It can also be very stressful at times. When things go wrong in the OR, all eyes are on you and you often don't have much time to make decisions that may mean life or death for the patient! Overall anesthesia is very safe, though, and these terrifying moments are few and far between! Another occasional disadvantage can be poor anesthesia-surgery relationships. You must work closely with surgeons, and your patients are their patients, and sometimes these interactions can be less than positive. A stereotype of the field is that there is insufficient patient interaction, but most people are surprised when they do their rotation at the connections you can make with patients. You walk them through what will happen to them for the rest of their day, which is one of the most stressful days of their lives, and you're with them start to finish. It can be very gratifying and patients are often very appreciative. You do not often have long term relationships with patients, except for unique circumstances or chronic pain specialists. If you like the long term follow up and seeing the same patients over and over, this would be frustrating. But there are benefits to not having the patients be "your" patients (ie when you're done with the surgery and post op care, you are not called for all the little problems. When you go home, your pager is off, and you do not deal with the many hassles that come along with being someone's primary caretaker.)

Advice regarding scheduling clerkships or electives for students interested in this field

- Do anesthesia 110 early and explore the department.
- I would recommend doing anesthesia during your third year, even though those vacation weeks are precious! I know a lot of people who became interested in anesthesia late in their fourth year when they did their core rotation, but by then it was too late. The earlier you can do it, the better, so you can get to know more about it, meet more people, etc. I did it very early in my fourth year and it was fine, although I already had a good suspicion I would be going into the field. The only other rotation that is very important is ICU. I did it at SFGH and loved it, but Moffitt is good too. Fourth year should be filled with medicine subspecialties, like a month of cardiology, pulm, etc. It's a pretty flexible fourth year. Advisors do not recommend doing much more anesthesia during med school as you will be doing it for the rest of your life and you should get a solid foundation in medicine first. Joining the Anesthesia Interest Group is also valuable to learn more about the field and meet more people who can give you a better idea of what it entails.

Advice regarding extracurricular activities for students interested in this field

- No particular activities are necessary. In my interviews so far they seem to like well-rounded students who have been involved in med school and in the community, regardless of the activities. Of course, research always helps, but is not necessary. And because anesthesia is such a broad field, many types of research are still applicable to anesthesia.

DERMATOLOGY

Gender

Male (1 respondent)

Age Range

29

Time at which students decided to go into in this field

- about late 3rd year, almost early 4th

Other fields students considered

- plastic surgery, ophtho, neurology, medicine

Advisors

- Tim Berger, Toby Maurer

Personal experiences that influenced the decision to choose this field

Characteristics of this field that make this field attractive (training, research, academics, patient care, lifestyle, compensation, etc.)

- ample time for research. lots of outpatient work. lifestyle. lots of variety. some involvement with internal medicine. small procedures available.

Lifestyle that might be expected in this field

- probably better than most.

Disadvantages of this field

- hard to match 2/2 small numbers. disrespected by others, although hard to distinguish that from envy. limited pathophysiology and treatment for some diseases.

Advice regarding scheduling clerkships or electives for students interested in this field

- do derm early. do something to stand out--some work in derm is desirable but not absolutely necessary. do medicine sub-i early. get to know the department here. do well, and i mean very well in all of your clerkships. apply broadly. be realistic in your self-assessment.

Advice regarding extracurricular activities for students interested in this field

- pursue some independent research. show initiative.

EMERGENCY MEDICINE

Gender

Male (3 respondents)

Age Range

24-36

Time at which students decided to go into in this field

- during clerkships
- I became interested in EM while volunteering in the ED as an undergrad. During my pre-clinical years, I did the EM preceptorship and Intro to EM electives, which got me more interested. Finally I did a clerkship in it at the beginning of my 4th year, and fell in love with it then.

Other fields students considered

- Peds, orthopedics, Family Medicine, Internal Medicine

Advisors

- Dan McDermott, Flavia Nobay, Jeff Tabas, Karen Hauer

Personal experiences that influenced the decision to choose this field

- FPC preceptor in ED. great experience
- working on wards and in ED, also knowing an ED doc socially outside of ucsf

Characteristics of this field that make this field attractive (training, research, academics, patient care, lifestyle, compensation, etc.)

- diversity of patients and problems, less concern re: overwhelmed w/ insurance paperwork (as in clinic practice), acuity of patients, lifestyle
- I love the diversity of EM--you have the opportunity to treat medical and surgical diseases, to interact with men and women, adults and children. I also love the pace of it, and the shift work schedule. Finally, I like knowing that I am an active part of the community safety net, the first, last, and only option for care for many uninsured patients.
- lifestyle, shift work, broad-based field, social environment, lots of movement and procedures, minimal charting and telephoning.

Lifestyle that might be expected in this field

- shift work, lots of nights/weekends, but full-time = ~48hr/week
- EM has less hours and a more flexible schedule than almost any other field. As a practicing physician, you'll work an average of 30-40 hours per week. Often, you can schedule your shifts to give yourself a week off in the middle of the month if you like. However, those hours can be intense, and you have to be willing to work some nights and weekends for the rest of your life.
- work 12 days per month, long hours but off when out of hospital. no call. ever.

Disadvantages of this field

- little continuity of care, patients never remember you, specialist often know more about any subcategory of disease
- Nights, weekends, and lack of continuity of care. Also, for those who don't like primary care, realize that nearly half of EM practice involves primary care for those without insurance. However, I consider this a plus.
- long hours. night hours.

Advice regarding scheduling clerkships or electives for students interested in this field

- do sub-i at place w/ residency. get a good EM mentor
- Yes. If you're interested in EM, do a rotation in it ASAP, preferably the first rotation of 4th year. This should be a practice rotation, to see if you're interested in the field, and should not be done at a program that you interested in going to. Then you should do a second rotation later in the summer at another program. You should ideally get honors in at least one of these rotations.
- very popular now. get Ice or something in ED and use it. If interested in particular location, rotate there early and work with their dept on a project.

Advice regarding extracurricular activities for students interested in this field

- try to do some research, especially w/ an EM person if possible.
- EM research might help a little, but is definitely not necessary. Get involved in whatever you are interested in... EM is looking for people with diverse backgrounds and interests.

FAMILY PRACTICE

Gender

Female (2 respondents)

Age Range

28

Time at which students decided to go into in this field

- during 4th year
- Before medical school

Other fields students considered

- pediatrics, internal medicine, med-peds

Advisors

- Sharad Jain, Bill Shore

Personal experiences that influenced the decision to choose this field

- Interest in international work, observing a rural clinic in Guatemala, etc.

Characteristics of this field that make this field attractive (training, research, academics, patient care, lifestyle, compensation, etc.)

- training, long-term patient care, limitless types of jobs available, compatible with having a family myself
- Interest in underserved, longitudinal care, flexibility, broad (very broad!) scope of practice, able to practice anywhere, regardless of resources.

Lifestyle that might be expected in this field

- If by "lifestyle" the question means salary, average. If it means hours/call-schedule, good. If it means a field that's friendly to have my own family, good.
- Depends on what I end up doing with it.

Disadvantages of this field

- I've heard the jobs in urban areas are often similar to internal medicine practice (few pregnant and child patients)
- Not well respected in academic centers, best job opportunities are in less desirable (ie: rural) areas... although this could be a plus if you think about the saturation of MDs in places like, say, SF.

Advice regarding scheduling clerkships or electives for students interested in this field

- Yes! I've heard the best experiences of my classmates have been in satellite locations rather than in San Francisco. (I loved Santa Rosa.)
- Do what you enjoy!

Advice regarding extracurricular activities for students interested in this field

- Anything you're interested can apply...

- Again, do what you enjoy and plan on being involved in in the future. If it's underserved, then get involved now. If it's policy, or global health, or emergency/wilderness medicine, or rural practice, or private practice, you may need to seek out opportunities to find out if this is really what you want to do. Many of these areas take outside elective/free time, as they are not so readily available on the UC campus.

General Surgery

Gender

Male (1 respondent)

Age Range

25

Time at which students decided to go into in this field

- During third-year core clerkship.

Other fields students considered

- Emergency Medicine

Advisors

- Chief Residents, Dr. Varma, Dr. Kirkwood, Dr. Jeff Norton (Stanford faculty, former faculty at UCSF).

Personal experiences that influenced the decision to choose this field

- Experiences during the clerkship were most influential. Taking care of surgical patients is a great joy, both in the clinic and the inpatient settings. Being in the operating theater is also a unique and intensely rewarding experience.

Characteristics of this field that make this field attractive (training, research, academics, patient care, lifestyle, compensation, etc.)

- The daily work of general surgery is simply awesome. Some may find the training too long training (five clinical years), but for me, it is actually a positive factor; surgical residents are some of the most competent residents in the hospital.

Lifestyle that might be expected in this field

- Hours can be long but everything has decreased since work-hours reduction went into effect. Hours as an attending can be long as well, especially in academic practice.

Disadvantages of this field

- Long hours, long training.

Advice regarding scheduling clerkships or electives for students interested in this field

- Surgery at SFGH has long been a favorite, but the experiences at Moffit and the VA are equally good, though different.

- Sub-Is should be done on Blue or Gold services. Vascular is also a good service for advanced coursework.

Advice regarding extracurricular activities for students interested in this field

- Finding research to participate in should not be difficult. There are many clinical projects going on.

INTERNAL MEDICINE

Gender

Male (3 respondents)

Age Range

25-28

Time at which students decided to go into in this field

- during fourth year
- Made my definite decision during my 4th year.
- During clerkships

Other fields students considered

- Neurology, Emergency Medicine, Orthopedic surgery

Advisors

- Rick Haber, Alicia Hernandez, Lawrence Tierney, Nancy Lane (research advisor), Helen Loeser, Dean Schillinger (research mentor)

Personal experiences that influenced the decision to choose this field

- Excellent medicine core clerkship and sub-I. Excellent experiences with patients. Brilliant, competent residents
- My time on my various sub-I's in medicine, ortho, and emergency medicine.
- A Doris Duke Research year and my medicine clerkship

Characteristics of this field that make this field attractive (training, research, academics, patient care, lifestyle, compensation, etc.)

- Broad field with opportunity to continue learning through career, patient contact, chance to be a physician scientist
- Patient care, the kind of personality of the specialty (i.e. how they treat each other, their attitudes), continuity of care, the ability to further subspecialize.
- Breadth of expertise that you will learn will allow you to treat a great variety of patients (and put all that preclinical info to use), a gateway to a large number of subspecialties, opportunities to do research in a wide variety of fields

Lifestyle that might be expected in this field

- Not sure at this point. Depends what I subspecialize in
- I plan on having a pretty decent lifestyle, with hopefully not too many weekends/evenings/holidays involved.
- Pretty long hours. I accept the challenge of maintaining a person and family life.

Disadvantages of this field

- Long training, considering fellowship for some fields, such as interventional cardiology
- Long hours

Advice regarding scheduling clerkships or electives for students interested in this field

- Don't do your medicine core first. No need to do an away rotation in your fourth year if Sub-I and core went well
- Try everything that you're interested in, doing a sub-I if possible, but also look at what life is like outside of the university system and how much life people in private practice are able to have.

Advice regarding extracurricular activities for students interested in this field

- Research never hurts
- Do something, anything is fine. Extracurriculars never hurt you.

MED-PEDS

Gender

Male (1 respondent) Female (1 respondent)

Age Range

28-30

Time at which students decided to go into in this field

- sort of during the core-clerkships...only solidified my decision after going on a couple of peds interviews, then med-peds interviews.
- mid-3rd year

Other fields students considered

- Pediatrics, Internal Medicine, Ob/Gyn

Advisors

- Coco Auerswald, Karen Hauer, Tracy Minichiello, Janet Shalwitz

Personal experiences that influenced the decision to choose this field

- Working with internists in the community at places like Tom Wadell, and Pediatricians at Larkin Street and Cole Street Clinic

Characteristics of this field that make this field attractive (training, research, academics, patient care, lifestyle, compensation, etc.)

- caring for the full spectrum of patients - training in acute and critical care as well as outpatient care. emerging research in caring for transitioning youth, especially those with congenital diseases. Lifestyle and compensation are not great, but hey, you can't win 'em all.
- Broad fund of knowledge, pt.'s of all ages, innumerable post-residency options

Lifestyle that might be expected in this field

- lifestyle is very dependent on whether or not one specializes afterward, becomes a hospitalist, does exclusively outpatient care, etc. In general, I expect to continue to work about 80 hours/ week even after residency, but will also have the possibility of temporarily having a part-time practice to accommodate child-rearing, and may eventually maintain only a 30 hour a week practice and do policy work for 20 hours/week.

Disadvantages of this field

- I think lifestyle and low compensation (compared to other MDs, but certainly not compared to the general population) are considered drawbacks by some...but it all depends on your natural work pattern/style
- employers aren't used to med-peds docs out west

Advice regarding scheduling clerkships or electives for students interested in this field

- core clerkships pretty much cover it...but I think doing an away rotation at a med-peds clinic or specialty practice is good, since we don't get any exposure to jointly trained physicians at our institution.

Advice regarding extracurricular activities for students interested in this field

- this shouldn't just be a matter of indecision, you should really be interested in in-depth care across the lifespan. the nmpa (national med-peds residents association) website - <http://www.medpeds.org/> is a good source of information, and has a particularly good article discussing the difference between family practice and med-peds, and how the med-peds approach differs from internal medicine and pediatrics alone.

NEUROLOGY

Gender

Male (1 respondent)

Age Range

25

Time at which students decided to go into in this field

- During clerkships

Other fields students considered

- Family Medicine, Urology

Advisors

- Wade Smith, Karen Hauer, Paul Turek, Dan Lowenstein

Personal experiences that influenced the decision to choose this field

- experience on the wards, the Neurology residents are (I think) the coolest.

Characteristics of this field that make this field attractive (training, research, academics, patient care, lifestyle, compensation, etc.)

- Subject matter: I like to read about Neurology so I didn't mind reading about it when I got home after the wards. Broad clinical venue: in Neuro you can range from working strictly outpatient to working in Neuro Critical Care, so there are a lot of options. Lifestyle is mid range, it's not the cushiest, but it's not bad either. Compensation for neuro is not that great, but hey can't win them all. Also, Neuro is changing pretty fast. There are a lot more treatments now than there used to be, and for things like Dementia and MS there are a huge number of treatments along the way, so finally the idea that Neurology is a diagnostic specialty is starting to fade.

Lifestyle that might be expected in this field

- It's totally variable. If you are a stroke specialist, it's like being a surgeon. You will be on call all the time (and I swear strokes only come in at 1am). If you do Neuromuscular, Headache, or some other specialties you will have mostly clinic. If you are a general neurologist, it is somewhere in between, and in most hospitals Neuro is strictly a consult service (unlike here) so you work as a consultant.

Disadvantages of this field

- Compensation is not great. The academic centers are very competitive for training, and although not a lot of people are fighting to get into neurology, (I've found) that most of the people that want to go into neuro are pretty smart.

Advice regarding scheduling clerkships or electives for students interested in this field

- The Neuro ICU elective is awesome here, but it is not representative of the majority of neuro programs (many good programs do not offer Neuro ICU). You definitely want to do a Neuro clerkship with at least one outside hospital. A Neuro Sub I or Neuro ICU at moffit is pretty much mandatory (don't do both-just one) then do a sub I at another hospital where you think you'd like to go. Some professors say you should do only two sub I's in Neuro and do the rest as medicine electives, but I really think 3 sub I's might be better so you can visit another program.

Advice regarding extracurricular activities for students interested in this field

- Go to the Brain interest group meetings--I didn't and I didn't get to know very many people on the faculty. Otherwise, have as much fun as you can because the best way to relate to people is to have an extracurricular activity in common. Even if you like to run, and the people who interview you like to kayak or surf (both uncommon in neuro-but just an example) you will have fun things to talk about.

OPHTHALMOLOGY

Gender

Female (1 respondent)

Age Range

27

Time at which students decided to go into in this field

- First considered it (along with a bunch of others) at the end of 1st year. Didn't decide definitively until 4th year.

Other fields students considered

- Peds, Emergency Medicine

Advisors

- Doug Fredrick, UCSF grads from 2004 who applied in ophtho, current UCSF ophtho residents

Personal experiences that influenced the decision to choose this field

- positive interactions with supportive faculty and residents in the field
- experience raising a guide dog and interacting with blind people who had guide dogs

Characteristics of this field that make this field attractive (training, research, academics, patient care, lifestyle, compensation, etc.)

- interesting research opportunities
- mixture of surgery and medicine
- long-term patient interactions
- ophthalmology is a great field if you're interested in international medicine
- get to do procedures
- ophtho is great for someone who's visually-inclined. The eye is beautiful =)
- REALLY nice people in the field
- lifestyle
- you're really making a difference in patient's lives (Imagine how you'd feel if you knew you could lose your vision -- you'd love your ophthalmologist)
- The ophtho exam is so much fun!

Lifestyle that might be expected in this field

- Depends:
- surgical retina: basically the same lifestyle as a general surgeon
- academics: expect to work hard, long hours, less compensation than private practice
- private practice: make your own hours (but don't expect to work less than 4 days a week). Compensation has been decreasing so don't go into it for the money.

Disadvantages of this field

- There are some patients (i.e. the ones with retinal diseases) that you can't do much for.
- Cities (especially in CA) are saturated. May be hard to find a job.
- For some people, the eye is too small an area to devote your entire career to.

Advice regarding scheduling clerkships or electives for students interested in this field

If you want to become proficient at the eye exam and see what it's like to be a resident, do your sub-i at SFGH and get to know Doug Fredrick (the program director). Try to do your sub-i during the month of May (when one of the big ophtho conferences is going on) because you'll get your own room (or two) and will be able to work up and present patients on your own.

But, you should get famous people to write letters for you so if you don't know any famous ophthalmologists, it might be better for you to do your sub-i at UCSF (where med students don't get to do as much, but all the famous faculty members practice).

Other electives that are helpful:

- neurology
- dermatology
- anatomy dissection (ask Dhillon if you can do an eye dissection)
- Emergency medicine
- ENT

Advice regarding extracurricular activities for students interested in this field

- Ophtho is a small field in which who you know is more important than anything else (including extra-curriculars, grades, boards, etc.). So you should focus on doing a research project with someone well-known and getting a great letter from that person. Extra-curriculars are unimportant in terms of matching.

(That said, there's a great group on campus, Unite For Sight, that does vision screenings and can give you good experience doing an ophtho exam. I would highly recommend Unite For Sight to anyone at all interested in ophthalmology. Being involved is not going to help you match, but it will help you decide whether or not ophthalmology is right for you.)

ORTHOPEDICS

Gender

Male (1 respondent)

Age Range

28

Time at which students decided to go into in this field

- After my subinternship in orthopaedic surgery

Other fields students considered

- general surgery, neurology

Advisors

- Drs Ries, Miclau, and Bozic

Personal experiences that influenced the decision to choose this field

- Interactions w/ residents

Characteristics of this field that make this field attractive (training, research, academics, patient care, lifestyle, compensation, etc.)

- training, colleagues, opportunities for research, the OR

Lifestyle that might be expected in this field

Disadvantages of this field

Advice regarding scheduling clerkships or electives for students interested in this field

Advice regarding extracurricular activities for students interested in this field

OTOLARYNGOLOGY

Gender

Male (1 respondent)

Age Range

26

Time at which students decided to go into in this field

- During the pre-clinical years, during a two-month internship directed at studying manifestations of HIV in Mexico City at INER (the Respiratory Illnesses Institute), I spent about 10 days with the otolaryngology service through a random act of scheduling. At this time, I found the residents to be uniformly enthusiastic, brilliant, and engaging. While I would later learn that the program at this location is the premier training program in the specialty in all of Central and South America, attracting residents from Venezuela, Bolivia, and even Spain, I never thought twice about the choice to enter the specialty. The variety of cases involving surgical correction of congenital, traumatic, neoplastic, infectious and even iatrogenic problems in patients across the age spectrum and involving both genders was too tempting. The main reason that I chose Otolaryngology over general surgery is the relative intricacy of the procedures involved - I felt that the incredibly delicate nerve-preserving techniques in Otolaryngology were the kinds of maneuvers that I felt very drawn towards.

Other fields students considered

- Interventional radiology, Interventional cardiology, Gastroenterology, Plastic Surgery leading to Hand Surgery, Plastic Surgery leading to Cleft Palate Repair

Advisors

- Dr. Andrew Murr (UCSF ENT Program Director), Dr. David Eisele (UCSF ENT Chair), Dr. Anil K. Lalwani (ENT Chair at NYU, former UCSF professor)

Personal experiences that influenced the decision to choose this field

- Mainly, the stunning consistency in the personalities of individuals in the field, from coast to coast, led me to realize that there really was a superb fit with the personality of the specialty. I admire many traits present in the vast majority of the individuals I have become acquainted with through this process. Overall, these surgeons are engaging, bright individuals with a remarkable down to earth quality that belies the intense and difficult training that all have completed. There is a confidence born of being tested under pressured circumstances that evidences remarkably few traces of cynicism or bitterness. An inspiring combination, to say the least.

Characteristics of this field that make this field attractive (training, research, academics, patient care, lifestyle, compensation, etc.)

- While the residency is quite difficult, other aspects of the field are extremely

malleable. Specifically, the research questions readily answerable in this field have already been thoroughly investigated in other fields by this time - i.e. there are many questions that are relatively simple to ask that are still available, which constitute 'low-lying fruit' for individuals even without graduate-level training in research. Patients in this specialty tend to have brief hospital stays and return to a high level of postoperative functioning for the most part, with significant effectiveness of the procedures in ameliorating the presenting problem. The field has wisely limited the total number of graduates so that the supply will not outstrip the demand, ensuring that individual can find work, whether at academic centers or in private practice, in almost all areas of the country.

Lifestyle that might be expected in this field

- My understanding is that while there are relatively few emergencies besides airway emergencies and trauma, the average otolaryngologist works about 60hrs/week, more in an academic practice.

Disadvantages of this field

- Everybody in the field seems to enjoy golf.

Advice regarding scheduling clerkships or electives for students interested in this field

- Start early with demonstrating interest. Do well on Step 1 and core clerkships. An away sub-I is optional but useful to allow one to gauge the home program with more perspective and / or audition at another location.

Advice regarding extracurricular activities for students interested in this field

- Research in the field is essential for garnering letters and therefore, interviews. Choose projects wisely (i.e. likely to result in publication soon, likely to be enough of your contribution to demonstrate significant authorship, and for the not-known attending you have chosen to get to know you well enough to write a strong letter of support). While it is not an impossible field to match in, it can be a rather harrowing minefield to negotiate - use alumni at programs, last year's graduates, and the school advisors to the degree necessary. Remember - it is an amazing field, and you have made the right choice. Good luck!

PEDIATRICS

Gender

Female (3 respondents)

Age Range

25-26

Times at which students decided to go into this field

- Before med school, although I wavered throughout med school and my rotations
- Final decision during fourth year (June) after completing sub-I, but narrowed down to two fields going into fourth year.

Other fields students considered

Surgery, Ortho, Emergency Medicine, Internal Medicine, OB/GYN, Pediatric Orthopaedics, other pediatric surgical subspecialties.

Advisors

Tim Kelly, Mohammed Diab (peds ortho), Andrew Murr, 4th years who had matched, current residents, some of my classmates also applying in peds

Personal experiences that influenced the decision to choose this field

- Knowing that I wanted to work with children. The Air Force and how different specialties would influence my likelihood of deployment
- My sub-I in pediatrics (NICU at Parnassus), working with the peds residents and faculty, also patients I saw in clinic during my third year core rotation.
- My core pediatrics clerkship was wonderful - the colleagues, the patients and their families. I disliked the atmosphere on other clerkships and was not interested in a surgical field after doing surgery.

Characteristics of this field that make this field attractive (training, research, academics, patient care, lifestyle, compensation, etc.)

- The patients and 3 year residency program
- Working with kids all the time! Ample opportunities for a variety of subspecialties with many different work hours, place of practice, fields of research (in case your not sure exactly what you want to do 30 years from now). Lifestyle has flexibility (vigorous or not so vigorous). Training with great residents and faculty, periods of high AND low intensity during training.
- Patient care, the warm fuzzy atmosphere of Peds, the type of people who work in the field.

Lifestyle that might be expected in this field

- No weekends, no long hours
- Plan to stay in academics, attend on wards (most likely subspecialty). Work with great people, opportunity to take time off for family, etc.

- Hopefully part time when I'm raising a family, but not quite sure at this point. Definitely not as much time as a surgical field.

Disadvantages of this field

- Lower pay; lots of repetitive clinic visits
- Low compensation

Advice regarding scheduling clerkships or electives for students interested in this field

- Sub-I early (May-July). Away rotation at any program you are highly interested in (gets your face known, although not necessary). Interviews are mid Nov-mid Jan, most places M-W-F. You can take December off and interview early or take January and interview "late". Advantages and disadvantages to each. May be easier to schedule if interviews are in Nov-Dec. There is a week between end of Fall block 4 and places closing for xmas break to interview.
- Just have fun on your core, and don't do away sub-I's, do away electives instead. A NICU Sub-I is a good choice - gives you some experience with higher acuity care but with a more manageable list of problems frequently encountered than PICU.

Advice regarding extracurricular activities for students interested in this field

- Health Hut; Homeless Clinic
- Peds Interest Group is helpful for learning about volunteer work. Also Health Hut to get practice doing well-child exams. Fourth year elective at Diabetes Camp (during summer) is highly recommended by other students.
- Do something that shows you are involved...but don't worry if you are a "late bloomer." Being involved in the community is more important than being involved with children specifically, but always great if you know early and get involved in activities/advocacy for kids.

PSYCHIATRY

Gender

Male (2 respondents) Female (1 respondent)

Age Range

27-39

Time at which students decided to go into in this field

- End of June during 4th year, after Neuro Sub-I and Psych Sub-I
- during 4th yr.
- During fourth year summer

Other fields students considered

- Neurology, Medicine

Advisors

- Lowell Tong, Lee Jones, Anne Fleming,
Personal Mentors: Amin Azzam, Kevin Mack, John Chamberlain, Lee Jones

Personal experiences that influenced the decision to choose this field

- I liked both inpatient and outpatient psych, I didn't like peripheral neuropathy. "The sensory exam almost kept me out Neurology" the Neuro residents used to joke. Well, the sensory exam got me. I'm out.
- personal experiences w/psych issues in family, exposure to psychotherapy, growing self-awareness while on clerkships as to what's truly imp't to me in the pt/MD encounter
- My experience on the C/L service at LPPI showed me that I did not need to abandon medicine by selecting psychiatry.

Characteristics of this field that make this field attractive (training, research, academics, patient care, lifestyle, compensation, etc.)

- I like the kind of patient care I was able to give as a psychiatrist. I like the fact that spending an hour getting to know a patient isn't just a nice idea or a laudable goal, but is in fact a central part of your job. Most other disciplines only give you half as much time with patients, plus you also have to allow time to do a physical exam. I looked at residents in other disciplines and said to myself, this field looks interesting, but I don't think I'd want my job to look like this resident's job. I looked at the psych residents and said, yeah, I could see myself doing this.
- subject matter (e.g. behavior/personality) is intrinsically fascinating opportunity to talk with/relate to my patients in depth; pacing of clinical encounters great variety in practice areas; opportunity to work part time; opportunity to interact w/peers who are psychologically-minded; (and who, in my experience, have been incredibly funny and warm people) opportunity to work in academic settings/teach a lot without a requirement for research/publications opportunity to moonlight throughout career as desired, for extra cash

Patient care - you never forget your psych patients
Patient care philosophy - more interest in "social" concerns
Intellectual material
Interface between law/policy/psychiatry
Lifestyle/free time

Lifestyle that might be expected in this field

- Reasonably comfortable, I believe. While it is not as well compensated as some fields, I think that people work less hours, so I imagine the compensation per hour works out pretty well. To me, the point of choosing a high-paying job is to maintain a good standard of living working less hours, not to have a luxurious lifestyle working long hours.
- outstanding; ability to control work hours, and work in a variety of clinical settings (e.g. part time private practice, part time community clinic work) is the rule
- Significant free time; significant control over your own schedule

Disadvantages of this field

- Less prestige, social stigma associated with psychiatry. It's not considered "real medicine" and lots of people flatly do not believe in Psychiatry, a charge that I never hear leveled at, say, Surgery. More people look at you warily when you say you are a psychiatrist, or suspect that you yourself are crazy and that is why you are in the profession.
 - No real disadvantages in my mind beyond the minor irritation of encountering ignorance of the skill/training required to deliver high quality psych care
 - Not very well respected
- Poor (or improving if you prefer) scientific basis for what we do

Advice regarding scheduling clerkships or electives for students interested in this field

- Not really. I came to this decision late, so I can't say I was really strategic about it.
- I did my psych clerkship fairly late in the year. I think I'd do it sooner if I had to do it again, simply in order to give myself more time to think carefully about what psych opportunities I could take advantage of in the 4th year. But I wouldn't fill your 4th yr w/psych electives. Maybe 2 at most (these can yield the most outstanding letters of rec). Avail yourself of electives that provide you breadth (e.g. endocrinology, radiology, dermatology, emergency medicine were highest yield for me) If I had more time, I think I'd have taken another neurology elective.
- Take a couple of electives before Labor Day, then avoid psychiatry entirely...until internship and the rest of your life, of course. The Bridge to Wellness elective is a real good one.

Advice regarding extracurricular activities for students interested in this field

- Again, having reached this decision late I don't think I can recommend much.
- talk to advisors and attendings to educate yourself on the different practice areas in which psychiatrists are involved; get them to hook you up with people doing the work, and follow them so you can see what people are doing

APPLIED IN MORE THAN ONE FIELD

Specialties

Medicine and Dermatology

Gender

Male (1 respondent)

Age Range

29

Time at which students decided to go into in this field

- Derm - after taking the derm elective
- Internal Medicine - more or less since the beginning of medical school

Other fields students considered

- peds, neuro, FP

Advisors

- Donald Abrams, Marcus Conant, Toby Maurer.

Personal experiences that influenced the decision to choose this field

- Fulbright year abroad doing HIV research pushed me to consider internal med/ID track, derm elective pushed me to consider derm, working in an HIV heavy LCE pushed me to consider family med/internal med primary care HIV, talking with friends and other classmates pushed me to try and think broadly, conversations with the three advisors above pushed me to consider derm or internal med, STD elective pushed me towards internal med/ID.

Characteristics of this field that make this field attractive (training, research, academics, patient care, lifestyle, compensation, etc.)

- Internal med and Derm - research opportunities in HIV gene therapy, lipodystrophy, other infectious diseases.
Internal med - vibrancy of role models in the field, the opportunity to work with HIV+/underserved in the field, opportunities to remain politically active, opportunities for international health work, opportunity to remain broad or specialize, abundance of longitudinal patient care opportunity.
- Derm - abundance of short procedures you can do while still interacting with patient, lifestyle, longitudinal patient care contact, visual diagnostics of field.

Lifestyle that might be expected in this field

- both internal med and derm are to a good extent dependent on how you want

to set up your work schedule, but derm seems to be more flexible in terms of compensation and work hours.

Disadvantages of this field

- derm - not that many spots available. grueling, expensive application process.

Advice regarding scheduling clerkships or electives for students interested in this field

- derm: start early (earlier the better, I decided I liked the field late). choose a derm LCE. Take the derm elective during your 3rd year. Do a research block or other derm electives during your 3rd year or early in your 4th to make contacts.

Get to know Tim Berger, Bruce Wintraub, Ilona Frieden, or other well known UCSF derm folks by talking with them, taking electives with them, or doing research with them. publish in a derm journal. do well during your third year cores. do well on your boards.

- internal med: get honors on your internal med/senior med clerkships, and schedule your clerkships around that focus. Internal med is a broad field so if you've got passions and specific health interests, explore them through electives, research, and through extra curriculans.

Advice regarding extracurricular activities for students interested in this field

- see above.

UROLOGY

Gender

Male (1 respondent)

Age Range

26

Time at which students decided to go into in this field

- During third year clerkships

Other fields students considered

- Internal medicine, interventional cardiology, emergency medicine, general surgery, plastic surgery

Advisors

- Peter Carroll (UCSF Urology Chair), Jack McAninch (UCSF Urology Program Director), Hiep Nguyen (former UCSF peds urologist, now at Boston Children's Hospital), current Urology Residents at UCSF

Personal experiences that influenced the decision to choose this field

- I had a terrific experience rotating through urology at UCSF for two weeks.

Characteristics of this field that make this field attractive (training, research, academics, patient care, lifestyle, compensation, etc.)

- This is one of the few fields that really takes care of both surgical and medical problems. As a surgical subspecialty, you have the ability to do huge surgical procedures such as radical cystectomies with neobladder construction, medium sized operations like laparoscopic nephrectomies, and tiny procedures, like cystoscopy. You're operating in the abdomen, down below, and everywhere in between and the range of surgical operations that you do is gigantic. At the same time, you are taking care of medical disease, such as stone disease, erectile dysfunction, and prostatitis. Your patients generally do very well and are incredibly grateful with the improvements in quality of life that you can offer. In addition, their range of pathology is both fascinating and hugely varied. As far as your colleagues are concerned, it is a field that is filled with interesting, curious, well-rounded, and good natured people. Almost categorically, every urologist I've met is good-humoured, good natured, and a good physician. These are things that made it the most attractive field to me. It encompassed all the things that I enjoyed about each of the core clerkships. You're doing surgery, you're taking care of a terrific patient population, you're thinking about disease in a medical fashion, you have access to terrific research, and you have the greatest colleagues in the world.

Lifestyle that might be expected in this field

- Depends on how you choose to practice. As a private urologist, the greatest

compensation is in office urology, which includes quick outpatient procedures and office diagnostics like urodynamics. So if you want to have the easiest lifestyle with the biggest compensation, you should do that. But you give up the big cases and the access to research, so there are tradeoffs. As an academic urologist, your cases are the most interesting and complicated and you can do tons of terrific work, but your compensation is about 2/3 or less of what you could be making as a private urologist. But the great thing about urology is that you can choose to mould your lifestyle to fit what is important to you. In either case, private or academic, you tend to have few emergencies and most people I have met who have finished their residency have a lot of things going on in their lives outside of medicine, including families, hobbies, and other interests.

Disadvantages of this field

- You are a specialist so you have to be happy with not knowing something about everything, but rather knowing everything about something. It can be a difficult and challenging residency, so you should be prepared to sink a lot of elbow grease into your 5 or 6 years of training. The match process is fairly competitive, so you should try to really plan things out well in order to match successfully.

Advice regarding scheduling clerkships or electives for students interested in this field

- Definitely do your surgical subspecialty rotation in urology if this sounds interesting to you. You definitely won't regret it. Take it earlier in the year in order to make some connections with the faculty earlier on. The department here is very well known in the field, so they are your biggest resource in your application process. If you don't do the urology two weeks though, you can definitely get exposure to urology if you email any of the faculty and tell them you're a student here and are interested in spending time at their clinic or in their OR. All of the faculty here are very receptive to students exploring urology. You should plan to do at least one fourth year elective in urology. I would do the rotation at UCSF and do it in the late spring or early summer. That way you can get to know the faculty and find some research opportunities. The letters you can garner from UCSF urology can carry you a long way. Do an away rotation if you want to see what another program is like, but it's definitely not required. Talk to the residents who are incredibly friendly and helpful. I would also definitely get to know Peter Carroll and Jack McAninch at UCSF, who are the Chair and Vice Chair of the department here. They are very well known in urology and can open a lot of doors for you as well as provide some amazing opportunities to explore the field.

Advice regarding extracurricular activities for students interested in this field

- Research is critical to your application in urology. Urologists as a group are very interested in research, so they like to see people who share the same interests. I think that strong letters from well known people and strong research are the most important parts of the application in terms of getting a great residency. However, terrific grades and board scores will open the door to getting an interview at

some programs. Pretty much anything you do that is interesting outside of medicine can only help you, because urologists like well-rounded people.