

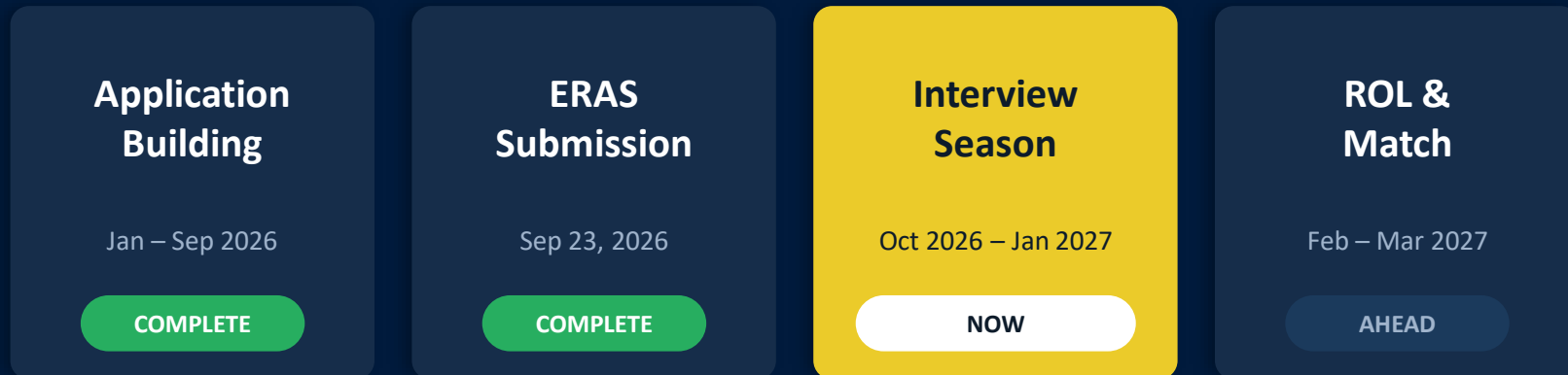
Match 2027 Strategy Seminar #4

Interview Strategy · Post-Submission Strategy

Saturday, October 10, 2026 · 11:00 AM EST



Where We Are in the Match Timeline



October 2026 — Interview season has begun. What you do from here determines where you match.

Most IMGs don't lose the match at the application stage.

Majority lose it at the interview.

56.4%

**Non-US IMG
Match Rate**

NRMP 2026

43.6%

**Did Not
Match**

4 out of 10 applicants

Most of them had the scores to get interviews. They lost it in the room.

What Programs Actually Use to Rank You

Top 5 Post-Interview Ranking Factors — NRMP Program Director Survey

RANK	FACTOR	%
01	Interactions during interview and visit	94%
02	Interpersonal skills	92%
03	Feedback from current residents	82%
04	Interactions with faculty during interview	79%
05	Fit with the program	72%

None of the top 5 factors are Step scores or publications. They are ALL about the interview.

What does that mean?

1 It is not a casual conversation

Programs use structured scoring rubrics. Every answer is evaluated on a numerical scale.

2 Every interaction is observed

Coordinators, residents, faculty, front desk staff — everyone reports back to the committee.

3 They already know your scores

They reviewed your application. Now they are evaluating who you are as a person and colleague.

4 The first 90 seconds set the frame

First impressions are disproportionately weighted. The opening shapes the entire interview.

12 Domains They Will Test You On

1

Introduction & Openers

First 60 seconds — setting the tone

2

Motivation

Why medicine, why this specialty

3

Why This Program

Program-specific research

4

Clinical Cases

Patient care and decision-making

5

USCE (IMG-Specific)

US clinical experience and adaptation

6

Research & Scholarly

Your own work — know it deeply

7

Teaching & Leadership

Team dynamics and initiative

8

Behavioral & Situational

Conflict, failure, pressure

9

Ethics & Professionalism

Gray-area judgment calls

10

Personal

Who you are outside the white coat

11

Red Flags & Gaps

Address these head-on

12

Future & Goals

Where you are headed

+ 20 Curveball Questions — wildcards that test how you think under pressure

The 3 Questions Every Program Asks

1

Who are you?

They want your origin story — specific, personal, authentic.

"I've always wanted to help people" fails this test immediately.

2

Why This Specialty?

Be specific about what drew you in. Name a case, a rotation, a patient.

Generic enthusiasm is transparent.

3

Why This Program?

Research the program. Name faculty, curriculum features, patient population.

"Great reputation" = you didn't look.

Generic answers to any of these = forgettable. Specificity wins.

Tell me about yourself

The 90-second answer that sets the tone for everything

15s

Where you come from/Origins

Background, family, country, story — brief context

20s

Why medicine and this specialty

Your "why" — a specific moment or reason, not a cliché

30s

What you've done

Key clinical experiences— highlights only

15s

Why you're here and what's next

Goals, what you're looking for in the near future

10s

What excites you

Something memorable outside medicine — humanize yourself

Practice until it flows naturally. Never memorize word for word.

Red Flags — Address Them Directly

Avoiding these makes it worse. Programs respect honest, structured answers.

RED FLAG	HOW TO ADDRESS IT
Gaps in Timeline	Explain briefly. Pivot to what you did during the gap and how it strengthened you as a candidate.
Low Step Scores	Acknowledge once . Redirect to clinical performance, growth trajectory, and what changed.
Multiple Attempts	Own it. Show what changed. Resilience is a positive trait — frame it as such.
Limited USCE	Emphasize quality over quantity. Detail what you learned and how you adapted to US clinical practice. VISA issues?
Visa Status	Be factual and direct. Know which visa the program sponsors before the interview.

Every interviewer who sees a red flag has already decided to interview you despite it. Your job is to address it cleanly.

Behavioral Questions

QUESTION	WHAT THEY EVALUATE
<i>"Tell me about a conflict"</i>	Emotional regulation, professionalism, de-escalation ability
<i>"Describe a time you failed"</i>	Self-awareness, accountability, growth mindset
<i>"Walk me through an ethical dilemma"</i>	Judgment, values, reasoning under pressure
<i>"Tell me about a time you led a team"</i>	Initiative, team dynamics, leadership under constraints
<i>"Describe a mistake you made"</i>	Honesty, learning ability, patient safety mindset

Use the STAR-B framework for every behavioral answer.

The STAR-B Answering Framework

For behavioral questions — structure beats memorization

S	Situation	Set the scene in one sentence	10 – 15 sec
T	Task	What you specifically needed to do	10 sec
A	Action	What YOU did — be specific, not "we"	45 – 60 sec
R	Result	What happened — quantify if possible	20 sec
B	Back reflection	What you learned and how it shaped you	15 – 20 sec

Total per answer: ~2 minutes. Longer is not better.

Questions YOU Should Ask

ASK THESE

"What does a typical day look like for an intern?"

"How does the program approach mentorship?"

"What's one thing you'd change about this program?"

"How do residents transition to independent practice?"

NEVER ASK THESE

"What's the salary?"

"How many days off do I get?"

"Do I have to do research?"

"How easy is it to moonlight?"

Your questions signal preparation and priorities. Choose carefully.

Non negotiables

1

Arrive/Join 15 minutes early

Late is done. Early shows respect and composure.

2

Know every interviewer's name

Look them up. Reference their work or interests.

3

Be warm to ALL staff

Coordinators report back. Dismissive behavior is a red flag.

4

Never badmouth other programs

Ever. Even casually. It signals poor judgment.

5

Watch your body language

Eye contact, posture, handshake. Non-verbals form the first impression.

6

Follow up within 24 hours

A specific thank-you email. Not a generic template.

After the Interview

The Strategy Most IMGs Skip Entirely

Thank you notes · Letters of intent · Rank order strategy · The match algorithm

Thank You Notes That Matter

When

Within 24 hours of the interview.
Same day is ideal.

How

Email unless told otherwise.
Short and specific — 2 to 3 sentences.

What to Include

Reference something specific from
YOUR conversation with that interviewer.

WHAT NOT TO DO

- Generic copy-paste to every interviewer
- Overly long emails — keep it to 2-3 sentences
- Mentioning your rank list or ranking decisions

Letter of Intent/Interest

A formal letter stating a program is your top choice

What It Is

A 3-4 paragraph letter to the program director clearly stating they are your #1 choice and why.

When to Send

After completing all interviews, before the ROL deadline. Typically January-February.

The Golden Rule

Send to ONE program only. If you send multiple LOIs, word travels. Credibility destroyed.

What to Include

Why this program specifically, what you will contribute. Be genuine and specific, not generic.

An LOI can tip the scale when a program is deciding between you and another applicant.

Building Your Rank Order List

- | | | |
|---|--|---|
| 1 | Where you would be happiest for 3-7 years | Location, culture, support system — you are living here, not just training. |
| 2 | Training quality and mentorship | Faculty investment in residents. Case volume. Structured curriculum. |
| 3 | Program culture and fit | How did you feel during the interview? Did the residents seem happy? |
| 4 | Career opportunities after residency | Fellowship placements. Geographic mobility. Network strength. |
| 5 | Your gut feeling | After all the analysis — where do you actually want to be? |

Rank by YOUR preference, not by perceived prestige. The algorithm rewards honesty.

USMLE ERAS Match Algorithm

1

Applicant-Proposing

The NRMP algorithm starts from YOUR rank list. You are matched to the highest program on YOUR list that also ranked you.

2

It Favors Applicants

The applicant-optimal solution is guaranteed. You get the best outcome possible given both rank lists.

3

Honest Ranking = Optimal Outcome

No strategic advantage to ranking a "safety" higher. Rank #1 where you most want to go. The math is on your side.

Never rank strategically. Always rank honestly.

Common ROL Mistakes



Ranking by prestige instead of fit

A prestigious program where you are miserable for 3 years is a bad match.



Leaving off programs you'd attend

An unranked program cannot match you — even if they ranked you #1.



Assuming you'll match at your top choice

A long, honest list maximizes your chances of matching somewhere good.



Not ranking enough programs

Data shows: more ranked programs = higher match probability. Rank everywhere you interviewed.

You wouldn't perform surgery
without practicing.

**Why walk into the most important professional
conversation of your career unprepared?**

12

**Question
Domains**

to prepare for

180+

**Possible
Questions**

across all domains

90 sec

**First
Impression**

to set the tone

MOCKS? Why Family and Friends Are Not Enough

1

They don't know the rubric

Program directors evaluate specific competencies on a numerical scale. Your family cannot score what they don't know exists.

2

They're biased

"That sounded great" is not feedback — it's encouragement. You need honest, specific critique that hurts a little.

3

They can't simulate pressure

A real mock with a physician who has reviewed hundreds of IMG applications creates realistic interview pressure.

You need someone who will tell you the truth.

Someone who has been on the other side of the table.

How to become the strong candidate?

- ✓ Prepare answers for ALL 12 question domains — not just the easy ones
- ✓ Practice out loud, not in their head — delivery matters as much as content
- ✓ Get feedback from experienced mentors — someone who knows the rubric
- ✓ Research EVERY program before the interview — program-specific answers
- ✓ Have a post-interview strategy planned — thank you notes, LOIs, and ROL
- ✓ Rank honestly, not strategically — trust the algorithm

Interviews are a skill. Skills improve with structured practice.

Key Takeaways

1

The interview is a skill

Not a personality test.
Prepare like you would for
Step 2. Structure, practice,
feedback.

2

Post-interview strategy matters

Thank you notes, LOIs, and
your rank order list are not
afterthoughts. They are the
final play.

3

Practice with someone who knows the system

Family is support. A mentor
who has been on the other
side of the table is feedback.

IMG-Friendly USMLE Resources

RESOURCE	DESCRIPTION
IMG Interview Question Bank	180 questions across 12 domains, sorted by difficulty with the STAR-B framework
IMG Application Scorecard	10-domain self-assessment tool — score yourself the way PDs do
Personal Statement Blueprint	Step-by-step framework for a cohesive, authentic personal statement
ERAS Application Tracker	Notion template for tracking applications, interviews, and deadlines

Available at usmlelaunch.gumroad.com

Contact Us

PLATFORM	HANDLE	WHAT TO EXPECT
Instagram	@USMLE_KICKOFF	Weekly tips, match updates, strategy posts
Facebook	USMLE Kickoff	Community discussions, announcements
Website	www.usmlekickoff.com	Services, blog, booking, and resources
Email	usmlekickoff@gmail.com	Questions and other requests

160 days to Match Day 2027

Q & A

www.usmlekickoff.com

