Clerkship Survival Guide

Brought to you by:
Class of 2014 Student Senate
Family Medicine

Average Shelf Difficulty (10 = most difficult): 7.4

Top 3 Resources (5 = must have):

1. Pretest
   Average usefulness: 3.9
   Percentage of students used: 75%

2. Case Files
   Average usefulness: 3.7
   Percentage of students used: 75%

3. AAFP Qbank
   Average Usefulness: 4.13
   Percentage of students used: 47%
   Note: Although this resource is the highest rated in terms of usefulness, please note that the average is only based off of 47% of the students’ responses.

Other Useful Resources:

Uworld, Blueprints, Med U Cases, Step Up – Ambulatory Section, AAFP Journal

Family Medicine Advice

“IT goes by fast and there are a lot of required assignments/procedures so get started on them early. Also get started early reading case files and doing questions - lots of the cases show up verbatim in the clinic so it's helpful both for the exam and seeing patients. “

“You should have plenty of time to study so use it. The UWORLD step 2 QBANK is the only thing I found that replicates the difficulty level of the actual exam. Pretest will help you get a few questions but for the most part it contains easier questions. Case files is worth going through once but do so as close to the exam as you can. “

“Clinical:
1. Make an effort to do as much hands on as you can.
2. Depending on your site, you can have really long days or really short days. Figure out how yours is and plan appropriately.
3. Always be on time, check your schedule frequently, and make sure you are in the right place.
4. Start/Complete ALL your assignments ASAP (if possible in the first week). You don't need to "learn anything" to start completing them. You also don't want to "wait for the right patient". This way, you can spend the rest of the rotation focusing on becoming a better Clinician. Your responsibilities will increase with your comfort level - i.e. you'll start having less time to yourself if they really are counting
on you. (Depends site to site).
5. Learn to present concisely ASAP. Everyone appreciates if you can do an effective problem pertinent H and P. It seems like our senior colleagues appreciate this more than an extensive regurgitation of details. Balance the practice in obtaining the H and P without obstructing office flow.

Shelf:
1. What you see clinically is *definitely not proportional* to what is on the shelf.
2. Looking things up that you don't know might not be as important as studying off your materials for the shelf. There will be many things you may not know. Like previous exams, that cool fact may not be high yield at all. Information about core conditions is reasonable to look up immediately. If it’s something obscure, ask yourself if it’s worth your time.
3. Start early, whatever materials you are using. “

“Go through one source at least twice. KNOW health management guidelines for adults, basics for kids. Go one step further...the question won’t be on just the first step in management...they say ‘this was already tried’ or ‘this test was already done’ and then ask, ‘what is the next step?’"

“The FM shelf felt like Step 1. I think if I had re-read First Aid for Step 1 during the FM rotation I would have felt more prepared for the FM shelf. Case Files/MedU/UWorld didn't seem as helpful as I thought they would be.”
Internal Medicine

Average Shelf Difficulty (10 = most difficult): 8.0

Top 3 Resources (5 = most useful):

1. **UWorld Q-Bank**
   - Average usefulness: 5
   - Percentage of students used: 90%

2. **Case Files**
   - Average usefulness: 4.27
   - Percentage of students used: 55%

3. **Step-Up to Medicine**
   - Average Usefulness: 3.57
   - Percentage of students used: 65%

Other Useful Resources:

UptoDate, Pathoma, Pretest, Harrison's

Internal Medicine Advice

**Case files:**
“...seems misleadingly simple compared to what you see on uworld, but a good chunk of questions on the shelf were topics covered in here! Didn't really appreciate it until shelf day when I realized this.”

**UWorld:**
“...be prepared to be overwhelmed, but don’t let that stop you! Do 10 Q's a day right off the bat, then increase your # of questions as the shelf gets closer in month two. Don’t bum out if you're hitting 50% rather often, most of us did, just keep going!”

“I did about 1,000 of the internal medicine questions and it was really all I needed for the shelf.”

**Step-Up**
“...watch out for some errors...”

“Lots of info but surprisingly not so user friendly. Reference it throughout the 2 months while seeing patients, but don’t freak out if you don’t read it cover to cover”

**Clinic:**
“Read about your patients every night. Then you will be ready for rounds. And this is a form of studying.”
“When on call, volunteer to follow/write-up one of the first patients assigned to your team. During day-call this allows you time to complete your note and head home immediately after your shift. During night call early completion of your notes allows you a chance to sneak off and sleep for a couple of hours.”

“While just reading is good, reading about your patients (and those on your team) was more helpful. There are a lot of times where I had 10-15 minutes of downtime. During those times I just went on UpToDate and skimmed an article related to my patient. I felt like that was way better than waiting until I got home. Even though I didn’t feel like I was reading, I learned a lot.”
Neurology

Average Shelf Difficulty (10 = most difficult): 7.9

Top 3 Resources (5 = most useful):

1. **UWorld**
   - Average usefulness: 4.57
   - Percentage of students used: 88%

2. **Case Files**
   - Average usefulness: 4.5
   - Percentage of students used: 75%

3. **Pretest**
   - Average Usefulness: 4
   - Percentage of students used: 63%

Other Useful Resources:

- Blueprints, UptoDate, Clinical Neurology (Greenberg, D.A; online via AccessMed), eMedicine, Neurology in a page

Neurology Advice

“Best way to learn during this rotation is through cases. Try to see as many cases as you can and then try to look up each diagnosis and treatment in UptoDate. This can be done in the clinic every day. Meanwhile, read through Case Files and try to get that done within the first couple of weeks of the rotation, if not earlier. After that, start doing questions in Pretest and UWorld. Use blueprints as a quick review for the shelf.”

“Review how to do a complete Neurological Physical Exam. Review nerve pathways from year 1 & 2. Study the cases you see after work. Learn trade names for drugs if possible.”

“Know the etiology behind back pain and associated symptoms.”

“The rotation itself was not demanding, mostly 8a to 4/5p daily, and you could put in as much effort as you wanted. The shelf sucked, though. I don't know what resources are the best to study with, but I what I used wasn't enough. The UWorld questions came closest to the actual test. “

“Don’t expect 50 stroke questions, and don’t ignore medicine stuff. Encephalopathies were big on the shelf. Also, try to find tricks and move quick. The questions are long and everyone was pressed for time to the very last second.”
OB/GYN

Average Shelf Difficulty (10 = most difficult): 6.6

Top 3 Resources (5 = most useful):

1. UWorld
   Average usefulness: 4.46
   Percentage of students used: 68%

2. uWise/ACOG Questions
   Average usefulness: 4.35
   Percentage of students used: 68%

3. Case Files
   Average Usefulness: 4.25
   Percentage of students used: 63.2%

Other Useful Resources:

Dr. Christensen’s Review, First Aid for OB/GYN, Blueprints

OB/GYN Advice

“Great rotation as long as you are proactive and get your hands on as many cases/deliveries as possible.”

“Don’t sit idly by. Get involved and stay involved. Nurses/midwives appreciate that and clue you in as to what is going on and what you should be doing. Also, more likely to teach you.”

“Start questions early and don’t just rely on World/Case files. Uwise is great!”

“Try your best, read up on patients and do some Qs every day. The ACOG Qs were the most representative of the shelf exam though.”
Pediatrics

Average Shelf Difficulty (10 = most difficult): 7.5

Top 3 Resources (5 = most useful):

1. **UWorld**
   - Average usefulness: **4.7**
   - Percentage of students used: 88%

2. **Pretest**
   - Average usefulness: **4.25**
   - Percentage of students used: 70.6%

3. **Case Files**
   - Average Usefulness: **4.07**
   - Percentage of students used: 88.2%

Other Useful Resources:

Clerkship notes by Dr. Friday, Blueprints, First Aid Pediatrics

Pediatrics Advice

“Start doing questions early and finish reading Case Files within the first month. Also, go through Dr. Friday’s clerkship review early. The questions on the shelf were much tougher than the questions on USMLE World and Pre-test. That being said, the Pre-test questions were relatively more representative.”

“Write down a list of diseases you’ve seen as you go along, making a index that you go over every now and then. Add UWorld/etc stuff to it. This is helpful especially without some more chaptered study material like First Aid.”

“Try to study throughout the rotation. Set a goal of finishing 20 case studies per week and 100 questions. That way you can hopefully stay on track and go over the questions AGAIN when studying for the shelf. You will notice the common themes/questions.”
Psychiatry

Average Shelf Difficulty (10 = most difficult): 7.0

Top 3 Resources (5 = most useful):

1. First Aid
   Average usefulness: 4.3
   Percentage of students used: 100%

2. UWorld
   Average usefulness: 4.3
   Percentage of students used: 100%

3. Lange Q&A
   Average Usefulness: 4.5
   Percentage of students used: 66.7%

Psychiatry Advice

“Know the minute, specific differences between conditions”

“Try and see as many patients on your own as possible”

“Enjoy it while it lasts!”
Surgery

Average Shelf Difficulty (10 = most difficult): 8.3

Top 3 Resources (5 = most useful):

4. **UWorld**
   - Average usefulness: *4.38*
   - Percentage of students used: 72.7%

5. **Kaplan Surgery PDF**
   - Average usefulness: *4.28*
   - Percentage of students used: 72.7%

6. **Case Files**
   - Average Usefulness: *3.86*
   - Percentage of students used: 63.6%

Other Useful Resources:

- Pretest, Pestana Audio and Notes, First Aid Surgery, Surgical Recall (only good for ‘pimp’ questions, but not for shelf)

Surgery Advice

“I know this is redundant...but read and do as many questions as you can. A lot of the shelf questions are barely surgical; they include stuff like pharm and micro. It also has some medicine.”

“Classmates strongly recommend doing a month in West Bloomfield.”

“Know diagnosis treatment and management of patients, know everything, not really anything to do with surgery. Know more about surgical subspecialties not just general surgery.”

“Dont go straight home after you're sent home for the day...go somewhere to study even if it's for an hour because you will be exhausted.

“Do UWorld Int. Med questions too...the Shelf is not only surgically based. Practice oral exams with your residents. Use the required modules to help you prepare for some of the oral exam questions”

“As you may know, the surgery shelf has a lot of medicine and Step One material on it. You obviously don’t have the time to study all that material, so make sure you at least hammer down the high-yield surgical topics in the Kaplan notes.”
“Be on time, be enthusiastic, always be around (just follow the chief or intern), but don’t be too talkative or interrupt (wait to be addressed…surgeons are mean and think students should be seen but not heard).”

“Uhhh do some studying or something for the Wayne state written exam. (shelf studying is not good enough probably). That was the hardest exam I’ve ever taken. Average on the test was a 50%.”

“The Shelf exam is 70% Internal medicine and/or Step 1 material (minus biochemistry). There were maybe 30 questions that were really about surgery out of 100.”

“Don’t spend a ton of time reading the textbook. I read 500 pages from it and still got about avg on the written exam. Instead focus on clinical vignettes like Pestana, NMS, Casefiles.”