

Timeline Agenda (8-3pm)

- 8:00-8:15am - Breakfast
- 8:15-8:45 - Introduction - "Branding"
- 8:45-9:45 – Cover Letter/Personal Statement workshop
- 9:45-10:00 - Break
- 10:00-11:30 – CV/ERAS workshop
- 11:30-12:30pm - Lunch
- 12:30-1:30 - Interview prep
- 1:30-1:45 - Break
- 1:45-2:45 - Breakout Q&A [Fellowship/Hospital Medicine/Primary Care]
- 2:45-3:00 – Wrap up

Introduction

Purpose of retreats

- PGY1 – learning to be an intern
 - Where you have been
- Rising PGY2 – professional identity formation, running a team
 - Where you are currently
- Rising PGY3 – future planning
 - Where you are going

Branding

- Telling a cohesive story – ties together your personal background, past and present experiences and future aspirations
- A way to market yourself
- Use to get a fellowship program or job to want to invest in you
- Framework to start creating your cohesive story -
 - Where have you been?
 - Where are you now?
 - Where are you going?

Reflection 1 - Where you have been

- What pre-residency or early residency experiences informed your career choice?
 - Can be personal, clinical, research, education based, volunteer etc.
 - Think about how these informed you career choice and/or career pathway (clinician, physician scientist, clinician educator, advocacy, QI, policy, administration, etc.)
- Clinically, what excites you about your chosen field? Reflect on specific examples that you've had
- What parts of your chosen career path outside of clinical care most excite you?

Reflection 2 – Where you are

- What experiences in residency right now are informing your chosen career path?
 - Again, can be personal, clinical, research, education based, volunteer etc.
 - Think about how these informed you career choice and/or career pathway(clinician, physician scientist, clinician educator, advocacy, QI, policy, administration, etc.)
- What are you most proud of achieving in the last year? How has this influenced your career plans

Reflection 3 – Where you are going

- In an ideal world, what does your career look like 5 years after completion of training?
- Clinical practice environment
- Non-clinical roles
- Work-life balance
- Geography

Putting these together

- Using your “brand,” story, experiences, goals to inform how you plan to use fellowship or job search to get to ideal career

Personal Statement and Cover Letter

Personal Statement vs. Cover Letter

Personal Statement

- Narrative
- Cohesive story ("Brand") using background and future plans
- Four paragraphs
- Need a strong, clear closing

Cover Letter

- Formulaic
- Business letter layout
- Three to four paragraphs
- Why you are interested in a specific role

General Rules for PS/Cover Letter

- Check your spelling: Make it perfect
- Check your grammar: Read your PS/cover letter out loud and hear how it sounds
- Limit use of AI
- One page max single spaced
- Tell a cohesive story
- Avoid doing too much

Cover Letter Outline

- **First paragraph:** Introduce yourself and why you are writing — to be considered for a specific position
- **Second paragraph:** Provide brief details about yourself and why you are interested in the opportunity and the location
 - Note any special skills or interests, such as research, management or teaching
- **Third paragraph :** In what other ways will you contribute to the department (service, outreach)?
 - What have you done to demonstrate you will do any of this (details in CV)?
- **Fourth paragraph:** Thank the recipient for the opportunity to apply and for reviewing your CV, end with a statement indicating that you look forward to hearing from the recipient soon

Cover letter “Do’s”

- Address the cover letter to an individual physician, practice administrator, recruiter and not “to whom it may concern”
- Be upbeat and positive. Ensure that the letter’s tone reflects your excitement about medicine and that it reflects the way you would speak in an in-person interview
- May include names of references with the cover letter if you’re looking for a specific position

Cover Letter “Don’ts”

- Don’t sound desperate or beg for the job
- Steer clear of “over-selling” yourself or making claims about why you would be the absolute best candidate. Instead, let your credentials and references make the case for you
- Avoid sarcasm and humor
- Don’t disparage individuals, programs, or institutions if you have had a negative experience somewhere — regardless of the reason

Personal Statement Outline

- **Paragraph 1 – “where you’ve been”**
 - Explain why you chose your field, personal information about distance traveled/diversity not obvious elsewhere in application
- **Paragraph 2 – “where you are” – clinical experiences**
- **Paragraph 3 – “where you are” – other experiences (not just CV)**
- **Paragraph 4 – “where you are going”**
 - Needs to make sense in the context of your CV
 - Outline what you’re looking for in a fellowship
 - Map your trajectory
 - Show how you will contribute/academic potential
 - Describe the skills you seek
 - You can change your mind about this later, but it will open doors!

Cover Letter/PS workshop

- Outline and/or edit your PS/Cover letter using initial reflections
- 20 mins of individual work
- 15 minutes of peer-peer editing

CV Prep

Definitions

- CV: Itemized list of a person's entire education, publications, accomplishments, notable projects, awards, honors, achievements, and professional experiences
- Resume: Concise summary of your qualifications
- You will only be asked for a CV from this stage of training on

When will I need a CV?

- To send to potential employers for PC/HM jobs
- To give to letter writers for fellowship application LORs
- To fill out fellowship applications

CV tips

- Clear (well organized, readable, easily understandable)
- Concise (no double entries, brief)
- Complete (all relevant information should be included)
- Consistent (uniform format, consistent ordering)
- Current (include dates with all entries; revise at least once a year)

CV Do's

- Think of your CV from a potential employer's perspective
 - Do you seem like a good candidate?
- Include as many relevant details and specifics about your skills, talents and experience as possible
- Be concise and use simple language
- Remove your high school info and non-medical jobs

CV Don'ts

- Give too many details
- Ramble
- Brag
- Be dishonest or misleading
- Avoid embellishment

CV Details

- Medical school CV templates are searchable online
- Conserved sections with formatting variations
 - Contact information/Biography
 - Education
 - Certification and Licensure
 - Honors and Awards
 - Training (work experience, internships...)
 - Academic appointments
 - Professional involvement- Memberships, Associations, etc.
 - Teaching experiences
 - Bibliography
 - Research experience
 - Language proficiency

CV Details

- Edit template with caution
 - Institutional service, community service, hobbies and interests
- Pay attention to formatting chronology
 - BU uses oldest to newest
 - Other institutions use reverse chronologic order
- Institutions have threshold differences
 - Posters
 - If posted on website, include in bibliography
- Save new versions with date of revision
- Dates matter! Particularly academic appointment
 - Recommend month/year

Contact Information

- Include your personal data: name, address, phone number, e-mail address, and date
- Use macros to auto-update the date
 - Add date to template if needed
- Your name should appear as a header or footer for subsequent CV pages

Education/Academics

- Academic Training:
 - List your degrees, institution and date they were awarded
- Residency/Fellowship varies on CV template
- Additional Training:
 - Include residency information
 - Include pathway here
 - List the date you expect to receive the degree for the program you are currently in

Work experiences

- List prior positions (Part-time, full-time, temporary and permanent)
 - Excluding moonlighting
- Include: organization; complete name, city and state; job/position title; dates; also include a brief description of your activities/duties

Example:

8/2024 - present Attending Physician, Department of Medicine, General Internal Medicine Section,
Boston Medical Center, Boston, MA

Other experiences

- Pathways
- Committees
 - Teaching vs. Hospital
- Teaching experiences
 - Some institutions prefer to use a teaching portfolio
 - May be easier to include a grid
- Research
- Professional Society memberships

Bibliography

- Subdivide into categories
 - Peer reviewed articles
 - Poster and oral presentations
 - Case Reports
 - Review articles
 - Book chapters
 - Editorials
- Highlight your name

Examples of taking good to great: Pathway Participation

- Medical Educator Pathway
 - Member of pathway
- Medical Educator Pathway
 - Led two morning reports for 10 residents
 - Presented three Bite-Sized Teaching (BST) mode teaching sessions
 - Creating curriculum related to X care of Y patient population for medical students

Examples of taking good to great:

Committee Involvement

- Diversity, Equity, and Inclusion Committee
 - Member
 - Helped support DEIA efforts in residency program
- Diversity, Equity, and Inclusion Committee
 - Leader of a resident-driven committee of the IM program of Boston Medical Center (BMC)
 - Involved in recruitment and curriculum development with the goal of promoting advocacy and a culture of diversity
 - Volunteered for # of recruitment socials
 - Participated in X community events

Examples of taking good to great: Research

- Risk of development of X syndrome in patients with X
 - Working with Dr. X
- Risk of development of X syndrome in patients with X
 - Mentors/PIs: X MD, Professor and Director, X Program
 - Role: performed chart review, compiled database, and statistical analysis; June XXXX - present
 - Submitted to American Society of XXXX Annual Meeting, November xxx
 - Manuscript pending to J American Society of XXXX
 - Poster accepted for presentation at DOM Evans Days Fall XXXX

Examples of taking good to great:

PGY2 QI Project

- Improving Anticoagulation at BMC
 - Worked on a project to improve prophylactic anticoagulation at BMC
- Reassessing hospitalized patient needs for prophylactic anticoagulation
 - Worked collaboratively with a group of residents on a QI project to improve assessment of DVT risk after admission to the hospital
 - Increased documentation of DVT risk from 20 to 30% in 1 month on the GIM medicine teams among patients admitted for more than 3 days
 - Poster submitted for presentation at DOM Evans Days Fall XXXX

Putting it into Practice

- Focus on ONE area where you want to improve
- Take 15 minutes to rewrite, create, or add to this part of your CV
- Save your CV with the month 4-2025 in the title

Pair and Share

- Pair with a partner not going into your chosen career specialty/pathway
- Review each other's CV for 5 minutes
- Provide feedback to your partner about their CV with specific focus on updated section

ERAS CV

- 10 experiences
- 3 meaningful experiences with space for more details
- Impactful experience
- Use your CV to select most valuable experiences
 - Highlight ways these tie to your story in terms of skills gained, movement towards ultimate goal
- Publications
- Hobbies/interests
- Do not include anything you don't want to be asked about!

Geographic and Setting Preferences

- Geographic Region
 - Select up to 3 geographic areas
 - Can also select "No division preference"
 - Programs cannot see which divisions you select except the one that they belong to
- Setting
 - Urban, suburban, rural, or no preference



Program Signals

- New for 2026!
- What we know from residency: program signal greatly increases likelihood of getting invitations
 - Tiered signaling less clear
- Greatest likelihood of invitation is combination of geographic preference and program signal
- PDs are also going to be new to this – discuss with mentors/fellowship PDs/APDs

Which specialties are participating?

- Allergy/Immunology: 5
- Cardiovascular Disease: 20
- Critical Care: 3 gold, 12 silver
- Endocrinology: 5
- Gastroenterology: 5 gold, 10 silver
- Hematology and Medical Oncology: 5 gold, 15 silver
- Hospice and Palliative Care: 5
- Pulmonary Disease and Critical Care: 3 gold, 12 silver
- Pulmonary: 3 gold, 12 silver

ERAS/Cover letter workshopping

- Select 3 experiences on your CV
- Workshop how you want frame them in the context of your brand
 - Highlighting skills and insights gained

Interview Prep

Purpose of the Interview

- An opportunity to sell yourself
- Determine fit of applicant for fellowship program or job
 - Fit works both ways
- Provide more detail about items from your CV and application
- May include behavioral questions
- Answer questions that you have

Pre-Interview Homework

- Familiarize yourself with the role or fellowship program
- If given your interviewers' names in advance, look them up!
- Review your CV and application
- Have specific questions about the program
 - Specific is better
 - Consider different types of questions for different interviewers
 - Avoid questions about minutia such as call schedule/days off – keep to things like exposure to your areas of interest, mentor availability
- Practice common questions

Job Interviews

- Usually initial screening interview (phone, video)
- On site interview
 - Director
 - Colleagues in your section
- Different formats
 - Individual
 - Small group
- Can ask for expected timeframe to hear back
- Send thank you email to Director

Fellowship Interviews

- What drew you to this fellowship program?
- What drew you to this hospital?
- What would you bring to our program?
- Tell me about this scholarly project. What was your role? What did you learn? What was the outcome? What did you enjoy? What are the next steps?
- How would you describe your ideal job in 5 years from now?

Common Behavioral Questions

- Tell me about a time you struggled. What did you learn from that experience?
- Tell me about an accomplishment you are most proud of from residency/medical school. What did you take away from this?
- Tell me about a role model/mentor. What characteristics do you most admire about them?
- Tell me about a challenging professional interaction?
- What do you consider your greatest strengths/weaknesses?

Interview Do's

- Show you've done your homework about the program, institution, specific role
- Know your CV/application inside and out
- Tailor questions for different interviewers
 - Ask potential colleagues (i.e the fellows) about day-to-day work life
- Ask specifics that will help you make a decision
 - Can ask multiple people the same question
- Ask about support for specific interests/career paths
- Dress and act the part

Interview Don'ts

- Be too casual
- Ask bland questions
- Seem disinterested or unprepared
- Disparage any people, programs or institutions
- Embellish truth about CV or experiences
- Have a distracting background
- Seem only interested in days off, ease of schedule

Everyone's worst nightmare...

- "Tell me about yourself"
- Use the story you have created in your CV and application to build this answer

Interview Practice

- Partner with someone not going into your specialty to practice one behavioral question of your choosing
- Give feedback on verbal and non-verbal communication

Breakout Q&A

The Options

- Fellowship
- Hospital medicine
- Primary care

Fellowship Timeline

- May 1 – Fellowship Qualtrics Survey, PS and CV due to Residency
 - If not done already, reach out to LOR writers with draft of PS and CV
- June 4th: 2026 ERAS beings
- June 5th: Apply for EFDO token to start ERAS application
 - Remember some documents take time to process
- July 2nd: Can start submitting application
 - July 16th: Fellowships begin reviewing applications
- Nov 19th: Rank list due
- Dec 3rd: Match day!

Primary Care Timeline

- Summer PGY2-3 (June-Aug):
 - Refine desired job description (cFTE v not, what non cFTE could be used for)
 - Identify contacts at potential employers (rarely job postings drive this process- usually networking or cold-emailing section heads/medical directors)
 - Refine CV, cover letter and submit for review to mentors
- Fall PGY3 (Sept-Nov)
 - Reach out to contacts late summer/early Fall
 - Apply/interview Sept-November; aim to align timeline at different institutions as much as possible to allow for comparison of offers and negotiation
- Winter PGY3 (Dec-Jan)
 - Review offer letters
 - Negotiate (with assistance from mentors)
 - Accept job & begin credentialing (licensing, institutional credentialing)
- Winter PGY3 (Feb-Mar)
 - Prepare for transition; identify outstanding skills (e.g. procedural skills, billing and coding, efficiency in documentation)

Hospital Medicine Timeline

- Summer PGY2-3 (June-Aug):
 - Refine desired job description (teaching vs non-teaching, consults, procedures)
 - Identify contacts at potential employers (usually networking or cold-emailing section heads/medical directors)
 - Refine CV, cover letter and submit for review to mentors
 - Identify references (not letters of recommendation)
- Fall PGY3 (Oct-Nov)
 - Reach out to contacts mid Fall
 - Apply/interview November-December; align timeline if possible, to allow for comparison of offers and negotiation
- Winter PGY3 (Dec-Feb)
 - Review offer letters
 - Negotiate (with assistance from mentors)
 - Accept job & begin credentialing (licensing, institutional credentialing)
- Winter PGY3 (Feb-Mar)
 - Prepare for transition; identify outstanding skills (e.g., procedural skills, billing and coding, efficiency in documentation)
- There's no one way! Academic vs. Community; Regionality; Institutional culture

Wrap Up

- Ask questions
- Start drafts of everything early
- The better the quality of the materials you present to references and letter writers, the better they will be able to sponsor your application

