# APPLYING FOR RESIDENCY IN CANADA

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Updated: May 2021
ELIGIBILITY

To complete your residency in Canada, you must be a Canadian citizen or Permanent Resident, unless your home country is willing to sponsor you.¹

- I am a Canadian Citizen or Permanent Resident → Proceed
- I am not → Some schools will take US citizens without sponsorship (e.g. McGill), so check with schools individually before proceeding.

TERMS & DEFINITIONS

CaRMS: Canadian Resident Matching Service
NRMP: (USA) National Resident Matching Program
ERAS: (USA) Electronic Residency Application Service
VSLO: (USA) Visiting Student Learning Opportunities
AFMC: The Association of Faculties of Medicine of Canada

FOURTH YEAR ROTATIONS

If you wish to complete your residency training in Canada, it is highly advisable to complete several fourth-year elective rotations in Canada, ideally one of which is at the university where you want to complete your residency. The goal is to become exposed to your field of choice in the Canadian system and to collect a letter of recommendation from a Canadian attending physician. In Canada’s resident selection process, there are fewer data points available to assess an applicant’s abilities (i.e. no grades or step exams). Therefore, letters of recommendation and network-building are very important. The network of physicians in Canada is smaller compared to that in the USA, so there is a chance the residency program directors will somehow be connected to the physician who wrote your letter of recommendation.

APPLYING TO CANADIAN ELECTIVES

Realistically speaking, Canadian schools will prioritize students from Canadian schools over yourself (a student from an American school) when filling spots for fourth-year electives. This is because American medical schools fall under “international medical schools” or “LCME-accredited” schools when it comes to elective rotations. Therefore, apply broadly, and take what you can get, even if the rotation is two weeks long. The portal for application to electives can be found at https://www.afmcstudentportal.ca/.

The paperwork for Association of Faculties of Medicine of Canada (AFMC) is time consuming, so start the paperwork and begin researching Canadian electives immediately after you take Step 1.

¹ CaRMS Eligibility: https://www.carms.ca/match/r-1-main-residency-match/eligibility-criteria/
You need to pay to access the portal and pay for each elective application. **Therefore, thoroughly research online the electives you are applying.** Policies, application eligibility, timelines, costs ($200-$2000 CAD per school), and required documents vary drastically between schools. Examples to consider:

- McMaster has a lottery system that takes place only 2 times a year, whereas the University of Toronto provides a directory of preceptors that you can contact yourself to set up an elective.
- McGill requires a signed attestation of your ability to communicate in French.
- Alberta institutions may require a Canadian police background check.

*Note, these policies may have changed since 2019 and are only examples.*

To avoid wasting money and time applying for electives that have already been filled, **apply as soon as the application for that elective opens**, or contact the university preceptors ahead of time (i.e. before the application opens). However, not all schools allow you to contact preceptors directly, as this can be considered unprofessional. Therefore, check each school’s AFMC page before reaching out. Applications for electives typically open 22-28 weeks before the start date of the elective. Again, check each institution’s page for exact details.

Here is some general advice for choosing electives:

- Do your best to ensure continuity with a single provider or a small handful of providers who can work closely with you throughout the rotation. This is especially relevant for outpatient rotations.
- Ensure you have letters from physicians in the field(s) you are planning on applying into.
- Make sure your electives are early enough so that you can receive letters of recommendation before the CaRMS deadline. Ideally, they are early enough that they appear on your MSPE/Dean’s letter, but this may be difficult if you are also applying to ERAS and need American letters too.
- Canadian electives do not fit our 4-week block schedule, so you will need to be flexible. You may need to take one or two off-weeks to accommodate these away rotations. These off-weeks will be part of the 3 off-blocks you are given in fourth year. There are 4 weeks per block, so you can have a total of 3x4=12 weeks off.
- If you find yourself unsure about your career in third year (as many students are), you can find more information on Canadian residency programs at the site below. Most programs are quite transparent about what they are like and what they are looking for in an applicant. [https://www.carms.ca/match/r-1-main-residency-match/program-descriptions/]
BU’S POLICIES ON AWAY ROTATIONS

Quoting from the BUSM Fourth Year Schedule and Guidelines²:

**Elective rotations:** Students must complete 24 weeks of elective rotations. Eight weeks must be fulfilled within the BU system, i.e., taken from the Fourth Year Elective Catalogue, or independently arranged within the BU system and approved by the department chair designated on the approval form. The other 16 weeks of elective rotations may be taken inside or outside the BU system. **Credit toward degree requirements will be granted for no more than 16 weeks of fourth year rotations taken outside of the Boston University School of Medicine system.**

**Outside electives:** Students may arrange electives at LCME-accredited United States medical schools, if these electives are part of an accredited fourth year curriculum. Upon notification that a student has been accepted for any outside elective, the student must complete an Extramural Elective Form.

Note: Ignore the “United States medical school” portion in the previous quote. LCME-accredited Canadian medical schools are allowable and are not considered Global Health electives. You do not need to contact the Director of Global Health for approval for electives in LCME-accredited Canadian schools.

TIMELINE & SCHEDULING

Unlike American schools, most Canadian schools require applications from visiting students several months in advance, sometimes as far as 8 months in advance. **Therefore, you should begin researching Canadian elective rotations during the summer after M2 and consider applying during the fall of M3.** There is no VSLO equivalent for Canadian fourth-year electives, so you will need to reach out to schools individually. It may be to your benefit to **complete these Canadian electives as early in your fourth year as possible** (i.e. within Blocks 9-13). It would allow your supervising physician enough time to write a reference letter for your CaRMS residency application, which is due in November.

However, there are a couple factors that may affect your decision to apply early:

- If you follow the timeline mentioned above, you will have completed only 2-3 third year rotations before applying to Canadian away-rotations. If you are the type of student who knows exactly what field of medicine you want to enter, great. If not, it may be difficult to pick fourth-year elective rotations before completing third year and learning what fields you like and dislike.

- BUSM’s M4 schedule is finalized after Canadian away-rotation applications are due. In January of your third year, there will be a class-wide lottery for the two required M4 rotations (sub-

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internship & geriatrics). The lottery results will be revealed in February, and whatever rotation you get will determine your M4 schedule.

Here’s the dilemma. If you wait for the lottery, you will be too late to apply for Canadian away-rotations. However, if you do not wait for the lottery, you risk receiving a mandatory M4 rotation that coincides with your Canadian away-rotation. You may need to swap rotations with classmates or cancel away-rotations to make things work. This may be time consuming and expensive.

At the end of the day, the decision to apply early to Canadian away-rotations is a calculated risk. If you take this risk, you will need to be flexible and accept the possibility that your schedule may need to shift.

When and if you begin the process of applying for Canadian away-rotations, visit the registrar’s office and notify them of your situation. To add an away rotation to your schedule, you will need to complete and submit an Extramural Elective form that can be found on the BUSM Registrar’s webpage. Also, remember to request the blocks you want “OFF” in the fourth year optimization. The Canadian interviews usually happen within a 3-week window from late January to early February, so you may want to request that block “OFF”. Those weeks usually coincide with Block 17, but check the CaRMS website for the exact dates.

RESIDENCY

INTRO TO CARMS (CANADA)

As mentioned above, CaRMS is the Canadian equivalent of ERAS and NRMP combined. When you visit their website, you will notice four paths for application: R-1, MSM, FM/EM, and PSM. MSM, FM/EM, and PSM are for physicians seeking further training after they have completed their first residency, so you can ignore those. You will be applying via R-1, the main residency match.

Note that (Canadian citizen or permanent resident) US medical graduates (USMGs) from an LCME / CACMS-accredited school are considered equivalent to Canadian medical graduates (CMG). Boston University is in that pool, so you are eligible for the same residency spots allocated to CMGs and can participate in the first match iteration (R-1).

Within R-1, there are two iterations: a first iteration which fills most residency spots, and a second iteration to fill all the unfilled spots with students who did not match in the first iteration. Any open spots remaining after the second iteration are “up from scramble”. It goes without saying that you want to match in the first iteration. The second iteration is a mini-match in which you must re-apply with all required materials, interview, and submit a rank list – all within 1 month. In other words, it is a short period of time for a lot of things to happen. The scramble after the second iteration is similar to the old US scramble before there was a SOAP. Essentially, medical school deans and attendings reach out to you without a formal process.

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3 CaRMS Eligibility: [https://www.carms.ca/match/r-1-main-residency-match/eligibility-criteria/](https://www.carms.ca/match/r-1-main-residency-match/eligibility-criteria/)
The contents of the CaRMS application is very similar to ERAS, as you can see below.

[Image of CaRMS application interface]

However, there are some key differences from ERAS:

- **There are different personal letters per program!** Check [https://www.carms.ca/match/r-1-main-residency-match/program-descriptions/](https://www.carms.ca/match/r-1-main-residency-match/program-descriptions/) for program specific requirements per essay.

- You can apply to more than one specialty. Just make sure you have the correct letters.

### CANADIAN BOARD EXAM

In the USA, students typically take the USMLE Step 1 exam after their second year of medical school and the Step 2 exam in their fourth year. When applying using CaRMS, you do not need to submit USMLE Step 1 or 2 scores, but you may choose to do so if you did well. In Canada, there is only one board exam equivalent to **Step 1 and 2 combined: the Medical Council of Canada Qualifying Examination (MCCQE) Part 1**.

The MCCQE1 is a 1-day, computer-based, pass-fail exam. It is similar in content to USMLE Step 2. The exam consists of two parts:

1. **Multiple Choice** (4 hours)
2. **Clinical Decision Making**: A case is presented, and you need to select or write a short answer about the appropriate next step. Negative marking occurs if you make any dangerous decisions.

There is a question bank (of questionable quality) for this exam. It costs $50 CAD a month and can be found at [https://www.canadaqbank.com/](https://www.canadaqbank.com/). It is recommended to spend between 2-4 weeks studying for the exam depending on your confidence on the Step 2 material and the time elapsed since taking Step 2.

The MCCQE Part 1 is usually taken during the fourth year, before or after applying to residency since many Canadian residency programs do not require a MCCQE score upon application. Many Canadian graduates take it in the last couple months of fourth year, after they have already matched, or in the first couple months of residency. You may choose to wait till you match in Canada to take the exam, or you may want to take the exam immediately after taking Step 2 while the information is still fresh in your mind.
The exam is only offered during certain times of the year, so check the MCCQE website (https://www.mcc.ca/examinations/mccqe-part-i/) to make sure you do not miss an opportunity. You will need to make a https://physiciansapply.ca/ account to take the exam. **It takes a few weeks for your paperwork to be approved, so start early** (i.e. January or February of M4 Spring semester).

There is an option to skip the MCCQE1 due to equivalence of the USMLEs. However, you will not be able to sign prescriptions on your own during residency, and you will need to practice under a supervising attending after residency and pass an assessment of some sort before the Medical Council of Canada grants you full practicing rights. All things considered, taking the MCCQE1 is the easier option.

**TIMELINE**

The CaRMS timeline typically lags a bit behind that of NRMP, such that you can participate in BUSM’s guided third/fourth year match process, then resubmit your ERAS materials with minor tweaks to the CaRMS system.

You can then submit both CaRMS and NRMP rank lists. The CaRMS match is *usually* before the NRMP. So if you match somewhere in Canada, you will be automatically withdrawn from the NRMP. However, once every 5 years or so, the matches are in the reverse order (i.e. NRMP first, CaRMS later). Make sure to check every year.

Unlike in the USA where interviews can be scheduled from Oct – Feb, Canadian interviews all occur in a 3-week period in January/February. Some are structured as a large event - somewhat like a conference with large-group info sessions for up to 150 interviewees, broken up by individual 20-minute appointments to interview with 1-3 interviewers from the residency program.

**STATISTICS & TRENDS**

- Of the 2757 active CMG participants in the 2013 match, 52 were US grads
- Of the 2913 residency spots offered to CMGs in 2013, 2634 spots were filled after the first iteration; many of the spots left over are in less competitive fields such as rural family medicine, psychiatry, and pathology although every so often there will be one ENT or Derm spot left somewhere in the country

**INTERVIEW CONTENT: POINTERS FROM BUSM ALUMNI**

Here are some interview pointers from BUSM alumni who have interviewed at Canadian residencies.

**FAMILY MEDICINE**

- **Rural vs city** programs is a big thing to consider when thinking about your goals and what you want out of residency. You will likely be asked about this.
- Interview styles vary from school to school. Some are 20-30 min panel interviews. Others are modified multiple mini interviews with difficult medical and ethical scenarios.
• It is not necessary to attend all the socials. They truly are optional, so do not sweat it if you cannot make it.
• Interview days often have “open houses” where you get to learn about all the streams the programs have and have the option of adding streams to CaRMS. Take this opportunity to really learn about what makes each program/site different and what the “feel” of the program and the residents are – online everything sounds the same. You will more than likely be asked some form of “Why our program” anyway, so if you do this before the interview, even better!
• Have a story for every CanMeds role and be ready to answer a variation of the most typical interview questions.

RADIOLOGY

• Interviews in Canada were very technical. I read images, worked through clinical scenarios, solved puzzles, and had to talk through ethical cases. Bottom line - be prepared! Know your anatomy (e.g. what are the branches of the external carotid?). It’s a good idea to read through Felson’s again.

CONSIDERATIONS – WHY CANADA?

Residents in Canada are provincial health ministry employees, meaning they earn a standard salary, pay into the EI system, and are eligible for benefits such as paid parental leave (via EI). While programs and specialties differ for how “family-friendly” the program is, many residents in Canada choose to take a full year for maternity leave, which is viewed as the default. USA residency programs do not have an overarching ACGME policy, but most programs do not allow residents to be absent from patient care for more than 12 weeks at a time.

Residency salary and benefits in Canada are set by each province. Salary and many benefits are therefore the same, regardless of specialty, across the province with some extra minor benefits being department and program dependent (e.g. travel for conference reimbursement, educational resource reimbursement, dental coverage, elective rotation reimbursement).

IMPORTANT RESOURCES

BUSM Fourth Year Schedule & Guidelines  

CaRMS  
https://www.carms.ca/

AFMC Student Portal for Visiting Electives  
https://www.afmcstudentportal.ca/

AAFP’s Strolling Through the Match Guidebook  
https://www.aafp.org/students-residents/medical-students/become-a-resident/match.html
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