The science of scheduling: When to do key medical school rotations

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When you enter the clerkship phase of medical school—traditionally during the third year—you are getting exposure to your future in the form of your core clinical rotations. Lasting between four and eight weeks, at most schools, the core clinical clerkships consist of internal medicine, surgery, obstetrics and gynecology, pediatrics, family medicine, psychiatry, neurology and radiology.

Students have autonomy in their clinical rotations in that they can schedule them as they see fit. Is there a right way to do it? A medical student and resident offered insight on that question.

Early application

Kevin Perez is a second-year medical student at A.T. Still University School of Osteopathic Medicine in Arizona—one of 37 member schools of the AMA Accelerating Change in Medical Education Consortium.

When Perez begins his clinical rotations, he plans to start with the ones that are the most broadly applicable.

“I’m going to pick the most holistic ones first,” Perez said. “So, I’m probably going to pick family medicine. It’s slower paced, and it gives you a better understanding of what being a doctor is. So, surgery and EM [emergency medicine] would probably be what I’ll do toward the end.”

According to Luke Burns, MD, a second-year ob-gyn resident at Michigan Medicine, the rotations that give you the best knowledge base to build upon are going to depend on your preferred medical specialty.

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“If you want to do ob-gyn, you’re going to want to do surgery first, so you’re really good at surgery and know how to scrub into a case,” Dr. Burns said. “Likewise, if you want to do pediatrics, maybe do medicine first, so you have some inpatient experience before you go to the wards.”

Improving as you go

Perez is planning on going into emergency medicine. Because of that, he plans to do that rotation later in his training.

“It’s graded kind of subjectively,” Perez said. “Because of that, your performance and how much you know coming in, are going to define how well you do. If you want to do EM, you want to do well in that rotation for when you apply to EM residencies later. Picking it as your first one wouldn’t be a great idea, unless you are truly ready. You only get one shot.”

The key metric on which clerkship performance is evaluated—and one which residency programs take into consideration—is a medical student’s scores on shelf exams, which come at the conclusion of a core rotation.

“One really important thing I didn’t realize would happen is I got better at taking shelf exams,” Dr. Burns said. “My shelf scores improved as the clinical year went by. If you feel a little shaky taking exams, there’s some advantage to making it so your most important exams come at the end.”

Saving the best for second-to-last

You may not know what you want to do when you’re entering clerkships. But you’re likely to know a few specialties you don’t want to do. It makes sense to load those at the front of your clerkship schedule. “The common philosophy is to schedule the things you don’t want to do first,” Dr. Burns said. “If you don’t want to be a pediatrician, do that rotation first. Because it’s the one you’ll cut your teeth on, you’ll mess up on it, and by the time you get to the next thing, the theory goes, you’ll know what to do and how to impress attendings and residents.”

In Dr. Burns’ case, he scheduled his ob-gyn rotation as his second-to-last rotation.

That was always the plan, he said, because “then it would mean that it wasn’t the very last thing, so I had time to … change my mind and I had time to get my [subinternships], those important rotations for my fourth year, in order.
When thinking about scheduling core rotations, Dr. Burns acknowledged that “it can be a difficult for people who don’t know what they want to go into.” But, he added, “it’s not the end of the world” if medical students wind up doing clerkships early on in specialties they decide to pursue for residency.

For additional tips on a number of relevant medical school topics, including scheduling clinical clerkships, visit the AMA Career Planning Resource.