

# USMLE Step 1

## Alfaisal Experience Report



July 2020  
1<sup>st</sup> edition





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### **Acknowledgements**

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Dr. Khalid Jazieh  
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Dr. Ismail Mohammed Shakir (Director, International Office, CoM)  
Randa Yasin (Co-Director, International Office, CoM)

And other visionaries of the Alfaisal Medical Alumni Association (AMAA, now known as Alumni Relations Office (ARO)) for laying down the foundation of this project and selflessly initiating several other initiatives for the benefit of their juniors, their colleagues and Alfaisal at large.

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# A MESSAGE FROM OUR DEAN



Prof. Khaled Al Kattan  
Dean,  
College of Medicine,  
Alfaisal University

Alfaisal University allows students from all different backgrounds to meet and learn together. Our College of Medicine is proud to have produced top quality graduates that have left a lasting impact wherever they have gone. Over the years, it has created numerous opportunities for students to participate in student organizations which help empower them.

The International Office is one such example that admirably stands out. The IO functions in a multifaceted domain, facilitating international and local collaborations for research internships and clinical training as well as shedding light on student development. It has created this spectacular conglomerate that puts the art of practicing medicine under a multitude of lenses, hence making it possible for students to gain exposure to an abundance of experiences that can sharpen their skills.

The International Office has made sure that there is no stone left unturned when it comes to the horizon of opportunities in the medical world waiting for our budding physicians to embrace. They have made sure that every student under our umbrella is equipped with the necessary information and support when it comes to making crucial decisions in their career paths. This booklet manifests their outstanding accomplishments and is a means of bridging the gap between our alumni and our current student body.

Our exemplary students are at the heart of this organization that continuously strives to make Alfaisal better for the future generations to come. I am proud to be a part of this momentous time in the history of Alfaisal and have no doubt that this is just a stepping stone for many great things to come.

# A MESSAGE FROM OUR VICE DEAN

**OF QUALITY ASSURANCE AND ACCREDITATION & FACULTY ADVISOR**



Dr. Akef Obeidat,  
Vice Dean of Quality  
Assurance and  
Accreditation & Faculty  
Advisor  
College of Medicine,  
Alfaisal University

The International Office was established to bring unique opportunities from across the globe to the doorstep of the College of Medicine, here at Alfaisal. The Alumni Relations Office (ARO) was instituted under the International Office to foster relationships with our esteemed alumni around the world.

Just like our multi-cultural student background we are proud to say that our alumni are part of reputable professional training programs locally and internationally as well. ARO helps tether alumni to their alma mater and allows them to relay back their experiences and knowledge gained with current students.

The Alumni Relations Office (ARO) envisions to achieve their mission through consistently sharing valuable senior guidance, organizing events and networking meets, and providing training and mentorship opportunities.

When the call of duty comes, the IO goes above and beyond to ensure that nothing but the best is offered to nourish our students' opportunities, skill set and most importantly the ability to envision a bigger picture. Time and again they have proved to be a true Alfaisalian: aiming for the stars and along the way sharing that stardust to uplift their colleagues too.

A continuum of quality is apt for describing their efforts and this booklet is just another testament to their exemplary achievements. I am excited to witness the incredible growth that is yet to unfold in the years to come for ARO and hence IO.

# 2020 FROM THE DIRECTOR'S DESK



Several years ago, the “USMLE Experience Report” project was initiated by a group of seniors. Their vision was unprecedented - to gather the experience of Alfaisal students taking the USMLE and synthesizing the data into a comprehensive report that would provide evidence-based guidance and recommendations to all students preparing for or planning to take the USMLE.

This is it. On behalf of the Alumni Relations Office (ARO) of the MSA International Office (IO), I'm extremely proud to be sharing this report with you all.

*Through this, we present to you the accumulated experience of more than 50 Alfaisal students who have successfully taken the USMLE Step 1 exam over the past years, with data collection beginning in May 2017.*

The report includes descriptive information regarding our survey population, their academic and USMLE characteristics as well as associated information regarding their preparation (resources used and preparation timeline). We also attempt to answer some of the hottest Step-1-related questions by testing for correlations between students' Step 1 score and factors such as GPA, number of First Aid and UWorld passes, study duration and more. Critical commentary and relevant senior advice has been included throughout the report to add an insightful perspective to all the numbers and graphs. Towards the end, we've included a few valuable pieces of guidance. Finally, as an added bonus, we wrap up the booklet with a list of residency programs our graduates have received interview invitations from over the years.

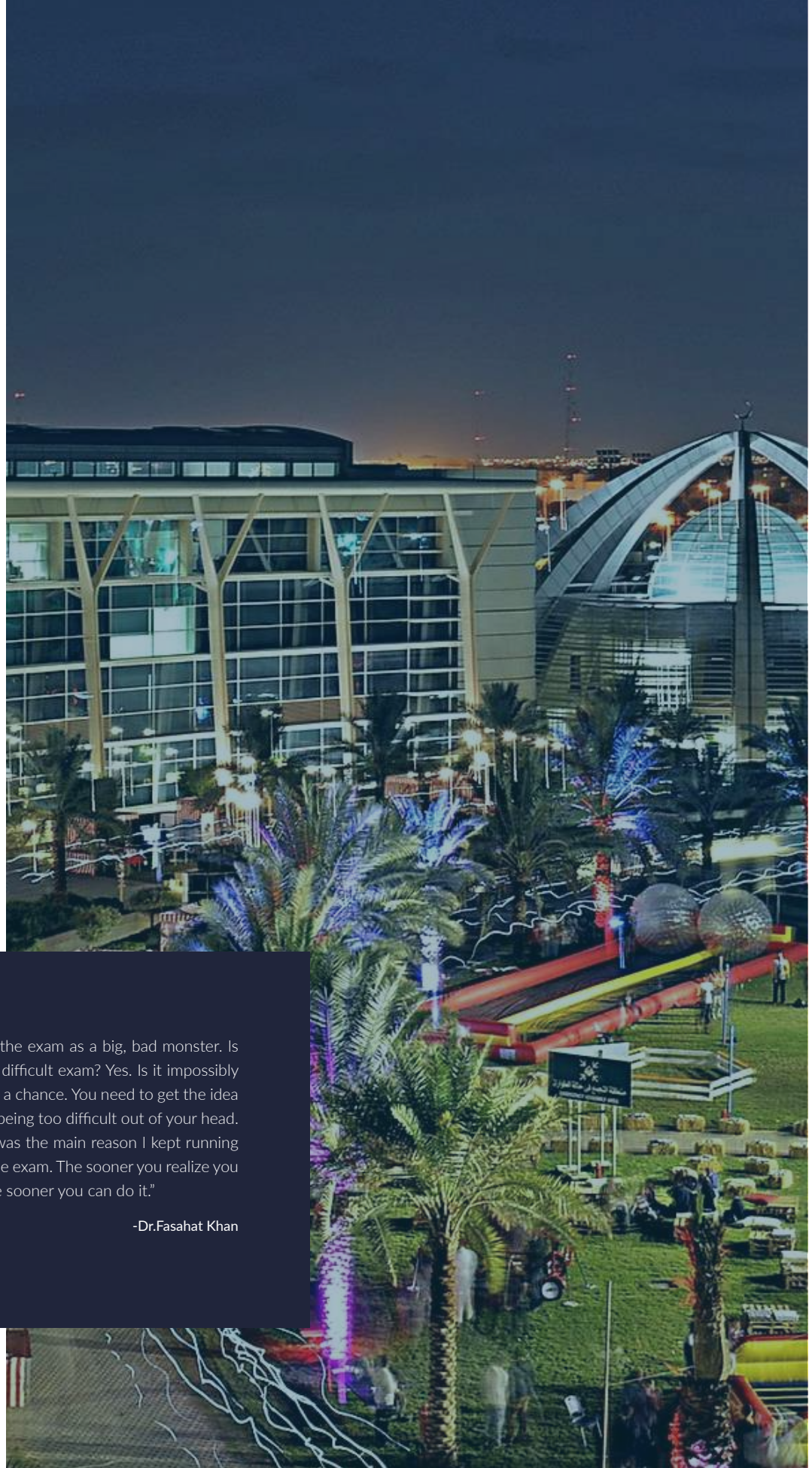
Dear colleagues, selflessness and service should be the very fabric of what it means to be at Alfaisal. The quality of selflessness underpins this report. The founders of this project were determined to not let their juniors go through the challenges and difficulties they themselves faced due to the existing lack of knowledge and experience. Despite Alfaisal's stellar achievements, its young age necessitates that we hold on tight to quality of selflessness, that we help each other rise above our common challenges. This cycle of guidance that was set into motion by our seniors must continue. That will require a coordinated effort from all of us to ensure knowledge and experience keep circulating across generations for as long as Alfaisal exists.

A handwritten signature in blue ink that reads "Omar Javed Baqal".

Omar Javed Baqal  
Director, ARO  
Advisor, IO

*“If I have seen further than others, it is by standing upon the shoulders of giants.”*





"Thinking of the exam as a big, bad monster. Is the Step 1 a difficult exam? Yes. Is it impossibly difficult? Not a chance. You need to get the idea of the exam being too difficult out of your head. This notion was the main reason I kept running away from the exam. The sooner you realize you can do it; the sooner you can do it."

-Dr.Fasahat Khan



# SECTION: 1

## USMLE Step 1: A Brief

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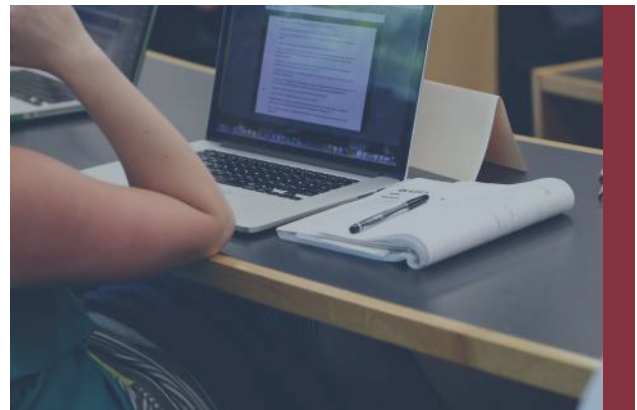
The United States Medical Licensing Examination<sup>®</sup>  
(USMLE<sup>®</sup>) Step 1



# USMLE STEP 1: AN INTRODUCTION

The United States Medical Licensing Examination® (USMLE®) is a three-step examination for medical licensure in the U.S. The USMLE assesses a physician's ability to apply knowledge, concepts, and principles, and to demonstrate fundamental patient-centered skills, that are important in health and disease and that constitute the basis of safe and effective patient care.

The USMLE Step 1 is a one-day computer-based exam taken by most US medical students at the end of their second year of medical school. It is also taken at any point of their medical career (during medical school, after graduation, 10 years after graduation, etc) by thousands of international medical graduates (IMGs) who wish to join Graduate Medical Education (GME) programs in the United States such as residencies and fellowships. The Step 1 includes no more than 280 multiple-choice questions and spans 8 hours of testing, broken down into seven 1-hour blocks of 40 questions each.



## Exam Contents

According to the USMLE, each Step 1 exam covers content related to the following traditionally defined disciplines:

- Anatomy
- Behavioral sciences
- Biochemistry (including genetics, molecular and cell biology and nutrition)
- Biostatistics and epidemiology
- Immunology
- Microbiology
- Pathology
- Pharmacology
- Physiology



Step 1 is a broadly-based, integrated examination that classifies test items along two dimensions: processes (eg, normal structure and function, therapeutic principles, etc) and systems (eg, hematology, cardiovascular, renal, etc).

Test items commonly require you to perform one or more of the following tasks:

- Interpret graphic and tabular material
- Identify gross and microscopic pathologic and normal specimens
- Apply basic science knowledge to clinical problems



USMLE Step 1 score is usually reported 3-4 weeks after the exam date, unless specific announcements about score reporting delays at some points of the year are made by the USMLE

# USMLE STEP 1: PASS/FAIL ANNOUNCEMENT OUR PERSPECTIVE

Recently, USMLE made a major announcement about changes to how the USMLE Step 1 score will be reported in the future, in addition to other changes to the rules of the USMLE exams.

Read more here: <https://www.usmle.org/announcements/>



Score reporting for Step 1 will change from a three-digit numeric score to reporting only a **pass/fail outcome**, while Step 2 CK and Step 3 will continue to be reported as a numerical score. This policy will take effect no earlier than January 1, 2022 with further details to follow later this year.

Needless to say, this is a monumental change – one that has been attempted for several years. The incentive for this change emerged from the understanding that a high Step 1 score was not necessarily correlating with better clinical performance as a resident. **So why were residency programs giving it so much importance when selecting candidates?**

It has finally happened, and there are people on both sides. Many argue that IMGs will be hardest hit by it, as achieving a high Step 1 score was one of the main things keeping them in the running for prestigious residency spots. Creators of exam prep material are raging, almost calling this decision “satan’s work”, as the incentive to buy expensive video lectures and question banks could potentially drop.



## OUR TAKE

**Our take** – The decision to make Step 1 PASS/FAIL may have been taken, but it is more important to see how residency programs react to this change and how it will influence the residency selection process. Where programs before used Step 1 as a filter to exclude a considerable chunk of ineligible candidates, could we see the Step 2 CK score become the new Step 1? Many would say it makes more sense to use the CK score as a filter, since it is clinically oriented and possibly better correlates with clinical skills and knowledge of a resident.

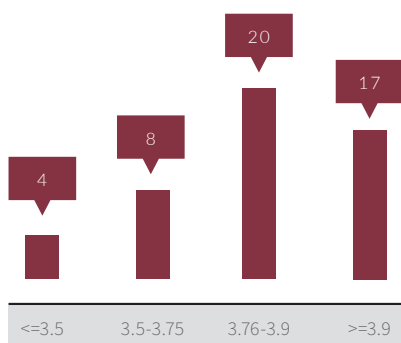
The decision might be GOOD for – IMGs and IMGs from well-known institutions and those with excellent well-rounded CVs (strong research experience, volunteering experience, LoRs). The decision might be BAD for those from less-known med schools with weak CVs. At this point, we can only speculate until there's more clarity about the consequences of this decision on the residency selection

process. Following the decision, ECFMG (Educational Commission for Foreign Medical Graduates) released a statement stating that "ECFMG is committed to the continued ability of IMGs to enter U.S. GME and offers programs that support IMGs along the continuum from international UME to U.S. GME and practice." Hopefully the impact of this decision is cushioned by active steps from the authorities to protect and promote IMG participation in US GME programs.

Understandably, study resources are not likely to change drastically. Sketchy is here to stay, and so is Pathoma. Given the uncertainties in the timeline and technicalities of the implementation of this change, it is recommended that students continue to prepare well for a numerical test, without compromising on time and effort put into it; at least until there's more clarity about the change.

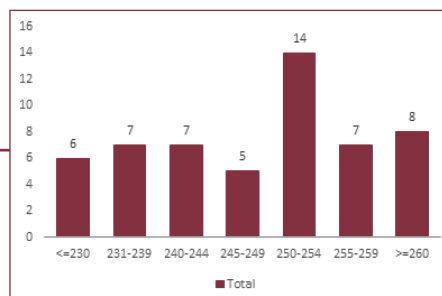
# SURVEY PARTICIPANT DEMOGRAPHICS

**57 students** who have taken the USMLE Step 1 at Alfaisal University College of Medicine up until December 2019 responded to our survey, out of which 75% were males and 16% were females. With increasing interest and awareness about the USMLEs and the US residency at large, the number of students taking the USMLE Step 1 has steadily increased over the years. It is important to note that the actual number of exam takers from Alfaisal must be much higher, as this survey population does not include all students who have given the exam.



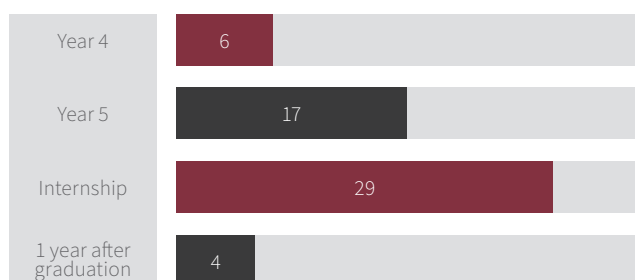
Does higher GPA mean higher Step 1 score? Later in the report, we'll explore this interesting correlation. Here, we can observe that our Step 1-taking students come from a wide range of GPA groups, with the majority belonging to the >3.75 group. GPA should not dictate one's chances of success in the Step 1 exam.

In short, **Alfaisal students are doing really really well** on Step 1. For instance, the Alfaisal USMLE Step 1 mean of 247 (as calculated based on this survey's data) is much higher than the mean Step 1 score of non-US IMGs who matched in 2018 (234). Looking at the sheer number of 240+ scores, it could be understood that Alfaisal is the best performing institution in KSA when it comes to Step 1, although it should be noted that we do not have access to objective data to make that comparison. It could be possible that our medical curriculum is underappreciated for how well it prepares us for the USMLE. Nevertheless, a very important point to take into consideration while looking at this survey-reported Alfaisal mean is possible participation bias, wherein students with higher scores are more likely to respond to the survey and share their experience than those with low scores



For so long, it was thought to be impractical to sit for the Step 1 exam during clerkships years (4th and 5th years). Most students would do the exam after finishing 5th year and before starting internship, or during internship, or even after internship. This year, the status quo was broken by current 5th year students. At the time of writing this (days prior to the semester break), several 5th years have already taken the Step 1 exam and in fact have scored extremely well.

This should be a positive motivation for all students pursuing this pathway. Nevertheless, internship appears to be the most popular time when students sit the Step 1. Seniors advise that dedicated studying be started in 4th year and the exam be given by the end of 5th year. This leaves ample time to clear Step 2 CK and CS, in addition to applying for US clinical electives in a timely manner.



# STUDY RESOURCES AND EXAM PREP MATERIAL

Unsurprisingly, “UWorld” and “FIRST AID for the USMLE Step 1” formed the study foundation for all students. 40%, 33% and 23% of the students covered FIRST AID twice, thrice and more than three times, respectively. 25%, 58% and 16% of the students covered UWorld once, twice and three times, respectively.

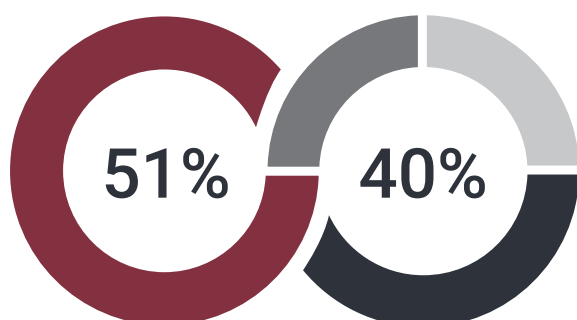
## WHAT ELSE?

Besides the common “UFAP (UWORLD, FIRST AID, Pathoma)” resources, other most commonly used resources were:

- Kaplan (33%),
- Boards and Beyond (23%),
- and BRS Physiology (18%).

Additional resources are influenced by a student’s understanding of their strengths and weaknesses, and thus these should be tailored as per need on an individual level.

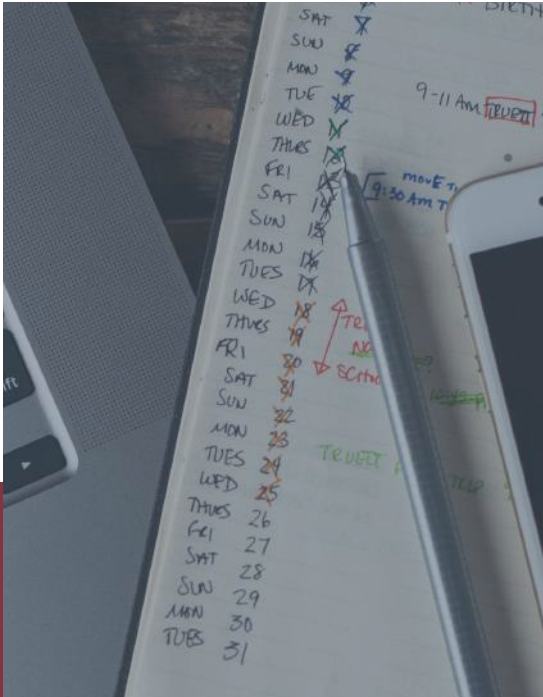
A valuable piece of advice that more commonly comes from high scorers, is to expose yourself to as many questions as possible, essentially meaning doing several question banks. This helps test your understanding of the content from different perspectives, and helps you understand how the same content could be tested in several different ways. The main utility of USMLERx Qbank is to simply help in memorizing and retaining FIRST AID material, as question quality does not correlate with that of the real exam. Amboss is an emerging Qbank with very good potential. It includes UWorld-like questions and comprehensive explanations and is generally considered a “tougher” Qbank suitable for concept-strengthening. Some unique features include “Attending Tip”, having the important points in the question highlighted automatically and being able to specify question difficulty when creating test blocks.



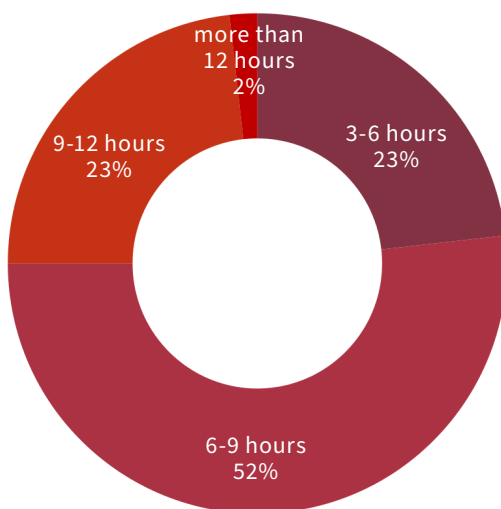
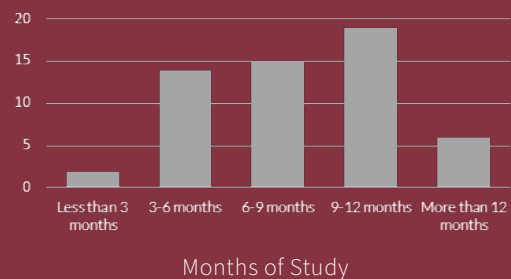
As per our data, 40% of the students began using question banks section by section with their first pass of FIRST AID while 51% started using question banks after their first round of FIRST AID. Less commonly, 2% began using Qbanks after their second round of FIRST AID and 4% started Qbanks before even using FIRST AID.

## WHAT'S NEXT?

# USMLE STEP1: STUDY PLAN



Setting a study plan and timeline is a great matter of personal circumstances and preferences. It varies greatly between individuals and depends on a wide range of factors, ranging from other commitments, baseline performance, target score (dictated by targeted residency specialty) and more. Nevertheless, I can't emphasize enough on how important it is to set a chronological goal by which you must sit the exam, while evaluating your progress and preparation at regular checkpoints. If everyone had all the time in the world to study for this exam, we would all be walking around with 270s. The point is to be sufficiently prepared to give yourself the best chance to achieve your target score; you will never be fully prepared.

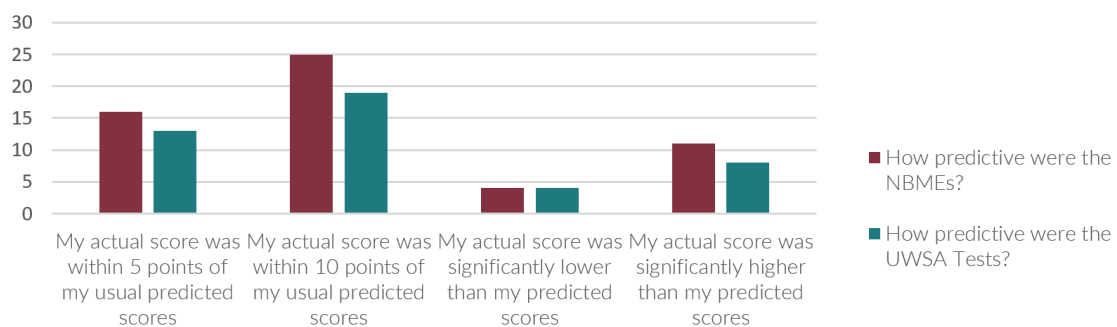


Following on the previously mentioned senior advice of starting to study seriously for Step 1 in 4th year and giving it by the end of 5th year, you would eventually enter the “dedicated study period” several months before your exam date. This is the phase of intense preparation and hammering out any remaining weaknesses, while polishing your exam-taking skills by practicing as many questions as possible, preferably in real exam-like conditions (e.g., doing timed tests on question banks making them as long as the real exam). The most common study period duration in our study was 9-12 months. With intense studying comes burnout and fatigue, thus making it very important for your dedicated study period to be long enough to allow you to prepare efficiently and thoroughly, but short enough to make stress and burnout more manageable. You'll notice from the figures that both moderate daily study duration (6-9 hours) and a moderate total study period (6-12 months) were common practice. In summary, moderation is key; don't overdo it.



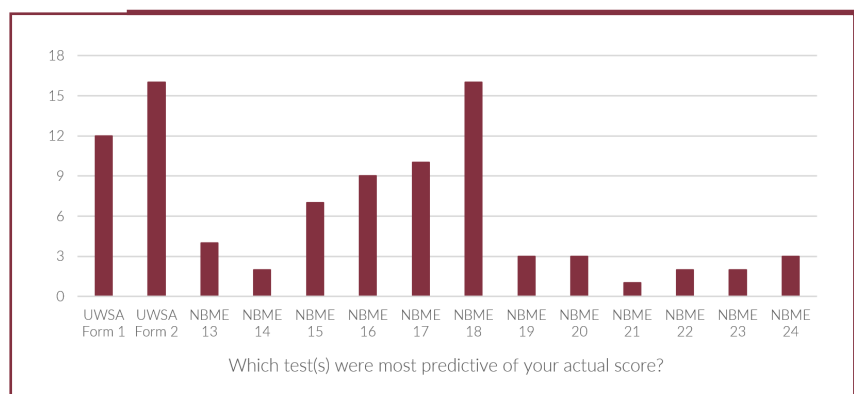
# PRACTICE TESTS: NBMEs AND UWSAS

“Trust your test scores” - you’ll come across this advice frequently when after your exam you begin counting mistakes and start panicking. Regardless of how you feel your exam went and how many questions you got wrong, quite frequently your real score will fall somewhere around your practice test scores (NBMEs and UWSAs). Here’s the catch: There are some tests which are much more predictive than others. If you look at the below figure, you will notice that statistically speaking, someone’s actual score being less than their practice scores is the most unlikely outcome.



The NBME (National Board of Medical Examiners) is the authority that oversees the USMLE exams. They also offer sample practice exams (aka Comprehensive Basic Science Self-Assessment (CBSSA), casually known as the NBMEs) that students can take either through the university or online from the comfort of their homes. Each test is 220 questions long, being 4 blocks of 55 questions each. These tests (\$60 per test or, “Form”) can help students practice questions made by the real exam makers, establish a baseline score when taken early, train their exam strategy and identify areas of improvement. In 2019, the NBME announced the new set of Forms, 20 to 24. That means students who took the exam before the release of the new Forms used the older ones - 19 and below. After the release of the new Forms, old ones were taken off with one exception - NBME 18, which has been long considered to be one of the most predictive Forms. Interesting, however, more recently students have reported that the NBME 18 has begun losing its predictability due to the curve changing over time.

The UWorld Qbank also offers 2 self-assessment tests, the UWSA1 and UWSA2. Both are 4 blocks long, with each test having 160 questions. The UWSA1 normally significantly overpredicts, thus most students don’t depend on it to assess their exam readiness and take it a month or more before their exam. However, UWSA2, as our data also suggests, is one of the most predictive tests out there, and is usually recommended to be taken a week or less before your actual test date. Kindly refer to the figure above for a relative comparison between the predictability of the NBMEs and UWSAs. It is understood that the nature of questions in UWorld and the UWSAs resonate closer to the questions on the real exam than the NBMEs, with regards to length of question stems and overall style of question structure. NBME questions are generally short and typically vague, with some Forms being notorious for making questions unnecessarily confusing and tricky.



# CORRELATIONS

**HIGHER GPA MEANS  
HIGHER STEP 1  
SCORE? THIS IS  
A NOTION THAT  
DATES BACK 4500  
YEARS. DOES IT  
HAVE ANY BASIS?**

**WELL, AS PER OUR ANALYSIS  
IT ACTUALLY MIGHT.**

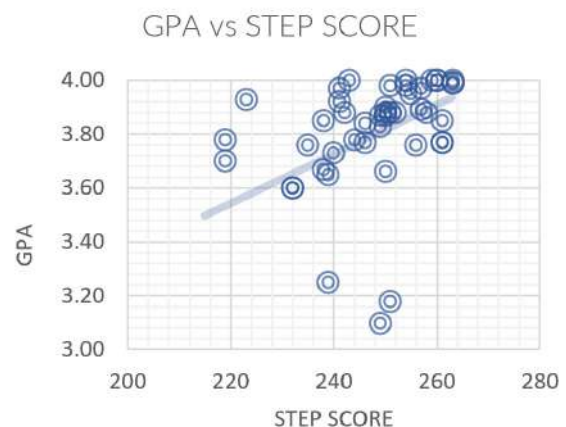
We found a correlation coefficient of +0.45 between GPA and Step 1 score, indicating a moderately positive correlation. It must be noted that there are always exceptions, just as our data set had. There are students with low GPAs who score very well on the Step 1. At the same time, there are students with extremely high GPAs who are unable to also score high on the exam, understandably to the surprise of many. The former group possibly didn't let their GPAs define them and their chances of doing residency in the US. They put together a plan, identified areas of weaknesses and worked as hard as possible.

So many different factors need to perfectly fall in place for someone to score very high - almost like stars aligning the right way. Inherent intelligence, excellent exam-taking strategy, monstrous memorization ability, well-planned study schedule and

last but not least - beast-mode exam day performance and stress management. This last factor is most commonly the downfall for the high GPA-ers who don't score equally high on the Step 1. Exam day planning and preparation can't be emphasized enough. This is the climax of months of studying, having sacrificed literally everything on the way - your hobbies, time with friends and family and sadly, maybe even your health.

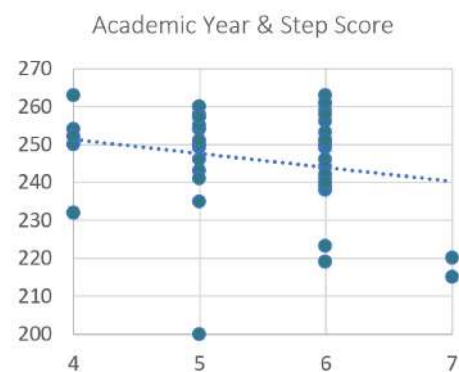
Nerves will undoubtedly be running high and feeling anxious and nervous is totally normal. Just don't let it affect your performance on the big day. The week before - actively work on clearing your mind of unnecessary negativity and self-doubt and build the mindset of a challenger and a warrior. Convince yourself that you've given this exam everything you could and prepared as well as you could. Rest is up to destiny and something that is not in your control. Your only responsibility is to go in there and crush the exam to the best of your ability.

Day before- Plan out your exam day. Prepare your bag and the snacks you'll have during your breaks. Check Google Maps and plan a route to the exam center. And most importantly, SLEEP WELL!!! You'll thank yourself for doing this. It's a long tiring exam and you need to make sure you're well rested for it. Go to bed early and do whatever you know helps you sleep well - sleeping aids, hot shower, chamomile tea, white noise, whatever!



## WE TESTED THE CORRELATION BETWEEN ACADEMIC YEAR WHEN STEP 1 WAS TAKEN IN AND STEP 1 SCORE AND FOUND A WEAK NEGATIVE CORRELATION (-0.19).

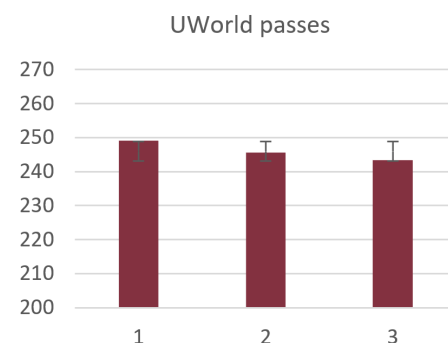
It is understood that the farther you progress from the basic science years (years 1-3), the more likely it becomes that material and concepts will be forgotten and would need to be relearned. While most of the students in our sample sat the exam when they were in their 5th year or internship, we had very few data points from students who took the exam after graduation. A contributing factor to the noted trend is also the increased number of 5th years who gave the Step 1 this year and did extremely well



We also investigated the correlations between Step 1 score and number of FA passes, UWorld passes, NBMEs done and total study period (refer to graphs)

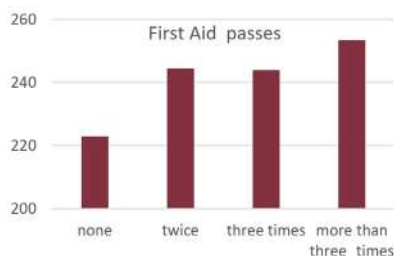
## UWORLD PASSES

The more UWorld passes, the lower the mean Step 1 score (?!), although with overlapping error bars and thus perhaps not indicative of any specific trend. It is also important to note that about ⅓ of our sample did UWorld twice, with much fewer students doing it once or thrice. Doing UWorld twice, although recommended, comes down to personal choice. One thorough UWorld pass perhaps equals 2 half-hearted UWorld passes, with regards to concept-building, memorization and retention. If someone is satisfied with their first UWorld pass and notice that they are not learning anything new on their second pass nor is it challenging them, it may be a better idea to do a different Qbank altogether



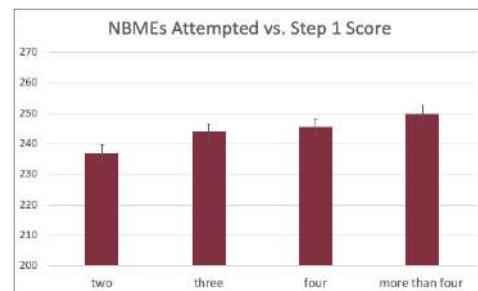
# FIRST AID PASSES

The more FA passes, the higher the mean Step 1 score, with the trend being pretty obvious. This really highlights how yield FA really is, how important it is to memorize as much of it as possible and justifies why it's called "The Bible of Step 1". Some will even casually say that the exam is about how well you know FA. Maybe not entirely true but goes on to show FA is a must-do



# NBMEs DONE

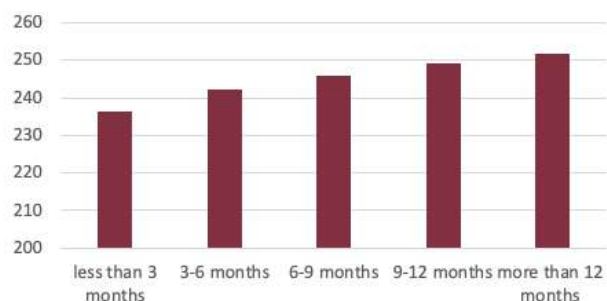
The more NBMEs done, the higher the mean Step 1 score. This highlights the role of practice tests in familiarizing yourself with exam questions, practicing your exam strategy and question approach and testing your understanding and retention of the material. Regardless of how unpredictable recent NBMEs have been or how unreflective they are of the nature of the real exam questions; they still serve as good exam practice



# STEP 1 PREP TIME

Students who studied for 9-12 months and >12 months had the highest mean Step 1 scores. The fact that they were able to put in >9 months of study means that they started early; a piece of advice that will never ever be emphasized enough. Lay out a study plan for yourself long enough to thoroughly cover all needed material, solidify all your concepts, hammer out all your possible weaknesses, practice and improve your exam strategy and exam-taking skills; all this while balancing other commitments such as personal life, family, clerkships and internship rotations.

STEP 1 prep time vs Score





Some have asked me about finding motivation to study, and the reality is that nothing I will say will give you enough motivation to study for months. You must find your own reasons.

-Dr. Al-Awwab





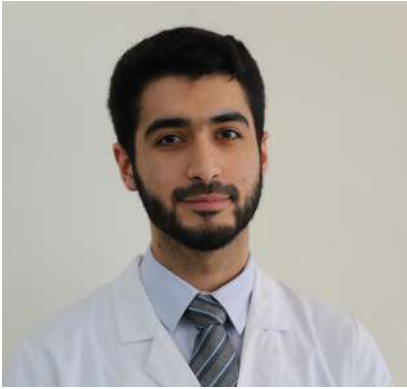
## SECTION: 2

### Alumni Advices

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We conclude the report with valuable advice from Alfaisal alumni, which helps tie down together all the statistics, number and graphs you saw in this report.





## DR. ALAWWAB DABALIZ

RESIDENT AT UNIVERSITY HOSPITALS, CLEVELAND, OHIO

# OPENING THOUGHTS

1

The biggest problem with Step 1 is the amount of information to cover and memorize. The only way to succeed in retaining such amounts is through spaced repetition. Hence you see the extreme number of passes over First Aid (FA) and the UWorld Question Bank (UW).

2

The number of FA passes mentioned below doesn't take into account any reading of FA I used to do for the university exams

3

I usually recommend people to plan way in advance. When planning your studying schedule, start from the exam date and go backwards, giving yourself a reasonable amount of time to go over everything you want. This is always the best way to plan (just like for university exams but on a much larger scale). Don't forget to include catch up days in your plan (free days to catch up to your plan), because unfortunately, however reasonable a plan is, it is very difficult to follow it perfectly

4

As you will see in the plan below, the number of study hours should increase gradually. Just like physical training, you need to build stamina and endurance gradually in order to gain the ability to study for hours on end close to your exam date

5

The most difficult thing about the USMLE Step 1 is the long and draining preparation, not the test itself. Once you go through months of prep solving thousands of Step 1 style questions, the exam itself is doable. Try to keep that in mind

6

Some have asked me about finding motivation to study, and the reality is that nothing I will say will give you enough motivation to study for months. You must find your own reasons. Literally sit down with yourself and think about the reasons you want to do the Step 1, and answers like to do residency in the US are not enough, go deeper than that, and convince yourself that this is what you want to do, and you're not just doing it because everyone else is. In the end, it is important to have your intentions or niyyah well-defined, and whenever you do anything with the right intentions for the right cause Allah will make it easy and reward you upon your efforts

# TIMELINE

This is my personal timeline with minor modifications for clarity



## FA 1st pass

Priority is getting familiar with the concepts in FA using extra resources if necessary (e.g. pathoma, youtube, google, khan academy, BRS physiology, Kaplan, etc.). The objective is to understand any new or difficult ideas mentioned in FA with minimal memorization. Timeline: 3-4 months during academic year. [Approx. 12-15 pages a day, 3 days a week]



## FA 2nd pass

Increased emphasis on memorization while revisiting the different ideas in the book. Timeline: 5 weeks during the summer (can also be done 10 weeks during the academic year). [Approx. 20 pages a day 6 days a week during the summer OR 10 pages a day, 6 days a week during the academic year]



## Implementation

For the next 6-7 weeks, I was doing UW for the first time and FA for the third time, dividing my days between both (details in the comments below).

**Timeline: 6-7 weeks during the summer.**

**a. UW 1st pass:** Answering mode: tutor and untimed. Finished systems first, then went on to basics (didn't do the questions randomly). Example: Under any system (say Gastro) I would choose: Anatomy, Embryology, Histology, Physiology, Pathology, Pathophysiology, and Pharmacology (basically following how the chapter was organized in First Aid). I would leave out the remaining subjects under Gastro (e.g. Biostatistics, Microbiology, Biochemistry, etc.) to be done separately later on according to First Aid's basic subjects' chapters after finishing the systems. Once I solved a question, there were one of 5 scenarios:

- Answered the question incorrectly. **Repeated under "incorrects".**
- Answered the question correctly by chance or without confidence. **Marked for repetition.**
- Answered the question correctly with confidence, but wanted to repeat for:
  - 1) a very nice question that really challenged my thought process,
  - 2) some concepts were very nicely described in the explanation and I wanted to read it from there again, or,

3) the explanation summarizes multiple diseases in a very nice manner, and I wished to read it in the same way again.

**Marked for repetition.** - Answered the question correctly with confidence, and apart from a small idea that is new, I felt comfortable with the question, explanations and concepts described. Wrote that new idea in my FA/Created UW flash cards. Did not mark or repeat the question. - Answered the question correctly with confidence, and after reading the explanations I felt comfortable potentially answering similar questions in the real exam without going over the same material again (usually the explanation to these questions are covered in FA). Highlighted in FA. Did not mark or repeat.

**b. FA 3rd pass:** Familiar with most concepts by now, trying not to leave a page without having it memorized. [Approx. 60 questions and 15 pages a day, 6 days a week]



## UW 2nd pass

I only repeated the marked and incorrect questions (as described above, which for me added up to around 1800 questions). Timeline: 3-4 weeks during the summer. [Approx. 100 questions a day, 6 days a week]



## FA 4th pass

Last review. Brushing up on the knowledge and remembering the dry facts one last time. Timeline: 2 weeks. [Approx. 50 pages a day, 6 days a week]

## COMMENTS

1.As you can see, the bulk of studying was done throughout the summer break. Based on the experiences I have witnessed; I believe that summer studying is much more productive and valuable compared to studying throughout the academic year.

2.As you can see in the timeline above, I believe that for most students, 4th year and the summer between 4th and 5th year are the best time to dedicate your studying for Step 1, with the exam ideally being at the end of the summer. If possible, DO NOT WAIT TILL THE SUMMER AFTER 4th YEAR TO START. Your studying likely will continue to drag along throughout 5th year.

3.Recommendation: Every time you start reading FA, start reading from the systems then read the basics. Rationale: we are much more familiar with the systems than we are with the basics. This allows us to read through and understand the systems a lot faster than the basics. The faster pace gives us a confidence boost as we finish more than half the book before having to go over the dry and somewhat unfamiliar basics [the order I used to follow with minor changes every pass, keeping in mind that I always wanted to go over the things I am weakest in towards the end: Basic pathology > Systems from strongest to weakest ending with neurosciences and psychiatry > Basic pharmacology > Immunology > Biochemistry > Microbiology > Public Health].

4.Recommendation: Read FA cover to cover 1-2 times before starting UW. This is an arguable point as many of my successful colleagues have approached integrating UW differently. Rationale: FA is the primary resource that contains most of the information required to perform well on Step 1. UW is an exceptional resource that allows you to understand some of the hidden FA concepts and adds to the knowledge provided by FA. Without knowing the content of FA (by going over it 1-2 times), how will you know what to do with the plethora of information provided in UW? You will find yourself writing down notes from UW and later realizing that these notes are already mentioned in FA, thus, wasting valuable time.

5.A resource that I have been specifically asked about is "Boards and Beyond". I personally have no experience with it, however, if you are someone who prefers to learn by watching videos/listening to lectures then it seems like a good idea to do it early on (before or with your first FA pass) to help you understand the content of FA.



6.To further utilize the spaced repetition theory, I integrated my 1st UW and 3rd FA passes as follows: I divided my days into FA reading/memorization in the mornings, and then UW questions in the afternoons and evenings. However, I would only read the chapter from FA after completing its questions in UW. The rationale behind this was to attempt to answer the questions without having the information fresh in my mind, which I believed would help develop my question solving skills, and it would space my exposure to all the topics over a longer period, for longer retention.

7.Recommendation: Solve UW more than once and make that last time within 2 months of your exam. Some people write down extensive notes while solving UW the first time and start to focus their time on reading those notes instead of answering the questions again. Rationale: practicing question solving is a valuable ability for these board exams, and doing the questions again not only reinforces that material for you but also improves your question answering abilities. Try to have a balance between note writing and question solving.

8.NBMEs and UWSAs: in total, I ended up doing 3 NBMEs (1 in the university early on and 2 online – forms 15 and 18), and 1 UWSA (form 1). I heard there's a trend in our university to do all NBMEs for more practice. I can see how that may help, but if you are tight on time – like I was, I don't think this should be a priority, especially if you are reaching/exceeding your target score on your NBMEs.

9.Speaking of target scores, decide on a reasonable target score based on the data available for the specialty you are interested in (e.g. Charting Outcomes for IMGs on NRMP.org). Yes, we all want to score the highest possible Step 1 score, but at the end of the day, you also want to balance your time with the other exams, securing electives, doing research, or whatever else you want to spend your time doing. If you aren't sure of the specialty yet then you probably should target a reasonably high score that would allow you to be competitive regardless of specialty, and eventually your score may help you decide.

10.Again, try to decide on an exam date from the beginning and plan all of your studying accordingly (I knew when my exam date would be more than 7 months in advance, I ended up delaying my exam date by one week only). One very tricky thing about this exam is the ability to choose your own exam date. I have seen way too many people go into the vicious cycle of delaying the exam. We can never predict what life circumstances will arise in the upcoming year, but until and unless something has really interrupted your studying, delaying the test date should be the last thing on your mind. Again, it's not the end of the world if you had to delay a few weeks, what I am trying to emphasize here is to always keep this as a last resort.

11.For the students who haven't yet started 4th year, if you are serious about taking the Step 1, figure out who your study buddy for Step 1 will be (you two should understand each other very well) and sit down and lay out a plan together. You don't have to study together if you don't want to, but having someone that is serious and dedicated to motivate, follow up, and suffer with you is a must. If you are excited about studying this upcoming long summer break, I would recommend you spend a couple of hours a day (or something like 3 hours a day 3 days a week) familiarizing yourself with FA, or maybe watching Boards and Beyond and Pathoma. I would also recommend you utilize this long break doing other things that will help your residency application in the future (whether that's research, work experiences or significant volunteering). Keep in mind as you are planning your timeline for future studying that summer breaks won't be as long starting from next year, so you may have to start studying earlier than in the timeline above.



"I like to say that there's no one correct way to prepare for this exam, and what works for me may not work for you. Read and hear other people's experiences and opinions and make a timeline and plan that works for you"

-Dr. Alawwab Dabaliz

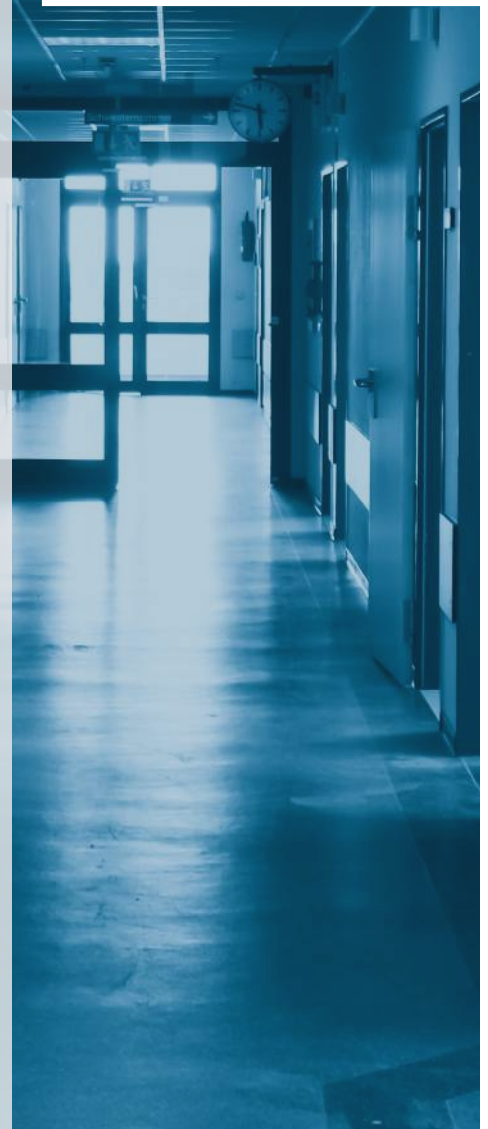
12. My intention is not to discourage anyone who isn't following the above timeline. At the end of the day it is my personal experience. We have extremely successful examples of colleagues and seniors who managed all their exams during internship. But I am sure they all wished they had been more serious about Step 1 and finished it early on. Keep at it.

13. On the topic of nationals from the banned countries: I can only imagine how frustrating this is to you and I hope everything resolves soon. The question is whether you should consider taking the Step 1 or not. My answer will depend on which year you are. If you haven't started clerkships yet, then I highly encourage you to take a leap of faith and finish the exam early (AKA by the beginning of 5th year). Rationale: During fourth year, there aren't any other board exams that you can take, so might as well get this out of the way. Your medical knowledge and self-confidence will increase significantly, and your appreciation for medicine as a field will grow. On top of all that, a passing Step 1 score is valid for 7 years, so you will have 7 years to complete your Step 2 CK and CS and become ECFMG certified (a requirement for most specialties if you are interested in doing a fellowship in the US).

14. Do NOT feel disheartened when you come across things that you have forgotten. This is very normal throughout the process and happens to everyone along the way.

15. Over the course of your preparation, I would recommend leaving one day a week to spend with your family and friends away from studying (or whatever it is you enjoy spending your time doing). This will help you re-energize and re-focus and start the following week strong, and hopefully would keep you in the right frame of mind. In my own schedule, I only had half Fridays off, and in many instances, I found myself using that half day to catch up to my plan (didn't include catch up days when I was planning!), would definitely recommend against that.

16. Making one recommended plan for everyone is unreasonable. I like to say that there's no one correct way to prepare for this exam, and what works for me may not work for you. Read and hear other people's experiences and opinions and make a timeline and plan that works for you.







## DR. EIAD HABIB

INTERN

I decided to write this since it has not been talked about before and I think it is a truly helpful resource which is not known to many. I'm talking about flashcards; and the concept of spaced repetition. I will be using my USMLE Step 1 and Step 2 CK studying experiences as examples, but this explanation holds true for any other board/block exam you may come across.

We used to hear our seniors sparsely mentioning that they used flashcards while studying, but back then it was a more manual approach where they had to physically write down their own facts on cards and carry them around to review them. However, very recently a new app was developed that made this process as seamless as it possibly could be. For those of you who have not heard of it, it is called Anki. What this app does is allow you to either make your own flashcards very quickly, or to load flashcards from pre-made decks (other people that already went through the hassle of creating and perfecting cards for certain exams/topics).

Another vital feature of this app is that it automatically creates a schedule for you to ensure an algorithm of "spaced repetition", which is a powerful evidence-based learning technique. It trains your brain by seeing a fact on a specific day, then again 3 days

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Regardless of your academic level, the concept of flashcards and spaced repetition will surely aid in your journey to ace whatever it is that you are studying for”

-Dr. Eiad Habib

later, 7 days later and so on (with wider-spacing intervals), until that fact is deeply engraved within your subconscious without you even feeling it. This is considered one of the active ways of studying, since a flashcard stimulates your brain to retrieve a specific piece of information each time you do it. Contrast that with passively reading a paragraph from a book, for example. And when you don't remember something, the app will keep repeating this card to you on more frequent intervals so that eventually, this weak-point that you had is now converted into one of your strengths. You can look up the concept of spaced repetition online, you'll find that people in lots of different fields have been using it with great success. Additionally, having all the information at your fingertips will minimize the time you waste at the university or hospital, because you can be doing cards in empty clinics during rotations, between lectures, in hallways, in the car (if you're not driving of course), etc..

Now on to how to use this app to its full potential. Some people prefer to make their own flashcards, basing them on their UWorld incorrects or just random factoids or difficult-to-recall things from First Aid or any other source. This way is ultimately the best in my opinion; the only downside is that it will take you a bit more time to create those cards from



scratch compared to someone who's only doing a pre-made deck. The second way is to use a pre-made deck, where all you need to do will be to just decide on which deck to use (from reading and listening to people's experiences), download that deck and import it to your library.

Every day, you will be doing a set number of new cards which you will specify for yourself, along with any "reviews" that show up from previous days. As you can already tell, the number of reviews will constantly be increasing as time goes by.

Now to talk about my Anki experience with regards to Step 1. There are a lot of pre-made decks out there, which have been tried and tested by many students. I will share the links of everything down below. I personally used a deck called Zanki, which was created by a student during his 2 years of studying for his Step 1 exam, and that student scored in the 260's range. This is by far the most widely used deck for Step 1 at the current time, but keep in mind that it is around 24,000 cards so it would take you a little bit more than 8 months to finish it all, assuming that you are doing 100 new cards per day. What is good about this deck is that it is pretty comprehensive in my opinion. The creator used First Aid, UWorld, Pathoma, BRS Physiology, Kaplan, and Sketchy Pharma for specific topics. So if you have the time, I really recommend using this deck as it will definitely be beneficial.



Since it covers almost all of First Aid, it will make you go over the entirety of the book by breaking it down one card at a time. The only disadvantage to Zanki is that it does not cover microbiology, for which I recommend another separate microbiology deck called Lolnotacop. For those of you who do not have the luxury of time to do these big decks, you can just make your own cards for the things you are weak at along with your UWorld mistakes. Alternatively, there are other shorter decks (link posted below), but they are obviously not as comprehensive as Zanki. Another important point is that since the Zanki creator incorporates UWorld answers into his cards, some people do not like that it "spoils" the questions for them. A quick fix for this issue is to suspend the cards in a specific organ system/discipline (meaning you will hide them) and unsuspend them only when you are done with the relevant chapter's questions from UWorld. You can look up how to suspend/unsuspend cards on YouTube, there are many tutorials.

As for Step 2 CK, there are also multiple different decks with no real consensus on the "best" one, but the same person who created Zanki for Step 1 did create a deck for CK (albeit it being only ~5,200 cards). However, someone else came along and used Zanki's deck as a backbone while adding to it information from many other sources including AMBOSS, OnlineMedEd, Emma Review, UWorld and a few others. This creator scored a 276 on his CK exam, and this is the deck I decided to go with (called Dorian's deck), and so far I think it is comprehensive and well-made (disclaimer: I did not take my CK exam yet).



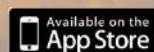
As of yet, there are Step 1, Step 2 CK, Step 2 CS, Step 3, and even residency decks that were pre-made by students and doctors. Regardless of your academic level, the concept of flashcards and spaced repetition will surely aid in your journey to ace whatever it is that you are studying for. I personally felt myself improving and becoming more confident in things that always confused me during medical school. It is quite pleasing to feel your weakpoints becoming major sources of strength with time. My friends and I that used Anki all managed to score 250+ on our Step 1 exam, and I dedicate a big part of my score to this app. I wanted to pass on this information to our younger colleagues so that everyone is kept in the loop about this newly emerging resource.



## Learn more, faster.

AnkiApp is a cross-platform mobile and desktop flashcard app.

Study flashcards in your downtime. Make flashcards with text, sound, and images, or download pre-made ones. Studying is extra-efficient, thanks to our unique algorithm. Automatically does backups and sync to all your devices, via the cloud.



# SOME FAQ'S

The app is free on Windows, Mac, and Android. However, it costs \$24.99 (~94 riyals) on iPhones and iPads. Honestly speaking, this was probably the most efficient use of 94 riyals I ever paid.

## How much does the app cost?

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## When should I start using this app?

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There is no right answer to this question, it really varies based on your style and the exam you are studying for. I can only talk about Step 1 so far. I personally discovered this app quite late (in December of my 5th year) so I only managed to spend around 6 months on it before my exam. For those of you planning to take the exam by the end of 4th year or beginning of 5th year (which are the ideal times in my opinion), starting Anki by the beginning of 4th year is a great idea. This will give you enough time to mature the decks and be comfortable with most of the information in them. However, since most of the information falls under the basic sciences category, starting the decks in second or third year as you move with the block is also not a bad idea, and this is what US medical students are doing right now (but keep in mind they take their exam after second year).

Just go on <https://ankiweb.net/account/register> and create an account. Download the program on your laptop. Open it and sign in with your account. Download the deck that you want to use. Choose "Import File" and that deck will be added to your library. Then choose "Sync" so it can upload your library to the cloud. Next, download the app on your phone and log in. Then choose "Sync" and it'll download your library from the cloud to your phone. For more details about the program, how to make cards, tips and tricks etc., please visit <https://reddit.com/r/medicalschoollanki/wiki/>. There are also many tutorials on YouTube.

## How do I set up Anki?

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## What decks do you recommend?

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As I mentioned earlier, there are many different decks with different styles of making cards, so head on to the link down below and see what looks best for you. For Step 1, Zanki is very comprehensive and is used by many people (including me) and I strongly recommend it. There is also another anatomy deck by Dorian based on the Anatomy Shelf Notes (which are high yield for the Step 1 exam), and considering that the entire deck is only 292 cards, I also strongly recommend doing it to hammer this dry anatomy information into your brain. It personally helped me a lot during my exam.

**How many cards should I do per day and are there any specific app settings you recommend?**

As I previously mentioned, there are “new” cards as well as “review” cards. The number of new cards is up to you, it depends on how big the deck is and how much time you want to finish it in (just simple math). I generally found that doing 100 new cards per day is very reasonable. Keep in mind that if you do more than that, your reviews will start piling up and will soon be in the thousands, so I do not recommend going above that. However, a very important point is that you need to **KEEP UP WITH YOUR DAILY REVIEWS**. This is crucial to make full use of the app and the concept of spaced repetition. You do not have to do new cards everyday, but you need to finish your reviews day by day. In terms of app settings, the default settings are good with the only exception being the “max reviews per day”; change it to a high number (something like 9999) since limiting your reviews just defies the whole concept of the app. You need to finish all your reviews every single day. I cannot emphasize this enough.

No. Some of my friends started using it but stopped soon after. You have to keep in mind that it will use up a lot of your time, and it needs daily persistence in keeping up with your reviews. To me and my friends that used it daily, we did not mind the time or boredom because we felt ourselves tremendously improving with it. However, others felt that it is not worth the time spent and decided to study traditionally from books and other sources only. Both groups got good scores, so it really depends on you and the type of studying you prefer.

**Is Anki for everyone?**

This link has a flowsheet that can help you decide which deck is best for you:

- [https://www.reddit.com/r/medicalschoollanki/comments/9ztgf3/updated\\_flowchart\\_guide\\_to\\_medicalschoollanki\\_step/](https://www.reddit.com/r/medicalschoollanki/comments/9ztgf3/updated_flowchart_guide_to_medicalschoollanki_step/)

This is the link to the most updated Zanki deck:

- [https://www.reddit.com/r/medicalschoollanki/comments/8e7xyd/zanki\\_addon\\_fa2018\\_fa2018\\_errata\\_updates/](https://www.reddit.com/r/medicalschoollanki/comments/8e7xyd/zanki_addon_fa2018_fa2018_errata_updates/)

This link has the Anatomy Shelf Notes deck:

- [https://www.reddit.com/r/step1/comments/8sih6h/my\\_anatomy\\_deck\\_for\\_step\\_1/](https://www.reddit.com/r/step1/comments/8sih6h/my_anatomy_deck_for_step_1/)

**A final note** - reddit.com is a valuable hub where you can read about people's experiences in almost everything. It personally guided me a lot to calibrate my studying methods and plans. Check out the “step1” subreddit for detailed studying experiences from high scorers and the “medicalschoollanki” subreddit for all Anki-related concerns (especially the “About” and “Wiki” sections).

I apologize for the long post, but I tried my best to cover any issues that might pop up. If there are still any questions or concerns, please feel free to ask me any time and I will answer them. Best of luck to everyone!



## DR KHALID JAZIEH

INTERNAL MEDICINE RESIDENT,  
CLEVELAND CLINIC

If you want to apply to the US, this is possibly the most important exam you'll take in your life. No pressure. I'd say you should start studying this as early as possible (I'll go over what I think is the optimum study schedule later in the general tips). Just keep in mind- Step 1 is more important than your university tests, GPA, research, electives, LORs, happiness, and time with your family. But if you study hard and more importantly, study smart, you should be able to ace this exam easily inshallah.

## RESOURCES

### A. BOOKS:

First Aid for the USMLE Step 1. Get the latest edition. Check for the errata (mistakes in the book) and correct them by looking [here](https://firstaidteam.com/updates-and-corrections/) (<https://firstaidteam.com/updates-and-corrections/>).

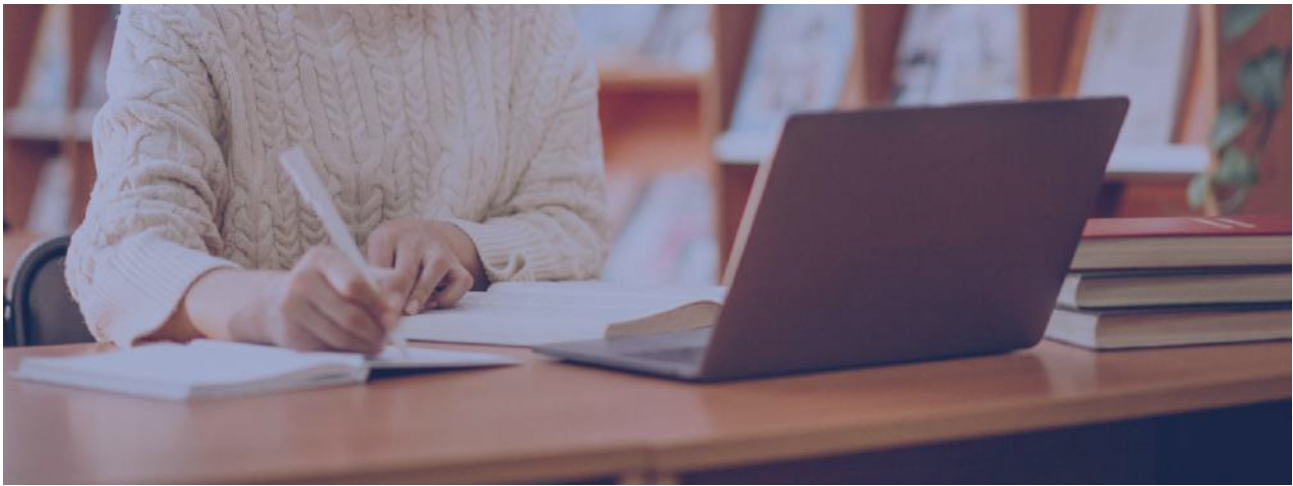
Now, this is very important. When it comes to studying the content of FA, just understanding it is not enough - **YOU MUST MEMORIZE**. You need to understand the information first, then you need to memorize it. FA is a review book, meaning everything inside it is important. I knew people who were finishing more than 9 or 10 pages of FA every hour. Unless you have photographic memory, that's way too fast. I'd say an average of 3-5 pages every per hour is a good range. I would highly recommend going over FA at least twice. And focus on the 3 P's - Pathology, Physiology, and Pharmacology. These are the most important and most high-yield topics.

Now, what about other books, videos, websites, etc.? Well, that depends. If you have trouble understanding something in FA, it will be very difficult to memorize. Then you'll need to study that material from someplace else, understand it,

then go back to FA and memorize it. For example, I had difficulty understanding Biochemistry and Biostatistics from FA, so I watched the Kaplan videos first, then went back to FA. If you have difficulty understanding pathology, use Pathoma. If you have difficulty with anatomy, consider using BRS. If you look at the end of FA, there is a list of recommended resources for each topic. Don't make the same mistake I did and buy something for every topic. Only use the ones that you need.

**The only book that I'd recommend everyone to use is FA, other than that you should tailor your resources to fit your needs.** For me that meant FA, and Kaplan videos for Biochem and Biostats. I didn't use Pathoma, BRS books, DIT videos, Kaplan books, Step 1 Secrets, or other resources so I can't answer questions about them. The one other resource I would probably recommend for everyone is a website for heart sounds, because you will definitely have those in your exam. This is an example, but there are other great [websites](https://depts.washington.edu/physdx/heart/demo.html) you can use (<https://depts.washington.edu/physdx/heart/demo.html>).





## B. QUESTION BANKS:

- UWorld Qbank: UWorld will be your best friend when preparing for the Steps. They have the best questions available. Often the questions are even more difficult than those of the actual exam. Now, I would highly recommend you do UWorld like the actual test. In my opinion, doing it tutored is a waste. Do the sections timed, then review the correct and incorrect answers with the explanations. The most important part of the explanation is the “Educational Objective”. I don’t suggest reading the entire explanation unless you got the question wrong or you had doubts about your answers.
- USMLE Rx: A nice bonus if you have time. Not as good or difficult as UWorld though. Going through UWorld twice is definitely more important than doing Uworld once and Rx once.
- I didn’t use the Kaplan Qbank, so I’m not sure how useful it is

## C. PRACTICE TESTS:

- UWorld Self-Assessment Tests: There are two tests by UWorld, and you can get them for a discounted price if you buy them with the Qbank. I like these more than the NBMEs because you can actually go over your questions and see explanations for them, just like the UWorld Qbank.
- NBMEs: The classic practice tests. You can find them [here](https://www.nbme.org/taking-assessment/self-assessments) (<https://www.nbme.org/taking-assessment/self-assessments>). For the Step 1, you’ll need to do the Comprehensive Basic Science Self-Assessment (CBSSA) tests. Do the most recent ones. I’d recommend doing at least 2 of them. The major disadvantage of the NBMEs is that they only give you your score, they DO NOT provide feedback. If you buy the extended feedback version (which costs \$10 extra), you’ll be able to see what questions you got wrong. But you will not be able to see the right answers, and there won’t be any explanations. For that, you’ll have to search the internet for forums that have the answers



## ABOUT THE TEST ITSELF

Because it’s so important, a lot of people make it seem that Step 1 is impossibly difficult. This is absolutely false. Step 1 is challenging but it can be conquered, and the more you study (and the smarter you study), the higher your score will be inshallah. FA + UWorld + Self-Assessments should cover more than 90% of the exam. The most important issue is time management, and the best way to prepare for that is to do all your question banks and practice tests timed to increase your speed, and to do as many as possible to build endurance.

The exam is 8 hours long consisting of 7 blocks, each one lasting an hour. There’s a 15 min tutorial, and 45 mins of break that you can divide between the blocks however you want. Anytime you finish a section early, the remaining time of that section gets added to the break time. If you skip the tutorial, you’ll get 15 extra minutes of break time (making it an hour long). Just don’t skip the part of the tutorial where you test your headphones.

Bring lunch with you, and sleep well the entire week before your exam. You’ll need to leave your house early because security at the embassies can be congested. You can see the tutorial before you go to the exam by checking out this [website](https://www.usmle.org/practice-materials/index.html) (<https://www.usmle.org/practice-materials/index.html>).



## DR ALAA ALDALATI

EMERGENCY MEDICINE RESIDENT  
MAYO CLINIC, ROCHESTER, MINNESOTA

I completed my internship in 2018 and then matched into an Emergency Medicine residency program in the United States in 2019. I had above-average Step 1 and Step 2 CK scores and passed Step 2 CS on my first attempt. I hope that the story of my journey to this destination will give hope to our aspiring young doctors who aim to pursue the same path.

EM is a competitive specialty and as of 2018, amongst the 2,200 positions available, only 28 of them were offered to foreign medical graduates. When I was applying to such a high-stake specialty, people said that I was out of my mind and that I had to have a back up plan. However, what I realized deep within me was that I had a unique benefit at my disposal that made me

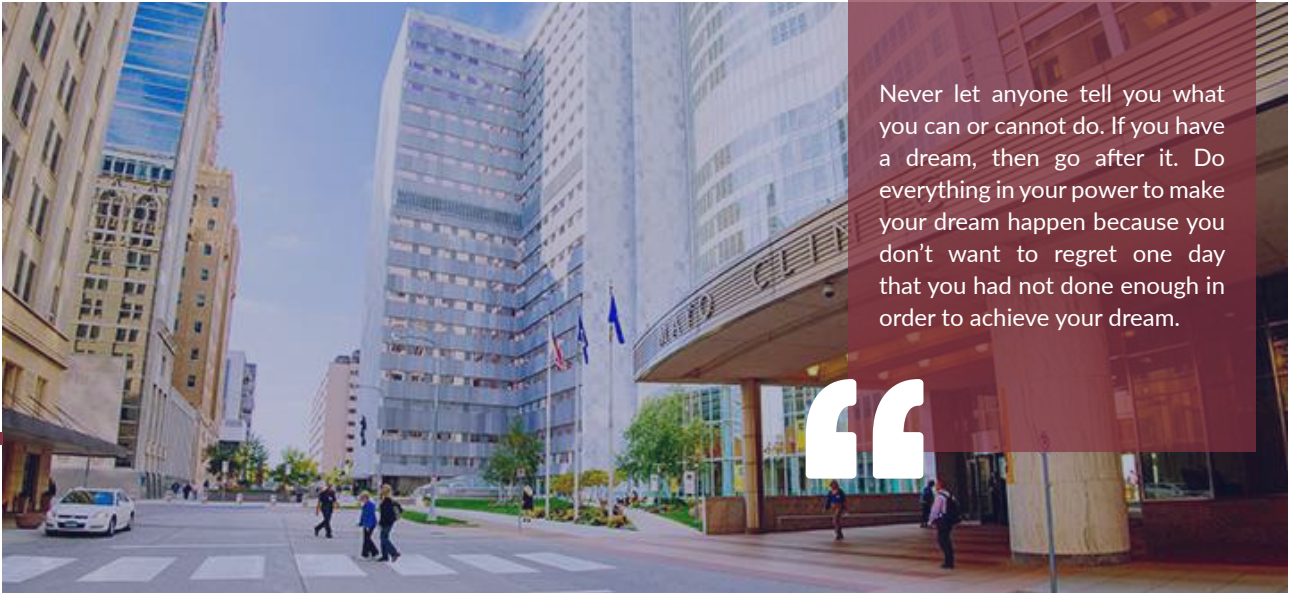
**STAND OUT AMONGST THE OTHER IMG APPLICANTS**



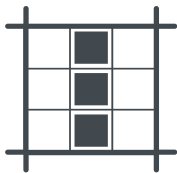
Amongst the **2,200** positions available, only **28** of them were offered to foreign medical graduates.



The first and foremost would most definitely be my strong letters of recommendation that I received from doing four separate Emergency Medicine rotations across the US. During my time there, I made sure to walk the extra mile for my patients and ensure that I was working hard to hit the bar. My advice to you is to create a genuine rapport with your patients by doing something as little as pulling out a chair, sitting by their bedside and explaining their condition to them in understandable terms. Try to perform as many procedures as you can and always bear in mind- do not compare yourself to an AMG because your job is to stand out amongst them, and comparison will only pull you down.



Never let anyone tell you what you can or cannot do. If you have a dream, then go after it. Do everything in your power to make your dream happen because you don't want to regret one day that you had not done enough in order to achieve your dream.



Another important thing that made a huge difference for me was attending conferences and meetings. We all live in a small world; everyone goes everywhere, and program directors meet each other on several occasions. I attended the national emergency medicine conference known as ACEP (American College of Emergency Physicians) that hosted a side by side residency program fair where you can network with program directors. At such events, try your best to socialize with others and make connections. Attend the lectures held by the program directors and show a sincere interest in their work by asking intellectual questions. Don't be afraid or shy away from introducing yourself to the program directors or assistant program directors. Be confident and have utmost faith that you are equipped with the necessary skills. Remember to tell them through your actions- I know this is a competitive field, but I believe that I deserve a chance.



The third thing that made my application special was my volunteering experiences that stemmed from my extensive contribution to the Medical Student's Association (MSA). They asked me several questions about it, like what kind of work I did, how that impacted me, and what I learnt from it overall. From these stories they acknowledge that you are a good team player and they love people who can work harmoniously in teams with others who have miscellaneous personalities.

#### **Apart from all of this, there are a few points I WISH I had written on my CV.**

One common misinterpretation in the US lies around the word internship. However, I further explained to them in detail that the number of school years in Saudi Arabia was different to the US and that even though we are dubbed as "interns" we are still considered as undergraduate students. And guess what, they found that so impressive that we were already ahead of the game and above everyone else.

The other point I could have mentioned is switching from a predominantly Arabic-based high school to an English based university. To them that signifies your commitment to medicine because you taught yourself another language in order to follow your passion.

That was all for my personal experience on this rewarding journey to residency.

Last but not the least, remember- never let anyone tell you what you can or cannot do. If you have a dream, then go after it. Do everything in your power to make your dream happen because you don't want to regret one day that you had not done enough in order to achieve your dream. I wish you all the best on this journey of writing your own story.

## DR. FASAHAT KHAN

INTERNAL MEDICINE RESIDENT,  
HOUSTON METHODIST HOSPITAL

So I took the Step 1 last month (yeah, I'm really late) and I wanted to write up my experience in hopes of helping anyone who is/was in the same boat as I was. If you're looking for a post with a study schedule or how to approach each subject in detail, turn away now. This post is more of a guide for those of you who are boycotting the USMLE like it's Starbucks, those who are thinking about it but are lost or those of you who've gone through the 5 stages of grief and have started studying. Basically, I'm going to outline the many mistakes I made, so that you can avoid doing them, and mention the few things I did right. So let's get to it.



### MY MISTAKES:

1. My biggest mistake, without a shadow of a doubt, was waiting till internship year to take the exam. Throughout my medical school years, I was hinged on the fact that I would go to Canada. I avoided the USMLE like it was bacon. No seriously, if any of my friends brought it up, I'd change the subject or walk away. Finally, in 5th year I realized that the chance of getting into a residency in Canada was close to 0. I panicked for days and then finally decided I should probably start studying for the Step 1. If anyone reading this is in 3rd or 4th year, unless you're a Saudi or you have a solid plan for residency, do NOT push away the exam. I can't stress this enough. If I could go back in time, I would've started studying in my 2nd or 3rd year. A year from now, you'll wish you started today. Stop pushing it away. This is THE biggest mistake I made, and I will always regret it.
2. Thinking of the exam as a big, bad monster. Is the Step 1 a difficult exam? Yes. Is it impossibly difficult? Not a chance. You need to get the idea of the exam being too difficult out of your head. This notion was the main reason I kept running away from the exam. My biggest advice is to find a friend who is serious about studying for the exam, this'll help you realize the exam can be tackled and you'll end up motivating each other. The sooner you realize you can do it; the sooner you can do it. The USMLE is not impossible. There are stories of students who did poorly during their med school years and ended up getting amazing scores. I myself was extremely lazy during my first 2 years, and was below average. What matters is how much hard work you're willing to put in. If you study hard and study smart, 250 is easily achievable. One of my school teachers once told my class something that's stuck with me for years. He said that none of us is "smarter" than the other, there are just those who work hard and those who don't. I agree, there are the handful of geniuses that are lackadaisically smart and a few people who are below average, but the vast majority of us are equal in terms of intelligence. It just depends on how hard you're willing to work.
3. Finishing my first read of FA late. I finished my first read of FA in the first week of August, around 2 months before my exam. If I could go back, I would've studied FA during 1st-3rd year with each subject so that I would've had a general idea of the knowledge. I was able to finish FA another 2 times before my exam, but if I started earlier, I could've done it a few more times.
4. Wasting time. During the year, I was only able to go through 4 organ systems + Biochem. Although a lot of that is attributed to time spent on the rotation I was doing, I also did waste a lot of free time. In the end, I look back and wish I didn't waste as much time as I did.
5. Not studying in the summers I was free. If I could go back to the summers of third and fourth year, I would have spent some time studying, even if it was 2-3 hours a day. Don't waste your whole summer, try studying even if it's a couple of hours a day. It'll play a role later on, trust me.
6. Not doing all the NBMEs. I was only able to do NBMEs 13, 14, 15 and 16. I was leaving 17 and 18 to the week before my exam, but ended up revising other things and didn't have time for them. I did read NBME 17 off a forum, just so I could learn anything new. I ended up having a question copy-pasted from NBME 17 that I would not have gotten had I not read the forum. There usually is 1-2 questions copied exactly from an NBME, so try your best to do them all.

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## THINGS I FEEL I DID RIGHT

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1

Starting UWorld early in my prep. I bought a year subscription in October, and I was able to go through UWorld twice before it expired. When I look back, I'm really glad I start UWorld as early as I did. Although sometimes I would go 1-2 months without opening UWorld during the year due to our rotations, etc. I was still able to do around 40-50% during the year. Also remember: use UWorld as a learning tool, not an assessment tool. I was averaging less than 50% on Biochem during my first pass. It's normal so don't get discouraged. As long as you annotate FA or make a UWorld journal, whichever works for you, and you understand your mistake and learn from them.

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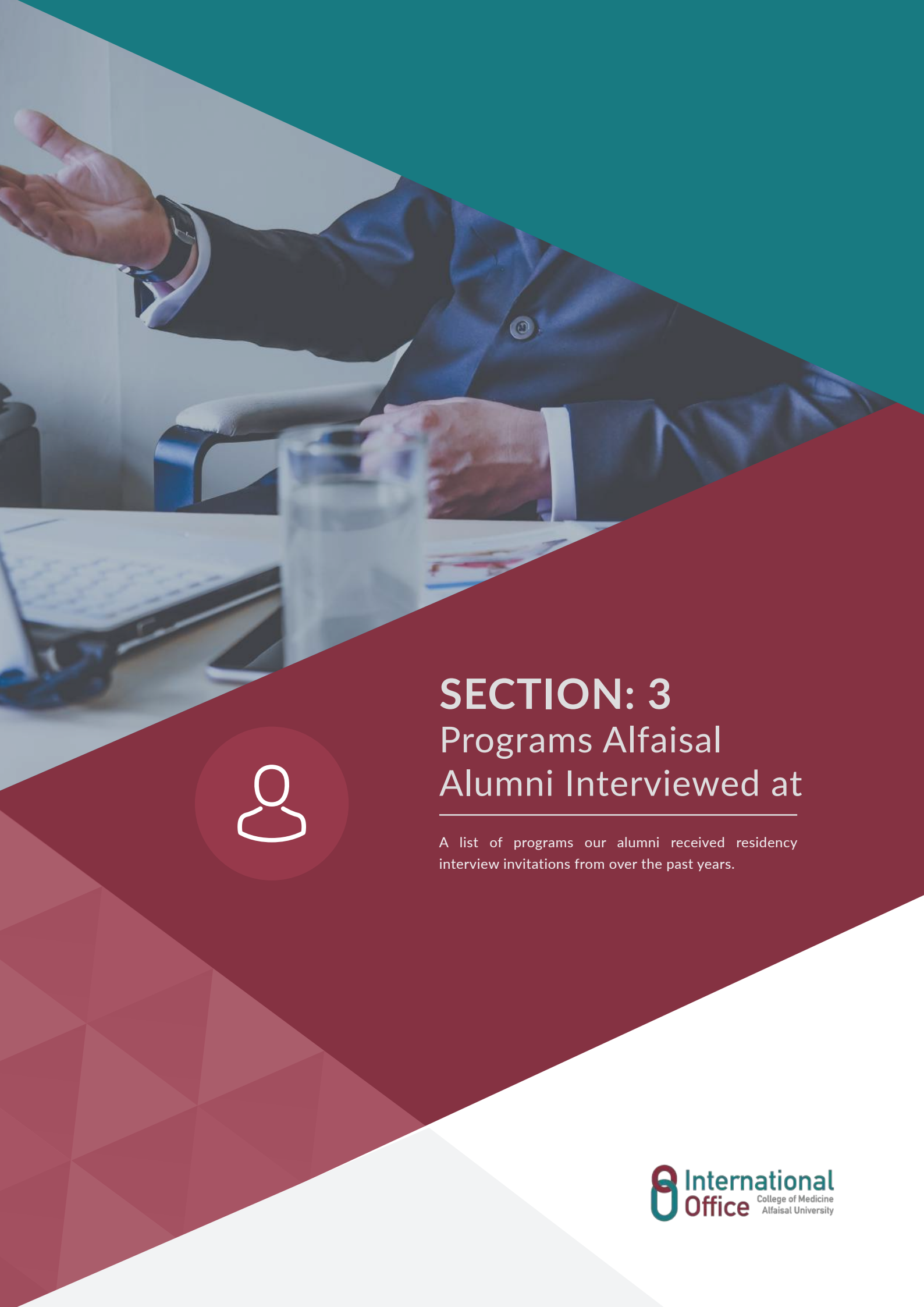
2

Spending time on memorizing pathways, etc. and studying smart. This is probably tied for number 1. Studying smart and studying effectively for me was not trying to research "tips and tricks" on how to memorize things. Yes, mnemonics do help, but there's a limit to what they'll help in. You can't use mnemonics to help you memorize the Urea or TCA cycle. They will help a bit, but in the end it's all down to brute force and repetition. What I would do is take a blank piece of paper and write out whatever I could of a pathway from memory. Then I would open FA and fill in/correct all the things I missed. I did this with most of the Biochem pathways, and with the gram + and gram - charts in the micro section. You'll mess up the first few times, but just keep at it. Every morning before you start your studying for the day, take 15-20 mins and draw out every high-yield Biochem pathway (gluconeogenesis, glycolysis, TCA cycle, Urea cycle, etc.) or anything else you have trouble remembering (tables, graphs, etc.) and after doing this for a week or two, it'll be ingrained in your memory. This helped me more than I can explain.

“

**Remember to make a ton of dua, because nothing is possible without Allah's help. Work hard, pray harder and you'll see the fruits of your efforts. Best of luck!**





## SECTION: 3

### Programs Alfaisal Alumni Interviewed at

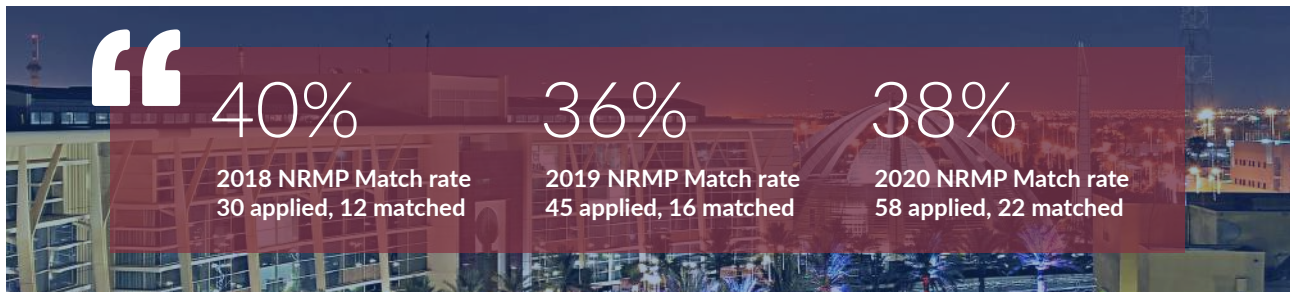
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A list of programs our alumni received residency interview invitations from over the past years.

# PROGRAMS ALFAISAL ALUMNI INTERVIEWED AT

As an added bonus, below is a list of programs our alumni received residency interview invitations from over the past years. This list could prove incredibly useful for those applying to the Match and those looking for and applying to US clinical electives. We hope this list gives you a reassuring sense of direction, somewhat of a “light at the end of the tunnel”, when after finishing your USMLE exams you finally apply to the Match and with every single interview invitation, you stride towards victory.

Please note that this list reflects responses of only the seniors who responded to our Residency Match survey, and thus is not meant to be a complete list of all the interview invitations received.



## LIST ARRANGED ALPHABETICALLY

Place	Count	Rating (out of 10)
Abington Memorial hospital	1	8
Advocate Health Care (Advocate Illinois Masonic Medical Center)	2	5,8
Albany medical center	1	
Allegheny Health Network	1	9
Ascension Providence Hospital	3	7
Augusta University	1	8
Baylor College of Medicine	1	8
Beaumont	6	9,10
Beth Israel Deaconess Medical Center	1	10
Bridgeport Hospital	1	7

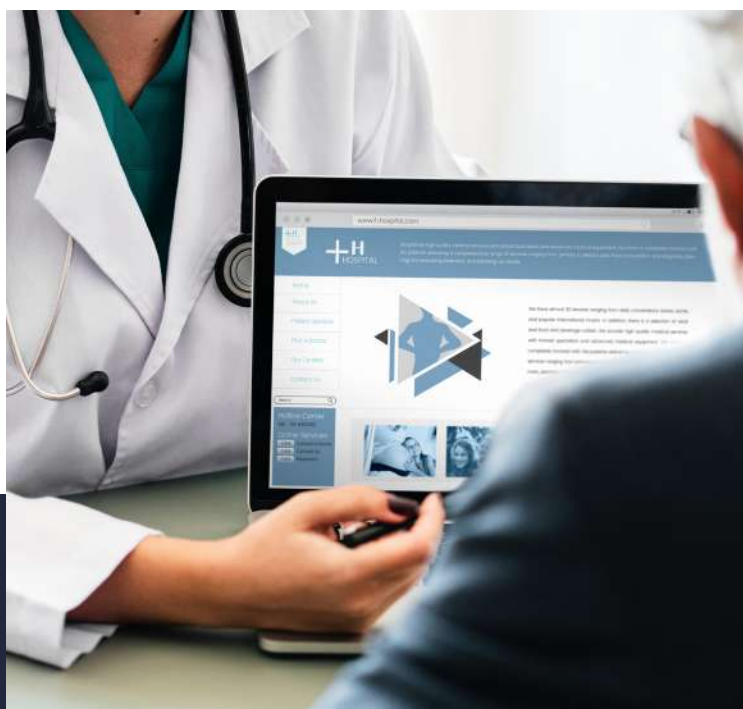
Place	Count	Rating (out of 10)
BronxCare Health System	3	4,6
Brookdale University Hospital Medical Center	1	
Brooklyn Hospital	4	5,6,7
Brown University	1	9
Case Western reserve University/MetroHealth Medical Center	6	6,7,9
Centegra Hospital- McHenry	4	4,6
Charleston Area Medical Center	3	7,9
Children's Hospital of Michigan	1	
Cleveland Clinic	8	4,8,10
Cleveland Clinic- Fairview Hospital	1	8
Detroit Medical Center/Wayne State University	1	9
Donald and Barbara Zucker School of Medicine at Hofstra/Northwell	1	9
Eastern Idaho Regional Medical Center	1	4
Emory University	1	9
Florida Atlantic University	1	
Florida Hospital Medical Center	1	7
Good Samaritan Hospital Medical Center	2	6,9
Greater Baltimore Medical Center	1	6
Harlem Hospital Center	1	6
Henry Ford Hospital	2	8,9
Houston Medical Center	5	9,10
Howard University	1	8
Hurley Medical Center	3	2,7
Jacobi Medical Center/Albert Einstein College of Medicine	3	7,8,5
Kansas University Medical Center	2	6,8
Kent Hospital - Rhode Island	1	9
Lahey Clinic	1	8

Place	Count	Rating (out of 10)
Lincoln Medical Center	4	1,2,4,6
Long Island Jewish Medical Center	1	7
Louisiana State University- Shreveport	3	6,7
Loyola University	2	8
Maricopa Medical Center	1	7
Marshall University	3	7,8
Massachusetts General Hospital	3	10
Mayo Clinic	8	8,10
McLaren Flint Hospital	1	8
Medical University of South Carolina	1	10
Mercy Catholic Medical Center	1	7
Michigan State University- Lansing	5	6,7,8,9
Montefiore Medical Center, Wakefield Campus	1	5
Mount Auburn Hospital- Cambridge	1	10
Mt. Sinai Queens	1	5
New York Medical College	1	7
Newark Beth Israel Medical Center	1	
NewYork-Presbyterian Queens	1	4
Norwalk Hospital - Yale University	2	7,8
Ohio State University	1	10
Oregon Health and Science University	1	10
Presence Saint Francis Hospital	2	7
Rochester General Hospital	5	6,7,8
Roger Williams Medical Center	1	7
Rutgers University	1	8
Saint Agnes Healthcare	1	6
Saint Barnabas Medical Center	1	7
Saint Elizabeth Hospital- Brighton MA	1	10
Saint Louis University	2	7,9

Place	Count	Rating (out of 10)
Saint Luke's Hospital - Anderson Campus	1	7
Saint Mary Hospital -Waterbury CT	2	2,7,8
Saint Peters Univ Hospital-Rutgers University	2	5,8
Sinai Hospital of Baltimore	3	7,8
Southern Illinois University	1	8
Staten Island Uni Hospital	2	6,7
SUNY Downstate Health Sciences University	3	8,9
SUNY Upstate Medical University	1	8
Texas Health and Science Center - San Antonio	1	8
Texas Tech University Health Sciences Center- Amarillo	5	6,7
Texas Tech University Health Sciences Center- Permian Basin	2	8,10
Tufts Medical Center	2	8,9
Tulane University	1	8
United Health Services (UHS)	1	7
Univeristy of Nevada- Reno	1	6
University at Buffalo	3	6,7
University at Buffalo/Sisters of Charity	11	5,6,7,8
University of Cinninati	1	10
University of Iowa	1	7
University of Louisville	1	7
University Of Maryland Medical System Corporation-Baystate	3	8
University of Miami JFK Medical Center	1	9
University of Minnesota	1	4
University of Mississippi -	1	9
University of Missouri-Columbia	1	9
University of Missouri-Kansas City	3	6.5,8,9
University of New Mexico	1	10



Place	Count	Rating (out of 10)
University of North Carolina	1	10
University of Pittsburgh Medical Center, Pittsburgh	2	10
University of Pittsburgh Medical Center - McKeesport	2	5
University of South Alabama	2	7,8
University of South Dakota Program	1	8
University of South Florida	1	10
University of west Florida	2	10, 7
University of Toledo	4	8,10
University of Utah	3	8,9,10
University of Wisconsin Hospital and Clinics	2	9
University of Massachusetts	2	9
UT Southwestern Medical Center	1	10
UT Southwestern Medical Center	1	8
West Virginia University	1	10
Wiess Memorial Hospital	1	8



## LIST ARRANGED IN ORDER OF DECREASING NUMBER OF INTERVIEWS

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Place	Count	Rating (out of 10)
University at Buffalo/Sisters of Charity	11	5,6,7,8
Cleveland Clinic	8	4,8,10
Mayo Clinic	8	8,10
Beaumont	6	9,10
Case Western reserve University/MetroHealth Medical Center	6	6,7,9
Houston Medical Center	5	9,10
Michigan State University- Lansing	5	6,7,8,9
Rochester General Hospital	5	6,7,8
Texas Tech University Health Sciences Center- Amarillo	5	6,7
Brooklyn Hospital	4	5,6,7
Centegra Hospital- McHenry	4	4,6
Lincoln Medical Center	4	1,2,4,6
University of Toledo	4	8,10
Ascension Providence Hospital	3	7
BronxCare Health System	3	4,6
Charleston Area Medical Center	3	7,9
Hurley Medical Center	3	2,7
Jacobi Medical Center/Albert Einstein College of Medicine	3	7,8,5
Louisiana State University- Shreveport	3	6,7
Marshall University	3	7,8
Massachusetts General Hospital	3	10
Sinai Hospital of Baltimore	3	7,8
SUNY Downstate Health Sciences University	3	8,9
University at Buffalo	3	6,7

Place	Count	Rating (out of 10)
University Of Maryland Medical System Corporation-Baystate	3	8
University of Missouri-Kansas City	3	6.5,8,9
University of Utah	3	8,9,10
Advocate Health Care (Advocate Illinois Masonic Medical Center)	2	5,8
Good Samaritan Hospital Medical Center	2	6,9
Henry Ford Hospital	2	8,9
Kansas University Medical Center	2	6,8
Loyola University	2	8
Norwalk Hospital - Yale University	2	7,8
Presence Saint Francis Hospital	2	7
Saint Louis University	2	7,9
Saint Mary Hospital -Waterbury CT	2	2,7,8
Saint Peters Univ Hospital-Rutgers University	2	5,8
Staten Island Uni Hospital	2	6,7
Texas Tech University Health Sciences Center-Permian Basin	2	8,10
Tufts Medical Center	2	8,9
University of Pittsburgh Medical Center, Pittsburgh	2	10
University of Pittsburgh Medical Center - McKeesport	2	5
University of South Alabama	2	7,8
University of Wisconsin Hospital and Clinics	2	9
University of Massachusetts	2	9
University of West Florida	2	7, 10
Abington Memorial hospital	1	8
Albany medical center	1	
Allegheny Health Network	1	9
Augusta University	1	8
Baylor College of Medicine	1	8
Beth Israel Deaconess Medical Center	1	10

Place	Count	Rating (out of 10)
Bridgeport Hospital	1	7
Brookdale University Hospital Medical Center	1	
Brown University	1	9
Children's Hospital of Michigan	1	
Cleveland Clinic- Fairview Hospital	1	8
Detroit Medical Center/Wayne State University	1	9
Donald and Barbara Zucker School of Medicine at Hofstra/Northwell	1	9
Eastern Idaho Regional Medical Center	1	4
Emory University	1	9
Florida Atlantic University	1	
Florida Hospital Medical Center	1	7
Greater Baltimore Medical Center	1	6
Harlem Hospital Center	1	6
Howard University	1	8
Kent Hospital - Rhode Island	1	9
Lahey Clinic	1	8
Long Island Jewish Medical Center	1	7
Maricopa Medical Center	1	7
McLaren Flint Hospital	1	8
Medical University of South Carolina	1	10
Mercy Catholic Medical Center	1	7
Montefiore Medical Center, Wakefield Campus	1	5
Mount Auburn Hospital- Cambridge	1	10
Mt. Sinai Queens	1	5
New York Medical College	1	7
Newark Beth Israel Medical Center	1	
NewYork-Presbyterian Queens	1	4
Ohio State University	1	10
Oregon Health and Science University	1	10

Place	Count	Rating (out of 10)
Roger Williams Medical Center	1	7
Rutgers University	1	8
Saint Agnes Healthcare	1	6
Saint Barnabas Medical Center	1	7
Saint Elizabeth Hospital- Brighton MA	1	10
Saint Luke's Hospital - Anderson Campus	1	7
Southern Illinois University	1	8
SUNY Upstate Medical University	1	8
Texas Health and Science Center - San Antonio	1	8
Tulane University	1	8
United Health Services (UHS)	1	7
Univeristy of Nevada- Reno	1	6
University of Cinncinati	1	10
University of Iowa	1	7
University of Louisville	1	7
University of Miami JFK Medical Center	1	9
University of Minnesota	1	4
University of Mississippi -	1	9
University of Missouri-Columbia	1	9
University of New Mexico	1	10
University of North Carolina	1	10
University of South Dakota Program	1	8
University of South Florida	1	10
UT Southwestern Medical Center	1	10
UT Southwestern Medical Center	1	8
West Virginia University	1	10
Wiess Memorial Hospital	1	8



OUR CONTACT

# Keep In Touch!



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The International Office (IO), College of Medicine is the central point for coordination and implementation of all the procedures related to the CoM's international cooperation. Our International Strategy provides us a framework within which we can oversee and develop our numerous collaborations and partnerships that are focused on 3 key priority areas - Students, Education, and Research





