

JRIG Orthopedic Surgery Residency Program Director Q&A

1. How important is research to the application? How much research is “enough” to get into an orthopedic residency? (papers, presentations, posters, etc.)

Presentations << Publications. Quantity << Quality. You must be able to speak intelligently about the research you list on your residency application. Completing your own research project from start to end is great. Best: Multiple published ortho-related articles. Most places will check to see how much of your research is ortho-related. Research gap year in medical school is more and more common these days (usually between 2nd and 3rd MS years).

Aiming for top 20 residency spots or academic career → more research needed, most have a gap year. What they look at, ranked: 3rd year clerkship grades/honors > research experience (2-3 published, 1-2 ortho-related).

2. How much do you value full manuscripts vs presentations/posters/abstracts? What about unpublished work? Do you factor these in differently when determining publication productivity? Is there a difference in value for types of publications (case reports, retrospective chart reviews, clinical trials, meta-analysis)?

Dr. Crawford: There is a dedicated section of the residency application that allows you to include non-published research, publications in process, posters, and abstracts. There is added value to including these on your application.

Dr. Lee: People try to fill in the gaps of their application with a large quantity of research participation, don't do this. You can fill in a ton of submissions, but it means more if projects are presented at an orthopedic related conference or a published manuscript.

Types of research: Case reports are the lowest value added to the application, original work with your own idea is the highest quality with presentation at a major conference. Encouraged to include all types of research, even case reports. Having something, even a case report, is better than nothing. More intensive research, however, is favored.

Does it matter if your manuscript is findable on pubmed or non-indexed or if they are presented at local conferences?:

Still counts with similar weight, it is considered by the PD. If you are putting something down on your CV, know your research WELL. Interviewers will ask about your research. Residency interviews will expect you to talk about your research in detail. Be confident in your research and be up to date.

3. Do I have to do research specifically in ortho? What kind of research do you recommend? What if I decide to change to orthopedics in my third and fourth year of medical school?

If you become interested in ortho later in med school, it might be a good idea to do a dedicated research gap year. Residency committees like to see research specifically in ortho and they do not weigh other types of research equally. You can use personal statements to explain late interest, abnormalities, etc.

4. How do I find research mentors? How do I get involved in a research project?

Dr. Mitsunaga – Reach out to any orthopedist (these happen to be more clinical research and QI projects), find research with other programs remotely (you can do research here with another program). Get in touch with research resident or department with an idea, they are looking for help with projects. Get in touch with peers who have done orthopedic research.

Dr. Crawford – Summer student research program (HPH), Queen's department of surgery, be careful of time constraints with the PI with a busy orthopedist. Hard to conduct the entire research project by yourself. Work with someone who has some time to spend with you on the project.

Away rotations, how many?

- Dr. Crawford: before your application goes out, at least two – when Dr. Crawford was applying
- Dr. Lee: around 2-3 programs (home program as early as possible), be strategic with choosing your 3 away rotation programs
- Dr. Mitsunaga: do as many as you can that JABSOM will allow

5. Do you recommend I take dedicated time off? (year, summer, etc.)

This is case-dependent, but many applicants these days do elect to take a gap year for research. This can be helpful in bolstering your application.

6. In addition to research, what are some other must-haves to make a competitive application?

What else do you look for: letters of recommendations, **hobbies**, personal statement, and little things (who are you as a person?) Explain abnormal stuff in personal statement, i.e. late decision to be interested in orthopedics, gap years, etc. Don't brag about yourself, revise personal statement with people who can make it poignant and concise. Background in sports is good.

Dean usually writes a letter that goes into the application. They know something about you, make sure the dean puts something meaningful in your letter. Interesting backgrounds, showcase in your dean's letter.

7. What does the orthopedics Hawaii's residency program emphasize compared to other residency programs in the country?

Aside from research, letters of recommendation (including a strong Dean LOR with specific examples of what makes you stand out as a student) and hobbies help the residency committee get a sense of what type of person you are. Do not brag in your personal statement, and make sure to have it read by someone who is exceptionally good at writing in English so it isn't dry!

8. 3rd year elective, what is the expectation, how to stand out?

Dr. Lee – only 2 students as 3rd years, short rotation after general surgery (few days)...its more of an informative elective, not a lot of expectations. Good to be a familiar face to the ortho program.

Dr. Mitsunaga – after general surgery or GYN surgery with procedural experience. Be familiar with sterile processes. This is the time to confirm your interests. If you can do it, take advantage of the opportunity.

Dr. Crawford – Get an honors in surgery, work hard, don't ask dumb questions that show you haven't learned the material, ask really meaningful questions at good times, be invested, soft spoken and humble but hard working. Did you round? Did you present? Were you a good teammate? Honors in surgery speaks volumes. Put in your time and you will get noticed. Crush the surgery rotation.

Signaling system, how does this impact your evaluation of applicants?

Dr. Lee – The idea is to signal or show preference to a program (~30 programs) but I evaluate the same way and really give no credence to the signaling. We're not only looking at people who signal UH, you still need to have a good application. Still in the adjustment phase so we're unclear as to how this impacts the evaluation of applicants.