



<https://doi.org/10.1016/j.jemermed.2019.05.034>

## Medical Student Forum

### ARE YOU APPLYING TO MORE THAN ONE SPECIALTY?

Paul Jhun, MD,\* Jan Shoenberger, MD,†‡ Dorian Drigalla, MD,§|| Cherlin Johnson, MD,†‡  
Susan Stone, MD, MPH,†‡ Peter M. C. DeBlieux, MD,¶|| Mohamad Ali Cheaito, MD,\*\*  
Shahram Lotfipour, MD, MPH,†‡ and Amin Kazzi, MD\*\*††

\*Department of Emergency Medicine, University of California San Francisco, San Francisco, California, †Keck School of Medicine of the University of Southern California, Los Angeles, California, ‡Los Angeles County + University of Southern California Medical Center, Los Angeles, California, §Department of Emergency Medicine, Texas A&M College of Medicine, Temple, Texas, ||Department of Emergency Medicine, Baylor Scott & White Health, Temple, Texas, ¶Section of Emergency Medicine, Section of Pulmonary and Critical Care, Department of Medicine, Louisiana State University School of Medicine, New Orleans, Louisiana, \*\*Department of Emergency Medicine, American University of Beirut Medical Center, Beirut, Lebanon, and ††Department of Emergency Medicine, University of California, Irvine, California  
Reprint Address: Amin Kazzi, MD, MAAEM, FAAEM, Department of Emergency Medicine, American University of Beirut Medical Center, PO Box 11-0236, Riad El Solh, Beirut 1107 2020, Lebanon

□ **Abstract**—Although the majority of U.S. medical students predominantly apply to only one specialty, some apply to more than one. When it comes to emergency medicine (EM), applicants may apply to additional specialties due to several reasons: being international medical graduates as well as their inability to make a decision regarding the choice of specialty, fear from the growing competitiveness of EM, or the desire to stay in a specific geographic area. Accordingly, in this article we aim to guide medical students through the process of applying to more than one specialty, including using the Electronic Residency Application Service application, writing a personal statement, getting letters of recommendation, and an Early Match. Moreover, we elaborate on the effect of applying to more than one specialty on a student's application to a residency in EM. © 2019 The Authors. Published by Elsevier Inc. This is an open access article under the CC BY-NC-ND license (<http://creativecommons.org/licenses/by-nc-nd/4.0/>).

□ **Keywords**—emergency medicine; residency; multiple specialties; applicant; medical student; IMG

#### INTRODUCTION

Over the last three decades, emergency medicine (EM) has quickly become one of the most popular career choices for

U.S. medical students, reaching its highest number of offered postgraduate year (PGY)-1 positions in 2018 (7.5% of all PGY-1 slots) (1). In fact, EM has become one of the most competitive specialties in the Match. Every year there are many EM applicants who go unmatched and find themselves forced to scramble into another specialty or make alternate plans until reapplying the following year.

Although many students have an idea of what specialty they want to pursue when they enter medical school, plans change. With every examination, course, clinical rotation, and evaluation, medical students are constantly re-assessing their interests and their realistic chances of being accepted into their desired specialty. Therefore, when it comes time to apply, it is usual for candidates to hesitate when having to make a final decision. Although the majority of U.S. medical students will apply to only one type of residency training, some may find themselves applying to more than one specialty.

#### WHY DO SOME STUDENTS CONSIDER APPLYING TO MORE THAN ONE SPECIALTY?

The increasing competitiveness of EM may be intimidating to many students, and although they may be

focused on EM, they might wonder if they are competitive enough to obtain a residency position (2–4). Concerns may arise about competing with other applicants from a variety of prestigious schools who may have done a great deal of research, have a prior background in EM, or have more leadership experience (5). This may lead students to feel as though they need a backup plan. For example, some applicants may feel that it is wise to apply and interview with another specialty that is not as competitive or has a larger number of positions available. The chances of matching will remain little if an average applicant applies to several highly competitive specialties (6).

Another possible reason might be the applicant's desire or need to remain in a specific location. The applicant may be married or have children or family in the area, which may make relocation to another area undesirable. The student may believe it is necessary to apply to a second specialty because the importance of a successful Match in the geographic area where he/she prefers to remain is equally, if not more, important to matching in EM.

Yet another issue arises regarding conflicting interests. Because EM attracts students who enjoy a variety of clinical experiences, it may be difficult for an applicant to decide between EM and another specialty. Some students enjoy working in the operating room but hesitate at the prospect of long hours extending well into a surgeon's career. Other students enjoy caring for critically ill patients in the intensive care unit but dread having to be on call. Although EM is a difficult residency, it eventually affords emergency physicians a career with a more flexible schedule, and a career over which they have a greater degree of control and freedom. This can be appealing to a variety of people, such as those wishing to have families or those who have significant interests outside of medicine. The advantages and disadvantages of the different specialties may cause a student to feel pulled in opposite directions. This can lead them to apply to both fields with the hope that the choice will become clearer as their fourth year progresses. The other possibility is that some applicants may choose to let the Match process

decide their specialty for them because they are unable to make a decision themselves.

### STATISTICS FROM THE 2018 MATCH

According to the 2018 National Resident Matching Program (NRMP) charting outcomes data, among those who matched in EM, international medical graduates (IMGs)—both U.S. and non-U.S.—were more likely to rank other specialties in addition to EM, compared with allopathic and osteopathic seniors (7–9). This is partly because IMGs are aware that they have lower chances of matching. Among the 92 EM program directors that responded to NRMP's biennial survey, only some reported that they interview and rank U.S. IMGs (42%) and non-U.S. IMGs (14%) (10). Table 1 summarizes the number of distinct specialties ranked by U.S. allopathic seniors, U.S. osteopathic seniors, and U.S. IMGs and non-U.S. IMGs that matched in EM (7–9).

### WHAT IS THE PROCESS INVOLVED IN APPLYING TO TWO OR MORE SPECIALTIES?

Applicants who choose two or more specialties that participate in the regular NRMP Match will need to apply, interview, and rank those programs at the same time. The Electronic Residency Application Service allows applicants to create a database with personal statements and letters of recommendation. For each program that they apply to, they can select a specific, customized personal statement and a different set of letters of recommendation. Applicants will also need to write a separate personal statement for each specialty to which they apply. In addition, they will need to obtain multiple letters of recommendation for each specialty. There are several ways to accomplish this. One way would be asking the letter writers to generate one general letter of recommendation that does not mention the specialty to which the applicant is applying. This letter can be sent to all programs to which the applicant is applying. The applicant may then obtain two more letters per specialty for which they are applying. Alternatively,

**Table 1. Number of Distinct Specialties Ranked by U.S. Allopathic Seniors, U.S. Osteopathic Seniors, and U.S. International Medical Graduates (IMGs) and Non-U.S. IMGs That Matched in Emergency Medicine (7–9)**

	Number of Specialties			
	One	Two	Three	Four or More
Applicant Type				
U.S. allopathic seniors (7)	93.2%	6.1%	0.5%	0.2%
U.S. osteopathic seniors (8)	87.3%	10.5%	1.6%	0.6%
U.S. IMGs (9)	36%	46%	15%	3%
Non-U.S. IMGs (9)	55.5%	37%	7.5%	0%

applicants may seek only specialty-specific letters. If applicants ask a faculty member to provide them with two different sets of letters to accommodate their intent to apply to two different specialties, they may find them reluctant to do so (although not always). Their credibility and professional ethic are on the line, particularly when it involves an application to programs in their own field. Applicants should know which letter writers are mentioning which specialty and be meticulous about double-checking which letters get submitted to each specialty. This is one of the more common ways that programs discover that an applicant is applying to multiple specialties, which then make them question his/her commitment to EM. The other thing applicants should know is that the Dean's Letter may indicate their career choice, so it may be necessary to speak with the student affairs office and explain that they are applying to more than one specialty. Most schools will still generate only one Dean's Letter, but they may choose not to mention the specialty the applicant is pursuing.

In terms of cost, there is no difference if applicants are applying to five different programs in three different specialties or fifteen programs in the same specialty. In fact, the system is designed to accommodate people applying to a second subset of programs because many people have to apply for preliminary year programs in addition to their advanced programs. Therefore, the process easily allows applicants to apply to multiple specialties. However, it will take significantly more time, strategy, and diligence on the student's part to keep everything separate and prevent any embarrassing overlaps.

The other possibility is that in addition to EM, students may be interested in a program that is part of the "Early Match." There are a few specialties, such as ophthalmology and urology, which take part in the Early Match. Applicants may find the process of applying to one of these specialties, in addition to EM, easier to manage than applying to two specialties in the NRMP Match because the application timelines are separate. Application materials for the Early Match are due in late summer, whereas the actual Match is in January. Because the two Match processes use different electronic application services, there is less likelihood of confusion between letters of recommendation and personal statements. In addition, if a student is unable to match in January, he or she will still be able to continue the process with the intention of matching in EM in March.

Additionally, students applying to multiple specialties are advised to seek sub-internships in both specialties to ensure they will enjoy working in the backup specialty, make sure their applications and personal statements for each specialty are as strong as possible, and be honest in case they are asked about dual interest (6).

### **HOW DOES APPLYING TO ANOTHER SPECIALTY AFFECT A STUDENT'S APPLICATION TO AN EM RESIDENCY?**

Although it is important to understand why some students choose to apply to multiple specialties and how it is carried out, one of the most important things to take into consideration is how this choice will impact the applicant. The process of applying to multiple specialties involves some risk for the applicant. An EM program director (PD) who is evaluating an applicant applying to more than one specialty raises a red flag regarding that applicant's level of commitment to EM. PDs want to recruit applicants who are fully committed to EM, not ones who see it as a backup to another coveted, more competitive specialty or who cannot decide between two specialties. EM residency is demanding, and PDs do not want to be worried about residents dropping out after taking the time to train them.

It is important to point out that programs are not privy to information regarding an applicant's choice to apply to multiple specialties. Due to the concerns that PDs will likely have if they discover the applicant is applying to an additional specialty besides EM, students should generally not disclose plans to apply to more than one specialty unless there is a specific need to do so. However, even if you do not tell the PD, there can be very obvious clues within your application, such as significant research in an area other than EM, personal statements that do not commit to one field, ambiguous Dean's letters or letters of recommendation, or specialty choice-specific material sent by error to the wrong program. Another thing to consider is that when an applicant applies to more than one program at a single institution, there is a reasonable chance that they may run into someone from one program while interviewing with the other. If an applicant is set on applying to multiple specialties, it might be more strategically prudent to apply to only one program per institution. Furthermore, applicants are advised to be cautious even when applying to more than one specialty within a geographical area (11).

In general, if a program decides to interview an applicant whose file contains some clues regarding a possible second specialty application, this issue will be brought up during the interview. If a good explanation is given, it will be accepted. For example, there are students who do all or most of their research in one field and then have a change of heart and decide that EM is a superior career choice; in such instances, most PDs will be open to the switch. If possible, make sure to address this in the personal statement and emphasize the motivation for and dedication to EM.

## CONCLUSION

In summary, there are many reasons why an applicant may end up applying to more than one specialty. This process can be more complicated than applying to a single specialty and has some inherent risks but may be the best option to pursue in particular situations.

*Acknowledgment*—This work was supported by the Department of Emergency Medicine at the American University of Beirut Medical Center (AUBMC). The funding source was not involved in the preparation of the article, writing of the report, or decision to submit the article for publication.

This research received a nonrestricted educational grant from the not-for-profit Resident Student Association (American Academy of Emergency Medicine) and the Department of Emergency Medicine at the American University of Beirut.

## REFERENCES

1. National Resident Matching Program. Results and data: 2018 Main Residency Match. Washington, DC: National Resident Matching Program; 2018.
2. Schmitt A, Dyne PL, Broder J, et al. An overview of the allopathic match. *J Emerg Med* 2019;56:e61–4.
3. Hansen E, Pilarski A, Plasner S, Cheaito MA, Epter M, Kazzi A. The osteopathic applicant. *J Emerg Med* 2019;56:e65–9.
4. Katzung KG, Ankel F, Clark M, et al. What do program directors look for in an applicant? *J Emerg Med* 2019;56:e95–101.
5. Lotfipour S, Luu R, Hayden SR, Vaca F, Hoonpongsimanont W, Langdorf M. Becoming an emergency medicine resident: a practical guide for medical students. *J Emerg Med* 2008;35:339–44.
6. Puscas L. Viewpoint from a program director they can't all walk on water. *J Grad Med Educ* 2016;8:314–6.
7. Charting outcomes in the match: U.S. allopathic seniors. National Resident Matching Program. 2018. Available at: <https://mk0nrmpcikgb8jxyd19h.kinstacdn.com/wp-content/uploads/2018/06/Charting-Outcomes-in-the-Match-2018-Seniors.pdf>. Accessed November 10, 2018.
8. Charting outcomes in the match: senior students of U.S. osteopathic medical schools. National Resident Matching Program. 2018. Available at: <https://mk0nrmpcikgb8jxyd19h.kinstacdn.com/wp-content/uploads/2018/06/Charting-Outcomes-in-the-Match-2018-Osteo.pdf>. Accessed November 10, 2018.
9. Charting outcomes in the match: international medical graduates. National Resident Matching Program. 2018. Available at: <https://mk0nrmpcikgb8jxyd19h.kinstacdn.com/wp-content/uploads/2018/06/Charting-Outcomes-in-the-Match-2018-IMGs.pdf>. Accessed November 10, 2018.
10. Results of the 2018 NRMP Program Director Survey. National Resident Matching Program. 2018. Available at: <https://mk0nrmpcikgb8jxyd19h.kinstacdn.com/wp-content/uploads/2018/07/NRMP-2018-Program-Director-Survey-for-WWW.pdf>. Accessed November 10, 2018.
11. Opposed vs. unopposed: can you apply to multiple medical specialties in one hospital? Match a resident. 2017. Available at: <http://blog.matcharesident.com/opposed-vs-unopposed-can-apply-multiple-medical-specialties-one-hospital/>. Accessed November 10, 2018.