

# The Interview Process

## MANAGING THE PROCESS

### Program Time Lines

Each program is free to establish deadlines for applications. In general, more competitive specialties have earlier suggested deadlines for application materials. For example, Orthopaedic Surgery programs may have deadlines as early as October 1. You need to consult each program's informational brochure or website. In general, your application includes either a common application form (ERAS) or universal application (non-ERAS), 3-4 letters of recommendation, board scores (Step I and Step II, if available), medical school transcript, photo, personal statement, and MSPE.

Early planning is essential as you begin the residency interviewing process. You will find that many programs will not even schedule appointments until all of your application materials (including all letters of recommendation and MSPE) are received. Most programs do a pre-screening and grant interviews on an invitation only basis. The competitiveness of the specialty and the individual programs involved determines the level of the pre-screening.

*Schedule interviews as soon as you are invited even if you schedule a date in January.* Some programs have little flexibility; they may offer interviews on selected days of the week only (for example, every Tuesday and Thursday); others will offer an even more limited selection of interview dates; (e.g., 1 or 2 days per month from November through January or February).

### Scheduling Time Off for Interviews

David Geffen School of Medicine at UCLA policy for scheduling interviews is straightforward. Applicants should use unscheduled time only for the interview process.

Interviews for residency interviews are not excused absences. Course chairs are not obligated to grant time off for residency interviews and believe that significant time off interferes with patient care and the functionality of the team. You may not schedule interviews during required clerkships as this may result in having you repeat the rotation. The faculty of elective clerkships are not encouraged, nor are required to grant days off for interviews. Excessive absence could lead to failing the elective. *If offered an interview on a day that conflicts with academic obligations and there is no other alternative, contact the SAO for advice.*

## **Tracking and Rating Interviews**

Spend as much time as possible at any given institution to assess the house staff and faculty. Take advantage of the opportunities to revisit the wards and clinics to discuss the program with residents to assess their level of satisfaction and the sense of camaraderie and support. Try to get the name and telephone number of at least one house officer at every program whom you may contact at a later date with additional questions.

It is equally important to assess the community surrounding the medical center. Gather information on the patient base and financial stability of the medical center. Make sure you leave with a solid understanding of such things as the cost of living, areas in which the house staff currently reside, employment opportunities for your spouse or significant other, and cultural and recreational activities.

It is essential that you develop a system to organize key information after each interview. In a short period of time you will gather and evaluate a massive amount of information. Record your impressions after each interview. Details will soon be forgotten or confused if not recorded in an organized fashion. Note questions or key points for follow-up telephone calls or letters.

## **Return Visits “Second Looks”**

While not expected or required, a return visit might be valuable to:

- Confirm the seriousness of your interest in the program
- Answer remaining questions you may have
- Permit a second chance to assess the potential fit

*Contact the SAO if you are weighing this option and would like advice.*

## **Tips for Medical Residency Interview**

Getting a medical residency interview call is a great feeling. All the hard work you had put in towards the residency application process and the ERAS/NRMP system has finally paid off. However, this is not the time to relax. Much work needs to be done for the Residency interview. Residency interviews can be very expensive trips. Try to plan ahead by calling the medical residency programs and arranging for interview dates. Airfare is usually cheaper midweek and if booked 3-4 weeks in advance. Some good online discount travel sites include Student Universe, Orbitz, Expedia, and Sidestep. The AAMC offers special travel fares to students interviewing for residency positions. For hotel rooms, you cannot beat the prices you get by bidding on Priceline. At [www.myinterviewtrail.com](http://www.myinterviewtrail.com) offers direct links to plane tickets, car rentals, and hotel reservations with the option to share costs with other applicants.

## Preparing for the residency Interview

---

- When you get a residency interview call, you should plan to schedule your interview so that you can complete all residency interviews in a specific geographic area within a 5 to 10 day period. This saves you time, energy and money. However, if you are looking at a specific residency program, visit it ASAP.
- Research about the residency program you are going to. Visit the residency program's website, read their brochure and take down notes for reference later. This helps you prepare to ask appropriate and intelligent questions at the medical residency interview.
- Dress professionally and conservatively. For men and women this means a professional looking suit and shirt or blouse. You should wear clothes that fit you well and make you feel comfortable. This will help you endure the long day and project an image of confidence.
- Avoid wearing cologne or perfume, do not chew gum.
- Guidelines for men: solid dark colored socks and tie, dark leather belt, and shoes, keep jewelry to a minimum and please consider not wearing earrings.
- Guidelines for women: Keep cosmetics and jewelry to a minimum. Avoid wearing very high heels and outlandish nails. Make sure skirt length is not too short and midriff and cleavage are covered.
- Carry a brief case or portfolio, pens, a pad of paper, extra C.V.s, and your checklist.
- Once you receive the schedule for your medical interview day, read about the areas of interest of each residency interviewer and look up some medical research papers published by them. This will impress them and keep an intelligent conversation going. You can search for research papers by entering author names at [www.pubmed.com](http://www.pubmed.com).
- Practice pronunciation of difficult names of interviewers, so that you can get it right at the residency interview. Do not hesitate to ask for help with pronunciations.
- If you have any unexplained gaps in your work experience or it has been a few years since you finished medical school, be prepared to give an explanation. See SAO for advice preparing.
- If you had to take any qualifying USMLE exam more than once or if your USMLE scores are low, be prepared to explain. See SAO for advice.
- Most residency programs invite candidates to dinner, the day before the residency interview. Many times your spouse or SO is welcome to attend. This is the time for you to show your social skills, get to know the other residents and fellows in the program, and other candidates.
- Make a list of interview questions to ask and carry a folder to give yourself the professional look.
- Network with your friends and other residency applicants to find out details about specific medical residency programs, their interview questions, patterns, and their impressions.
- Even though asking medical questions at residency interviews has fallen out of vogue, you should nevertheless, be prepared for it.
- Expect to be asked in detail about anything you've listed on your C.V.

## During the residency interview

---

Selecting your residency program is a major decision that you will have to make after very brief contact with people who may be your associates for a long time. Value the impressions that you make of the program and the people, and keep track of those feelings about the interview to assess how suitable the fit is between you and the program.

Direct each question to the appropriate interviewer (i.e. program funding to the director and call schedules to the residents). Consider which questions are appropriate for the interview, and which are for a less formal setting. For example:

Think about your real priorities and make sure you express them. And, ask your questions at the appropriate times. The beginning of the interview is not the best moment to ask about salary, benefits and call schedules. Although they are legitimate questions, bad timing or asking the wrong people could make your interviewers uncomfortable about your values. In addition, questions that challenge or confront interviewers can be alienating; nuances such as tone and word choice are important. “What is wrong with your program?” is more difficult to answer than “What are some of the challenges that I might face here?” or “Where do you see the direction of this program in the next 5 years?”

- Plan to arrive early at the medical residency interview center. Greet and introduce yourself to the residency program’s secretary and make some polite conversation.
- Introduce yourself and chat with other residency applicants. This will help you relax and make you look like a team player.
- Use mouth fresheners after coffee and lunch to clear bad odor. Do not chew gum.
- During the residency interview, the residency program directors are assessing you on three main areas. Personality, communication skills and if you will fit in the residency program and be a good team player.
  - Your personality is given away by your body language and actions. During the residency interview, sit with your back straight. Avoid slouching. Maintain eye contact. Do not cross your arms or legs. Do not play with your tie or twiddle your fingers. Present a confident image. Remind yourself that this residency interview is to hire physicians, not medical students. So act professionally and show maturity. During the course of the day, your demeanor, and facial expressions will influence their perception of your personality. Keep smiling and crack a couple of jokes if you can.
  - Your communication skills are assessed by the way you answer the residency interview questions. Be precise in what you are trying to convey. Talk slowly and clearly if you have an accent. A common mistake is speaking softly. While it is polite to do so in several foreign countries, it may project an image of lack of self-confidence and timidity, besides requiring the use of hearing aids by the residency program’s interviewer.
  - Being a good team player requires flexibility, camaraderie, and the ability to be a part of the “chain of command”. Your ability to socialize and fit into the medical residency program is assessed here.
- Sell yourself. Find ways of conveying your good qualities and skills to the residency program’s interviewer. Answer questions in short sentences and to the point. You can lead the

medical interview into a specific direction if that is to your advantage.

- Say positive things about their residency program. All residency program directors like to hear good things about themselves. However, keep it sincere. Safe areas to comment include...
  - The residency program's website and how informative it was
  - Electives, conferences and teaching
  - Ongoing medical research
  - How happy the residents and fellows looked
  - This specific residency or fellowship program was recommended by your friend
- Show interest in their residency program by asking questions. If you don't, they may think that you are not interested.
- Don't ask questions about information already on the residency program's website. Instead start by talking about the website and ask a related question. This will impress the residency program director and show him that you have done your homework.
- During the residency interview process, indicate your interest by letting them know that you would be very happy to join their residency program.
- Lunch is your opportunity to ask and get all the nitty gritty details from the residents and fellows. However, remember that whatever you say may be conveyed to the residency program director. You are always interviewing so remain professional.
- Most residency programs get input from residents and fellows when deciding on the candidates. So be friendly to the house staff and play it safe.

## Commonly Asked Questions

Interviewers routinely ask certain questions of applicants, and for some of them you will have ready answers. Interviewees report that they found some questions appropriate; others they felt to be off-limits, though frequently asked. Ranked among the most difficult to answer were vague, open-ended or very general questions. Interviewees reported anxiety about questions like, "Tell me about yourself", or "What do you want to know about the program?", and yet those were the kinds of questions they repeatedly faced.

Another common question was about personal weaknesses. As one respondent said: "You should pick something that doesn't expose some horrible shortcoming -- something that could actually be seen as a strength. For example, you may feel that "I'm a perfectionist, I trust people too much." Or "I'm too organized." You certainly can't respond, "I'm insensitive, cruel and lazy!"

If you are prepared to answer the following list, you should be ready for many of the questions you will face.

- Why did you choose this specialty?
- Why are you interested in this program?
- What are your goals?
- Tell me about yourself?
- What did you do before medicine? (To an older student)
- Why should we pick you?
- What are your strengths?

- What are your weaknesses?
- Where else have you applied?
- Are you interested in academic or in clinical medicine?
- Do you want to do research?
- Where will you rank us?
- What was the most interesting case that you have been involved in?
- Present a case that you handled during medical school.
- Do you plan to do a fellowship?
- What could you offer this program?
- How do you rank in your class? (UCLA students are not ranked)
- Do you see any problems managing a professional and a personal life?
- Are you prepared for the rigors of residency?
- Where do you see yourself in 5 years?
- What questions do you have?

### **Non-Traditional Questions**

Beyond the routine questions, there are others that are more difficult, unusual, or even strange inquiries that may not seem to pertain to your future as a doctor. You cannot prepare for all the questions you hear about through the grapevine. Nor can you prepare for all the remote possibilities that you conjure up in your head.

Questions that are unexpected often fall under the general category of getting to know you. It's a good idea to spend some time on personal reflection before you start the interviewing process; give some thought to who you are in the world both as a doctor and as a person, what you like and dislike, why you're in medicine and what you want out of your residency.

If you are asked something that seems pretty off-beat, it is probably best to assume that you are being judged on your grace under pressure as much as on the substance of your answer. Some program directors think that the way to test your smarts in the face of medical emergency is to put you into a crisis in your interview.

Remember, not all interviewers are equally skilled. You can correct some of the problems you encounter by keeping the interview focused. When questions are asked that don't seem germane to the interview, you may tend to over-answer hoping to hit on something your interviewer wants. But don't go on and on. If you're asked a question about whether there are any physicians in your family, you needn't give a monosyllabic yes or no, but don't do your family tree, either. Rambling in an interview robs you and the interviewer of the opportunity to exchange the information you both need.

The following is a list of some non-traditional questions as reported by students:

- Are you religious?
- What is the one event you are proudest of in your life?
- What do you plan to do after residency?
- What are your hobbies?
- What do you think about housestaff unionization?
- How would you redesign the health care system?

- Why did you get (a certain) low grade?
- How will you deal with the possibility of being sued?
- What was your most difficult situation in medical school?
- What was the last book you read that wasn't a medical book?
- What do you think of socialized medicine?

## **Handling Unwelcome Race/Ethnicity/Gender-Based Questions**

The law prohibits discrimination on the basis of race; religion; national origin, age, sex, and handicap status. If you are asked questions pertaining to any of these subjects, you are not required to answer them. If a program is particularly flagrant in its pursuit of these questions, you may want to contact the Federal Equal Employment Opportunity Commission (EEOC) or the state agency that handles discrimination claims. If you feel that the answers to any of these questions have cost you a job, and that you were at least as qualified (or usually more qualified) than the person who got the job, you may file a charge of discrimination with the EEOC or the appropriate state agency. The law prohibits discrimination in hiring decisions on the basis of sex. It is not illegal for an interviewer to ask questions based on any of the above subjects unless only certain people, i.e. white, African-Americans, etc., are asked. If a program chooses residents on the basis of answers to these questions and charges are filed, the fact that the questions were asked can be used against them at that time.

Of course, no one wants to force the issue, if possible. Instead be ready to use such opportunities to gauge the real environment and philosophy of the institution. For example, you might respond, "I'm glad that you asked that question. It gives me an opportunity to ask you the employee mix and patient demographics here...and your philosophy on teaching cultural competency. I'm very interested in improving the health status of minority populations."

An approach like this can open a dialogue between you and the interviewer. It also gives you an opportunity to find out how the attitudes of the program reflect (or don't reflect) your own. In a wider context your question can elicit information about the working conditions of the program, which affect all residents.

## **Questions to Ask During Interviews**

Everyone who interviews for a residency has different priorities and ideas about what they want in a placement. Therefore, there is no way that someone can send you into your interview with a list and tell you that if you ask these questions you will cover everything that you need to know. In addition, different specialties demand that different questions be asked. However, it is very important for two reasons that you develop a set of questions. First, it is imperative that you glean the information that you need to assess the program; as one respondent to the questionnaire said, "You're interviewing them just as much as they're interviewing you." Second, it is a handy emergency procedure in the event that you run into an interviewer who wants you to direct the interview. The following is a list of questions for which you may want answers, broken down into categories which may also be useful as a guideline for developing your own questions. Be careful not to ask a question that is already covered in the literature on that program.

*Education/Philosophy:*

What is the philosophy of the program?  
Who are the faculty?  
What kind of curriculum is offered?  
How many hospitals participate in the program?  
Is a thesis or publication required during training?  
Is there time and funding for conferences and meetings?  
To what extent do residents manage patients?  
What is the patient mix and what are the community demographics?  
Do residents perform surgery?  
Is the program changing, and why?  
What do residents here like most and least?  
What are the research, clinical, teaching opportunities?  
What is the scope of experience I can expect?  
What is the program like (in the subspecialty I'm interested in)?  
Where are the graduates of the program now?  
How much elective time is there and how is it usually used?  
Is the Chairperson staying?  
What percentage of graduates enter fellowships?  
How is the training divided?  
What are the weaknesses of the program?  
Do residents have time to read?  
How available are the attendings (including nights and weekends)?  
What were the results of the last accreditation visit?  
Are there any joint residency activities?  
What is the patient mix? Does it reflect the community demographics?  
What kind of community outreach might we be involved in?

*Competitiveness of the Program:*

What do you look for in a candidate?  
How many people do you rank?  
How do your residents perform on boards?  
What is this program most respected for?  
What is the ownership of this institution?  
How financially stable is the program?

*Quality of Life:*

What is the mix of married and unmarried residents?  
What is the racial/ethnic/gender breakdown of residents?  
Do the residents socialize as a group?



Are their support groups?  
Is there an Office of Minority Affairs? What is its role?  
How many residents are there?  
What is call schedule like?  
What happens if someone is sick?  
Characterize faculty-resident relationships.  
What is the relationship between this program and other specialties?  
Have any housestaff left, and why?  
What do you expect of your housestaff?  
Is there a house staff grievance process?  
How are complaints handled?  
What is the parental leave policy?

### *Benefits:*

Do you offer health, life, disability insurance?  
What is the salary?  
What is your meal plan?  
What kind of vacation time do you offer?  
Do you have sick days?  
Do you have maternity/parental leave?  
Does the curriculum include training in cultural competence?  
Is training offered in medical Spanish or other languages?  
Does the program seek and actively recruit minority residents?  
How many attendings/faculty are minorities, and are efforts being made to actively recruit them as well?  
Does the medical school have an Office of Minority Affairs?  
What is the make-up of the patient population?  
Is the program or hospital involved in any projects to help the underserved?

### **Other Things You Might Want to Know**

There are other questions that you won't be asking in the interview but might want to investigate on your own. For example:

#### *Where is it?*

Do you like the city?  
Do you like the fact that it's rural, or in a suburb?  
What is the community seem like?  
What is the climate like?  
What kind of transportation is available?  
What is the access to theater, movies, sporting facilities, the great outdoors?  
What are the financial implications of living here?

### *The Hospital:*

How are the individual call rooms?  
What are the meals like?  
What is the library like?  
Can you easily photocopy articles you need?  
Where are the lockers?  
Do men and women have equal facilities?  
Are there fitness facilities?

### **Beyond the Questions**

In answering questions about what kind of person you are, why you went to medical school, and what you want to accomplish, you will want to try and distinguish yourself from the other interviewees. However, that is often difficult to do. Many have reported that the most common questions were sometimes the hardest to answer, for example, “Why do you want to be a doctor?” Most say to become physicians for the same reasons -- to “save lives”, “improve health care in America, “help people”, “make a contribution to society,” and so forth. That is not to say that you should not say those things; by all means do so. After all, that probably is what you hope that you will be contributing.

But in addition to your heartfelt answers to those questions, you can distinguish yourself by showing that you have spent time in introspection and that you understand how your experiences have shaped you and influenced your decisions about becoming a physician and choosing your residency. One experienced interviewer told us, “Everyone has a story, but many of the students we see don’t seem as if they know their own particular stories. Many have not really thought through their lives and what they want.” Spend some time with yourself before the interview; ask yourself these questions:

- What are your expectations of what your life will be like after residency? What’s your visual image of your life as a doctor?
- What have you done in your life that shows that you are a hard working and dedicated?  
(Remember, it doesn’t have to be restricted to medicine.)
- What besides medicine do you have in your life that you feel passionate about?

### **What About “Lifestyle”**

The medical profession continues to debate the advantages and disadvantages of the intensity of the residency demands and schedules. Long resident work hours, sleep deprivation, high stress levels, relationship interruptions -- these are somewhat par for the course in a typical residency program, but of legitimate concern nonetheless -- particularly as you may think about your now or future spouse or children.

It’s appropriate to ask about call schedules such as “How often will I be taking call” or “What are the expectations for a new resident...” But too many questions about time off will make you look like you’re picking your residency on that basis, which does not speak well to the program. It’s a fine balance.

## After the residency interview

---

- When you are done with your residency interview, meet the residency program's secretary and express your appreciation for her help in arranging the interview day and thank him/her.
- Once you get home, write down all the positive and negative points about the residency program. Put down your personal thoughts about the residency program and community. Give each residency program a score, based on your personal criteria. This will refresh your memory at the time of preparing your rank order list for the ERAS / NRMP match.
- Don't forget to write individual "thank you letters" to all interviewers and the residency program's secretary. Letters to the residents / fellows is optional. Letters can be typed or hand written.
- If you were impressed with the residency program and are giving it serious consideration, we would recommend that you visit the residency program again for a second look. Plan to spend a full day following the residents, as they go about, doing their daily hospital routine. This helps you decide about ranking the residency program, besides improving your chances of getting a position there.

Go back to your housing and immediately write down your impressions of the interview. After a few interviews, you will tend to start forgetting what happened where. Write a description or make a list of what you liked and didn't like, and *do it right after the interview* because you won't remember later.

Don't rank a program you will feel uncomfortable working for. If you're going to interview at many programs, it's a good idea to prepare a checklist in advance of the factors that are particularly important to you that you can use for all your interviews. At the end of the process you can then use a consistent rating system to help sort out your decision.

Follow up your interview with a note of thanks -- but not one that sounds like a form letter. Make sure that you sound genuinely interested.

---

(c) Copyright 2002-2004 ResidencyandFellowship.com. All rights reserved. No part of this website may be reproduced in any manner whatsoever without written permission. Please read our [disclaimer](#).

(c) Copyright 1995-2007 American Medical Association. All rights reserved.

---

## Residency Program Evaluation Check List

Program Address \_\_\_\_\_

Program Director \_\_\_\_\_

House staff Coordinator \_\_\_\_\_

Secretary Phone & Email \_\_\_\_\_

1 = best 5 = worst

<b>Community and Personal Factor to Consider</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
Type of institution (academic, private, academic affiliation, etc.)					
Type of community in which located (urban, rural, suburban, etc.)					
Cost of living/ housing in the community					
Safety, crime rate in the community					
Religious/ cultural needs and opportunities					
Proximity to family					
Availability of work for partner/ spouse					
Quality of Schools, public and private					
Availability and quality of day care					
Insurance costs for cars, housing					
<b>Job details and benefits:</b>					
Salary					
Health Insurance					
Dental Insurance					
Life and Disability Insurance					
On-call facilities					
Vacation					
Family/ maternity/ paternity leave					
Parking					
Student loan forgiveness					

1 = best 5 = worst

<b>Service/ Educational factors</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
Economic status of the hospital/ academic medical center					
Number of residents on the various services					
Supervision of resident inpatient work					
Frequency of on-calls					
Number of patients managed per resident					
Means for patient coverage					
Number of patients covered when on-call					
Amount of ambulatory training					
Supervision of ambulatory care					
Means for inpatient coverage for residents in ambulatory setting					
Number of medical students on the various services					
Resident responsibilities for medical students					
Length and location of the various rotations					
Amount and timing of electives					
Affiliations with medical school(s)					
Affiliations with other hospitals					
Number of inpatient beds					
Percentage of filled beds					
Average length of stay of inpatients					
Annual admissions					
Annual outpatient visits					
Number of procedures, as relevant to specialty					
Number of residents, as relevant to work load					
Patient mix and ethnic/cultural balance					
Physician support services (IV team, etc.)					
Laboratory services					
Radiology services					
Social services					
Nursing services					