4th Year Planning for Neurology Residency

Required: The only absolute requirement is that you graduate so be sure you satisfy all graduation requirements. But check out individual programs of interest because some may specify additional requirements for their programs.

Recommended for most students:

In part, I will give these in the context of fulfilling some specific UCF requirements for graduation.

The Acting Internship Requirement: It may be best for many students to do the required AI locally before doing an away rotation from the viewpoint of your ability to compete with other students on the rotation. But if you are sure from your 3rd year experience that you can make a strong showing, then you might consider doing an away AI in neurology (via VSLO) as one of your early 4th year rotations.

If Nemours pediatric neurology AI is available (MDI 8470 7), this would be a good foundation for either pediatric or adult neurology, though they give preference to those seeking pediatric neurology.

If you cannot get the Nemours AI, then a private office AI in neurology (MDI8802 9) will satisfy the graduation requirement. But if you do an office neurology AI, some students may wish to consider a local internal medicine or pediatric rotation (AI or elective) involving work on a hospital service prior to taking an external rotation to be sure you are “tuned up” for the competition ahead both in away rotations and in residency. For some students, however, if they have already done their EM or Critical Care requirement prior to their first away, then that, in addition to the office AI, maybe tune up enough. Another possibility would be to add the neurosurgery AI at AH (MDI 8650 1) (requires VSLO) or a pediatric neurosurgery elective at Nemours (MDE 8491 7) or OH (MDE 8491 2) (VSLO) prior to an away rotation.

EM/Critical Care requirement. I do not think one is preferred over the other. Just fulfill the requirement.

Electives:

Away rotations: If you know where you really want to go for residency, then doing an AI there can help. The away rotations can either be AI’s or electives unless you wish to fulfill your AI requirement with an away AI. You can also do away research rotations.

Local Electives: Consider taking at least one neurology related elective in Orlando at some point in the 4th year. Possibilities:

One of the neurology AI’s mentioned above could be taken as an elective if you have not already taken it as an AI.
Clinical Neurological Ophthalmology (MDI 8802 9)
Neurodegenerative Disease: Research & Clinical Care (MDR 8802 9)
Neuro-Radiology (MDE 8767 9)
Pediatric Neurosurgery Elective at Nemours (MDE 8491 7)
Interventional Pain Medicine/PM&R (8820 9)
Sleep Medicine (MDE 8207) (VA)
Acting Internship in Neurosurgery (MDI 8650 1) AH (VSLO)
Pediatric Neurosurgery (MDE 8491 2) OH (VSLO)

**Research:** Try to get your FIRE project published, if possible. Also, be on the lookout for publishable cases that you can write-up with your attendings. Time permitting, try to get some research done in addition to your FIRE project but not at the expense of doing well on your clinical rotations.

**Diversity of Experience:** You can take up to 4 full electives in the same core area, but do not feel you need to take the full four in neurology. I recommend taking electives in at least two other areas including at least one psychiatry elective. Cardiology, Rheumatology, and Radiology are also good choices. If you have any liking for OBGYN, consider the fact that the neurological problems of pregnancy (and of women in general) constitute a neglected area. You can also find some half block length electives so that you can fit more diversity into the time available. Also consider an international experience.

I would not take less than one full block of neurology but don’t focus too much on neurology. No one expects you to come to the residency knowing it all. Get a well-rounded background.

**Students with special interests:**

I am happy to give individual advice on special interests such as highly research oriented careers, niche areas in neurology, or combination programs (psychiatry/neurology or IM/neurology for example). I am also happy to give individual advice on any of the more routine matters covered above.

Stephen Berman MD Ph.D.
Chair for Neurology Education