

Class of 2024: Planning your 4th year



WAYNE STATE
School of Medicine
Office of Student Affairs
and Career Development

Psychiatry



Priority scheduling

We recommend a psychiatry elective in the first part of 4th Year (April-August). Most students take a 2nd psychiatry elective at some point during the fourth year.

We recommend a SubI in either internal medicine or family medicine since you will complete 4 months of internal medicine in your PGYI year. Students planning to go into child and adolescent psychiatry can also consider a SubI in pediatrics. Although some students elect to take their SubI early in fourth year as part of preparation for USMLE Step 2, you do not need to complete a SubI prior to September for psychiatry applications. Some students prefer to complete the SubI in Feb-March so that this experience is closer to the start of residency.



Recommended year 4 electives

Most students take one psychiatry elective during April-August of fourth year, and a second elective at a time that works best within their M4 schedule.

- Early electives (April-August) can solidify interest in the specialty if you are debating between two fields and provide opportunities for letter of recommendation writers to get to know you.
- Later electives provide opportunity to advance knowledge and skills closer to the start of residency. Some students take three electives. More than three electives within psychiatry during fourth year are typically not recommended as this leaves less time for electives in other fields.
- An away elective is not necessary but can be considered if you are very interested in a particular program or region.
- An elective in child and adolescent psychiatry can be helpful for students considering a fellowship in this sub-specialty.

Recommended non-psychiatry electives include those which provide a foundation in internal medicine (such as medicine sub-specialties), experience in treating patients with a chronic illness, experience with a geriatric population for those considering geriatric psychiatry, or a pediatric population for those considering child psychiatry, and in anything that interests you – this is your last opportunity for such a wide range of non-psychiatry electives, and we recommend you use this time to explore your interests.



Suggested interview months

USMLE Step 2 should optimally be completed by August. Some programs will not offer an interview without your Step 2 score.

Leave one month open in November, December or January for interviews (most students pick November or December). Electives can be scheduled during the other two months, as up to 5 days off are allowed to interview. Students who anticipate many out of state interviews sometimes take a second month off or schedule an online elective during interview season which provides extra flexibility.

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■ USMLE Step 2CK: timing/target scores/etc.

Psychiatry residency programs differ in their focus on Step 1 and 2 scores, however in general programs look holistically at residency candidates. Although higher scores are helpful, there is no benchmark score needed to apply to psychiatry for residency.



■ Letters of recommendation

Psychiatry residency programs typically require three, sometimes four LORs. The maximum number of LORs you can assign to one program through ERAS is four. Most psychiatry applicants will have two LORs from psychiatrists and one LOR from a faculty member outside of the field of psychiatry. Due to the COVID19 pandemic, there is currently only one LOR from a psychiatrist required.

Consider asking attending physicians with whom you have worked closely and who can write directly about your clinical skills and your work as part of the healthcare team. You do not need a LOR from the departmental chair when applying to psychiatry.



■ Recommended documents

The **Roadmap to Psychiatric Residency** is a new informational tool which came out in 2021 and was created by leadership in multiple psychiatry organizations including ADMSEP (Association of Directors of Medical Student Education in Psychiatry) and AADPRT (American Association of Directors of Psychiatric Residency Training).

<https://www.psychiatry.org/residents-medical-students/medical-students/apply-for-psychiatric-residency>

It expands on many of these sections and includes information about applications, the personal statement, and residency interviews.

You can also find more information about the field of psychiatry specific to medical students at the following websites. The APA and AACAP are free to join for medical students.

- American Psychiatric Association (APA) – Psychiatry as a Career and Student Opportunities
<https://www.psychiatry.org/residents-medical-students/medical-students>
- American Academy of Child and Adolescent Psychiatry (AACAP)
https://www.aacap.org/AACAP/Your_Career/Medical_Students/AACAP/Medical_Students_and_Residents/Medical_Students/Home.aspx?hkey=3f163f79-71fb-4b2f-a1d4-dd42f59d21f4
- Association of Directors of Medical Student Education in Psychiatry (AADPRT) – Information about Sub-specialty Options within Psychiatry
<https://www.aadprt.org/trainees/psychiatry-subspecialty-fellowship-training>
- Psychiatry Student Interest Group Network (PsychSIGN)
<https://www.psychsign.org/>



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Additional Information

Specialty Highlights

- Career satisfaction in psychiatry can be greater than in many specialties
- Psychiatry offers the opportunity to know patients in greater depth and work in a multidisciplinary team
- There are options for a flexible lifestyle, which includes part-time opportunities
- Varied practice settings include hospital, clinic, academic, agency consultation, etc; from solo private practice to group employment options with some psychiatrists practicing in multiple locations (ex. part-time outpatient, part-time consultation liaison)
- From biologically-based treatments, to psychodynamic psychotherapy, to new interventional psychiatry treatments, and any combination in between, there is a wide range of treatment options within the field
- The specialty has a potentially longer span of professional practice
- Psychiatry has lower malpractice insurance rates than in many other specialties

Cautions

- This is not a “quick fix” specialty
- You need to know yourself and your limitations
- Some colleagues mistakenly believe psychiatry is not a true medical specialty; in fact, it is immersed in the neurosciences, and imaging and neuropsychiatry offer great promise re: future diagnostic and treatment options
- Income is on par with many specialties, less than procedure-based specialties (but those specialties also have higher malpractice premiums) and is a shortage specialty

Typical Training Patterns

- Four-year residency, usually done from PG-1 through PG-4 (Option to begin Child/ Adolescent sub-specialization as a PG-4)
- Minimum of 4 months Primary Care and 2 months Neurology required

Common Subspecialties

- Addiction, done as a PG-5
- Child/Adolescent (the only 2-year fellowship; can begin as a PG-4 or PG-5)
- Forensic, done as a PG-5
- Geriatric, done as a PG-5
- Consultation Liaison (C/L) Psychiatry, done as a PG-5

Special Options

- “Triple Board” (Peds-Psych-Child Psych) Program is 5 years in length and is offered in 10 locations across the country; www.tripleboard.org
- Combined residencies with Family Medicine, Internal Medicine, and Neurology



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■ Contact Us with Any Psychiatry Specialty Questions

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