

# Away Rotation Guide

## *Who needs an away rotation?*

Away rotations are a great opportunity to get to know different programs, cities, and regions that you are interested in. Most of the specialties that strongly encourage away rotations are surgical subspecialties (orthopedics, ENT, plastic surgery, urology, neurosurgery, etc.), however, emergency medicine and family medicine programs also offer ample positions for visiting students. When asking yourself '*Do I need to do an away rotation? and why?*' the main thing to consider is its role as an audition to convey your strengths as an applicant beyond your CV/transcript. Much of that "audition" comes as an evaluation of your interpersonal skills and how well you vibe with the residents and faculty – incredibly hard to assess on interview day. A month spent at a given institution gives the program a pretty decent idea of what the next 3-7 years may look like if they rank you highly. Furthermore, it gives you as an applicant a far better window into what your experience will likely be. Many programs will convey the exact same blossoming culture with great work-life balance, but seeing is believing. You will be exposed to different cultures, interpersonal dynamics, and quality of life that varies between programs, ideally finding one that fits right for you.

## *How do I pick them?*

Choosing to do an away rotation at a particular program is effectively the ultimate form of showing interest. Picking the right program(s) can greatly set you apart from other applicants and improve your odds of matching at that school. However, picking programs you are interested in is often a lot easier said than done, as there are so many to choose from. There are two great places to start when deciding between programs: 1) ask yourself if there are any geographical factors that you are going to prioritize during your cycle (staying close to family/significant other, a city you really want to live in, etc.) 2) ask your faculty mentors and residents at your home program for other institutions to check out. By asking this second question you will be opening the power of your network. Whether or not you realize it yet, medicine is a very very small world and having a mentor call on your behalf prior to a rotation can have a huge impact on your experience. Even if they are not going to make a call, they may give you some direction when navigating that institution's faculty or culture to better your odds of securing a LOR. Furthermore, faculty can help you gauge which programs provide their residents with the best training – not all are created equal and there can be substantial differences in breadth of exposure, resources, and training culture between institutions. Finally, residents and students in the class above you can share their thoughts on *fun* places to rotate, as programs differ in their hands-on opportunities, teaching experiences, call schedule, and presentations for students.

## *How many should I do?*

Like picking *where* you will be doing your aways, the number of rotations you complete is a very personal decision. Many specialties have somewhat of an "average" amount

that most applicants try and complete. I would encourage everyone to reach out to the class above them to ask an appropriate amount to consider. Keep in mind deviation from an arbitrary specialty standard is okay and you should ask yourself important questions before committing too many away rotations because an MS4 told you to. Some realistic things to consider are:

- The cost – away rotations are very expensive and budgeting it very important. The cost of a month-long lease is an obvious starting point, but you also need to factor in the cost of getting to and from the hospital if you don't have a car, food costs, flights, and other miscellaneous expenses like keeping up your rent in Dallas.
- Your endurance – keeping your spirits high for multiple months in a row can be a tough endeavor especially as many of your other classmates start to enjoy some of that fourth-year freedom. Pacing yourself is very important to stave off burnout and ensure you're looking your best at all the programs you rotate.

### *When should I do them?*

The simple answer is to get your away rotations done before your application is sent out in hopes of securing a timely letter of recommendation(s). This means that after your home sub-I you can expect to spend the subsequent months, usually July – September, at different programs. However, this may be impossible for multiple reasons:

- Doing more than 2-3 rotations means you will almost always have one after your application due date
- Timing of programs doesn't always line up (not all schools follow the same block schedule so you may have to wait a few weeks in between rotations)
- Availability may not always be ideal meaning you will have to do it later in the season.

All that being said, it's not the end of the world if you're doing rotations after your application is due. Although you won't be getting a letter, you're likely at your best – you know the most, you've seen the most, and you're the most prepared you've been up to that point in the cycle. This means your likelihood to stand out is higher compared to earlier rotators. So, if there is a program you really want to impress, it is often best to do it last.

## **TIPS FOR SUCCESS ON YOUR ROTATIONS**

As I mentioned previously, your sub-I experience is essentially an audition that allows you to demonstrate your strengths and more importantly your ability to mesh with the team at programs you're really interested in. On interview day, all applicants will be evaluated by their grades, MSPE, research, and extracurriculars on paper. Those who shined during their sub-Is give programs a great idea of what sort of resident you will be in the coming years, whether by firsthand experience or through your LORs from away rotations. Much of this assessment is based on your interpersonal skills and ability to navigate interactions with faculty and, often more importantly, residents as they spend

the most time with you. A current resident shared this formula for success that I found very helpful: interpersonal skills (clinical skills + preparedness + work ethic) = success. Your ability to get along with the team magnifies other aspects of your evaluation. simply knowing the most about a case or presentation is likely not going to be what lands you a spot or a strong letter.

Here are some more directed pieces of advice when on rotation:

*When in doubt trust your “kindergarten skills”...*

- Play nice
  - It goes without saying that you should always maintain a respectful demeanor toward your host faculty and residents. Even if they are difficult to be around; always take the high road and remain calm, kind, and attentive toward the patient(s).
  - Your ability to play nice with your co-sub interns and other med students (MS1-3s) on your rotation will be evaluated. Never try and undercut another student or force your way into getting more attention from faculty/residents. It never looks good, and programs are very keen on picking team players. It can be stressful, but you will get your spotlight eventually.
  - Being friendly with nurses and other members of the care team shouldn't be overlooked. Many nurses will have been at an institution for longer than the residents and even faculty and their opinions matter. It doesn't take much time to introduce yourself and get to know them to make a great impression.
- Be honest
  - Honesty is always the best policy and your trustworthiness on rotation is critical to your success.
  - Residency programs are learning environments and these opportunities to learn extend to you as a rotator. You may be asked to do things you're not entirely confident in; it is important you communicate what you're able to do so that they can evaluate you appropriately, give you an opportunity to try something new, and importantly teach you.
    - Remember that it is faster to do something the right way the first time, even if done slowly, than to fix a mistake.
  - “I don't know” is almost always the best answer if you are uncertain. It may be tempting to throw out a wild guess, but guessing can get people hurt in the real world. Admitting you don't know demonstrates a level of humility and allows the attending to either reframe the question or ask you to elaborate on your current level of knowledge. After you say “I don't know” some attendings may like “I don't know, but do you mind if I talk through what I'm considering?”.

- Inside voice
  - It can be very challenging to know when to speak up, chime in, or share something personal with the team to demonstrate your friendliness without coming off as annoying. You will be able to get a better read as you go, but if you're in doubt you will never be faulted for staying quiet.
  - If you are wanting to demonstrate interest in a faculty members research or technique, it may be wise to come up with some good questions to ask during a case or clinic. However, if you come with questions, be prepared to answer follow up questions as they will likely try and assess your level of understanding and genuine interest.
- Wait your turn
  - If the residents want you to do something, they will ask you. It takes time to build trust in your technical ability. If you're eager to demonstrate your aptitude always ask before doing, sometimes another set of hands can be genuinely helpful, other times you may be in the way and slow things down.
  - Residents are trying to get exposure to. Do not be upset if an interesting case is a too packed to scrub in; you're a visitor and if you see that a room is full you can ask if you can go help another member of the team.
  - You will do a lot of observing, so try and do so actively. Make note of your resident's technique, how they hold instruments, and their body position so that if they ask you to perform the same task you can impress the room.
- Help out
  - Early on, ask which areas you can be the most help.
  - Observe what daily tasks the residents have to do and assess which ones you could do on your own. If you are able to lighten the load of a resident they will be eternally grateful.
  - "Is there anything else I can do" can be a bit exhaustive sometimes, so try to answer this question for yourself first so that your question becomes something much more directed, like "can I go do that dressing change for patient X?"
  - You are not above getting the bed or helping clean up a room after a case or a patient leaves the clinic room.
  - If you are going to follow one rule to look like a rockstar **first try and make the life of the person one step above you easier.**
- Remember to share
  - Have supplies on hand for dressing changes when rounding or answering consults. (later discussed below)
  - Sharing information with your co-rotators is not detrimental to your success. Making others look good makes the team happy and in turn will positively impact their perception of you.
- Be on time

- Try and abide by the old saying: “early is on time, on time is late.” If you’re going to be late at least let someone know or have a good reason.

#### *Knowing what to know...*

- This can be one of the most daunting things when preparing for cases, presentations, and interacting with faculty. The most important thing to know is always the patient. Even if you are not directly being asked details, you never know when it might be helpful to know their med list, allergies, or if they have a family member with them – its these little things that will make you really stand out and benefit the team.
- When it comes to more didactic knowledge, often the best thing to do is ask your residents for reading advice, whether it be helpful textbooks or papers that are consistently referenced at their program/by certain faculty. When reading on a topic, try and ask yourself questions as you go and then formulate reasonable follow up questions based on your answer. This exercise will get your primed to endure some of the “pimping” you may experience on rotations. Particularly for surgical specialties, if you know nothing else at least know the anatomy, followed by the steps of the procedure, and then some research surrounding the pathology/technique if you have time. Your knowledge base will build overtime, and you will be able to allocate your learning elsewhere.

#### *Work ethic and Preparedness...*

- Showing up ready to work is a lot of the battle on your away rotations. It will likely be your longest hours of med school, and you will probably have days where you eclipse your residents in *time at the hospital*.
- Embrace being the first one there and the last to leave by being the most prepared member of the team. Take note of the supplies needed on rounds during your first few mornings and start having them on hand throughout the day. I recommend sporting a fanny pack or a deep pocketed jacket to house your walking supply closet. If you are able to help a resident with a consult without having to leave the room for supplies, you’re doing perfect.
- Strengthening your ability to anticipate encompasses the former point and extends to all aspects of the OR and clinic. Demonstrating you know where to go and what to do before being told is one of the most endearing qualities in a learner. As you get more comfortable with a program, do not be afraid to ask for an instrument if you are certain it will be helpful for exposure or removing staples/sutures, as examples. Similar to the points on helping, if you can anticipate the needs of the person directly above you without getting in the way, you’re being a consummate team player.
- You are capable of more than you think, but do not endanger yourself or others by seeing how long you can stay up. Remember, the residents do their job without your help 11/12 months of the year; if you’re falling asleep during a case or unable to make it home because you’re too tired, take a break in a call room and sleep. You will perform exponentially better if you are well rested.

Likely many of these tips will seem intuitive after your clerkship rotations, but it never helps to remind yourself why you are visiting a program and what sorts of things they would want out of a future resident. It is best to ask specialty specific skills, reading, and helpful supplies to have on hand to students in the class above or current residents. Ultimately, the most important qualities for away success is to be willing to work with a smile on your face, be friendly, be humble, and be prepared. Good luck with your rotations!