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USMLE

United States Medical Licensing Exam (USMLE).

USMLE Step 1

Given the unique history of USMLE Step 1 in the US residency selection process and the score's correlation with future performance in board-certifying examinations in different specialties, this scoring change is predicted to significantly impact US Doctor of Medicine students, US Doctor of Osteopathic Medicine students, international medical graduates, and residency program directors, among others. The significance and the rationale of the pass/fail change along with the implications for both residency applicants and educators are summarized in a paper by Ozair et al. Although medical programs, academic institutions, and residency organizing bodies across the United States have swiftly stepped up to ensure a seamless transition and have attempted to ensure equity for all, the conversion process carries considerable uncertainty for residency applicants. For educators, the increasing number of applications conflicts with holistic application screening, leading to the expected greater use of objective measures, with USMLE Step 2 Clinical Knowledge likely becoming the preferred screening tool in lieu of Step 1 ¹⁾.

United States Medical Licensing Exam (USMLE) Step I score is cited as one of the most important factors when for applying to neurosurgery residency. No studies have documented a correlation between USMLE Step I score and metrics of neurosurgical career trajectory beyond residency.

To determine whether USMLE Step I exam scores are predictive of neurosurgical career beyond residency, as defined by American Board of Neurological Surgery (ABNS) certification status, practice type, academic rank, and research productivity.

A database of neurosurgery residency applicants who matched into neurosurgery from 1997 to 2007 was utilized that included USMLE Step I score. Online databases were used to determine h-index, National Institutes of Health (NIH) grant funding, academic rank, practice type, and ABNS certification status of each applicant. Linear regression and nonparametric testing determined associations between USMLE Step I scores and these variables.

USMLE Step I scores were higher for neurosurgeons in academic positions (237) when compared to community practice (234) and non-neurosurgeons (233, P < .01). USMLE Step I score was not different between neurosurgeons of different academic rank (P = .21) or ABNS certification status (P = .78). USMLE Step I score was not correlated with h-index for academic neurosurgeons (R2 = 0.002, P = .36).

USMLE Step I score has little utility in predicting the future careers of neurosurgery resident applicants. A career in academic neurosurgery is associated with a slightly higher USMLE Step I score. However, USMLE Step I score does not predict academic rank or productivity (h-index or NIH funding) nor does USMLE Step I score predict ABNS certification status ²⁾.

The neurosurgery residency matching program is part of the National Resident Matching Program (NRMP) www.nrmp.org and uses the Electronic Residency Application Service (ERAS) system

www.aamc.org/eras.

Applications open Sept. 15 each year, and the match takes place the subsequent March for positions that will start July of the same year.

The ERAS application consists of personal demographics, a photograph, a standardized CV, United States Medical Licensing Examination (USMLE) scores, publications, a personal statement, letters of recommendation and a letter from your home institution's Dean. It is recommended to complete USMLE Steps 1 and 2 in time to include this on the application submitted in September. Applicants must identify at least three individuals from whom they can obtain letters of recommendation, advisably neurosurgeons from known institutions who have seen you work in a clinical and research capacity. Such letters must be requested in the summer before the match to assure that they are available in time for interviews. Dean's letters should also be requested but will not usually be available until Nov. 1 of the year prior to the match.

Due to the competitive nature of the neurosurgery match, the mean United States Medical Licensing Examination (USMLE) Step 1 score of successful applicants is around 240. Here is a rough breakdown of scores:

< 220: Seek advice on whether you have a reasonable chance at matching, how best to improve your application and how to plan advantageous away rotations. People do match with these scores but only with a very solid application.

220-230: Your score will not stand out to programs, and your clinical performance on away rotations will become very important. Seek trusted advice on how to best leverage your application and on which programs you should rotate with and apply to. People do match every year with these scores.

230-240: These are solid scores, and you should do well if your clinical performance is good. This alone will not be sufficient to match at top-tier programs. Excellent clinical performance and a strong research portfolio is also needed.

240-250: This is a good score. Your application will be considered by most programs.

250: Your board score is outstanding and will stand out.

Having USMLE Step 2 on your application is not at all necessary but does make your application stronger while demonstrating initiative. Additionally, it is helpful to the program in which you match for licensing purposes. If you believe that your score on Step 1 is marginal, a high score on Step 2 is imperative

1)

Ozair A, Bhat V, Detchou DKE. The US Residency Selection Process After the United States Medical Licensing Examination Step 1 Pass/Fail Change: Overview for Applicants and Educators. JMIR Med Educ. 2023 Jan 6;9:e37069. doi: 10.2196/37069. PMID: 36607718.

2)

Gelinne A, Zuckerman S, Benzil D, Grady S, Callas P, Durham S. United States Medical Licensing Exam Step I Score as a Predictor of Neurosurgical Career Beyond Residency. Neurosurgery. 2019 May 1;84(5):1028-1034. doi: 10.1093/neuros/nyy313. PubMed PMID: 30010944.

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