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It has been a year since I graduated from WSUSOM's Internal Medicine Residency program. The year 2020 has been a unique time when our struggles with the COVID-19 pandemic significantly affected how we clinicians practice medicine and will practice medicine in the future. Working the first half of 2020 providing COVID-19 care at Ascension Providence Rochester Hospital (APRH) and the second half in cardiology subspecialty care, I feel fortunate to have been able to practice in different clinical settings and get ready for the future.

Over the past year, there has not been a single day when my daily clinical/academic work has not reflected my education at APRH. Based on the feedback I have received from my peers and faculty at Genesys Hospital, I feel that I was trained well. I am very grateful to the dedicated faculty, peers, and WSUSOM/APRH staff who fostered an encouraging and supporting environment.

My experience in the cardiovascular program at Genesys Hospital has been intellectually stimulating and fulfilling. There is a steep learning curve: clinical guidelines specific to cardiology, interpreting and performing basic echocardiogram and transesophageal echocardiograms, the basics of cardiac catheterization, interpreting exercise stress test and cardiac nuclear studies. It was overwhelming initially, but it got better. By the latter half of the year as I got more comfortable, I started appreciating how these different tools gave me the power to make a difference in my patients' life. It is very rewarding to get instant gratification after treating a STEMI and cardioverting atrial fibrillation to sinus rhythm.

I would like to use this opportunity to talk more about to prepare for the transition from residency to fellowship.

- **Start early and develop a timeline**

- Time flies. It is true especially with residency when you are working 6 days a week with 1 day off. You might just don't realize how quickly a week passes especially during ICU/floor months, and you just time-travel from Monday to Friday and then to next Monday. Developing a timeline is crucial to keeping yourself on track.
- Key points (sample timeline) - because applications are due by the end of the second year:

- Have a mindset about what you want to pursue (fellowship or not) starting mid-first year.
 - Try to schedule elective rotations in the subspecialty you want to specialize in the early part of your first year to get firsthand experience of that subspecialty.
 - Determine what you want to specialize in by the end of the first year, latest.
 - Use the first year to build a strong foundation of internal medicine concepts.
 - Start working on research/scholarly activities in the first year.
- **Carrying out research/scholarly activities**
 - With fellowship applications getting super-competitive, you need just more than graduating from residency in good standing and a letter of recommendation. Below are some ideas about how you can build up on your scholarly activities:
 - Become familiar with different types of research publications. Case reports, case series, metanalysis, review articles, and observational retrospective studies are good to begin with. I would say prospective studies and randomized trials are usually not possible during residencies.
 - Know the various ways of presenting and publishing your research. One way is to write a complete manuscript, but a more concise way is to write it as an abstract. For an abstract to get published, you need to submit it to national/international meetings.
 - Read previously submitted abstracts to get an idea of how the abstracts are written and what the professional organizations or societies are looking for.
 - Develop a file with research ideas garnered from your daily clinical rounds and what you read in textbooks/papers/UpToDate. Discuss your ideas with the attendings.
 - Know the different professional societies and conferences in your specialty. Good examples include the American Heart Association, American College of Cardiology, American College of Gastroenterology, American Thoracic Society, CHEST, American Geriatrics Society, Society of Hospital Medicine (SHM), Society of General Internal Medicine (SGIM), and American College of Physicians (ACP). The European Society of Internal Medicine is a great example of an international meeting. SHM, SGIM, ACP are great places to start as they are internal-medicine specific. ACP also hosts 2 meetings at the state level, which are a great way to network and collaborate with peers from neighboring residency programs.
 - Set up a calendar with meeting dates and abstract submission deadlines for these conferences and start working at least 4-6 weeks in advance. Most of these conference start accepting abstracts in October/November of each year.

- **Networking/obtaining letters of recommendation/finding a mentor**
 - In my experience, this is the most important step. Again, start early. Let attendings know what you are interested in early on. Ask for help and opportunities. “If you don’t ask, you don’t get it.”
 - Find institutions where you want to subspecialize. Reach out to the leadership at that place and express your interest.
 - Secure 4 letters of recommendation, one from the Program Director (so be on good terms with all core faculty). The other 3 should come from physicians in the subspeciality you are interested in, although this is not a hard and fast rule.
 - For letters of recommendation, excel in the subspecialty rotation. Come before the scheduled time, and don’t leave early even if the work seems light. When starting a rotation, let the attending know about your interest and that you will be asking for a letter. Write a cover letter too, letting the attending know about the highlights of your time with him/her.
 - Reach out to your Program Director to see if you can secure an away rotation. This process is slow, so start things rolling by the middle of the first year to secure a rotation by the middle of the second year.
 - Make a profile on Twitter, Doximity, Researchgate, Google Scholar, and LinkedIn. Follow the leaders of the fields on Twitter.

This is obviously pretty overwhelming when taken at one glance. The key is taking small steps, being consistent, and following your timeline. Good luck to everyone!

If anyone is interested in knowing more about what a cardiology fellowship is like or would like to discuss their career path after completing the Internal Medicine residency, please feel free to reach out to me at jainanubhav2116@gmail.com. Since I am interested in clinical cardiology research, please do not hesitate to reach out to me if you would like to discuss or collaborate on any research ideas.

Warm regards,

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