



MCEP Residency Spotlight: Western Michigan University Homer Stryker M.D. School of Medicine

www.mcep.org

Quick Facts

Location
Kalamazoo, MI

Length/Type
3 year

Training Site
Community

ED Volume
160,000

Shift Length
9 or less

Shifts per Month
19-21

Elective Weeks
6

Critical Care
26

Ask the Program Director: Dr. Philip Pazderka

What is your programs philosophy?

Our prime objective is to train excellent emergency clinicians in an educationally supportive and nonmalignant environment. We allow curriculum flexibility to encourage physicians to enter any type of emergency practice they desire.

What sets your Emergency Medicine Residency program apart from others?

We provide a very strong critical care foundation for residents, featuring far more critical care content than most programs. We have a unique critical care staffing model that allows only emergency medicine junior and senior residents to staff on the critical care service. This allows the intensivist faculty to focus their teaching on the emergency medicine aspects of critical care.

We also have unusually strong EMS and flight programs. Our long-established air medical program gives our residents hands-on experience in critical care transport. Our EMS curriculum is also strong, featuring an unusual resident-staffed in-field EMS response vehicle starting in the PGY-2 year. "WMed-1" is staffed 24/7 with a senior EM resident, providing residents the ability to be on-scene medical control for the most serious EMS calls. We've had residents serve as the physician on scene for sixty car pileups, lightning strikes, and house fires with multiple cardiac arrests and delivering breech twins.

What type of population does your base hospital serve?

We have a diverse, broad-based patient base combining urban, suburban and rural populations. We average approximately 150,000 patients a year divided between two tertiary trauma centers.

Does your program provide research opportunities? Is research required?

The research opportunities at Western Michigan University are broad, ranging from bench research to multi-center clinical trials. Residents have the opportunity to either develop their own research projects or work with faculty on projects that are ongoing. Although formal research is not required, all residents must complete an academic project, as with all emergency medicine residency programs.

Where are your graduates? Academic vs community hospitals, geographic areas?

Approximately 22% of our residents go on to teaching careers. Graduates work in a multitude of clinical settings, from academic medical centers to community hospitals to downtown urban centers. We've had residents from all over the country in our program, and currently have graduates working in 36 different states.

What is your advice for students who are considering Emergency Medicine?

Students should keep an open mind, and explore all specialty options. Advance planning is critical, as is the need to get a good advisor, regardless of the specialty you choose. If definitely doing EM, make sure you schedule some critical care in your 4th year. Become involved in professional organizations like EMRA. Also, take a look at the advice our Chairman gives to those students interested in emergency medicine. Find it at:

<http://med.wmich.edu/education/internshipresidency/emergency-medicine/advice-emergency-medicine-applicants>

What part of a medical students' application do you consider most important?

Academic excellence is important, and assures that applicants get in the door to be interviewed. However, at the end of the day, the interview itself carries the most weight for emergency medicine applicants. At our institution, this consists on both faculty and residents interviewing applicants. We value our resident's opinions and their ranking of applicants is worth as much as the program director's.

What is something that sets a great applicant apart?

An outstanding performance on an audition rotation is the best way to set a great applicant apart from others. Emergency medicine is a very clinical specialty, and there is nothing like a great clinical performance to turn heads. Such excellent performance will additionally gain you a great SLOE which will open doors at other programs, as well.

What do you look for when an applicant comes to interview?

Are they teachable? Would this be someone we would want to work next to for three years? Is this someone we could trust on a busy ED or ICU shift when we can't supervise them as closely as we would like? Is this someone we would trust to make out our call schedule? Is this someone we would be proud of as a product of our program? Is this someone we would want to care for ourselves or our family members?

Ask the Residents: Mauli Shah

What made you choose Emergency Medicine?

My emergency medicine rotation in medical school was undoubtedly the most fun and interesting rotation in medical school. Working in the ER allowed me to see all types of populations from children to the elderly as well as treat all different chief complaints from the simple rash in a neonate to the altered mental status in an 80-year-old. I loved getting involved in trauma resuscitations and performing bedside procedures from intubations to ultrasounds. I enjoyed changing my thought process and getting involved in the care of some of the sickest patients that are admitted to the hospital. It was icing on the cake to work with very personable and down-to-earth staff!

What is your 'typical' day like as a resident?

The typical day as a resident often includes an 8 hour shift in the department - often times I stay an hour or two after tying up loose ends or finishing documentation. Once a week we have conference for 6 hours. The rest of the day is spent studying, spending time with co-residents and their families outside of work, and/or catching up on household errands.

Why did you choose the program that you currently attend?

WMed was the perfect fit for me. It allowed me to gain the experience of working at two very different hospitals, both level 1 and 2, as well as work with two very different groups of physicians and EMR systems. I was exposed to both the academic side as well as the community side of emergency medicine. One of the biggest draws to Wmed was our EMS capabilities and the experience we gain with pre-hospital care via MSU-1 and Aircare! Last but not least, this program had a family feel with importance on resident wellness including several activities run by Medmates.

Do you live in the city your program is in? What do you like about the area?

I live in Kalamazoo proper and there are plenty of things to do in the area! There are several breweries and restaurants in the town. We are 1 hr from Grand Rapids, 2 hours from Chicago, and 2 hours from Detroit - many of us make a quick trip to explore these areas when we get a few days off. There are lots of outdoor activities to participate in including sporting leagues and Kalamazoo summer festivals to name a few.

What is your call/shift schedule like?

We work 19 shifts as a PGY-1, 18 shifts as a PGY-2, and 17 shifts as a PGY-3. Each shift is scheduled for 8 hours. Our shifts include working in the department, AirCare, MSU-1, and ultrasound.

What activities are you involved in outside of the program?

Residency is a busy time so most of my free time often goes into working, studying, spending time with friends/family, or travelling. With any extra time, I like participating in the events hosted by Medmates. I also enjoy giving lectures to medical students at WMed. Many of my co-residents enjoy rock climbing, playing on kickball leagues, working out, going to Zumba, etc.

What is your advice for students who are considering Emergency Medicine?

Rotate early and in different emergency departments to really figure out if ER is for you. It is definitely fast paced, demanding, and challenging working as the gatekeeper to the ED, but it is also fascinating, with something new to learn every day. Think early about obtaining SLOE letters. Take every advantage to participate in performing procedures!

How did you decide which programs to apply to?

I first found a location of the country I wanted to live in -- this was largely based on proximity to my family, friends, and significant other. This helped me narrow down my programs. I then researched programs that would provide me exposure to both academic and community medicine. I wanted a program that had good ICU, trauma, and peds exposure.

What type of setting do you plan on practicing in the future?

I hope to practice in a community setting that is within close proximity to a medium sized city. I also hope to be involved in medical school academics as core faculty in the future.

What is something you wish you had known when applying to residencies?

I wish I knew more about the budget and travel expenses associated with applying and interviewing.

For more information on Western Michigan University Homer Stryker M.D. School of Medicine Residency, please go to

<http://med.wmich.edu/node/132>

Program Information provided via the EMRA Match tool

<https://webapps.acep.org/match#/>

Thank you Dr. Pazderka and Dr. Shah for taking the time to complete our MCEP Spotlight!