



The Ultimate Road to Residency Playbook

Every year, we work with medical students that realize too late what they should have been doing in MS1-3 to increase their competitiveness and preparedness for the residency match.

This is the unspoken checklist that program directors use – but your school probably won't tell you.

First - Why The Disconnect Happens

- **School Not Aligned With Your Goals**
 - Competitive specialty match rates, excelling on the USMLE, and robust scientific research programs are often a secondary focus of the medical school administration, with minimal attention/resources allocated to success in these domains (especially for DOs/IMGs)
 - This means students that are seeking competitive specialties need to find the guidance and strategies for themselves - and that's exactly why we created our platform - to bridge that very gap.
- **Lack of true home programs in key (and sometimes all) specialties**
 - Limits early specialty exposure, mentorship access (resident and attending level), and research + networking opportunities.
 - This is underrated and one of the biggest advantages that established MD students have over new MD schools and DOs and IMGs - it's less about the letters behind the name and more about the fact that they have built-in access to networking, mentorship, shadowing, and research.
 - However - as we will explain in this guide - it does NOT mean you can't carve your own path.
- **Insufficient infrastructure for personalized, physician-led, specialty-specific career guidance**
 - Often times these are non-physician faculty = no personal insight or exposure to the nature of the application process or its nuances (only hearsay)
 - One school mentor can often be staffed with 30+ students (in addition to other responsibilities)
 - Lack of key specialty representation (especially for niche fields)
 - Lack of emphasis on the tactical steps needed to be taken **early** in their careers to have a competitive application - by the time you hear about it late MS3, it's simply too late.

Tips for: MS1 - Starting Early

- **Build high quality study habits early:**
 - Use board relevant resources to accompany your studying
 - Learn how to use Anki effectively
 - Ask upper classmen for tips they used to succeed in your schools specific curriculum

- **Explore all specialties that you may be interested in:**
 - Schedule shadowing days, volunteer in clinics, and reach out to MD/DO at outside institutions if necessary to gain exposure
 - The earlier you can eliminate things off your list (or lock in your actual specialty) the more time you will have to create a compelling application and Match into it!

- **Dip your toes in 1 research project:**
 - Find one project in an area of interest and learn the game of research
 - Research is a long game and projects take time - learning the different types of research project/manuscript types, the art of scientific writing, and working on a team are all valuable skills and experiences to cultivate early
 - By the time MS2/3 come around - you'll know how to identify and jump on high impact opportunities and contribute meaningfully.

Tips for: MS2 - Heating Up

- **Plan to prepare for the USMLE as if it is a scored exam.** The biggest issue since Step 1/Level 1 became Pass/Fail has been students entering MS3 with poor study habits, test-taking strategies, and knowledge of resource utilization for the exams that actually matter (ie; shelf exams and Step 2/Level 2)
 - **If you are a DO - take both USMLE and COMLEX** if competitive specialty is even remotely on your radar.
 - Your school may try to dissuade you, but it is absolutely still a crucial component to demonstrate your candidacy at MOST competitive programs - and filters still exist against those that don't take it.

- **Exam Prep: Avoid resource overload** → 1-2 Q-banks, 1-2 core video/content resources
 - Our favorites: UWorld, Amboss, Boards&Beyond, Anki
 - Use these early in MS2 to get familiar with board examination format and style
 - Review content learned in MS1 alongside MS2 coursework
 - [OMM Bootcamp](#) → our comprehensive high-yield video review resource for COMLEX I/II (40+ high-yield videos, 150+ COMLEX style practice questions + explanations)
 - If you are interested in working with one of our tutors that have scored 260/700+ on USMLE/COMLEX - [chat with us here!](#)

- **Continue building CV with quality:** research, leadership, teaching involvement, service
 - Focus on quality, depth of impact, & longevity of experience > quantity of experiences
 - Aim for experiences in specialty of interest or for causes you deeply care to support - don't just take on roles/positions/projects to fill up your CV.
 - Program directors want to hear a clear, cohesive narrative about how you chose the specialty and what you did to demonstrate that interest and cultivate valuable skills that make you different from other candidates.
- **Network with faculty + join interest groups** (local and national)
 - Do not be shy to leverage cold email outreach to faculty at other institutions - some of the best relationships stem from this!
 - Every specialty has a society, and often with a resident/medical student subdivision. Leverage them!
- **Identify your specialty of interest** - the earlier you do this, the more time you have to cater your application strategically towards it.
 - Unsure? Take our [Specialty Selector quiz](#) and find out your top specialty matches in under 1 min!

Tips for MS3 - The Golden Year

- **Prep smart for shelves/rotations:** complete all questions from two (2!) Q-banks for every rotation prior to shelf exam to ensure exam day success.
- **Be the rotation rockstar:** professionalism, teamwork, ownership of patients, and assistance with daily workflow and tasks.
 - If you make your resident's life easier, they will vouch for you behind closed doors.
 - Everyone is watching you at all times - even ancillary staff
 - You only get 1 chance at making a strong impression as an MS3
 - Use your downtime effectively - some rotations have it more than others - but you should be studying whenever you are not assisting with workflow.
 - More studying while at hospital = more time at home for other commitments!
- **Lock down LORs early and often** (you will need 3-4 total LORs per program for ERAS, but you can accumulate as many as you want and choose the strongest of them later)
 - Identify faculty that you've worked with for at least 1-2 weeks to get non-generic and powerful evaluations.
 - Only ask for LOR if you are confident that they can provide a strong letter of support.
- **Finalize specialty choice by mid-MS3 at the LATEST**
 - Seek out opportunities to explore the specialties you are interested in early in the year, even if you are not necessarily scheduled on that specific service.
 - This especially applies to those that are interested in specialties not part of the core clerkship offerings (ie; any surgical subspecialty, Radiology, Pathology, Derm,

Anesthesia, RadOnc, etc)

- It is critical to get exposure to the field you will apply for BEFORE sub-internships/ERAS to ensure you actually understand the workflows, expectations, and lifestyle of the field.
- Almost anyone will allow a motivated and enthusiastic MS3 shadow them for a few hours if you take the initiative to ask

• **Apply for Away Rotations & Use VSLO strategically:**

- Away rotations (aka Sub-Internships) are an essential component for most successful residency applicants
 - >50% of applicants that complete an away rotation end up matching at one of the sites they rotated at!
 - They provide a way to get in depth exposure to your future subspecialty and understand how practice and training patterns vary
 - They are a prime source for LORs, Research, and Networking
 - Aim to complete 2-3 away rotations in your target specialty
- Identify up to 10 programs early, contact coordinators in the winter to express interest in coming to rotate in Summer/Fall.
- Have all application materials finalized by the end of January.
- Leverage any resident/attending mentor you have made thus far to vouch for you to come for an away rotation/sub-internship at their program.
- Check out our [VSLO database](#) for anonymous reviews from prior students that have completed away rotations!

Mentorship: The 3 Levels of Support Every Med Student Needs - identify and build rapport with ASAP

- Near-Peer (MS4): most relatable, are living through the interview/match cycle (but lack the critical “other side of the curtain” insight)
- Resident: actually evaluates students + sits on interview side, approachable, understand the system from both sides. Feels your pain, & knows exactly how to address it.
 - Residents are also the busiest of the 3 groups - which is why it can be challenging to get substantial, longitudinal mentorship from them. Luckily - [we recruited the best residents from across the country](#) to our team that are passionate about mentorship and make time to work with you 1:1 throughout your entire application process!
- Attending: harder to access and develop relationship with initially, but important for LOR + overall career trajectory guidance.

The Bottom Line

Matching your top choice residency isn't just about test scores. It's about stacking the right boxes early so that when MS4 comes, *you're already positioned to win.*

This playbook was created by the expert residency advising team at [Matchpal](#) – a resident run advising & tutoring platform that helps hundreds of medical students match their dream specialty every single year.

Whether its early strategy for MS1/2 medical students interested in competitive specialties, expert tutoring for USMLE/COMLEX 1&2, or comprehensive advising for every single aspect of your residency application process - we've got a way to help you match your dream specialty.

[Click here](#) to schedule a free consultation with our team to learn more about how we can help you in achieving your career goals and match your top choice program!

