



## 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 dont 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!

