From a medical student with an HPSP military medicine scholarship:

Welcome to medical school from a fellow member of the Armed Forces of the United States. Whether or not you realize it, you are in a very exciting (albeit work intensive) part of your life that will hopefully lead to one of the most rewarding careers a person can have. What you very likely don't know is that being part of the military puts you in a somewhat different situation than most of your other classmates starting from now until you graduate. I am currently finishing my 3rd year of medical school as an HPSP, and I have learned most of the ins and outs of what you need to do as a military student. My hope is that I will be able to give you some general advice and some pitfalls to avoid throughout your new career as a military physician. I will start off with some very general advice of my own and then I move into a chronological guide of what you should expect to do in your 1st-4th years.

I want to let you know that deciding to become part of the military was one of the best decisions I have ever made (although, keep in mind, it is not for everyone). What has made it so great for me is not the money, but the experiences I have had and the people I have met throughout my short career. If you are the kind of person that loves to travel, see new things, meet new people, and serve those who defend your country, then you are in the right place. Two good general rules for healthcare and especially the military is to always show the utmost respect to every person you interact with and never think you are too good to volunteer for any job regardless of what it may be.

First off, my most general piece of advice that I can give you that applies to any professional field, but especially the military, is that your future is in your own hands. If you want something bad enough, whether it is a specialty, a promotion, etc, then work hard to maximize your competitiveness. I know this sounds basic, what I am trying to get across is that this not college or high school where you always have a curriculum laid out for you. You will hear many people who have never been in the military or who think they know what they are talking about tell you that the “military can choose your specialty for you” or the “military doesn't have all the specialties that the civilian world has”. The truth is that some of the specialties in the military are as competitive as in the civilian world. The military has all the specialties available in the civilian world, and you can eventually do any specialty you want, although, it may take a year or two longer. Also, the military cannot force you to do a career you don't want to do. If you want to do a competitive specialty (Ortho, ENT, Radiology, Derm), then seek out opportunities early to get involved with those specialties. Above all, always make sure you get good grades and make sure that you rock STEP 1 and STEP 2. This sounds like the most basic advice, but remember, you are in a class with a bunch of other highly intelligent people and getting in the top 25% of the class is a lot harder than you may think. Now that I’ve given some of my own personal tips, here is a really good guide that one of my military friends made for each year of school. Best of Luck, and make sure to read this guide and the HPSP handbook!

*For more information, you may also contact the President of the Military Medicine Interest Group. (This particular guide is describing the Navy’s program)
MS1 year
1. Most HPSP students have been accepted at this point. However, you can enter the program at any time in the first semester of med school and the Navy will retroactively pay for the first semester expenses.
2. You can join the HPSP program at any point during medical school and will owe the Navy as many years of pay back as they have paid for your school. However, note that if you accept the HPSP bonus ($20,000 for me), then regardless of the number of years of school the Navy pays for, you will still owe them 4 years of payback.

Summer after MS1 year
1. You are required to have 1 month of active duty on Navy orders every year.
2. Usually after 1st year HPSP students attend ODS (officer development school—5 week officers’ “boot camp”). This probably needs to be scheduled during the winter of your 1st year in order to secure a spot for the summer. If you completed ODS before medical school, then I’m not sure what the options are for doing your 1 month of active duty for MS1 year.

What if I don’t want to/can’t do ODS after MS1 year?
1. You don’t have to do ODS in the summer after your first year, but I strongly recommend it. I did not. I did research at UTSW on “school orders” (The Navy gives you orders to stay at your school and study for your 1 month of active duty). Again, it was really nice to have research on my résumé, but I don’t recommend this approach and neither does the Navy.
2. Because I didn’t do ODS after my 1st year these were the consequences:
   - You have to figure out how to acquire and how to wear your uniforms all by yourself—you’ll do away rotations with the Navy and you must check-in in uniform (and you’ll probably end up wearing the uniform between 2-6 days a week when on rotation). This is difficult and I was lucky enough to have a friend going to the military medical school (USUHS) who helped me a ton.
     b. Online Navy Uniform Store: [https://www.mynavyexchange.com/](https://www.mynavyexchange.com/)
   - You have to figure out basic Navy etiquette for your away rotations (different ranks, when to salute, etc.)
   - You need to get an ID card (There is a Air Force Reserve Base near Birmingham Shuttlesworth Airport)
   - You will have to complete ODS before you start internship with the Navy. So you can do it in the spring of your 4th year as most MS4s have at least a month off during the spring, but there’s a catch. It will count as an active duty month for you. This means that you can’t have the Navy pay for an away rotation in your 4th year (because that would be more than 1 active duty month per year which violates your HPSP contract). Or you have to really work with your school administration so that you can graduate early, then you will be done with your HPSP commitment and be full time active duty so there’s no restriction on your active duty months. Example: you did a Navy rotation in October which used up your 1 month of active duty for your 4th year,
then you take care of all graduation requirements by April, and then you can go to ODS in May.

- If you don’t do ODS prior to graduation then you will be doing it in June/July which will cause you to miss internship orientation and the first rotation of your intern year. Not the end of the world (which is what I did), but it’s not ideal.

**MS2 year**

1. Almost universally your “active duty” month is taken in the spring after MS2 year and is taken as “school orders” to study for STEP 1. The Navy wants you to take this month as “school orders” (again, this means that the Navy gives you orders to stay home and study for your active duty month).

2. The Navy requires you to take STEP 1 earlier than UTSW does. Be aware of this. This is usually not an issue, because essentially everybody takes Step 1 at the end of April/1st week of May before 3rd year starts, which meets both deadlines.

3. Once you get your Step 1 score, you need to send it to the Navy.

**MS3/MS4 years, excluding the Military Match**

1. You may have heard that in some specialties, like Ortho, residency programs really want you to do an away rotation with them as a student. Well, the Navy is one of those specialties. Unless you are planning to do a specialty (like Anesthesia, Radiology, ER) that does not offer a PGY-1 position, you need to rotate with a program in order to have a fair shot at matching to their program.

2. This is website to find out who to contact regarding Navy rotations:
   http://www.med.navy.mil/sites/navmedmp-te/accessions/Pages/SchedulingClinicalClerkships.aspx

3. Yes, you need to contact programs to schedule a rotation. And, no, they are not always the best at responding in a timely manner or even having working email addresses posted. So, you may have to contact a number of people.

4. In your MS3 year, do not do a rotation with a Navy program. You want to shine when you are on your Navy rotations and you want to be fresh in the minds of program director when the Match happens, so it doesn’t make sense to rotate in your third year.

5. The Navy financial year ends September 30th. So, take your active duty month from “3rd year” at the beginning of 4th year—that is, in July, August, or September of your 4th year and it will still be in the proper financial year.

6. Then, in October of your 4th year, take your active duty month for your 4th year. The program directors make their rank lists of applicants in November of your 4th year. So rotating at program in November or later is okay, but realize that it is too late to have any effect on where you will match to.

7. There are 3 sites—San Diego; Portsmouth, VA; Bethesda, MD—for Navy residency (unless you are going into family medicine in which case there are five sites). This means, that there will be 1 more site to visit than you have active duty months. Some people set up a 3rd Navy rotation so they can know about/be known at all 3 sites. Just know that you have to foot the entire bill for this extra trip (plane, hotel, rental car), where as the Navy reimburses you for all expenses when you are on active duty months. FYI—I didn’t rotate at Bethesda, MD.

8. You need to complete Step 2 earlier than your classmates. You need to have taken Step 2 CK by September 15th and CS by November 15th. Helpful tip: As CS is offered at only 5
sites across the country, spots fill up very quickly, but if you sign up for the notification emails that are offered you will be able to find the site/date you want.

The Military Match
1. All dates in this section are specific to the 2010-2011 year, but should be roughly accurate.
2. This is entirely different from anything your friends are doing.
3. The Military Match occurs in mid-December of your 4th year. This means the entire timeline is shifted up.
4. You will have to submit a preliminary rank list by July 15th. You can submit changes until October 15th.
5. The Navy makes you rank 5 choices. So, unless you are doing family medicine (which has 5 sites for residency), this means you must rank two specialties. [Ex. 1. ENT-San Diego, 2. ENT-Portsmouth, 3. ENT-Bethesda, 4. General surgery-San Diego, 5. General surgery-any site]. I think this limits “scrambling” in the event someone doesn’t match.
6. You submit all your info through ERAS (the online residency application that everyone in the country fills out; it allows you to choose the programs you want to apply to and sends your info to your desired programs). This must be done by September 15th.
7. You contact programs to set up interviews—if you want an interview, then you’ve got one. Don’t submit all your application materials on ERAS and then wait to be contacted by programs like all your classmates will do. Usually interviews occur in August, September, and October. Be careful about waiting, some programs stop interviewing on October 15th. When you go on an interview, even though the programs have all your info because you submitted it through ERAS, you still need to bring a small photo (doesn’t have to be in uniform), your CV, and your personal statement for each interviewer.
8. It’s usually best to schedule an interview at a program when you are there on rotation. It’s just convenient to do so. If you can’t make a trip out to interview at a site (or if you don’t feel like flying out because it’s your back up specialty and not a location you want to go to), then you can arrange for phone interviews. This is a cool option, but just remember that the Navy programs really value knowing you and if possible knowing you for more than a 30 minute interview. FYI—I was in San Diego on rotation in October and so I ended up doing phone interviews at Bethesda for both Otolaryngology and General Surgery.
9. You need to understand what you’re interviewing for. You are interviewing for an intern year (rare exception—some family medicine and psych programs offer “straight through” guarantees).
10. In the fall of your intern year you will go through another match. The options for that match in the Navy are applying for a PGY-2 position, GMO (general medical officer) 2 year tour, Flight surgery (3 years), Undersea/Dive medicine (3 years). If you are interested, you have to apply to a PGY-2 position, Flight or Dive by September 30th. The match will happen in mid-December. Note: you do not have to apply to a GMO position. Those who do not match into PGY-2, Flight, or Dive or decline the offer to one of those positions will be put into the GMO pool. In the spring of your intern year, GMOs get assigned to a particular billet (ie assignment).
11. The minority of applicants in this match will go straight through to start a PGY-2 year. They are finished with matching and will complete residency uninterrupted.
The majority of interns will go on a 2 year GMO tour (note: supposedly the Army and Air Force are minimizing the number of GMOs, but in the Navy it is still strong). Less do flight surgery and even less choose dive medicine.

12. For those who go on operational tours (flight, dive, GMOs), at the end of your tour you will enter a 3rd match. A few people choose to do a 2nd GMO/Flight/Dive tour which finishes their payback and then they get out of the Navy and pursue civilian residency. Most everybody though, applies to the residency position of their desired specialty. For most people this is a gimme match—if you did an internal medicine intern year and you are well known to the program, then of course you’ll be their top choice. However, for doctors pursuing Anesthesia or ER or Radiology, etc. (who did transitional years as interns), this is still an important and competitive match. This match guarantees you a spot for the remainder of residency (ie, if you match to general surgery, then you are guaranteed the PGY-2 though PGY-5 years). Operational tours count as extra points when applying for a residency position, so people coming back from a tour are much more likely to get a residency spot than someone trying to go straight through.

Deferment
1. One option when applying for the Military Match during your 4th year, is “Full deferment for civilian residency”. This means that you want to pursue civilian residency programs.
2. If you are granted deferment, then you enter the civilian match and are guaranteed to straight through residency (unlike most of those who will go to military residencies).
3. As I understand it, if you defer, you don’t accrue years of payback time, nor do you get paid as an officer. This essentially counts as a leave of absence from the military. So, they would leave you alone for the duration of your residency and then you owe however many HPSP years from medical school.
4. If you are granted deferment, but don’t match in the civilian match then you will scramble into a Navy spot (likely, IM or family or transitional).
5. Don’t expect to get deferment. Very few are granted. It’s not entirely clear, but my understanding is that if the Navy wants more surgeons than its residency programs can accommodate, then it will allow some to defer.
6. Also, deferment is not merit based—ie, they don’t necessarily let med students that could go to Harvard and get world-class training do so. I had an intern in general surgery when I was at Portsmouth who went to an Ivy League med school, did very well, had unbelievable Step scores, and was scheduled to interview at most of the Ivy League residencies. Then the night before his Harvard interview was informed that he had matched to Portsmouth, VA.
7. If you are hoping to get deferment, then you need to submit your application to civilian programs in September of your 4th year even though the Navy won’t tell you until December whether you can defer or not. I chose “deferment” as my top choice and hoped to push most of my civilian interviews into January. As some residencies don’t offer many interview dates you may have to go on interviews in Nov/Dec and end up wasting time/money. I ended up doing a few civilian interviews in December, then I found out that I matched to San Diego with the Navy, so I cancelled my January civilian interviews.
Payback time

1. You accrue payback time for years supported by the Navy during medical school AND residency. The good news is you can pay back these the medical school and residency years concurrently. Oddly, your intern year will not payback any years, nor will it be a year that you are accruing more payback. Basically, you will owe whichever is longer—medical school time or residency time (not counting the intern year).

2. So, if you were HPSP for 4 years in medical school and 2 years of internal medicine residency (remember intern year doesn’t add to payback), then you will owe a total of 4 years after residency. Each of the 1st 2 years will be paying back both a year in med school and a year of residency, then your 3rd and 4th years of payback pays for the 3rd and 4th years of med school. Similarly, if you do med school and then neurosurgery you will owe 6 years of payback after residency--each of the first 4 years paying back a med school and a residency year, and the 5th and 6th years paying back your last 2 years of residency. (Neurosurgery is 7 years long, but we don’t count the intern year).

3. But what about if you do GMO/Flight/Dive after your intern year? If you do 3 years of flight surgery, this counts as 3 years of payback. So, you will have paid back 3 years of med school, but you haven’t completed residency so you can’t pay that back yet. So, if you are in ortho and still have PGY-2 through PGY-5 years to complete during which you accrue payback time then you will still owe the Navy 4 more years after residency. Your first year of payback would be paying back your last year of med school and your PGY-2 year, the last 3 years of payback paying for the PGY-3 through PDY-5 years.

Other stuff

1. You don’t need to have an annual physical, but you do need to turn in an “Annual Health Screening Form”.

2. You need to fill out reimbursement forms and send in receipts after away rotations or Step payments, etc. in order to get expenses paid for. Some helpful forms are on the website: [http://www.med.navy.mil/sites/navmedmppe/accessions/Pages/Forms.aspx](http://www.med.navy.mil/sites/navmedmppe/accessions/Pages/Forms.aspx)

3. Your recruiting officer should be a good point of contact for questions/concerns. Also, [OH@med.navy.mil](mailto:OH@med.navy.mil) is an important email address where you send most of your forms/scores and a reasonable place to ask questions. You many also find [Joseph.pelot@med.navy.mil](mailto:Joseph.pelot@med.navy.mil) to be a helpful contact.