Career Counseling in Urology

Frequently-Asked Questions

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This booklet has been prepared by the Department of Urology in response to questions frequently asked by medical students who wish to explore the training and career opportunities in this field. We hope that it will be helpful to students and serve as a basis of discussion in individual meetings with faculty members and residents.

- Can you give me a brief description of the field? What are the key elements of this field that define it? Urology is a medical/surgical discipline which deals with diseases of the genitourinary tract including renal collecting systems and parenchyma, ureters, bladder, prostate, urethra, vas deferens, seminal vesicles, epididymides, testes and vaginal vault.
- What is the patient population that I will encounter? Will it include both children and adults? Will there be emergency work? What types of technology will I encounter? **Patients are of both genders (and occasionally hermaphrodites) and all ages, even prenatally. There are a great many emergencies in urology. Urology is tech-laden from lithotripters to robots to lasers to electrical resection equipment to tiny endoscopes.**
- Is it possible to describe the personality characteristics of many physicians in this field? Urologists tend to be funny, personable, mature individuals who are cool under fire. One must be certain to be able to handle the special stressors common to all surgical fields.
- How long is the training program/residency? **Typically 5 year program** with first year rotating year in general surgery and subspecialties followed by four year of urology culminating in a final "chief" year.
- Are there fellowships available after residency? Fellowships are available in oncology, pediatric urology, female reconstruction and pelvic medicine, male urethral reconstruction, minimally invasive surgery and robotics, andrology, transplantation and neurourology/urodynamics.
- How do I know if my academic record/grades will make me a suitable applicant? Typically students who are unknown to programs will be more competitive if they have scored 230 or greater in USMLE step I, are members of AOA, have participated in meaningful academic pursuits such as clinical or basic science research or who have taken a year off to do research through fellowships involving the NIH, Doris Duke or Howard Hughes Medical Institute.

- What is the role of my USMLE Step 1 score? What is a competitive score to qualify for an interview? If I failed Step 1 what are my options? Should I take Step 2 early The USMLE Step I score is the single most important "separator" for program directors determining who gets an interview. Those who fail Step I would be considered poor candidates for the match process. Step II is unlikely to be of help. Again, Step I of 230 or greater should be sought.
- Do I need a Step 2 Clinical Knowledge score to be screened for an interview? To be ranked? No
- Is there anything that I can do in my rotation or elective experience in this field to enhance my qualifications? Be a consummate team player, always be on time, be well-read especially in regards to cases currently active on the service, do not try to "outshine" residents or your peers. Be early, stay late. Offer to help without appearing to be overly eager. Always have the answers, don't be afraid to say "I don't know", no excuses, no blaming anyone or anything for lapses. Consider participation in manuscript preparation if that opportunity presents itself.
- Should I take outside electives in other institutions? If so, how many are advised and allowed? **Yes. Two are advised and allowed.**
- If your field requires a preliminary year what are your recommendations regarding that year? **General surgery rotating PGY-1 year is mandatory.**
- Is a research experience important in my application to this field? Do I need to do a one year research experience? Will research offset a low Step 1 score? Should I have publications to qualify for your field? Typically engagement in research projects and manuscript preparation is considered a sine qua non for the urology match candidate. One year research experiences are recommended for those with lower USMLE scores or who have no other distinguishing characteristics such as AOA membership or abstract/paper entries on their C-V.
- Is community service important in my application to this field? Not especially, but can be supportive
- What do you advise on obtaining letters of recommendation? Should they all be from the field? How many should I have? Do I need a chair's letter? If so, how do I obtain that letter? **Strong letters are sought from the department chair and key faculty. Letters from well respected urologists outside Downstate are given key consideration.**
- How do I meet with residents in the field and ask them to share their experiences and advice? Can I find residents with educational backgrounds similar to mine? Downstate urology residents are very approachable. Doing electives is the best way to interact with and impress them.
- If I want to learn more about the field, can you recommend how I do that? Make an appointment with Dr. Weiss, the department chair, or any

other Downstate faculty member such as Drs. McNeil, Schiff, Godec, Lee or Hyacinthe.

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