**Interview Advice and Strategy for CSAs**

Links and Videos

Know the CanMeds and try to demonstrate these characteristics in your interview: <http://www.royalcollege.ca/rcsite/canmeds/canmeds-framework-e>

Not medicine specific but helpful: wiki.answers.com/Q/FAC/1869

See Student Doctor Network: and search interviews under the medical category

Example of how to handle difficult questions, generally: <https://www.studentdoctor.net/2015/11/06/difficult-interview-questions/>

MMI format is common: <https://www.studentdoctor.net/2019/11/04/multiple-mini-interview-question-types/>

[https://blog.matcharesident.com/five-steps-best-residency-…/](https://blog.matcharesident.com/five-steps-best-residency-interview-preparation/?fbclid=IwAR2cig75h8L8qB7lG49i21hGpwlVVjdWPCYKhh3lg9D3qV4-hE5784-eREo)

[https://blog.matcharesident.com/9-reasons-why-medical.../](https://blog.matcharesident.com/9-reasons-why-medical-students-do-not-get-residency-interviews/?fbclid=IwAR0jq569uN11ZUOrqW0E5iWU_ZRGhOpnR7l_NQ0YbxG5sTIGNXwiiZissXI)

[http://www.healthforceontario.ca/.../Interview\_Skills...](http://www.healthforceontario.ca/en/Home/All_Programs/Access_Centre/Services_for_IEHPs/Sessions/Preparation_Sessions_and_Courses/Interview_Skills_Development_for_IMG_Residency_Interviews?fbclid=IwAR3p-h8FMcqcxMSZ8W9Vc-5UXSwt-h1f4TUzB9N-bFYw5AzME7BKRaeHU8o)

[https://www.carms.ca/.../file.../interview-guidelines-r1-ug/](https://www.carms.ca/match/r-1-main-residency-match/faculty-ugme/file-review-interviews-r1-ug/interview-guidelines-r1-ug/?fbclid=IwAR1Tk-uptJAtCT624NEcYwKot_1-RHhOJGIzw-IpzOEZZ2VGIwdBPnVZf4U)

[http://www.med.uottawa.ca/.../eng/getting\_residency.html](http://www.med.uottawa.ca/Students/StudentAffairs/eng/getting_residency.html?fbclid=IwAR0exS_yDb82jXop1dX3KbSzom9PLSXPiSk0tolPxu3x9tieEWdIh0ZkSSw)

[https://canadiem.org/game-time-the-carms-interview/](https://canadiem.org/game-time-the-carms-interview/?fbclid=IwAR0exS_yDb82jXop1dX3KbSzom9PLSXPiSk0tolPxu3x9tieEWdIh0ZkSSw)

[https://med.uottawa.ca/.../md2017\_-\_carms\_mock\_interview...](https://med.uottawa.ca/undergraduate/sites/med.uottawa.ca.undergraduate/files/md2017_-_carms_mock_interview_guide.pdf?fbclid=IwAR0sSdiv1Lu-wMdfpQLcq0WcrOJFxE23tft-nUmY9JSQ_oHuA3rMX7HTR5M) CARMS MOCK INTERVIEW GUIDE

From a U.S. perspective : [https://blog.matcharesident.com/top-5-img-friendly.../](https://blog.matcharesident.com/top-5-img-friendly-specialties-2019-match/?fbclid=IwAR3p-h8FMcqcxMSZ8W9Vc-5UXSwt-h1f4TUzB9N-bFYw5AzME7BKRaeHU8o)

Overview: General Advice

Prepare, prepare, prepare. Write out and practice your answers. Do some mock interviews even if the interviewers are not in the medical field. Do not practice so much that you end up sounding like a robot.

Before you walk in that room, remind yourself that you are going to be engaging with a human being that you want to connect to. Be human. Be yourself. Relax as much as possible. Be interactive.

Remember that you want to stand out. Remember that answers that have a story to them (a succinct story) are more memorable.

Typically, there are 3 interviewers.

Plan conversation topics/questions for the social in case you need to draw on them.

And obviously, do not get drunk at the social. 😊

Remember to be polite but not to the point of coming across as stiff and without a personality.

Evaluate the programs ASAP after your interview (after a few interviews you won’t remember how you felt about a particular program, nor the details) and make detailed notes. Consider creating a form in advance.

Consider sending out thank you cards to your interviewers.

Popular Interview Questions

1. Tell me about yourself.

This is a top question that often sets the tone for the rest of the interview. Practice this one.

Be prepared for this question and do not ramble. Do not simply repeat what is in your CV.

Focus. Be succinct. Use the opportunity to share something unique or expand on what the interviewer already knows.

Example: Talk about what brought you to medical school, then to apply in your specialty, and then that particular institution. Through this you could highlight several of your strengths or interesting experiences. International work? Research you performed that led you to that specialty? Meaningful patient interaction that steered you to the specialty?

Choose a simple strategy. Perhaps something not in your file. Or redirect to an important part of your life, for example, an interesting activity in which you participated or highlight your interests outside medicine to share your well-rounded nature.

1. Why have you chosen this Field?

This is an important question. Programs want to fill their positions with dedicated individuals who will likely complete and hopefully enjoy most aspects of residency training.

This is no time to express indecision.

Show commitment and enthusiasm for the specialty.

If lifestyle and salary are why you chose the discipline, best to keep this to yourself.

1. Why are you applying to this Program?

Prepare for this question. Because I need a job is not what the interviewer wants to hear.

How does the program fill your needs? Shared needs and philosophies and goals?

You will need to know the specifics about the program. Understand the curriculum, the goals of the program, unique features of the program like: elective options, types of hospital affiliations or international opportunities. Highlight ways you feel the program is unique.

1. What are your Strengths and Weaknesses?

Be prepared to articulate this. Ask other people’s perspectives to help you prepare.

Avoid rattling off qualities so you sound like a braggart or trite. Try naming a quality and give an example of when you exhibited it. Example: If organized and hardworking, describe event or experiment you planned and organized.

Weaknesses are tricky. Again, ask a friend.

Best to find a weakness that can be positive.

Example: I am detail-oriented and find that it can take a bit long for me to take a history and physical. But by observing some attendings, I’m learning to be more efficient and concise while still developing rapport with my patient.

Example: I can be impatient and hard on myself when I do not know the answer. I don’t like uncertainty, but I am teaching myself to recognize that this is an integral part of the profession and so I am developing approaches to deal with this. I recognize the need to inspire confidence but to be honest so…. Have learned the importance of consulting with colleagues….

1. How/Where do you see yourself ten years after residency?

Common question so be prepared to discuss both career goals and other interests. Fellowship? Type of clinical setting you hope to work at? Would you like to be affiliated with teaching hospital? Not a good idea to be too concrete as you do not want to come across as not having a high level of interest and enthusiasm for other services. So, balance your plans and wants.

This question can be used by interviewer to find out about interests and aspirations, but perhaps also to figure out how well the applicant understands a particular specialty.

1. What are you looking for in a Residency Program?

Probably good to be looking for teaching, patient care, and residents of a high quality. Excessive concern about salary and work hours won’t be seen as a positive.

If primary care field, you may want to express an interest in preparation for broad spectrum needed for rural practice (most provinces really, really care about rural practice)/small community.

Concern for good morale generally viewed favourably.

1. Describe an Interesting Case.
2. Discuss the Politics of Health Care.

CSAs have been asked whether Canadian or American system is better in American program interviews. Not the best answer to say Canadian system is best. Consider answering by giving thoughtful concise statement of pros and cons of both systems.

On other political topics, consider stating both sides and come down on one side or the other if it seems appropriate.

Thus, think of potential controversial medical topics.

1. Describe a Challenging Situation or Ethical Dilemma you faced on the wards and how you dealt with it.

Many interviewers are interested in learning how you approach challenges and problem-solving skills you use. Prepare from an experience you had. Interviewers are not interested in all the details. Interested in short summary of situation and how you overcame it. Doesn’t hurt to draw in resources you drew on in both hospital and outpatient settings. Did you employ teamwork skills? Specific examples usually better than generalities.

1. Where else have you applied?

Do not be defensive. Answer with confidence: name specific programs or geographic areas. Can be a segue to explaining what you are looking for in a program. Common themes that led you to them and this program.

1. Discuss Concerns or an inconsistency in your application (Difficulty with a specific course, rotation, exam).

Be prepared. Do not become defensive. Consider it an opportunity for a clear explanation. Take responsibility. What did you learn from this that you can use next time a similar situation arises?

1. Situational Questions

Difficult client situations including ethical issues like requests for unnecessary treatment or parent who does not want child vaccinated or patient who refuses treatment.

In answer important to recognize patients’ perspective, fears, concerns, but to find common ground from which to nudge while respecting client’s rights and finding a way to create a path for ongoing discussion.

How do you deal with uncertainty? Sometimes framed in tell us personal experience, or tell us medical experience, or tell us generally, or here is the situation: tell us how you would handle this.

Questions that seek to demonstrate specific characteristics: leadership; advocacy (where you did more than what was expected to help); compassion; ability to handle stress; team player; etc.

1. Handling Illegal Questions

Illegal questions include questions about race, sex, age, body habitus, marital status, family plans, disability. If asked don’t be defensive. Have a plan.

1. Answer the question. Safest route even if you have to be vague. Plans to start a family? “My education is my priority right now.”
2. Deflect. “I would have to think about that before I can answer.”
3. Decline to answer the question. High risk tactic.
4. Other Sample Questions

Describe a patient with whom you had a particularly meaningful interaction.

What is your favourite activity outside of the hospital? Or what do you do for fun?

What experience did you have while studying internationally that you think will be helpful in your career?

Do you feel comfortable working with patients of all ages?

Do you feel comfortable with people from different religious, ethnic, racial groups?

What is your leadership style?

What will you be considering or thinking about when you make your rank list?

What would you do if you did not go into this particular specialty?

If the field of medicine did not exist, what profession would you have chosen?

Do you enjoy working under pressure?

What is the last specialty you would choose, and why?

What was the first job or the most interesting job you have had?

What would you choose are your personal theme song?

What is it that separates you from the other interviewees and applicants?

What will be most important to you in ten years?

At the end of your life, what would you like to be able to say about yourself and your life?

What do you think is an important unanswered question in medicine, and how would you design a research project to address it?

What would you like to talk about?

1. Interview Pitfalls
2. Underestimating the importance of first impressions. Proper appearance, confident posture, smile, firm handshake. Not a good time to show nervousness.
3. Blurting out responses. Take a moment if you need it. Thoughtful “Hmmm.”
4. Rambling. Focus your responses.
5. Not knowing anything about the program.
6. Focusing on the program’s weaknesses.
7. Inconsistent/evasive answers.
8. Displaying an eccentric personality. Domineering, uncooperative, temperamental—not going to score you points.
9. Negative comments about other programs.
10. Poor interactions with administrative staff or current residents. Rudeness or lack of consideration will be filtered down and bit you.
11. Not rehearsing answered. But don’t sound rehearsed
12. Not promoting key assets. Before you begin interviewing, prepare a list of key points that you would like to get across. Try and work these into your answers.
13. Zoning out.
14. Selling yourself short. Avoid rambling but do not give a bare “yes” or “no” to a question as a rule. Questions are intended to invite fuller answers.
15. Sticking your foot in your mouth. Silence is okay. Avoid temptation to break silence by saying something stupid.
16. Minding your manners to the extreme. Important to be polite but not to the point of not making a connection with your interviewer. Don’t be so focused on professionalism that you come across a rigid and distant. Relax a little and enjoy getting to know your interviewer.
17. Being apathetic. Interviewer wants someone who is enthusiastic about the program. No time to show jetlag.
18. Lacking confidence. Remember how far you have come and what you have accomplished. Remember nonverbal cues: stand tall, smile, don’t fidget, maintain eye contact
19. Lacking interest. Have questions prepared. Seek perspective of the interviewer.
20. Ending on a low note. Eye contact, a smile, firm handshake, together with thanking interviewer for his/her time.
21. What Do I ask the Interviewer?

Asking questions shows interest. Best to ask questions, interviewer will enjoy answering. Probably avoid salaries and benefits, vacation, moonlighting, call schedule, etc.

Consider these:

1. Where have your residents gone after graduation?
2. What research opportunities are available? What is the availability of funding for research? What kind of mentor support is available from the faculty?
3. What opportunities are available to attend regional and national conferences and seminars?
4. Is there training relating to the business and legal aspects of the specialty?
5. Are there business and administrative committees residents can become involved in?
6. What is the structure of the last years of residency? Does the program offer elective time? Mini-fellowships? Time and opportunity to work abroad?
7. Is there a formal mentorship program within the residency?
8. What attracted you to join the faculty of this program, and what changes have you seen during your time here?
9. Really interested. Would like to see more. Is it possible to round tomorrow morning?
10. After the interview
11. Do you want to know more? If you are serious about the program speak to the house staff to learn more. Get contact information of a couple of residents for more information.
12. Jot down your impressions of the program while they are fresh in your mind. After a few programs the details will blur. Things you may wish to note include:
13. Location, physical setting, reputation, program strengths
14. Education: conferences, faculty, post residency, research, teaching and other opportunities;
15. Work Environment: patient load, responsibilities, call frequency, nursing and other support, on-call support; health and other benefits; vacation, sick and parenting leave
16. Gut feeling
17. Advantages/Disadvantages
18. Interviewers names and addresses
19. What was discussed at the interview?
20. Thoughts regarding ranking.
21. Evaluate your own performance. How can you improve?
22. Follow up letters. Unless interviewer tells you not to, write a letter to thank the program for its hospitality as well to express your continued interest. Generally, write to the program director and if there are others you can ask him/her to thank them or write separately. Do it soon while memories are fresh. A sincere follow-up can help solidify the good impression you made. Personalize the letter by mentioning specific things to help cement their recollection of you. If you just received another award or accomplishment, mention it. Say what you liked about the program and that you are very interested in the program. A picture attached to the thank you card does not hurt. Might seem weird, but they see a lot of people.