Success Early in Residency

Congratulations! Throughout your career, you have succeeded in multiple endeavors – tests, research, volunteering, work, and other life experiences, and you are now an internal medicine resident! You also have decided to pursue a career in gastroenterology. In this section, we will provide tips for success early in your residency to best prepare you for the GI match.

The most important piece of advice is to focus on becoming a strong internist. You will learn the various GI pathology and procedures in fellowship. The most successful GI fellows have a strong medicine background, are able to provide broad differentials, and understand the intricacies of post-graduate medical practice. Furthermore, one of your recommendation letters will be written by your IM program director/chair, and stronger residents will have stronger letters. A PD from a top 10 GI fellowship program states, “the quality of the letter is much more important than who the writer is,” when asked about who they want to write recommendation letters. Most importantly, it will reflect in the care that you provide for patients. In your first few months of residency, focus on learning your hospital system and how to best provide patient care, learning about medicine-specific pathology, understanding the EMR, and building relationships with your faculty and peers.

Once you are settled in, I recommend focusing on finding a mentor and participating in GI-focused scholarly activity. There are multiple types of mentors – private practice, research career, clinical career, education career, work-life balance, and general mentoring advice (https://gi.org/mentoring-program/). Ideally, you want to identify a mentor who has a good track record of working with residents to match into GI fellowship. Many times, this is a mentor who you can do a research project and (likely) you will ask for a letter of recommendation from. The best way to learn about good mentors is by asking your peers (those who have matched, are working with someone, or are later in their residency program) and your IM PDs / associate PDs. You can also look up profiles of the GI faculty in your program and find one who focuses in an area that you are interested in. Interview 2-3 potential mentors. One common mistake applicants make is to go with the first individual they speak to. I would openly communicate that you are early in residency and meeting 2-3 people with the hopes of identifying a mentor in an area that you are interested in, and that you will let them know once you have decided. There may be many reasons why a mentor-mentee relationship won’t work = personality, research interests, & expectations to name a few. The earlier you can find an ideal match, the happier both parties will be! (If GI was a late decision for you and you have worked with a mentor who is not a GI-focused, that is still okay. Many PDs emphasize the strength of an applicant which encompasses seeing a project from start to finish and dedication to scholarly activity.)

Don’t spread yourself too thin. This will not only allow you to see a project through completion, but also help you focus on becoming a strong internist. When multiple PDs from large GI programs were asked about what they expect in research from their applicants, responses included:
• “Quality is much more important than quantity. It’s a red flag if there are too many projects where the resident’s contribution is questionable. I would much rather see a project completed from start to finish.”

• “Commitment to research is the main thing we look for. We understand that people may be in residency and focusing on their clinical duties or working as hospitalists/researchers. There is not a number of publications we look for. What matters is that an applicant can start and finish a project and can speak intelligently about her/his research during the interview.”

• “More than numbers, I look for quality, either described in letters, personal statement, etc. I would rather have one good project in which the applicant is involved from inception to publication, including IRB submission, data collection, etc.”

It can also be helpful to identify letter writers early. For fellowship applications, you can submit up to four letters. One will be from your PD/Chair and three are open for your choosing. The longer you know someone and work with someone, the better of a letter they will be able to write for you. If you are in a program with a strong GI fellowship program, having multiple GI letter writers will be beneficial. If it is a small GI program, or you have not had exposure to many GI providers who can write you a strong letter, then asking an IM provider to write you a strong letter is a great option. You can also find mentors through the ACG – if you need a letter, I recommend asking them early in your conversation and exploring ways in which your mentor will be willing to write you a strong letter (e.g. write a review). There are many other avenues in which you can become involved beyond research. Examples include joining a GI society and participating in a subcommittee, organizing or helping to organize activities through community organizations, and lecturing medical students, to name a few.

We realize this all can be very daunting, that the GI match is competitive, and there is a lot to learn. Your ultimate goal is to gain a strong knowledge base and provide excellent care to your patients. Once you have found your footing in residency, identifying a mentor early can help you secure a letter, participate in research, and navigate the application process.