

WELCOME AND ANNOUNCEMENTS: MISTREATMENT, RESIDENCY TIMELINES, RESIDENCY RESOURCES

- **Mistreatment**
 - Quarterly fourth-year survey so we can gather input from your class
 - Respond to the survey even if you have not experienced mistreatment so we can get a baseline denominator
 - Recognize the difference between behaviors that may be offensive or unprofessional (an appropriate response could include education, feedback, and monitoring) vs. behavior that constitutes abuse and bias with malicious intent (an appropriate response must include cessation of behavior and/or removal from environment)
 - If you experience mistreatment, please seek help
 - Faculty ombudspersons (Diane Altkorn and Steve Zangan)
 - Peer ombudspersons (Pritzker Chiefs)
 - Other student leaders
 - Faculty/Career Advisors
 - Anyone in the Dean's Office
- **Residency Timeline: In the next month...**
 - Read & approve your MSPE and complete your ERAS application
 - ERAS opened September 1
 - ERAS office hours every Thursday 8-11am (sign up on doodle poll for a time)
 - Choose programs to which you want to apply
 - Meet with your Career Advisor
 - Register for the NRMP
 - Take Step 2 USMLE Exam (deadline: December 1)
 - Finalize LoRs (target date: October 1)
 - October 21: Residency programs begin reviewing applications
- **Residency Resources to Select Program**
 - PSOM Residency Interview Database (specialty and program specific outcomes of applications by 4 graduating classes of PSOM students)
 - Review with Career Advisor to create balanced application strategy
 - Survey opens for Class of 2021 on October 1 – **PLEASE COMPLETE!**
 - Data will help guide your application strategy in real time in the admissions cycle
 - Data will inform future classes by making the database more robust

INTERVIEWING FOR RESIDENCY PANEL DISCUSSION

- Christine Babcock, MD - Emergency Medicine
- Tessa Balach, MD - Orthopedic Surgery
- Fuad Baroody, MD - Otolaryngology
- John McConville, MD - Internal Medicine
- Lisa McQueen, MD - Pediatrics
- Deborah Spitz, MD - Psychiatry
- Jennifer Tseng, MD - Surgery

Question: How will interview days be organized this year – both in terms of structure and content?

- Dr. Balach – Number of interviews offered expanded to 90 from 60. Interviews will take place over course of three days in one weekend. Interview structure will be half day of interviews with 16 different faculty and residents, a virtual tour, and small group discussion time.
- Dr. McQueen – The structure is very likely to change over the course of the interview season. Interview days are likely to be shorter. Video information will be provided ahead of time to reduce zoom fatigue during the interview day.
- Dr. Babcock – Plans are evolving, but will likely include “flipped classroom” with information in advance and time on zoom dedicated to interaction with faculty and residents. Emed will interview the same number of students but will push the interview dates back into January.
- Dr. Spitz – Videos are on the website for applicants. Dr. Spitz will meet with all applicants for an hour to talk about program and then applicants will interview with 3-4 faculty and residents for a half-hour interview. There will be social small groups in a lunch and a “happy hour.”
- Dr. McConville – Internal Medicine normally interviews 400 applicants. The interview day will be shortened to 3 ½ - 4 hours, including an overview session, morning report, and hang out time with just the housestaff to preserve one on one time with residents without faculty. Applicants will have two interviews with faculty. The dinner the night before will become a “happy hour” with housestaff and applicants. Logistics still evolving.
- Dr. Baroody – ENT will interview over two days and all faculty will meet and interview all candidates. The number of interviews offered will increase to approximately 65 from approximately 55. The day will consist of an information session, a resident happy hour with candidates without faculty, and a “room” where residents and faculty can mingle during the day. The residents have put together a Day in the Life which is already online.
- Dr. Tseng – General Surgery has offered virtual info sessions. The interviews will take place over three days instead of two to have fewer applicants/interviews per day. Each applicant will be paired with a resident to serve as a guide through the interview day.

Question: There is a concern about the number of applications going up significantly and some programs are creating additional hurdles (ie., secondary applications). Are you considering this to weed out people who are less interested?

- Dr. Baroody – ENT will utilize a system where applicants are allowed to signal 5 programs other than home institution if they are particularly interested. All ENT programs will use this process. Signals open for applicants from September 28-November 9 and will be released to programs on October 21.
- Dr. Spitz – Psychiatry will ask candidates to put something in personal statement about why they want U of C. If they don't, they will not be interviewed. If a student is interested in a program, please tell Drs. Spitz or Marcangelo who will call the program and tell them.
- Dr. McQueen – Having the PD make the call is much more impactful than the applicant calling. Association of Pediatrics has discouraged programs from signaling.
- Dr. Balach – Ortho is also discouraging participation in signaling, but considering supplemental portion of application.
- Dr. Tseng – General Surgery is not participating in signaling. Many top tier general surgery programs, including U of C, will go blind on Step 1 scores, but not all.
- Dr. Woodruff – The process of asking PDs or Deans to make calls on your behalf should take place for a few weeks after 10/21. If at that point, a student hasn't heard from programs that are high on the list, follow up at that time with PDs and Career Advisors.

Question: How are students supposed to know what additional information programs might expect as part of the application?

- Dr. Spitz – Additional application requirements can be posted on the program site via ERAS.
- Dr. Woodruff – Program Directors may not put all expectations on ERAS and are more likely to put it on the website. For programs that you are most interested in, look at application process portion of the website to meet expectations.

Question: Should students be direct in signaling their top programs?

- Dr. McConville – Convey your particular interest to the right person. Make it specific to the program, and not just a geographic area of interest. Be sincere

Question: How should students prepare for interviews

- Dr. Babcock – Even if convenient do not set up interviews at two programs in one day.

- All – Dress and appear as if you are at an in-person interview. Pay attention to time zones!
- Dr. Woodruff: The medical school will offer space on a limited basis to students who are having challenges finding appropriate interview spots (wireless issues, family issues, etc.) However, with limited space there is a high threshold to make this happen. This should not be used as a preference, but for a specific reason.

Question: Will programs process applications and offer interviews differently this year?

- Dr. Balach – Ortho offers a universal invitation date and as many programs as possible will release interviews on the same date.
- Dr. Baroody - ENT offers will go out from November 9-November 30
- Dr. Spitz - Psychiatry will interview the same number (110 interviews for 6 slots) and interviews will take place every week all day on Tuesday over 13 days or so. However, psychiatry programs do things idiosyncratically.
- Dr. McConville – Internal Medicine does not have universal release date. U of C expects to have all interview offers out by third week of November and then let all applicants know before holidays if they are on wait list or not going to be interviewed. No universal protocol among IM programs.
- Dr. McQueen – Pediatrics is same as IM.
- Dr. Tseng – Many General Surgery programs are adding additional dates. Invitations from U of C will be sent out first or second week of November which is earlier than usual.

Question: Have you changed the way you are scheduling interviews? How much time should students wait to respond?

- Dr. Spitz – Psychiatry offers interviews on a rolling basis so respond quickly. If we don't hear back within 48 hours – inclined to think the student is not interested. Students need 12-13 interviews. More than that is not needed.
- Dr. Babcock – At the beginning of the season, as soon as you get the invite, schedule an interview. Once you hit a certain number (at least 13 in Emed or as high as 20 if there are red flags on the application or a couples match), then you can cancel interviews at programs that are not high on your list to open interviews for other people.
- Dr. McQueen – Data shows that if there are no red flags in the application file, then you have a 99% chance of matching if you interview at 10 places.

- Dr. Tseng – Program Directors worry that applicants will accept more interviews than they attend. Therefore, communications will increase as you approach interview date. Reply to these communications. Lack of response past the interview acceptance will be interpreted that you are a potential no-show.

Question: How important is it for students to attend social events?

- All – it could not be more important. Go. Your ability to interact interpersonally is critical to how well you are going to relate to fellow colleagues and patients. Pay a lot of attention to what residents say about applicants. Important for students to figure out if they are going to be comfortable.

Question: What are the guidelines for cancellations – how much time in advance is reasonable to cancel?

- All – Provide two weeks notice if you are going to cancel an interview. The virtual nature of this year does not change the etiquette around the situation.

Question: Do you have advice for “happy hour” etiquette?

- All - Don't drink too much. Engage people. It will be noticed if you don't interact broadly. Don't monopolize the conversation. Dress professionally. You don't need to wear a suit, but you should look professional

Question: Will social events be occurring on weekends?

- Ortho and General Surgery programs offered over the weekends while other programs tend to protect the weekend.

Question: What are the Program Directors looking for in virtual interview – personal, attributes, character?

- Dr. Balach – Be authentic. We want to know who you are as human being and future practitioner.
- Dr. Baroody – Be ready to talk about any and all experiences on your applications
- Dr. McConville –What are you passionate about? What within medicine really excites you? What things outside of medicine are you passionate about? Be ready to answer all questions related to what you put on your application.
- Dr. McQueen – Don't “pad” your experiences with activities that are not important to you – the program directors will see through that. Be your authentic self and highlight who you really are.

- Dr. Babcock – We should understand from application what makes you passionate and unique. Show your excitement about what you care about. It is ok to be excited about the stuff that makes you you.
- Dr. Spitz – If there are problems in your record, address them overtly. Don't assume that programs will not find them. We will want to understand what the problem is and how you handled it. The ability to reflect about yourself matters.
- Dr. Woodruff – Use career advisors before you decide that there is something problematic enough that you need to bring it up during interview. Career advisors can guide this decision and decide what needs to be addressed and what does not.

Question: What is your favorite question to ask during an interview?

- Dr. McConville – if I made you the Dean of PSOM, what would you change?
- Dr. Balach – tell me about a time you failed (looking for insight, self-awareness, resilience)
- Dr. McQueen – what is the hardest job you ever had? And this year - how has Covid pandemic shaped how you feel about the practice of medicine?
- Dr. Spitz – tell me about a time that things didn't go the way you hoped – how did you think about it, how did you handle it? We want to know what kind of a problem solver you are.
- Dr. Tseng – what's a question in surgery that excites you and how would you go about answering that?
- Dr. Baroody – describe your support system.

Question: What is one of the best questions that applicants have asked you?

- Dr. Baroody - What brought you here and what keeps you here?
- Dr. Babcock – Give me the opportunity to brag about my program and tailor my answer to your specific interests with a question like “what are you most proud of?”
- Dr. McQueen – I don't like the generic questions – what is that you *really* want to know? Authentic questions lead to more interesting conversations
- Dr. Lee – What in your life are you most proud of?
- Dr. Puri – Who is your mentor/role model and why? Also, do not say that all your questions have been answered.

- Dr. Poston – What are the aspects of our program that excite you and how would that support what you are passionate about. This tests integrative thinking and how much candidates have paid attention. Also dislikes canned questions like “do you see any changes in the next five years” which come across as lazy. Ask the same question of different people. See if there is convergence around mission/theme of a place.

Question: What irritates you most during an interview day regarding an applicant – what are your pet peeves?

Dr. Babcock – Seeing someone on their phone during a presentation. When it isn't your turn to talk, important to still stay focused and engaged and present during the entire process. The camera will be on you.

Dr. Woodruff – when in a conversation, show engagement and enthusiasm. It is virtual, but body language will matter.

Dr. Spitz – Faculty will interview 8 people for ½ hour each. It is hard work – it is harder when the applicant doesn't bring energy.

Dr. McQueen – If you are rude to support staff, don't even bother ranking us. Be polite to coordinators and admins. Programs don't want jerks.

Dr. Puri – Keep the energy up. The faculty are doing more than the applicants. Meet them more than half way. Bring energy to the interview. Zoom prep is expected.

Dr. Lee – PSOM has put together resources for virtual interviews, including recorded workshop on virtual interviewing and a tip sheet. These materials go over elements related to lighting, personal presentation. We can tell when you are not paying attention. Don't text! Pay attention and focused.

Dr. Woodruff – Turn off pagers and telephones. The time you are with the programs is precious. Show that your priority is getting information out of the interview and making the connections.

Question: Are post interview communications helpful or appropriate?

Dr. Balach – Not helpful

Dr. Baroody – We rank the same day after the second interview. Not helpful.

Dr. Spitz – It is helpful if we know that someone is really interested. But so many people say things that are not truthful, so PDs are dubious about that kind of thing.

Dr. McQueen – Try not to put weight on post interview communication. Would like global agreement that we will not engage in it. If you do send anything, write a fresh email.

Question: There is a risk that interview day will not provide all the information that applicants need. Is it appropriate and do you have infrastructure for queries after interview day?

- Dr. Babcock – If you have questions reach out to faculty or residents.
- Dr. McConville – Program Directors in internal medicine discourage post-interview communications. If you have sincere questions, there are places to go to ask those questions.

Question: If you have a major new accomplishments and want to update programs, is that reasonable?

- All - I can't think of a single time when it has made a difference.

Question: What do you do if someone asks an illegal question – i.e., are you going to rank us / do you have medical conditions / are you planning to start a family?

- Dr. McConville – This depends on time and situation, but be as vague as you want and do not answer the direct inappropriate question. Do as much as you can to evade. Give bland answers. And then report to the Dean's Office or your Career Advisor

BONUS TRANSCRIPT – MINUTES FROM 2019 INTERVIEWING FOR RESIDENCY PANEL

DISCUSSION

Have you begun sending out invitations?

- **Dr. McConville:** Medicine people at Pritzker should've gotten an interview! The bulk go out in the second or third week in October.
- **Dr. Babcock:** EM programs have picked a common application date; ours is October 8. Once I figure out how to send out invitations, you will get yours! Mid-October for EM.
- **Dr. Dade:** Not yet. The MSPE is the key piece [October 1]. All medical schools do transcripts differently, so we rely on the MSPE to make other decisions. Everyone from Pritzker will get an interview.
- **Dr. McQueen:** Nope!
- **Dr. Simon:** We have a common application day too, on October 8.
- **Dr. Conti Mica:** We will be looking in October and people in Ortho will hear in early November.
- **Dr. Woodruff:** Every program has their own process, so there is a fair amount of variability well into October and November for some specialties.

When should I start worrying if I haven't gotten an interview?

- **Dr. Babcock:** By Nov. 1, if you have not heard from an EM program you are interested in, reach out to us and we can help troubleshoot it. If you haven't gotten any interviews, expand your list of programs.
- **Dr. Tseng:** Mid-November to January are our interview dates, so if you haven't heard by your second week in November, get in touch with your mentor.
- **Dr. McConville:** By the second week of November, reach out. We have an active wait list that we act on in December and January.
- **Dr. McQueen:** Same timeline; reach out to mentors if you haven't heard. It is preferred that you reach out to mentors here to troubleshoot your next steps instead of just cold calling the program. You might come off as annoying if you do.
- **Dr. Simon:** By Nov. 1.
- **Dr. Conti Mica:** We have one weekend we do our interviews, so if you have not heard from Ortho programs by mid-November, start reaching out. A lot of communities are small and we all know each other, so we can always make an unofficial phone call. You don't want to be on an administrator's bad side.

Tips on attire?

- **Dr. Tseng:** For surgery, be conservative. This means muted colors; a little pop with a tie or blouse is fine, but nothing extreme. They want you to be serious about interview days, so stick to navies, blues, black, browns. You want to stand out due to your character and not your attire. Don't feel like you have to wear a skirt in January if it is cold. Wear comfortable

shoes or a change of shoes because you'll be taken on tours. If you are running late at the airport, go up to the counter in a suit—it'll give you more credibility!

- **Dr. Simon:** Look clean and not disheveled. Make sure your hair is put together and your clothing is ironed.
- **Dr. Babcock:** Do carry-on because if your luggage is lost, you won't have an outfit. Keep an extra shirt with you in case of spills.
- **Dr. Woodruff:** Make sure your shoes are in carry-on too; I had to go on interviews in a suit and hiking boots once.

Some programs have dinners the night before interview day—should students take those invitations seriously?

- **McQueen:** Those dinners help you, not us. We don't keep track of who goes, but you will get a sense of the work culture and what the residents are like outside of the hospital. However, if you do something "boneheaded," it'll get back to us, so don't get drunk and continue to behave professionally.
- **Dr. Tseng:** There are some programs where the residents have a say in your ranking, so the way you behave at those dinners gets fed back to the discussion table when talking about candidates.
- **Dr. Babcock:** Work under the assumption that every person you meet may have some say in your candidacy. Treat everyone with respect and treat everyone politely. Our program coordinators will let us know if someone is rude to them.
- **Dr. Simon:** It's a hard balance because you want to be memorable but only for the right reasons. Use the dinner to make a connection with residents; our residents do give us feedback. For attire, the invitation will say. The residents may be in scrubs, but you should still be professional—be aware of how you look.
- **Dr. Woodruff:** You're not just an applicant to be a resident; you're going to be a member of their practice for a number of years. Doctors want to know that you are excited and invested in the opportunity to be a part of that practice. Especially for smaller programs, commit to going to the dinner the night before.

Contact your career advisor!

- **Dr. Lee:** If you're at all concerned about the number of interviews you have, reach out to your career advisor!
- **Dr. Poston:** If you feel you have too many interviews, reach out to your advisor before you cancel any. If you are going to decline interviews, do that as soon as possible so someone else can get your spot—but don't do that without checking in with us. We have years of experience and can help you walk through this decision.

Are you supposed to respond when you get an invitation?

- **Dr. Babcock:** We all use different technology so sometimes you cannot respond.
- **Dr. Woodruff:** If additional communication is necessary, you can respond. But through ERAS or Interview Broker, there's not really an opportunity.

How much movement is there on wait lists?

- **Dr. McConville:** It depends on the specialty. We go 50-70 deep on our wait list, but that's probably different in smaller specialties that only have 1-2 interview days. If you're going to have someone reach out on your behalf, and you get an interview, you better be willing to get an interview invitation and spend the money to get out there even if you only have a few days' turnaround. That's a good way to triage your programs: are you willing to drop everything on 3-4 days' notice to go to that program?
- **Dr. Conti Mica:** Reach out to the ones you're super interested in to ask them to keep you on the wait list. If you have to change dates, do it quickly and don't cancel last minute because that will spread throughout the specialty.
- **Dr. Babcock:** Be careful about copying and pasting when emailing programs; we can tell because the font is different. Make that email unique.
- **Dr. Tseng:** The Program Coordinator is the one sending out logistical emails; don't email the PD if you have questions about where to store luggage.
- **Dr. Woodruff:** This is not the moment to narrow down your programs: for now, accept all offers that come your way, and if you end up with too many you can start to decline. Don't be picky now.
 - BE NICE TO THE PROGRAM COORDINATOR. They are the gatekeepers of the program. If you are professional and cordial with everyone involved in the team, that shows your integrity. PDs will remove people from their rank list if the coordinators tell them an applicant was rude to them. Also—try not to be too high-maintenance!

Cancellation Etiquette

- **Dr. Conti Mica:** The minute you know, cancel. There's someone else on the wait list who wants that spot, so be respectful of that—the more time you give, the better.
- **Dr. McQueen:** As soon as you know. The worst you could do is cancel the night before.
 - Your first interview should probably not be your first choice; over time, you'll get a better sense of what you are looking for in a program and early on you will not have that knowledge. You may also have first-time jitters.
- **Dr. Babcock:** As a PD, I don't even know who is canceling because everyone schedules online. We lock out a week before, so if you have to cancel less than 7 days out, you call us.
 - Do NOT no-show. If you do, that means something bad happened to you. We have called medical schools about that because we are worried. That worry can turn into anger when they find out you are completely fine. Just call us and let us know.
- **Dr. McQueen:** Don't just send an email to ERAS if it is time-sensitive; get in contact with a human and call us if you have to cancel last-minute.
- **Dr. Woodruff:** When we get within 2 weeks of an interview, there had better be a good reason for you to cancel that interview. You're putting people in a difficult situation that reflects poorly on you and will impact you in the future.

- **Dr. McConville:** Add a line: “Please verify that you’ve received this” when you ask for confirmation of a confirmation. If you feel like you have to send an email to cancel in advance, make it short and sweet.
 - Medicine is trying to send invitations in the afternoon, give you a time period to respond, and not to offer more invitations than spots available.
- **Dr. Babcock:** We try to send out invitations in the evening so people don’t have to drop something else to respond.

What are you looking for in the applicant when you meet them in person? What does the ideal candidate look like? Who is a “must-have”?

- **Dr. McQueen:** We can teach you medicine, but we cannot teach you how to be a good person or to have respect for other people, so we look for indicators of that.
- **Dr. Conti Mica:** If you’ve gotten an interview, you’ve passed the test and we just want to know who you are and get to know you to see if we are a match. Five years is a long time, and we have to make sure we get along and we can provide the education you want. We want to have a conversation, go off on tangents, see what you like, because that will show we can work together as a team.
 - When we ask open-ended questions, don’t give a yes or no answer. Guide us through a conversation of what you want us to know about you.
- **Dr. Simon:** Agree. We take seven residents per year, so every minute together we are like family. You have 15 minutes to make an impression on me. Did our conversation flow? Did we have a human connection? You probably want to see the same thing on your end. Are we people you can work with for 4 years?
- **Dr. McConville:** We interview more people, so we believe prior performance predicts future success so touch on your high points in your application. I also want you to take advantage of something here at the UChicago that you are passionate about—know about the place you’re interviewing and have an idea as to why this institution is right for you. Think about what you want to accomplish during your residency. There is no right answer; just be yourself.
- **Dr. Poston:** Honesty is important. As a PD, you have a good “BS-meter,” so don’t talk about research if you haven’t done a lot of research. Animate and put a face to what we see on your application; don’t try to reinvent yourself from what you’ve written.

What is your favorite question to ask applicants during an interview?

- **Dr. Babcock:** I only ask one question: what is unique or interesting to you that will add to the diversity here at UChicago? It allows people to tell me what they’re most proud of.
- **Dr. Tseng:** I always ask, “Why surgery?” I am looking for passion. Some people will ask, “Tell me about yourself,” so be prepared to answer that for 10-15 minutes.
- **Dr. McConville:** I often ask people if they have ever made a mistake or failed—and I want to hear about a real error. I will not hold it against you; I want to know if you have learned from it and grown from it.

- **Dr. McQueen:** What's the hardest job you've ever had? I love this because it's not necessarily about medicine and if they can't answer it, that's an important piece of information too.

Note from Dr. Woodruff: You will be given an opportunity over and over again to say bad things about your own medical school or hospital. It's worth the time right now to think of constructive answers to those questions, because Program Directors will be looking for good team members, *not* people who are negative, as critical as possible, or who will use any opportunity to badmouth a program.

- **Dr. Simon:** Tell me about a challenge—and don't say, "My third year of medical school"! Because that tells me about your clinical skills. Think of something outside of medical school.
- **Dr. Woodruff:** You will certainly be asked, "What can I tell you about my program?"
- **Dr. Conti Mica:** "What's the worst thing you've ever done?" It's kind of tricky and for us it's a little fun and a great story.

What are good questions for students to ask of interviewers?

- **Dr. Conti Mica:** What's the biggest weakness of your program and how are you working to fix it? If a program says there's nothing wrong with them, that's as bad as you saying, "There's nothing wrong with me and I'm the perfect applicant." This question gives you a chance to be a part of the solution.
- **Dr. Babcock:** What are you most proud of in your program? This will tell you whether our program matches up with your desires.
- **Dr. McQueen:** Any question you really want to know about. Don't just go down a list of questions; make it more conversational and not formulaic or part of a checklist you might have. Ask questions that show you are paying attention. The most interesting questions I've had are from applicants who asked about UChicago or our patient population or protests about the trauma center.
 - Don't ask questions about scheduling or vacation or things you can find on our website.
- **Dr. McConville:** I've been here 25 years, so I like, "Why have you stayed?" Then I can tell you what about my program is unique and attractive to me. If you ask multiple people and get similar answers, you can start to believe it and trust what people are saying.
- **Dr. Conti Mica:** Do your due-diligence, look on our website, see where we went to medical school, and learn about us. It'll make you look really good. [only works for smaller programs]
- **Dr. Woodruff:** Often, the very first question an interviewer will ask will be, "What questions do you have about our program?" You may be put on the spot first thing on the interview.

How do you respond when someone asks an "illegal" question? (Illegal by NRMP or federal definitions.)

Where else are you applying?

Where else did you do away rotations?

Are you planning on starting a family during residency?

Are you married?

Do you have any health problems?

Where do we stand on your rank list?

- **Dr. McQueen:** You are under no obligation to answer and you can say you're not comfortable answering. You can say "I keep my personal life and professional life separate."
 - Sometimes it's not out of spite but someone has just forgotten the rules or did not know them—they are just clueless. Reflect: was this a one-off interviewer with non-malicious intent or is it a signal of a hospital's culture? In that case, you can go back to your Career Advisor here, who can then call the PD at that place and notify them. Most PDs would want to know if this is happening with their faculty interviewers.
 - We want to know if our faculty are asking illegal questions, so feel free to tell Dr. Woodruff.
- **Dr. Simon:** It might not be malicious—sometimes it might come up in conversation with a resident about where else you are interviewing, and you don't have to answer.
- **Dr. McConville:** Only tell what you want to tell; it is OK to be evasive and give a generic, bland, short answer. We are going to give our applicants emails to the ombudspeople so they can anonymously reach out and give us feedback about who asked inappropriate questions, because we need to know and educate our faculty.
 - We can say that you're ranked to match, but we can't ask you where we are on your rank list.

How do we ask questions about family planning without really asking that?

- **Dr. Tseng:** Start with the residents.
- **Dr. Woodruff:** Start indirectly—ask how many people are married or currently have kids.
- **Dr. McConville:** There are institution-specific policies; there is a GME office leave policy that has the minimum family leave.
- **Dr. Simon:** "How family-friendly is the program?" [might not work in Ortho]

Pet Peeves?

- **Dr. Babcock:** People being on their phones. Your phones should be on silent and away. If you need to check a flight, go to the restroom.
- **Dr. Conti Mica:** Don't "swarm" the department chair; get to know everyone in the department and not just the head.
- **Dr. McQueen:** This is Peds-specific, but don't be overly casual or playful with us; this is still a professional interview. Do not send me cartoons in emails or talk about babysitting.
- **Dr. Lee:** If you have something listed as a hobby, be ready to talk about it. If you like cooking or reading, tell me about a recipe or some books.

Couples' Matching

- **Dr. McConville:** If you get an interview but your partner doesn't, I will talk to other PDs if I am interested in you, and I will ask them if your partner is on their list. It is fair to talk to the PD about that.
- **Dr. McQueen:** Be mindful of timelines if you get an interview and your partner does not; you don't want interviews to be over by the time those calls are made.

What is appropriate post-interview communication?

- **Dr. Babcock:** You don't need to send a thank-you note. If you must, emails are fine. Do not expect any post-interview communications.
- **Dr. McQueen:** Better off not to send anything so you don't make any mistakes. Don't update us when you have news about your publications; it doesn't really help.
- **Dr. McConville:** IM discourages post-interview communication. We have too many applicants; I'm interviewing 400 people. Programs will tell you explicitly whether they expect communication.
- **Dr. Conti Mica:** We have already turned in our lists by January because we do our interviews in one weekend, so a note probably won't sway us.
- **Dr. Poston:** Don't get caught up in trying to interpret vague emails after the interview. Make your rank list using other information.

Do you tell a program you are ranking them #1?

- **Dr. Babcock:** Don't say that if it isn't true. Some fields are small, so do not tell multiple programs they are your #1. You get one.
- **Dr. McConville:** If you must do a post-interview communication, tell ONE program they are #1. It can be 2 lines long.
- **Dr. McQueen:** Do NOT say "I am ranking you very highly," because then we know we are not your first choice.

BONUS TRANSCRIPT: Q&A FROM PREVIOUS YEARS

How to respond to "What can I tell you about my program?"

- **Dr. McQueen:** Think about which questions you really have and make them specific to the program (and not about scheduling or things that are already on the website). We got a lot of questions about the trauma center for adults and those were really interesting to answer.
- **Dr. Babcock:** Your questions might not be about the program but about the community, and that's fine too. Logistics questions are not really for faculty.
- **Dr. Dade:** Asking about call schedule and vacations is not really appropriate for faculty, but you can ask about our Family Planning Program, or other facets of our training. Be prepared to answer, "Did anything surprise you today about our program?"

- **Dr. Bielski:** If you have info from residents, you can say, "I was discussing X with your residents and they seem to enjoy it. Do you think that will change? Or what is the philosophy behind that?" Make it positive.
- **Dr. McConville:** Start with one of your interests and see how it ties into the program. "I was really involved in Maria Shelter volunteering when I was at Pritzker; how does that tie into XYZ program here?" If you know the faculty member has been there a long time, you can ask, "What has kept you here throughout the years?" Or if not, "Why did you choose to come here?" You can verify what they say with what the residents say.

Is it weird to apply to a program now, after September 15?

- **Dr. Humphrey:** No, it's not too late. Cast that very wide net.
- **Dr. Babcock:** Lots of places wait for the MSPE. Also, we haven't started looking at our applications yet so I wouldn't know if you applied on 9/15 or today.
- **Dr. Woodruff:** We are going to be following your progress as long as you keep updating your interview survey. Timelines vary by specialty, so we can't give you one date where you should "start worrying," but we will communicate with you if we feel we need to change your strategy. This is all a statistical gamble and we are trying to play the odds in making the best guesses. Every program has a different way of going about application season, and we cannot necessarily tell where their processes are at this point in time.

Second looks

- **Dr. McQueen:** Interview season is very busy for programs, and second looks are a lot of work to coordinate. There should be an important reason to have them, and I have not yet seen an important reason in second look applicants.
- **Dr. Blanchard:** Do not do second looks. It does not necessarily help your application and can only hurt you. Even be careful in emails after and do not come off as too casual. Shine on interview day and let that be the end of it.
- **Q: Some programs say on their website they encourage second looks. What about those?**
 - If a program sends that signal, pay attention to that and take that opportunity. If a program reaches out to you, say yes and be responsive!
- **Dr. McConville:** No.
- **Dr. Babcock:** It has such a high risk of hurting you, so do not do it.

Location, Location, Location: Is it reasonable for candidates to discuss where they want to be during an interview?

- **Dr. McConville:** Don't just say, "I want to be in LA because my family is here." Lead with something about the program: "I want to be at UCLA because of XYZ. In addition, my family is here."
- **Dr. Babcock:** If you've lived your whole life in the Midwest and want to leave, make sure you tell people that (in different words). Say, "I would be thrilled to move to San Francisco and join your program" or something.

- **Dr. Bielski:** We cannot ask about your partner, but if you bring up that your partner has to be in a certain city, you can tell us about that.