Applying for Residency: Medicine-Pediatrics

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Part I: Overview of Medicine - Pediatrics

Description of Specialty, Common condition, types of patients: Combined Internal Medicine / Pediatrics, commonly known as “Med-Peds”, is a unique combination of two separate residencies (Internal Medicine and Pediatrics, which are 3 years each) into one joint program lasting 4 years with 2 full years of focus on each specialty. You train in inpatient and outpatient settings, from the general wards to all of the ICUs for geriatric, adult, newborn and pediatric care. This same scope applies to your ambulatory training, where you have a continuity clinic serving as the Primary Care Doctor for patients of all ages. Many programs have a combined adult medicine and pediatric outpatient clinic, at others you may alternate weekly between and adult and pediatric clinic. The residency rotations vary between Medicine and Pediatrics every 3-6 months, advancing in responsibility and supervision along with your categorical peers. The curriculum ensures that residents receive all of the core rotations in each with the opportunity to tailor electives and research time as well. With 2 full years each of training devoted to Internal Medicine and Pediatrics, residents graduate well trained in both and prepared to sit for both the Internal Medicine board exam and the Pediatric board exam, as well to as enter all fellowships available to categorical Internal Medicine and Pediatrics residents.

Career trajectories: academics, clinical, research, teaching, etc.:
Med-Peds is one of the most flexible residencies as it relates to post-residency career trajectory. As described above and below, you can pursue any of the following in either or both medicine and/or pediatrics: hospitalist, primary care physician, global health, policy, all fellowships and some unique combined fellowships, in both academic and non-academic settings. A wide variety of teaching opportunities are available. Med-Peds residents are sought after in many settings, but especially in generalist fields such as hospitalist, primary care, transition care for youth with chronic diseases, and global health. Due to the breadth and depth of training provided across the life spectrum, med-peds often attracts med students with an interest in health equity and social justice. A residency in med-peds opens many paths, and graduates have been extremely successful in their careers locally, regionally, and nationally.

Practice Models
Med-Peds graduates have a wide host of opportunities available to them. These include private practice, academics and teaching, hospital practice (hospitalist), research, public health, global health
(international practice), transitional care (survivors of childhood cancer or congenital heart disease as examples) and combinations of the above. Med-Peds physicians specializing in the care of hospitalized patients, “hospitalists,” have become increasingly popular in the last decade. In the outpatient world, one-third of Med-Peds physicians work with other dual-trained physicians either exclusively or in multi-specialty practices. Most Med-Peds physicians work in practices that combine pediatricians, internists, and/or family physicians in multi-specialty group settings.

Residency: Length, typical curriculum
Med-Peds is a 4-year residency, with time split evenly between Internal Medicine and Pediatrics. Typical models switch between Medicine and Pediatrics every 3 months. The residency consists of one year of internship, similar to Medicine and Pediatrics with rotation through core areas such as general medicine and pediatric wards, ICUs, the Emergency room, subspecialty wards and outpatient rotations. Over the following 3 years you gain responsibility and assume supervisory roles, as well as gain wider experience through more subspecialty experiences. As a PGY 2-4, there will be electives to explore your career interests and broaden your training as well as time for research or rotations abroad. The curriculum is designed to provide experience in all core rotations for both Internal Medicine and Pediatrics, allow time to personalize your educational experience to your interests, and ensures that you meet the regulatory requirements for a combined track residency program.

Fellowships offered after residency:
All fellowships available to Internal Medicine residents and Pediatric residents are available to Med-Peds residents, and in addition, some Med-Peds graduates go on to do “combined” fellowships, such as Combined Adult and Pediatric Hematology / Oncology. Recent HMS graduates from Med-Peds residency have gone on to do the following: hospitalists (including combined Medicine and Pediatric hospitalists), primary care, combined adult and pediatric allergy immunology, combined adult and pediatric rheumatology, combined adult and pediatric infectious disease, combined adult and pediatric hematology / oncology, pediatric hematology / oncology, adult cardiology, and adult endocrinology.

Part II: Life as a Med-Peds Physician

Demographics
Traditionally, most residency programs and positions are east of the Mississippi where there are more medical schools and more experience with Med-Peds physicians. However, Med-Peds practitioners do practice in every part of the country including the west coast. There are currently 79 Med-Peds programs across the country. [https://medpeds.org/medical-students/program-map/](https://medpeds.org/medical-students/program-map/)

Earnings Potential
As with most other aspects of Med-Peds, there is a wide variety in earning potential given the number of career options all of which provide a comfortable salary. Generally speaking, as with Internal Medicine, primary care salaries are somewhat lower than subspecialty, with procedure-based subspecialties such as Cardiology and GI among those with the highest earning potential.
Lifestyle
Once again, with the wide number of career trajectories available to Med-Peds graduates, this will really depend on the career path chosen after residency. Life as a Hospitalist will be different than that of a Primary Care doctor, which is different than one focused on research or Subspecialty care. One of the unique benefits of a Med-Peds residency is the wide array of career paths available for graduates.

Academic Medicine
A study from 2005 showed that forty percent of med-peds graduates hold some type of academic appointment with a medical school. About 18-25% of graduates pursue fellowship training. At least 50% of those completing fellowship provide care for both adults and children, and 60% also hold some type of academic appointment.

Part III: Applying in Medicine - Pediatrics

How Competitive is Med-Peds?
Overall, Med-Peds is slightly more competitive than applying in either categorical Internal Medicine or categorical Pediatrics due to the smaller number of positions available, but still with high match rates for US medical students (in 2018, 84.7% of Med-Peds applicants matched in Med-Peds). We encourage you to think broadly about your applications as excellent programs are available throughout the country.

Planning the post-clerkship and senior years

Clinical Rotations
Performance on your Internal Medicine and Pediatrics clerkships are often weighted more heavily than other rotations in review of your application. As described below, planning for further elective or Sub Internship experiences in rotations where you felt you underperformed can help “make up” for underperformance.

Sub-Internships
In general, the requirement for Med- Peds is that you complete AT LEAST an internal medicine sub-internship. Some applicants will do sub-internships in pediatrics as well but this is not a requirement and not doing so will not put you at a disadvantage compared to applicants who do so. The value of completing sub-internships in both medicine and pediatrics is to compare the experiences and be certain that you really do want to complete a combined residency program. Some programs, but not all, offer sub-internships in Med-Peds, where they create a combined experience for you.
Away electives
It is not required nor is it necessarily advantageous to do away electives at the programs you are interested in - would only recommend this if you strongly want to investigate the culture of that program.

Other Recommended Electives
Consider an elective in Medical or Pediatric ICU - this can be a challenging experience, but can help give you insight into fast-paced inpatient medical and pediatric care. Specialty rotations with broad applicability (e.g. infectious diseases) might be considered for knowledge that applicants can subsequently apply to both medicine and pediatric practice. Many institutions also have services uniquely suited to Med-Peds clinicians, like adolescent or young adult pulmonary services. Ultimately, electives are educational opportunities for students to explore areas where they want to spend more time.

Research
As for other residency programs, research is not required for Internal Medicine and Pediatrics. However, Internal Medicine and Pediatrics provides helpful clinical training for those that have research interests in a variety of fields ranging from health services to basic science and beyond. A record of productive research is also valued by many academic medical center-based residency programs. As such, applicants who are inclined might consider diving deep into research activities via dedicated elective time. In turn, highlighting this work as part of an application will help you find a program that can best help you further this interest.

National Meetings
If you have the opportunity to present at a national meeting, take advantage of this! These meetings are an excellent networking opportunity and a way to introduce yourself to program directors and others involved in residency selection committees. They are also a great chance to meet residents from different programs who can offer advice and mentorship. SGIM and PAS are the most widely attended research focused meetings, while AAP and ACP are more clinically focused. That said, given the opportunities available after Med-Peds residency, you are likely to find a Med-Peds trained individual at almost any Medicine or Pediatrics meeting you attend!

Other degrees
Additional degrees (e.g., MA, MS, MEd, MPH, PhD) are not required for application to Internal Medicine and Pediatrics.

Part IV: Assessing Your Competitiveness

What Criteria do Programs Consider?
Programs take a holistic approach to applicants, looking for applicants that will provide excellent care for patients, be good team members and bring something additive to the residency. Med-Peds
residencies are committed to recruiting a diverse group of interns and residents. This means that programs consider grades and scores as only one aspect of an application and also want to see evidence of clinical skills, leadership and diversity in backgrounds and interests. Performance on the Internal Medicine and Pediatrics rotations are critically important. If you felt you underperformed on your Internal Medicine or Pediatrics rotations, it is important to then show improvement in a subinternship in that same field. Finally, it helps to show why combined Med-Peds residency is a good match for you as opposed to a stand-alone Medicine or Pediatric program. How does it match your interests and career goals?

1. Grades and your DSA
As above, programs consider grades and scores as only one aspect of an application, and performance on the Internal Medicine and Pediatrics rotations is most important. Students applying in Med Peds should have DSA from both departments.

2. USMLE Step Scores
In 2018, for students matching in Med-Peds, the average Step 1 score was 235 and the average Step 2 score was 250. In comparison, in 2018 for students matching in Internal Medicine, the average Step 1 score was 233 and the average Step 2 score was 246, and for students matching in Pediatrics, the average Step 1 score was 227 and the average Step 2 score was 243. However, as with grades, step scores are generally considered just one aspect of your application, and cannot “make or break” an application into Med-Peds.

3. Research Experience
Some research experience is valuable to show commitment to a specific area of interest, but as below, there is no cutoff for amount of research or publications. It is best if your work shows real participation and contribution. And during your interviews, be prepared to answer in-depth questions about your work!

4. Publications
It can make your application more competitive if you show true commitment and substantive work on research and publication, but there is no specific requirement to the number of papers, first author papers, abstracts, or posters.

5. Extracurricular Activities
Extracurricular activities have become an increasingly important aspect of the Med-Peds application process - we like to see areas of passion and interest, with commitment leading to leadership or transformational roles. Programs are much less impressed with the “buffet” of extracurricular activities (i.e., doing introductory roles in dozens of organizations), and want to see longitudinal commitment during medical school.
Getting an Interview: Attributes Residency PD’s Consider in Granting Interviews
As above, Med-Peds is a broad specialty, and as such, the application process and interview selection process is a very holistic one, focusing on all aspects of the applicant. Our approach is to focus on big buckets fairly equally, including but not limited to: diversity, academic performance and board scores, clinical rotation performance, clinical rotation feedback / commentary, letters of recommendation, extracurricular activities with an emphasis on leadership, research and publications, additional educational or life experiences including other graduate degrees, and other work experiences.

Letters of recommendation
Most programs require 3-4 letters, and most require 1 letter from a Chair of Internal Medicine and 1 letter from a chair of Pediatrics, but this is often satisfied by a letter from the Director of the Core Medicine and Core Pediatric rotations from your institution. If you plan a career focused on research, a letter from your research advisor is important as well. Always review the letter of recommendation requirements on the residency websites for the programs you’re interested in for the most up to date information.

How many programs should you apply to?
There is no right answer here, but applying to approximately 15 programs with the goal to attend 8-10 interviews would be a reasonable approach.

Common questions you may be asked – specialty specific
Many interviewers want to get a sense of why you chose Med-Peds, as this represents a unique “combined” residency, over categorical Internal Medicine or Pediatrics. Many applicants attempt to answer this question through their personal statement.

Communication with Programs: NRMP Code of Conduct for Applicants and Programs
Both candidates and programs are governed in their behavior and communication by the NRMP Code of Conduct (see Figure- get from NRMP). This is a contract that you agree to by your participation in the Match. The intent of this Code is to protect applicants’ privacy and confidentiality, to prevent programs from asking illegal or coercive questions, and prevent onerous displays of intent (second interviews or visits, rotations at the program institution, demanding to know how the candidate will rank a program). If you have one clear first choice program, discuss with your advisor whether you should communicate that to the program director. While some programs want to know this information, others may not use that information in their rankings. In most cases it will not help you to inform the program. Do not tell a program you are ranking them first if in fact you are not planning to do so- program directors do talk to one another and to clerkship directors to gather information about candidates, and you do not want a reputation for dishonesty.

Advocating for Interviews
If you are placed on a waiting list for a desired program, you have several options- acceptance, advocating for yourself, or asking your clerkship director or advisor to advocate for you. We recommend discussing this with your advisor, including a frank discussion of your reasons for wanting a particular
program and your competitiveness at that program. If after that discussion you want to approach the
program, you can reach out to the residency program director yourself or ask your advisor or mentor to
contact the program director. This can be particularly helpful if there is an aspect of your application
that is weaker and there is a specific reason why (ideally this is addressed somewhere in your letters or
personal statement also).

Where to get more information?

● NMPRA (www.medpeds.org) is a resident-driven organization dedicated to providing information,
opportunities, and programs to current and future Med-Peds residents

● Please come talk to the Med-Peds Faculty or Residents!

https://www.brighamandwomens.org/medicine/internal-medicine-residency/medicine-
pediatrics/overview

http://medpeds.mgh.harvard.edu/