

Preparing for Anesthesiology Applications

Am I competitive?

- **USMLE** – Step 2 the simplest quantitative measure for narrowing down thousands of applications. There are correlations with ITE scores and board pass rates. So, while it doesn't forecast success as an anesthesiologist, it does indicate aptitude for passing these exams, which is a critical component of competency in anesthesiology. The average scores to match have been in the low to mid 250's. Less than 240 creates an uphill battle as you may "screen out" of a lot of programs. Anything ≥ 260 s is helpful as you are unlikely to screen out of most programs. 240's – 250's might limit you obtaining interviews in the largest, urban, high-ranking, academic residency programs.
- **Grades** – Most schools have moved away from grades but nearly all still have a system for clinicals. It is important to have a few honors. You don't need all honors, but only having one, maybe two may turn programs off. Anesthesiology is a field that incorporates all of medicine so you should strive for honors on all rotations, not just for applying but also for maximizing your competency as an anesthesiologist. Only having ≤ 2 Honors may limit your ability to obtain interviews.
- **Research** – If you have any desire to match at a large academic program, you will need to show scholarly work. First author publications have a lot of weight. This is probably followed by middle author publications, first authorship on presentations at a national level, middle author on national presentations, and then your local presentations. If you only have a local presentation (med school research day/s), that will be extremely limiting. Your scholarly work does NOT have to be in anesthesiology. Programs understand students find anesthesiology later than other specialties so don't worry if all your research is in another field. In fact, if you get a letter from your PI/mentor and they rave about you and wanting to convince you to join their field but couldn't, that sends a powerful message.
- **Involvement** – Showing involvement in your medical school and/or community (volunteering) shows multidimensionality. Holding office or any sort of leadership position only makes that stronger. Listing an hour of involvement in 20 different things may not be as impactful as being involved in a few things but showing a long-term involvement/commitment to those things. Programs will make inferences about your work ethic and commitment. This does not involve time spent shadowing.
- **Red flags** – Any sort of failure. Failing a class, rotation, or a USMLE Step will make things very difficult. Most competitive programs will filter out any application with a failure. Another red flag is/are disciplinary action/s, both academic and nonacademic. Never try to hide any of these things in your application, but also don't make it a point of emphasis. Own it, explain any extenuating circumstances, and then do your best to reach out (email, meet and greets, away rotation) to explain things to get your application in front of their eyes.

MS4 Electives

- **Anesthesiology** – Goes without saying. It would be a red-flag to a program to not have a clinical grade for a senior anesthesiology rotation. This is also your opportunity to get a strong letter of recommendation. Complete this rotation by the end of August ideally so you have your letter/s and grade.
- **Chronic Pain** – As an anesthesiology subspecialty, you will both gain valuable insight into this field as well as create the potential to earn a strong letter of recommendation.
- **Critical Care** – Similar to OR anesthesiology and chronic pain, this training will be extremely pertinent to practice as an anesthesiologist and you will be on these rotations as a resident. Great option for your Sub-I.

- Surgery – Any subspecialty is fine. ENT and/or trauma may be particularly helpful. ENT because we are always working with the airway so you would learn a lot of important airway management and trauma because you learn how to quickly assess and stabilize patients.
- Cardiology – We stare at and interpret EKG tracings all day long and must be able to risk-stratify patients based on their cardiovascular health.
- Pulmonology – We routinely provide mechanical ventilation and must be knowledgeable of respiratory mechanics, physiology, and pathology.
- Palliative Care – We are often involved in end-of-life discussions, whether this be in the ICUs, as part of care conferences, and/or reversing/suspending DNR/DNI wishes for procedures.
- Addiction Medicine – We are constantly working with controlled substances, which includes caring for patients who may suffer from substance use disorders.
- ED/POCUS – The ED is a great opportunity to learn quick triaging, diagnosing, and management of sick patients including trauma patients. POCUS opportunities will help you become facile with ultrasound and image acquisition.

Away Rotation/s

We typically recommend away rotations for three main reasons.

1. You are worried about your competitiveness and can use away rotations as month-long audition rotations. This is your opportunity to show a program they would be silly not to interview and try to match you. If you are worried about your competitiveness, you should target away rotations at achievable programs and not target the most competitive, large, urban, academic programs.
2. You have a competitive application but want to match at a competitive, large, urban, academic program. These are the programs where everyone is sending their gold signals. Again, this is your opportunity to show them they'd be silly not to try to match you.
3. You simply have a genuine interest to see how anesthesiology is practiced in another location. This could be a different practice setting or geographic area.

If you are in the position of reason 1 or 2, you will want to likely do these rotations sometime after your UPSOM elective but before the end of interview season. Late summer/early fall is probably best but even Nov/Dec isn't too late. If you're in the position of reason 3 it might be best to pursue this type of away rotation in Jan-Feb or later when most students have completed their "audition" away rotations.

Signals

- As of 2024, anesthesiology applicants get 5 gold signals and 10 silver signals. While some programs might offer interviews to applicants who do not signal them, this is very much the exception and not the rule. You should not expect to get interviews from programs you do not signal.
- Geographic signaling – You can signal up to 3 geographic locations. Only regions you signal will see that you signaled them. For any region you do not signal, it just comes up blank. You can also choose to not signal any geographic regions, but many programs do place weight on geographic signaling.
- Most recent data suggest that on average interviews are offered to 3/5 gold signals + geographic signals and 3/10 silver signals + geographic signals. These rates are lower without geographic signaling.
- Know where you stand. If you feel you are less competitive (see above), then don't waste your gold signals on top tier, bi-coastal, large, urban, academic programs (i.e., the programs

that all the most competitive applicants are signaling). Your gold signals truly are gold – make them count!

LORs

- What matters most is that the person writing the letter can speak to your personality, work ethic and potential as an anesthesiologist. A letter that is simply a summary of your CV and PS is going to be weaker and less meaningful than a genuine, personal letter.
- Need to have 3, optional to have a 4th. Don't think you need to get a random 4th letter just to have 4. Three strong letters are just fine.
- Need to have at least one anesthesiology letter. It would be a red-flag to programs if you do not have a clinical anesthesiology letter.
- Most programs want to see letters beyond anesthesiology as well so do not feel you need all 3-4 from anesthesiology. Letters from surgeons are meaningful as we work with surgeons every day. Other good specialties include critical care, cardiology, pulmonology, emergency medicine, and internal medicine.
- If you chose to do an away rotation, do not feel the need to get a letter of recommendation from that program. Everyone will recognize letters from Pitt/UPMC. If you send out a letter from your away rotation, all other programs might assume that is the place you want to match.

Personal Statement

- This is your opportunity to provide programs with information to get to know you better. While it is worthwhile to explain why you are interested in making anesthesiology your career, don't waste this space explaining what the practice of anesthesiology is to the reader – they already know. Instead, think of this space as an area where you can explain to readers why it's you they should want to be doing cases with, exhausted at 2 in the morning with no end in sight. Remember, while residency is training, programs are also seeking out doctors to become a part of their perioperative team. Highlight your potential!

Experiences

You are given the opportunity to provide additional personal information about yourself. Practice brevity! Remember, review committees are reading hundreds of applications. Make your strongest points in the least amount of text as it will be more likely to be read.

- **Impactful Experience** – This is an area to elaborate on experiences/events that are not explained fully in your personal statement. This is a great place to describe hardships you may have overcome or other life events that might set you apart from other applicants. Anything mentioned here is fair game for interviews so be prepared to speak about anything you present in this section. This should be your most impactful experience.
- **Meaningful Experience** – You can list up to 3 other meaningful experiences and what you gained from those experiences. Keep these sections brief and to the point. Use this space to show how these experiences will set you up to be a successful resident and physician. These should be your next three highest ranking experiences.
- **Experiences** – You can list up to 7 other experiences. Don't feel the need to put something just to fill space. Make this space count if you have impactful experiences beyond what you have already listed.