## INTERNAL MEDICINE INSIGHTS GUIDE

Internal Medicine covers an expanse of clinical and professional domains, and as such, all interests or passions are welcome and celebrated. As you navigate through medical school, hone in on where your passions reside and enjoy the process of learning medicine. The goal of many Internal Medicine residency programs is to develop trainees who are great clinicians and great leaders.

# **PRECLERKSHIP** – identifying your passions & getting involved First Year

- Focus on acclimating to medical school! Prioritize your learning and finding balance with schoolwork and life outside of medicine. Developing these strategies early on will make the rest of medical school that much easier!
- Things to consider
  - Shadowing. If you have the time and interest, shadowing is a good gateway to the daily lives of clinicians.
    - TBL is a great arena to meet faculty in-person, form connections, and ask to shadow!
    - The IM SIG also sets up shadowing opportunities signup sheets are typically sent out via email and first-come, first-serve.
    - Another option is to cold e-mail IM physicians! It may be helpful to look through faculty bios to identify individuals who share your interests (e.g. medical education, research, quality improvement etc.).
  - o **Research.** Internal Medicine does not *require* research but if you are interested in academia, you can consider identifying potential areas of interest and using the school's research database to find mentors/projects.
    - Keep an eye out for the Medical Student Research Fellowship application! This is a <u>paid</u> summer research opportunity for UCD medical students to complete a research project and present at the following year's annual Poster Day.
  - o *Class Leadership.* Elections typically occur in October of first year and most positions are four-year commitments.
  - o **Student-Run Clinic.** A great way to practice clinical skills and serve the community highly recommend! Clinic shadowing and interview processes occur during the first few months of MS1.
  - o *Advising*. If you think Internal Medicine might be your specialty and/or want more information, contact the IM Specialty Advisor and introduce yourself!
  - o *Areas of Scholarly Concentration*. An optional way to tailor your medical education in a specific domain.
  - o **SIGs.** Again, this is where you start to individualize your portfolio. Don't see a SIG of interest? Consider starting your own!
  - o *Resources:* Specialty Advisor, Career Peer Advisors, MS4 Peer Mentors (going through application process), Academic Coach

#### Second Year

Get involved! Now that you have one year of medical school under your belt, it's time to really begin molding your portfolio. There are endless ways to get involved, but do what truly speaks to you [and what you can speak about during interviews]. Remember school

is still the priority! Learn your medicine and learn it well – this will help you as you prepare for Step 1 and clerkships.

- Ways to get involved
  - o *Student-Run Clinic/Volunteerism*. Continue volunteering and practicing your clinical skills!
    - If you are involved with clinics, your role will wrap up in the fall.
    - Great avenue to participate in initiatives to address health disparities or policies.
  - o **Research.** Continue working on projects of interest or seeking out research mentors.
    - Can be in basic science, quality improvment, clinical, public health etc.
    - Explore opportunities for different conferences. American College of Physicians (ACP) hosts a regional meeting that UC Davis attends annually!
  - o **SIGs.** If you can, make time to attend events to network and de-stress!
  - o *Mentorship & Advising*. Be on the lookout for Specialty Advising workshops and events.
    - Continue to reach out to faculty mentors and advisors as well as your coach!
    - Consider being a mentor, teaching assistant, or peer tutoring
  - o **Shadowing.** If time permits!
  - o *Leadership*. This area can be tailored to your interests to develop skill sets that residency programs find valuable.
    - Consider positions in national organization (AMA), medical school committees, SIGs, student run clinics, community work, advocacy

## CLERKSHIP - reflecting on what feels right

- The time you've all been waiting for clinical rotations! This year can feel like a dramatic shift from pre-clerkship and classroom learning but try to remember why you chose medicine and hold onto that to keep you going!
- The Internal Medicine Rotation
  - o Inpatient-focused, 6 weeks duration
  - o Every student will rotate for 3 weeks on the UCD Wards.
    - Prior to this rotation, reach out to 4<sup>th</sup> year students to help get your Epic set up. Learning how to use Epic efficiently will help make pre-rounding easier.
  - o For the other 3 weeks, you will rotate at one of the following sites:
    - Sacramento VA (includes 1 week of ICU)
    - Kaiser Morse (includes 1 week of ICU)
    - UC Davis TEACH Service\*
    - Kaiser Modesto\*
      - \* CHS students prioritized; non-CHS students may get placed here contingent on availability.
  - Note: CHS students may have other required sites based on their respective tracks.
- Tips & Tricks
  - Useful phone apps: *Haiku* for chart review, Epic chat, and orders; *TigerConnect* for secure messaging with faculty and residents.

- Typical day on UC Davis Internal Medicine Wards
  - 6AM Get sign-out from night team
  - 6-7:30AM
    - 1. Review patients' overnight events, labs, new orders
    - 2. See your patient(s)
    - 3. Go over treatment plan with your resident/intern
  - 8:00AM Rounds with your team
  - After rounds, pend any orders (you can also do this while rounding on your phone using Haiku), call consults, and finish your note(s).
  - Depending on the day, you may admit more patients to the team in the morning or throughout the workday.
  - Third-year medical students typically follow patients with the IM interns. Start with 1 patient until you get more comfortable. If you can, try to work your way up to 3 patients by the end of the rotation!
- Carry a journal! Regardless of the rotation, take some time to periodically reflect on your experiences. Remember how you felt on different rotations and different clinical settings – this will help you identify the right specialty for you when the time comes.
- Write down impactful patient encounters too! (This will really help as you prepare for residency interviews)
- Interesting patient case? Consider writing a case report and presenting it at ACP or another conference! UC Davis attends the regional ACP meeting every year, and medical students tend to do well. Other popular Internal Medicine conferences include SHM and SGIM.
- Network! You're in the hospital 6 days/week surrounded by faculty and residents who want to teach you. You never know who you'll meet (the medical community is a small place).
  - Consider asking an attending for a letter of recommendation, if appropriate. It may feel intimidating, but it's okay! Here are some considerations:
    - 1. Do you feel like your performance reflects your best effort?
    - 2. Have you received positive feedback from this attending?
    - 3. Due to scheduling, working only 1 week with an attending is the norm. Do you feel like you had enough face time with this attending? Did they witness you interacting with patients?
    - 4. Did you have any interesting and/or complex clinical cases with this attending? These could be great examples to be included in your letter.
  - When asking for a letter of recommendation, be sure to ask if the attending is willing to write you a *strong* letter.
    - 1. You can decide to ask in-person versus e-mail, but asking in person and receiving an immediate response can help mitigate any anxiety! A good time could be in your final feedback session on your last day working with the attending.
    - 2. The worst they can say is no, but you won't know if you don't ask! If the attending declines, don't be hard on yourself! Use this as motivation to be proactive and shine for the rest of the rotation.

## POST-CLERKSHIP – it all gets real

- It's time to apply to residency! (And take Step 2!)
  - o Set up an appointment between April and June to discuss application with advisor.
- Complete your UCD Acting Internship you only need 1 AI!
  - o Internal Medicine does NOT require away rotations; some faculty even discourage away rotations.
  - o Expectations and responsibilities are similar to an intern!
    - Sign-in as first contact for all your patients first thing in the morning
    - Work your way up to 3-5 patients, if feasible
    - Devise treatment plans independently you will follow your own patients and report directly to the senior resident.
    - Spearhead discharge process for your patients (e.g. coordinating with patient navigators and social work, writing patient education handouts and discharge summaries, placing outpatient referrals)
    - Depending on the team, you may be asked to give a chalk talk.
- Make sure your CV is up-to-date and revised. This way, you can plug-and-chug your experiences into ERAS once it opens in June.
- Application Advice
  - If you are attracted to a particular geographic area, put that in your application; list your "hometown," as programs look for "connection;" setting preference (urban, rural, etc)
  - Can put up to 10 (3 "meaningful" and 7 additional) experiences such as research, job, volunteering, community work, mentoring, prior jobs. Avoid fluff, attempt to have the most recent accomplishments, and be concise.
    - **Personal Statement:** Do not need to personalize every program.
    - Do not reiterate your CV
    - Tell your story, BRING YOURSELF TO LIFE, specific experience or strengths that make you unique; what motivates you; or what life experiences have influenced you and your career plans
  - Honestly address any gaps or issues in your training that are not well covered in your CV
- Caution with using AI, some programs use things to detect AI & plagiarism
- Draft your personal statement. It should be no longer than one-page single space!
  - o Gather your letters of recommendation
  - Submit materials to Lisa Madden (UCD IM Residency Coordinator) for IM
    Department Chair letter everyone gets this letter!
  - o Try to get at least 1 letter from AI rotation
  - o Maximum of 4 letters per program
    - 1. Clinical letter
    - 2. Clinical letter
    - 3. Clinical letter OR Research mentor letter
    - 4. Structured Department of IM Letter
    - It is okay to upload more letters and pick & choose how to distribute them (e.g. LOR from research mentor for top-ranked academic program)Clinical letters often from MS3 clerkship or AI. Could also be from LCE, IM subspecialty rotation, or MICU.

- o Tips for LOR
  - Make it easy for the letter writer
  - Always waive your right to see the letter in ERAS
  - Provide your updated CV.
  - Personal statement is helpful! Consider writing a concise statement about what you learned from working with the letter writer and any meaningful patient experiences.
  - Try your best to give minimum 4 weeks to write the letter
  - Write a Thank you note
- Recommended to take Step 2 by end August to have a score available once ERAS is submitted in September. However, if this is not feasible, consider reaching out to Dr. Jain to strategize.
- Common elective rotations for IM applicants
  - o General Medicine Consults
  - IM Subspecialties Available rotations: Cardiology, Pulmonology/Critical Care, Gastroenterology, Nephrology, Endocrinology, Rheumatology, Infectious Diseases, Geriatrics
  - o MICU rotation that counts as your ICU rotation
  - Keep in mind that 4<sup>th</sup> year is also a time to explore opportunities and build skills in other area you may not get again! Choose to complete non-IM elective rotations.
    - Other popular departments: Radiology, Anesthesia, Pathology, Ultrasound
- Interview invites typically sent out begining in mid-October and sent out on rolling basis through January
  - Keep your phone/devices in proximity! Interview slots are first-come, first-serve and fill up quickly! Make sure you have email readily available such that you can log onto Thalamus/Interview Broker as soon as an invitation is offered.
  - o Schedule a mock interview with IM Department and/or trusted mentors.
    - Continue to practice answering common questions with friends/family.
- Residency Interviews
  - Consider scheduling an easy rotation or block off time from Nov into first two weeks of January for interviewing.
  - o Most interviews are virtual via Zoom, Thalamus, or Microsoft Teams
  - o Find a quiet place to do your interviews
  - o Invest in good lighting or borrow a ring light from school
  - o Consider decorating your wall/background
  - o Have a few patient anecdotes prepared

#### **Ouestions?**

Reach out Career Peer Advisors, Specialty Advisor, Career Advisor, Academic Coaches, and Dean of Student Affairs

#### **CAREER ADVISING at UC DAVIS**

https://health.ucdavis.edu/mdprogram/career-advising/index.html

### IM SPECIALTY ADVISOR

https://health.ucdavis.edu/mdprogram/specialty-advisors/index.html

## MEDICAL STUDENT RESEARCH at UC DAVIS

https://health.ucdavis.edu/mdprogram/research/index.html

# INTERNAL MEDICINE ORGANIZATIONS & CONFERENCES

American College of Physicians Society of General Internal Medicine Society of Hospital Medicine

#### RESOURCES

- Residency timeline & ERAS worksheets to help understand what info goes into ERAS
- AMA database that helps compare residency programs: Frida <a href="https://freida.ama-assn.org/memberbenefits">https://freida.ama-assn.org/memberbenefits</a>
- Database that helps compare residency programs: Residency Explorer Tool <a href="https://www.residencyexplorer.org/">https://www.residencyexplorer.org/</a>
- Fees for 2025 ERAS® Residency Applications
- ERAS Offers a Fee Assistance Program, here is the link to learn more about eligibility.
- NRMP: https://www.nrmp.org/match-fees/

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<sup>&</sup>lt;sup>1</sup> Updated 4/4/2025