



ELITE MEDICAL PREP

Brief Overview of the Test

&

Some Best Practices & Suggestions



Disclosures

- Founder and President of Elite Medical Prep LLC
 - Specializes in 1-on-1 Tutoring for the USMLE



OUTLINE

- 1. Whose advice is this?
- 2. Why's this important?
- 3. What do you recommend?









Our Team

We are a group of healthcare professionals who have attained exceedingly high scores on our USMLE exams, and have dedicated our time to helping medical students achieve their own testing and professional goals. We want our students to see the USMLE as an opportunity to shine rather than as a barrier to residency acceptance.



Kenneth Rubin, MD
Co-founder and CEO

Mt Sinai USMLE Course Director

Mt. Sinai | Columbia University



Marcel Brus-Ramer, MD/PhD
Co-founder and President

Board Certified Radiologist Columbia P&S Online Lecturer

Columbia University | UCSF | Rutgers | Paris Diderot

With nearly 19 years and 10,000+ hours of combined USMLE teaching and tutoring experience, the founders of Elite Medical Prep ("Elite"), Kenneth Rubin, MD and Marcel Brus-Ramer MD/PhD, have developed a unique system of 1-on-1, small group and lecture-based instruction to maximize USMLE preparedness for students of all levels and backgrounds.

Where does the advice come from?

We are a group of healthcare professionals who have attained exceedingly medical student our students to

high scores on • Current & former medical students

Recently taken these exams

High scorers: all tutors scored >245

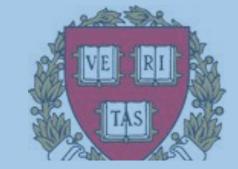
Tutored professionally for these exams

 Actively interested in education & academic medicine

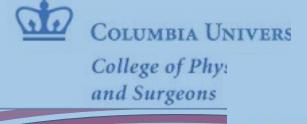
Some practicing physicians

SCHOOL OF MEDICINE

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Your Medical Education vs Your Quality of Life

Awesome
OK
OK
OK
Other

Terrible!

Premed



USMLE Step 1 Basics

- 280 multiple-choice test items
- 7x 40-question/60-minute blocks in an 8-hr testing session
- Scoring 3-digit; mean 230, SD 20, Pass > 194 (as of Jan 1st)
- 45 minutes of breaks—to use as you wish between blocks (additional 15 min if you skip the tutorial by doing it at home!)
 - Becoming more clinically oriented
 - > Tests ability to "apply important concepts of the sciences basic to the practice of medicine"
 - Questions require linking together various pieces of knowledge
 - Increased focus on population health and safety science



USMLE Scoring







U-\$\$\$-MLE

- NBME only cares about 3 month eligibility period
- Pick eligibility period wisely

For Students and Graduates of Medical Schools in the United States and Canada Accredited by the LCME or AOA

	2017 Fees	Effective Dates for 2017 Fees	
Step 1	\$605*	Three month eligibility periods beginning November 1, 2016 - January 31, 2017 and ending October 1, 2017 - December 31, 2017	
Step 2 CK	\$605*		
Step 1 and 2CK	\$70	Eligibility Period Extension (requests received starting January 1, 2017)	
Step 2 CS	\$1,280	For completed applications received starting January 1, 2017.	

	2018 Fees	Effective Dates for 2018 Fees	
Step 1	\$610*	Three month eligibility periods beginning November 1, 2017 - January 31, 2018 and ending October 1, 2018 - December 31, 2018	
Step 2 CK	\$610*		
Step 1 and 2CK	\$70	Eligibility Period Extension (requests received starting January 1, 2018)	
Step 2 CS	\$1,285	For completed applications received starting January 1, 2018.	

Next year's application materials will be available in the second half of September.

For information about taking Step 1 and Step 2 CK at international centers and regional surcharges email <u>USMLEreg@nbme.org</u> or call 215-590-9700.

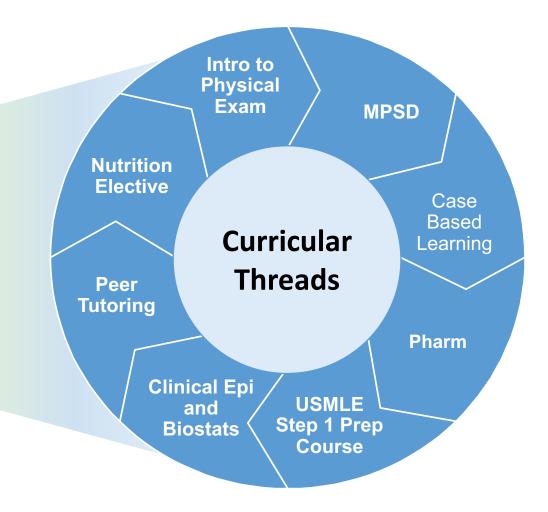
Sackler SOM 2nd year: Systems and USMLE

NBME Exam Week

NBME Exam Week

NBME Exam Week

	2 nd Year: Systems	# of Weeks
	Neurological	4
	Respiratory	3
	Cardiovascular	3
	Renal	3
	Hematological	3
	Gastrointestinal	3
	Endocrine	4
2	Reproductive	4
	MSK/Derm	2
	Psychiatry	1
	IE Comprehensive Exam & MLE Step 1 Study Period	6.5





Why is the test important? Why do residencies care so much?

Filter applications quickly

There are tests throughout medical education—you need to show you can pass them.

Those that can't pass, can't get licensed.

Non-working resident is a major problem for a residency

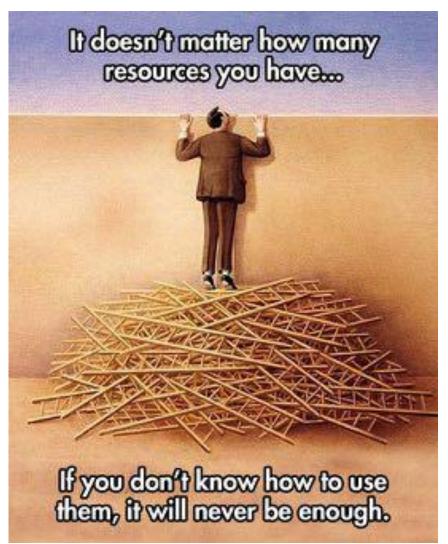
A 28 year old male had a fall from a 30 foot height. Before being intubated due to

hypotension, he reporter and an axial CT image f pelvic stabilization, wha



COMPOSITE BEST TIP LIST

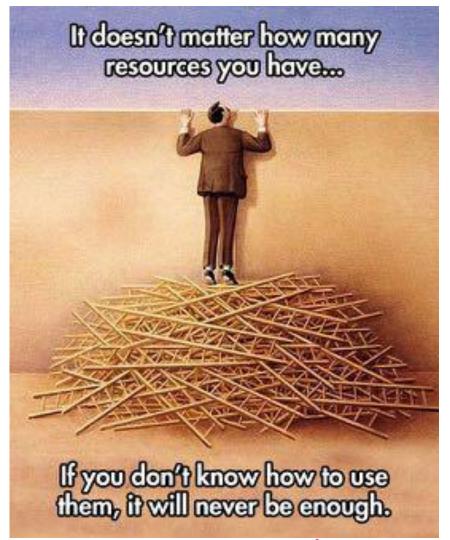
- 1. Start preparations early... very early.
- 2. Take a test. Many tests.
- 3. Limit your resources. Make Flashcards!
- 4. Create a plan and follow through.
- 5. 'Why' is more important that 'What.'





COMPOSITE BEST TIP LIST

- 6. Learn from & work with peers.
- 7. Maintain wellness activities.
- 8. If you need more time, take more time.
- 9. Get professional help if you need it.
- 10. If medical or psych problems, get professional help.





Start your preparations early



- Give yourself time to build up your knowledge.
- Starting early can mean:
 - Doing Q bank or practice questions
 - Using First Aid during your classes
 - Watching Pathoma videos
 - Reviewing Biochem
- When?
 - Now
 - Tomorrow
- Caveats:
 - Do not ignore your classes
 - Small but limited amount of time on a daily basis

Take many tests: pretesting & saving questions

Pretesting

the blockholk stall

The New Bork Cimes Magazine



#2

Why Flunking Exams Is Actually a Good Thing

By BENEDE Imagine the

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Would the question

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Pretesting with Multiple-choice Questions Facilitates Learning

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Abstract

Taking a test before study can improve subsequent learning of that pretested information. How the pretest affects subsequent learning of other information in the passage is less clear, however. In three experiments, we examined the consequences of taking a multiple-choice (MC) pretest on the later recall of both pretested and non-pretested related information, finding that pretesting improved recall of pretested information without impairing recall of nonlearned material. Thus, the observed improved recall of pretested information should reflect the consequence of processes other than successful retrieval.

Pretesting may be beneficial because it encourages more active involvement in learning, perhaps by increasing general interest in the topic. Additionally, the pretest may help students to discern what information is most important or what type of information the teacher is likely to test later.







Limit your resources. Make Flashcards!

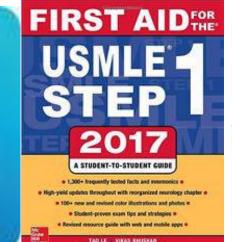
#3



VS















Video Series

















Platform	✓ Key Positives
P/22	✓ Best illustrations
OSMOSIS	✓ Comprehensive without being overly detailed
(Camosia	✓ Study schedule tool is unmatched
	✓ User friendly; Integrated with key resources
	✓ Mobile friendly
▲ AMBOSS	Comprehensive, but very detailed
AIVIDO33	✓ Guidance Mode in Qbank
	✓ Embedded key resources
â	✓ User friendly
§ SketchyMedical	✓ Great videos & illustrations
	✓ Uses memory palaces / active learning
Pathoma	✓ Presents path/pathophys in manageable chunks
T GETTOTTICE	✓ Videos have high rewatchability
	✓ Well organized and integrated with key resources
Boards and Beyond™	✓ Good secondary source for tough topics
	✓ Good integration of pharmacology and physiology
	✓ User friendly
Online MedEd	✓ comprehensive for shelf exams
	✓ Excellent videos
KAPLAN)	✓ Large question bank and practice exams
	✓ Mobile friendly
usmle	✓ Good review of basic USMLE tenets with references to
usifile	First Aid

Platform	√ Key Positives	XKey Negatives
ÖSMOSIS	 ✓ Best illustrations ✓ Comprehensive without being overly detailed ✓ Study schedule tool is unmatched ✓ User friendly; Integrated with key resources ✓ Mobile friendly 	 Qbank lower difficulty vs. Uworld Some flashcards are overly simple Some videos can be lengthy
▲ AMBOSS	 ✓ Comprehensive, but very detailed ✓ Guidance Mode in Qbank ✓ Embedded key resources 	Not user friendlyIllustrations are somewhat dullNo study schedule Tool
SketchyMedical	✓ User friendly✓ Great videos & illustrations✓ Uses memory palaces / active learning	Harder to use on short timelineAppeals to certain type of learner
Pathoma	✓ Presents path/pathophys in manageable chunks✓ Videos have high rewatchability	Not comprehensive across all topics - Best as supplement to other resourcesPassive learning only
Boards and Beyond™	 ✓ Well organized and integrated with key resources ✓ Good secondary source for tough topics ✓ Good integration of pharmacology and physiology 	Overly comprehensive and detailed/low-yieldGraphics are very basic and low qualityJust videos, no Qbank
Online MedEd	✓ User friendly✓ comprehensive for shelf exams✓ Excellent videos	➤ Qbank is lacking, explanations aren't comprehensive
KAPLAN)	✓ Large question bank and practice exams ✓ Mobile friendly	 Too much content/low yield Low video quality Not well integrated with resources No flashcards
usmle	✓ Good review of basic USMLE tenets with references to First Aid	OutdatedObank far inferior with typos and errors

Confirm the quality of resources you will use

For Books and Q Banks:

- Ask Peers
- Follow the historical patterns
- USMLE Medicine doesn't change much from year to year

For Courses:

- Ask Peers
- Be careful with live courses
 - \$\$\$\$\$ for travel and accommodations
- Passive lectures do not replace active learning
- Confirm pricing & refund policy

For Tutoring:

- Ask Peers
- Google your tutors
- Avoid false promises and score guarantees
- Ask for references
- Ask for a trial session/sample
- Confirm pricing & refund policy

Plan creation & follow through

Organ-based System of Studying

➤ Much preferred to Physiology then Pathophys

Budget time to do all questions TWICE

➤ Divide: # of Questions / # of Study Days

➤ TIMED versus TIMED TUTOR mode

Use external forces to help you maintain the schedule

➤ Peers, Family, Friends

➤ Programs, Apps

≻Tutors

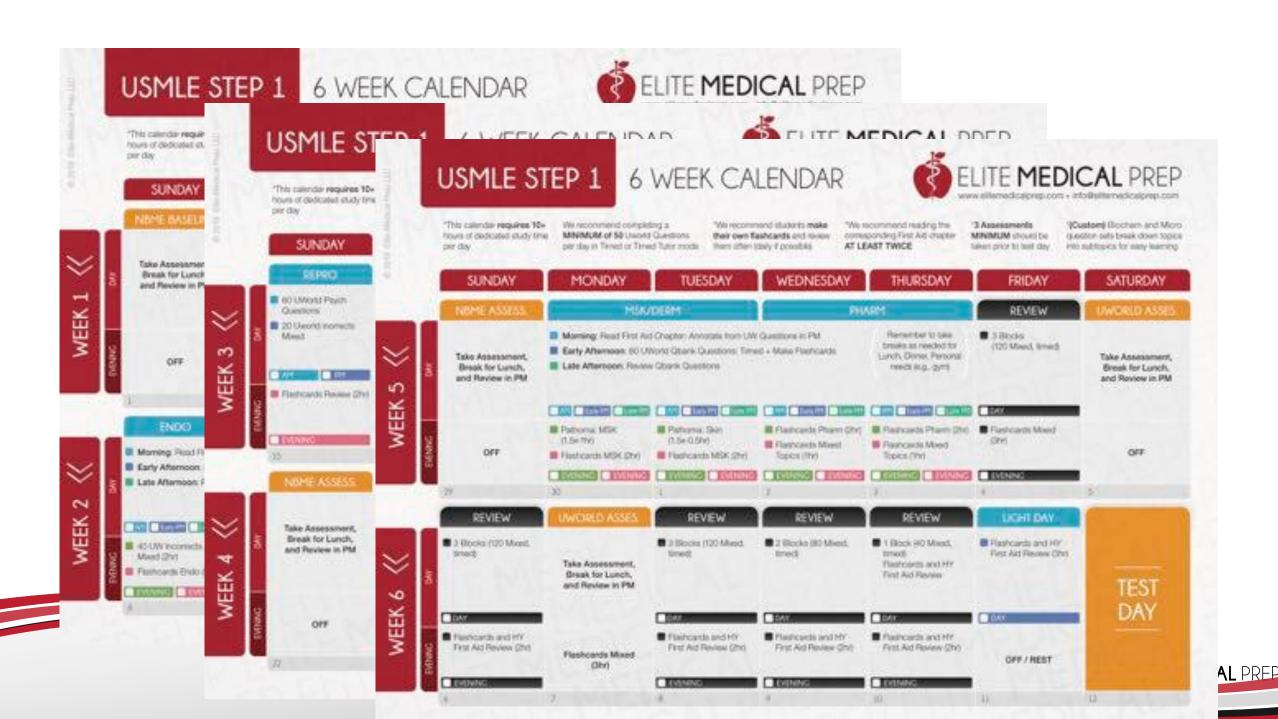
You will not 'catch up' with half days of studying

➤ Budget in catch up days

➤ Reward yourself with fun evening activities

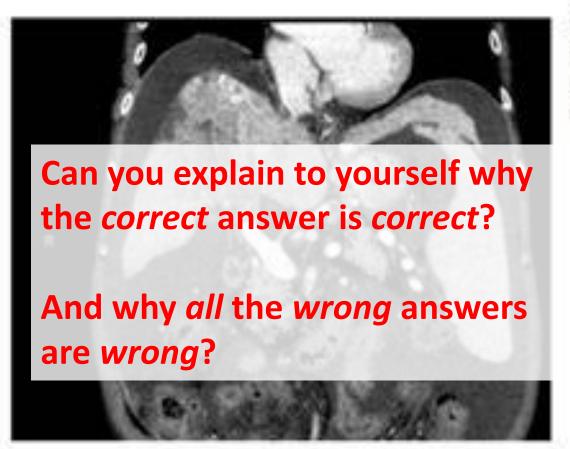






'Why' is more important that 'What.'

A 55 year old man comes to the emergency department because of sudden onset acute abdominal pain, nausea, vomiting, and bloody diarrhea 3 hours ago. He has a long-standing history of cirrhosis. His blood pressure is 95/48. His abdominal wall is rigid and tender to palpation with loss of bowel sounds. CT of the abdomen reveals:



During surgical intervention, a third of the small intestine is found to have a dark purple-red hemorrhagic appearance. Which of the following is the most likely diagnosis?

- A) Necrotizing enterocolitis
- B) Ulcerative colitis
- C) Pseudomembranous colitis
- Wilson's disease
- E) Bacterial enteritis
- F) Acute mesenteric arterial thrombosis
- G) Mesenteric venous thrombosis
- H) Acute pancreatitis
- Whipple disease



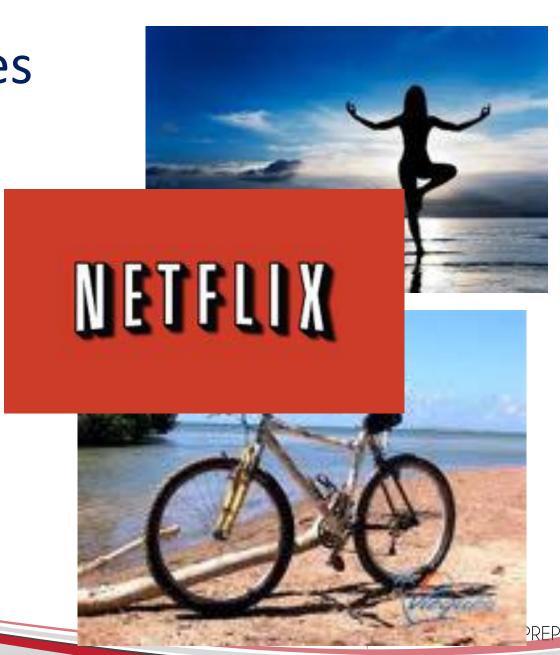
Learn from & Work with your peers

Peers. Peers. Peers.



Maintain wellness activities





If you need more time, take more time...





Often you need less time than you've been allotted

HOWEVER...

- The key is not to fail the test—at any cost
- Extra time should be used intensively. Avoid a sense of complacency.
- Poor use of extra time will not help you and can definitely hurt you!

Krebs Cycle

Neuroanatomy

Arachadonic acid pathway



Get professional help if you need it



- Courses
 - ➤ If you didn't attend classes at all or have forgotten everything
- Tutors
 - Focused Improvement
 - Personalized Planning
 - > Flexible Scheduling



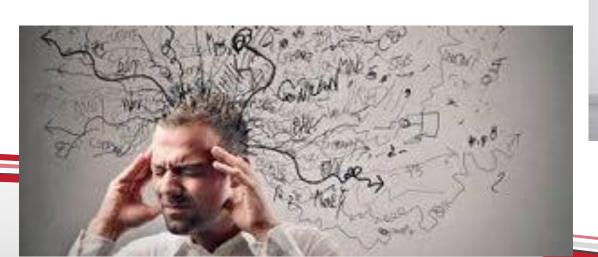


#10

Medical or psych issues













COMPOSITE BEST TIP LIST

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A Sample Question Breakdown



A 26 year old woman is brought to the emergency department by her roommate because of vomiting for 4 hours. She also has a 2 day history of fatigue and dizziness on standing. She has had severe heartburn for 3 months; treatment with over-the-counter antacids has provided some relief. The vital signs of the patient are T 35.6C (96F), pulse 110/min, and blood pressure 80/55 mm Hg. Physical examination shows marked pallor. Laboratory studies show a hemoglobin concentration of 6 g/dL and hematocrit of 18%. A chest x-ray is obtained (shown) and a pulmonary catheter is inserted and laboratory values are measured.

The patient is most likely experiencing which of the following types of shock?

- A) Anaphylactic.
- B) Cardiogenic.
- C) Hypovolemic.
- D) Neurogenic.
- E) Septic.





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How to Approach a Prompt/Question and Answers Begin with the End

- Read the question stem.
 - Understand what the question is asking you to do
 - > Ex: "What's the most likely diagnosis?"
 - Ex: "What is the underlying mechanism?"Ex: "Which serum marker will be decreased?"

 - > Ex: "What is the side effect of the likely drug given?"

Note: Distractor answers will fit only 1 clue or some of the information given, not ALL

- > Ex: "What's the next best step?"
- Note: As a general rule, except in emergencies, the **least** invasive test or procedure that helps the patient is usually correct
- Allows you to maintain focus. Especially on longer vignettes
- Avoids a common pitfall: students know the vignette but answer the 'wrong' question about it.



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How to Approach a Prompt/Question and Answers Let the answers help you, not hurt you.

- **2** Scan the answer choices
 - See if you can break them down into categories or buckets
 - Read the answer choices quickly and categorize them
 - **Example:**
 - A) Anaphylactic.
 - B) Cardiogenic.
 - C) Hypovolemic.
 - D) Neurogenic.
 - E) Septic.
 - A & E are immune mediated
 - ➤ We would expect signs of allergic reaction, infection, and/or a history of an exposure.
 - B & D are related primary dysfunction of an organ system
 - Look for a clear finding that points to the heart or the autonomic nervous system/spinal cord



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How to Approach a Prompt/Question and Answers Let the answers help you, not hurt you.

Actively read the prompt, highlighting the key findings, and summarizing in your own words as you go`

As information is given, begin piecing it together into a bigger picture

- > Your "big picture" summary will be immensely helpful in selecting an answer
- > Focus on the 3 pieces of history that reveal the diagnosis
- Summary:
 - > Young woman with acute onset GI symptoms presenting in shock with tachycardia and anemia, but no fever
- Use the summary to help narrow down answer choices.
 - Always try to use Process of Elimination (POE)
 - > Helps to find the right answer
 - > Helps exclude the wrong answers
 - ➤ Increases your confidence that you are right → reduces 2nd guessing yourself!

<u>Caveat:</u> don't box yourself in to picking a bad answer. If you eliminate all the answers or are left with only bad answers, **START OVER.**



A 26 year old woman is brought to the emergency department by her roommate because of vomiting for 4 hours. She also has a 2 day history of fatigue and dizziness on standing. She has had severe heartburn for 3 months; treatment with over-the-counter antacids has provided some relief. The vital signs of the patient are T 35.6C (96F), pulse 110/min, and blood pressure 80/55 mm Hg. Physical examination sleep and a pulmonary catheter is inserted and laboratory values are measured.

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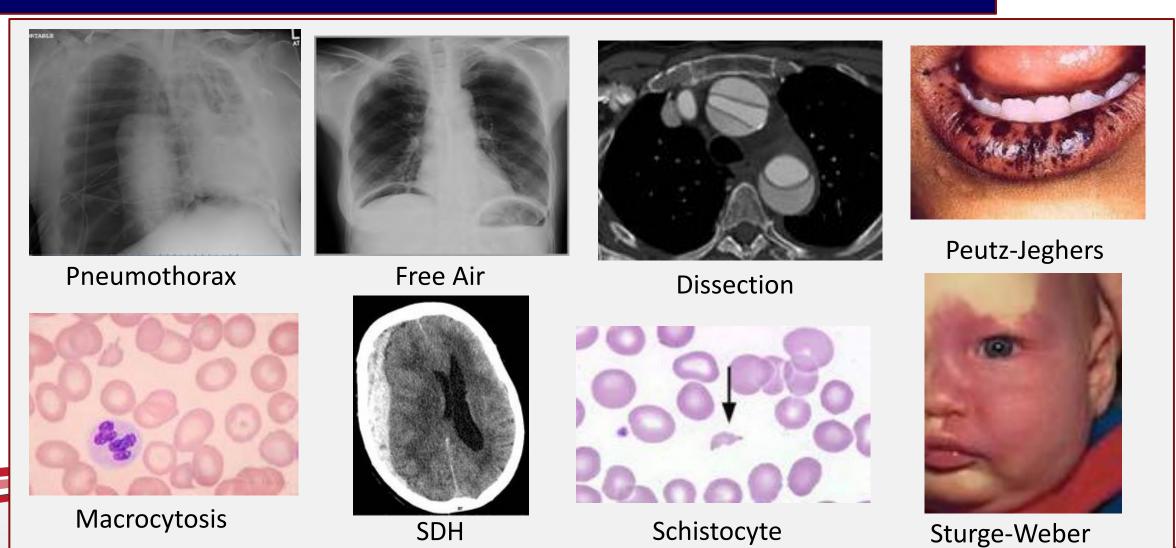
How to Approach a Prompt/Question and Answers Learn key normal values. Look at images last /ignore.

- 4 Strong familiarity w/ lab values will reduce anxiety/confusion later.
 Imaging is important in the real world of medicine. Not so much on the test.
 - Chem 7 and CBC must be memorized. Vitals must be burned in your memory forever!
 - > Develop sense of upper/lower limits for Na, K, Cl, Cr, Ca, BUN, Glu, Hgb, Hct, WBC, Plt
 - Look at images LAST, if at all
 - > Radiology Imaging You are NOT a radiologist.
 - > Do not need to make radiographic diagnoses
 - > Rare exceptions (i.e ptx, free air under diaphragm, Epidural, SDH or SAH)
 - Patient Pictures
 - Lesions can be helpful if they are pathognomonic for a disease process
 - ➤ i.e mucosal lesions for Peutz-Jeghers.
 - Smears/Histology
 - ➤ Blood smears helpful for basics: micro vs macrocytosis, cell type (e.g. schistocyte) and relative cell size
 - > Not expected to undertake detailed smear analysis without supporting history



How to Approach a Prompt/Question and Answers

Example rare images that are highly helpful



How to Approach a Prompt/Question and Answers

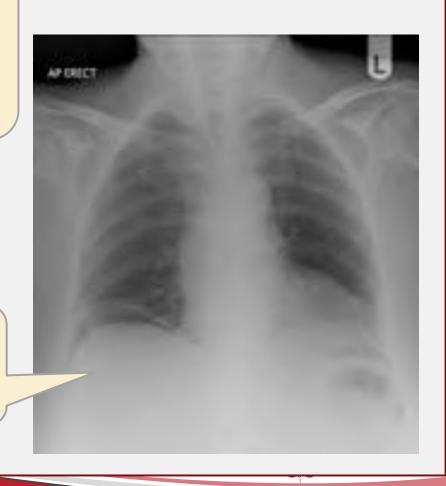
Employing a standardized approach to USMLE prompts ensures you will get the most out of each question

4

Hemoglobin 6 g/dL and hematocrit of 18%.

T 35.6C (96F), pulse 110/min blood pressure 80/55 mm Hg Understand the labs, <u>KNOW</u> the normal values

Images are rarely helpful on the USMLE



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- 1 The question stem tells you what the question is asking
 - The answer choices gives you some context as to what the question is about
 - The prompt highlight <u>three</u> important pieces of information; summarize in your own words the key information as it's given; ensure that the answer matches ALL of the information given, not just some
 - Labs and images EVAL the labs. IGNORE the images.

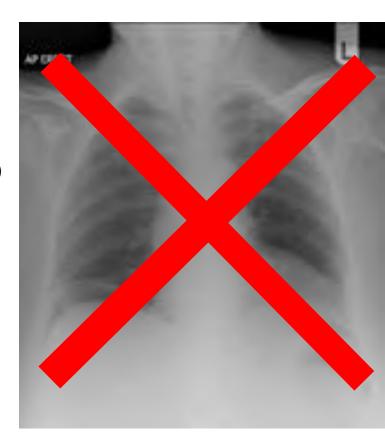
EMP's SUGGESTED ORDER.
There is no one right way to do this.



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- Golden Rule: If an answer jumps out at you, choose it. DO NOT change it (unless you re-read and are 100% sure it's wrong)
- If an answer does not jump out at you→ Process of Elimination

Think about what you would expect the prompt to give you for each answer:

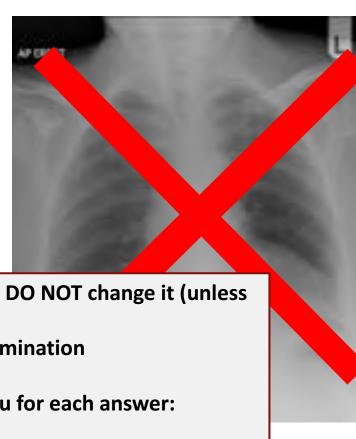
Anaphylactic-

Cardiogenic-

Hypovolemic-

Neurogenic-

Septic-



EDICAL PREP

Contact us with questions:

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