

Q & A

Post comp-step-

Kyle Dammann

Contact:

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My Road to Nevis...

- Former education
 - Graduated High school 2004; Lynchburg, TN
 - B-student with no interest in school, I was more worried about waterskiing and playing music.
 - Graduated ULM with B.S. Biology 2008; Monroe, Louisiana
 - Final GPA: 3.1. I would not have gotten into University if it were not for a full ride scholarship to ULM for waterskiing. I had terrible SAT and ACT scores. After finishing,, I qanted to go to med school but had poor performance on **MCAT= (22)** 😞
 - Graduated with M.S. Micro and Genetics 2011; Monroe, Louisiana
 - Final GPA: 3.9. I did alright on the test to get into the grad program GMAT, and liked research, so I convinced myself out of med school (told myself I could never make it)
 - Graduated PhD Malignant disease inflammation and cancer 2015; Vienna, Austria
 - Final GPA: 4.0. I excelled at research because I was very interested in this field and developed a strong work ethic throughout the program.

Road to Nevis...

- Started at MUA May 2015
 - Comp Dec. 2016
 - Step 1 USMLE: April 1, 2017 = (247) 😊

My road to Nevis

- I Always got injured as a kid (sports), spent lots of time in the hospital. The doctors inspired me, and I wanted to be able to do this for others.
- During my PhD studies I was forced to how to work (hard and smart) and also how to learn and apply material to the best of my abilities.
 - I really knew I wanted to pursue my dream of becoming a physician when my boss (Prof. Gasche) called me to pick up biopsies from the operating room to take them back to the lab. I loved watching my Prof work with patients, then I wanted to do the same.

M5: How was the Mt Nevis Hike?

- Used to **love** it and go up there after blocks Med1-5. Actually made it to the top in less than an hour once.
- Now I **hate** it b/c my GF kicked my a** b/c I got slow and fat from step. Oh well...

M5: What were some mistakes you made in M5?

- I don't like to think that I made any mistakes in Med5.
 - I worked both hard and smart, and followed my study plan since day 1 in Med1.
 - Go to class → go home → study till bed. I still didn't know if I would make it through comp b/c all the horror stories.

M5: Did you take a live review class like becker or kaplan, and what q banks did you use

- I actually used to believe in review courses but I changed my mind about them as time drew nearer to and after comp.
- My reasons why? Material is material. After a thorough pass through UWORLD-pathoma- and Firstaid you have seen all the concepts. If you understand them its just time to repeat them, not to start learning again. I think prep-courses can be a great tool if you do not pass comp, but by med 5 you should be capable of teaching yourself anything (or else you are screwed).
- 3 months of dedicated studying for step goes by fast, I could not have imagined spending that in a class room. There will be a point that no-one can teach you the concepts, (even if someone spoon feeds you concepts, you will still be surprised that you miss questions on the stuff you knew well... Why? b/c you need to learn how to recall under pressure. You only learn this by doing questions, not by listening to someone else. Step is not a listening test– it is in question format)
- This is only my opinion....

M5: What strategies did you use to review material from previous semesters?

- Day 1 of the semester I woke up at 6 AM. I started doing 40 Uworld questions timed, all subjects, all systems random. I read the explanations as if it were God speaking, and annotated my first aid. I did this every day! Every day!
- At the end of the day I reviewed 10-15 pages of my first aid. Not very many pages a day, but I knew the concepts and information I annotated in this book front to back.
- I also reviewed whatever I did all week on the weekends, sometimes even two times a week.

M5: Which sources do you recommend for shelves, comp, step?

- Shelves, comp, and step.
 - Sources don't change: Number 1= Uworld!! let them teach you the concepts → annotate those concepts into first aid → review those concepts and see what you don't know by doing questions from other banks, RX and Kaplan are great. It is not memorizing answers, it is just what you extract from them and how you have been preparing all along.
 - Ideally you should have been preparing and reviewing since Med4. I integrated info from these sources since Med 4 → Sketchy for Micro review + First Aid. BRS for Physio and First Aid. Pathoma for path + first aid. Sketchy pharm for pharm + first aid.
 - You made it to med 5 make sure you make a plan and stick with it.

M5: How did you divide your study time between the first weeks, then shelves and comp?

- I kept doing the same thing the entire semester. 40 q UW all systems, all subjects, timed every day. This took about 10 hours. If I missed certain concepts repeatedly, I made sure to focus on that also.
- After this I worked on stuff for blocks. If there was time each day I did more questions.

M5: How did you balance studying for comp and shelf?

- Nothing changed. Questions. Questions. Questions.

M5: What was your specific study schedule for comp during med 5? What was your plan during each day using your resources and q banks?

- Sleep at 12. Wake up at 6. I made myself go to bed and get at least 6 hours every day (no matter what). I never pulled all nighters, even though I used to sleep about 4 hours in med 1-4 and never slept the night before exams. You can't do this anymore and need that REM sleep for memory retention. **6 hours minimum!**

M5: Is there anything you would have done differently preparing for shelf-comp-step?

- Nope.

M5: How comparable was comp to step?

- **Very, very, similar.** Only the format is different. The questions are about the same difficulty.
- Comp is about 5 hours long. Its 4 blocks which are about 46 questions each. There is no break between the first and second blocks, so don't drink too much coffee.
- Step is 7-8 blocks of 40 questions depending on what test you get. You can take a break between each block with about 45 minutes of break time on the total test, and the remaining tutorial time is added to your break time.

M5: “I heard comp is harder than step”, how are they different?

- I do not believe this and think this is very misleading. I am sorry to be the one to say it but they are very similar exams. Do not believe anyone unless they show you their score reports. Unfortunately many people talk trash.
- NBME's are the best estimation of where you stand according to the USMLE. If you do not score well on NBME's you most likely will not score well on comp or STEP.
- The MUA comp is actually a blessing b/c the school wants to make sure you score well on STEP.
- Also, it is very difficult to greatly improve your score after leaving the island (3 months go by fast and there is so much material that even when you are studying 12 hr a day, everyday you come across something that you have not seen in about 4-6 weeks).
- What to do? If you have not already started...Start studying you're a** off NOW!

How I went from a 200→ 247 in about 8 months

- Studied the break from Med4-Med5. Took NMBE **form 12** at the end of break before Med5 started August, 2016 (Scored a 370 which correlated to a 200 USMLE). Note that I missed 49 out of 200 questions. **This is 75.5 % correct and barely passing by comp and USMLE standards!!!!**

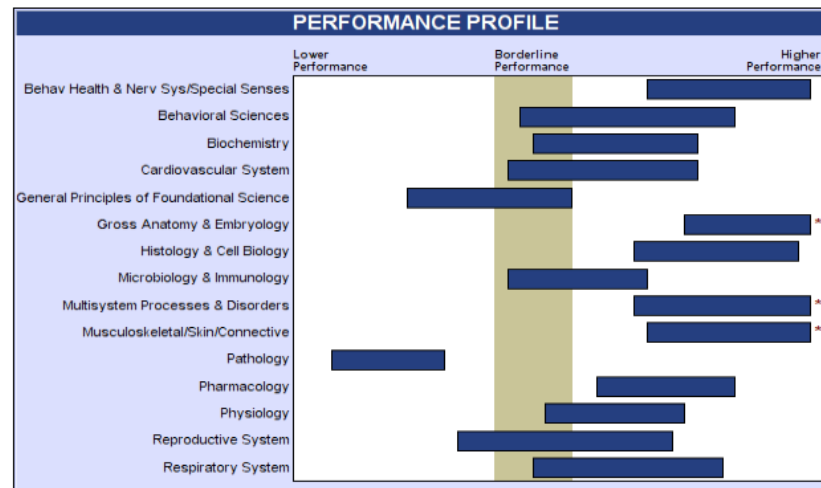
National Board of Medical Examiners®

NBME® Comprehensive Basic Science Self-Assessment (CBSSA) Performance Profile

Name: Kyle Dammann

Test Date: 8/28/2016

Assessment Score: 370



WHY so bad? Learn how to take a test.

- I was a very upset about my score... I made mostly A's while I was here at MUA, only 4 B's.
- Then I analyzed the questions I missed. It wasn't the content I was missing... After reviewing the test, I missed 15 questions because of running out of time. I needed to work on time management. I started doing timed questions every day, and all systems and random to keep my mind ready for all concepts. Test taking skills are very important.

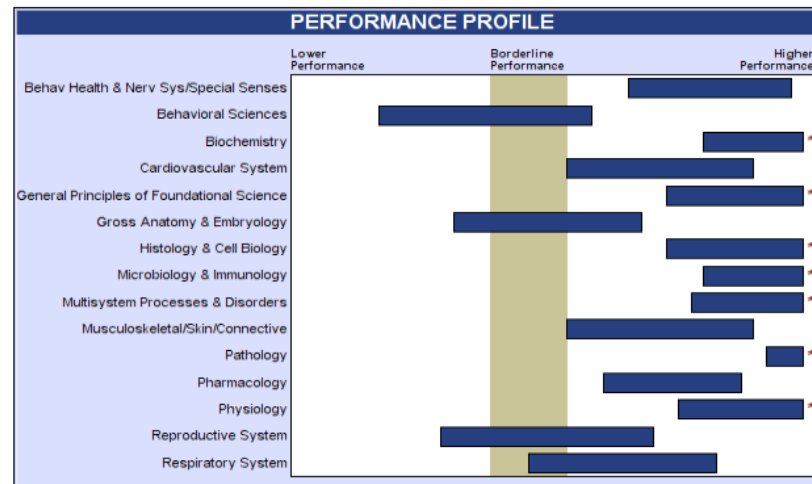
2 months later Form 13 October 2016.

National Board of Medical Examiners®

NBME® Comprehensive Basic Science Self-Assessment (CBSSA) Performance Profile

Name: Kyle Dammann

Test Date: 10/22/2016
Assessment Score: 520



This was a result of finishing the exam on time and covering the material which I had not yet studied before med5. 520=232 converted to USMLE. Btw... I missed 30 question on this test which was 85 percent correct.

One more month went by November, 2016. Now one month till comp..

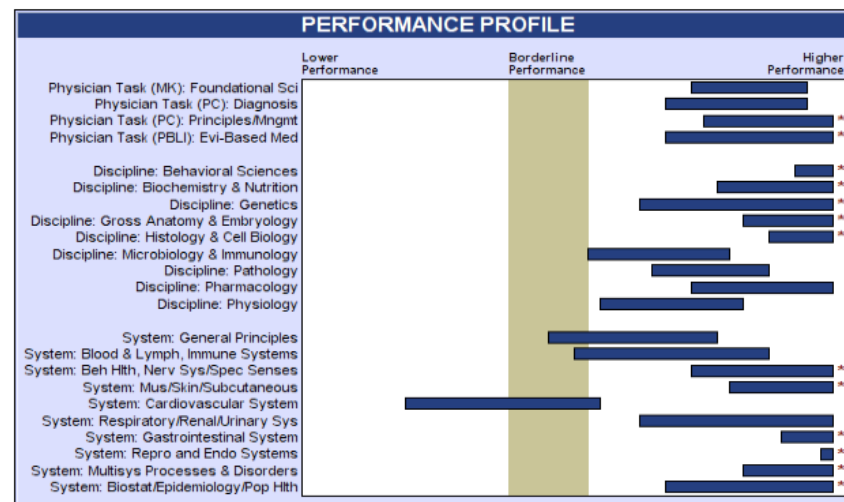
National Board of Medical Examiners®

NBME® Comprehensive Basic Science Self-Assessment (CBSSA) Performance Profile

Name: Kyle Dammann

Test Date: 11/26/2016

Assessment Score: 560



I reviewed the entire first aid in this month of studying and increased my questions from 40→ 80 questions every day. This was a 560=240 USMLE and 88.5 % correct.

Dec. 2016. Comp

- I just kept doing questions from uworld and kapplan q bank building up endurance and learned how to stay focused for about 200 questions (5 blocks).
- I made the same score on comp as NBME form 15.

Dec 16 → April 1st, 2017

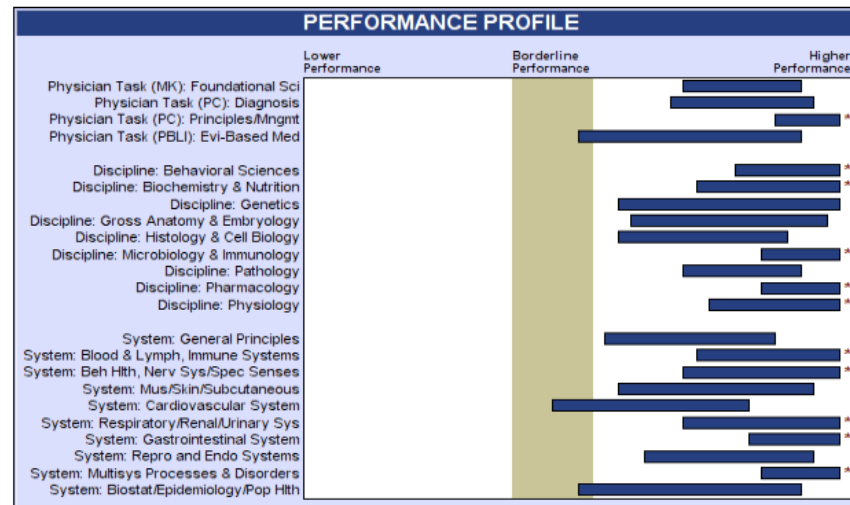
- February: NBME 16 = 238

Performance Profile

Name: Kyle Dammann

Test Date: 2/17/2017

Assessment Score: 550



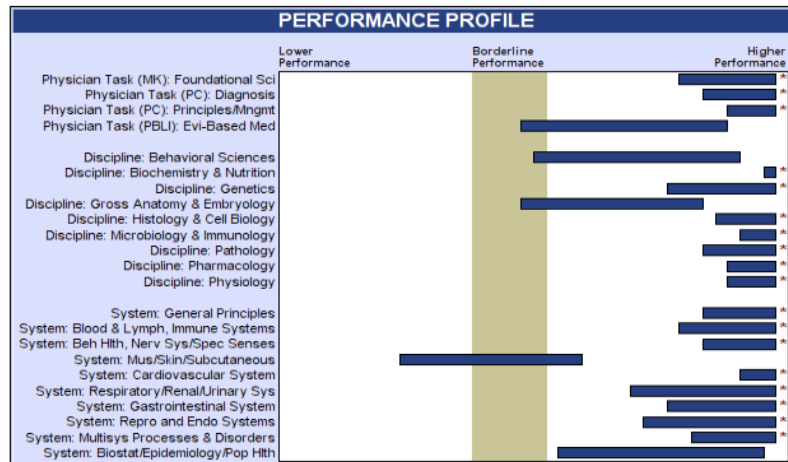
Form 17 March, 2017

Performance Profile

Name: Kyle Dammann

Test Date: 3/20/2017

Assessment Score: 590



590 was converted to a 246 on step. This was my best NBME. This was 17 wrong out of 200 and 91.5% correct. Still not a 250.

M5: How did you avoid fatigue while writing step/comp?

- Before comp I made sure I could do 4 blocks without getting fatigued. The last week before comp I did about 4-5 blocks of Kaplan q bank in a row to build up endurance.
- Month of endurance before step.

Endurance for a month..

- I started doing questions 2 times a week where I would do 7-8 40 question blocks just like step. This taught me how to keep my focus. You will be surprised how many easy questions you get wrong by the 7th or 8th block in a row b/c of fatigue.
- I took the kaplan q bank full length exams and score 84 on form 1. I scored 82 on form 2.

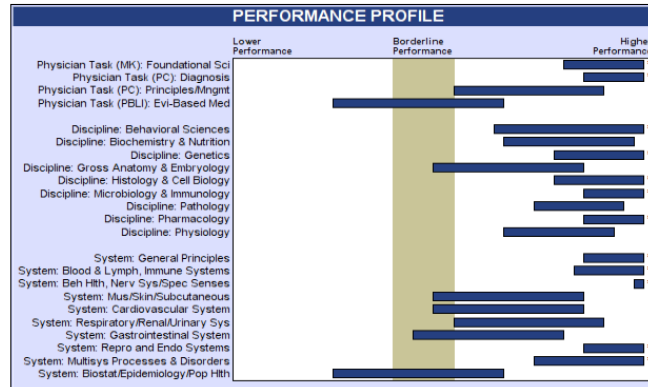
Form 18: (240) and 19: (238) same day back to back same week as exam

Name: Kyle Dammann

Performance Profile

Test Date: 3/27/2017

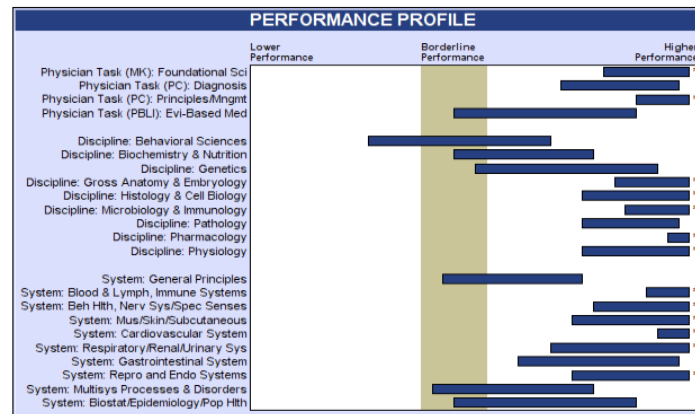
Assessment Score: 560



Name: Kyle Dammann

Test Date: 3/27/2017

Assessment Score: 550



Note that form 19 was only 20 wrong out of 200 and 90% correct and still not even a 240.
This curves are getting harder...

Test day

- I took the test 2 weeks earlier than I originally wanted to b/c I knew that I had peaked and I just wanted to go take it. I felt ready and expected to get anywhere from a 240-245.
- Results came back with a 247.

Score report

Dammann, Kyle William

USMLE ID: 1-020-396-6

Test Date: April 1, 2017

The USMLE is a single examination program consisting of three Steps designed to assess an examinee's understanding of and ability to apply concepts and principles that are important in health and disease and that constitute the basis of safe and effective patient care. Step 1 is designed to assess whether an examinee understands and can apply important concepts of the sciences basic to the practice of medicine, with special emphasis on principles and mechanisms underlying health, disease, and modes of therapy. The inclusion of Step 1 in the USMLE sequence is intended to ensure mastery of not only the sciences underlying the safe and competent practice of medicine in the present, but also the scientific principles required for maintenance of competence through lifelong learning. Results of the examination are reported to medical licensing authorities in the United States and its territories for use in granting an initial license to practice medicine. This score^s represents your result for the administration of Step 1 on the test date shown above.

PASS

This result is based on the minimum passing score recommended by USMLE for Step 1. Individual licensing authorities may accept the USMLE-recommended pass/fail result or may establish a different passing score for their own jurisdictions.

247

This score is determined by your overall performance on Step 1. For administrations between Jan 1, 2015 and Dec 31, 2015, the mean and standard deviation for first-time examinees from U.S. and Canadian medical schools were approximately 229 and 20, respectively, with most scores falling between 140 and 260. A score of 192 is set by USMLE to pass Step 1. The standard error of measurement (SEM)[†] for this scale is five points.

USMLE STEP 1 PERFORMANCE PROFILE

	Lower Performance	Borderline Performance	Higher Performance
PHYSICIAN TASK			
MK: Applying Foundational Science Concepts			XXXXXXXXXX
PC: Diagnosis			XXXXXXXXXXXXXXXXXX
PC: Management			XXXXXXXXXXXXXXXXXXXX
PBLI: Evidence-Based Medicine			XXXXXXXXXXXXXXXXXXXX*
DISCIPLINE			
Behavioral Sciences		XXXXXXXXXXXXXXXXXXXX	
Biochemistry & Nutrition			XXXXXXXXXXXXXXXXXX
Genetics			XXXXXXXXXXXXXXXXXXXX*
Gross Anatomy & Embryology			XXXXXXXXXXXXXXXXXXXX
Histology & Cell Biology			XXXXXXXXXXXXXXXXXXXX
Microbiology & Immunology			XXXXXXXXXXXXXXXXXX
Pathology			XXXXXXXXXX
Pharmacology			XXXXXXXXXXXXXXXXXX
Physiology			XXXXXXXXXXXXXXXX
SYSTEM			
General Principles			XXXXXXXXXXXXXXXXXX
Blood & Lymphoreticular and Immune Systems			XXXXXXXXXXXXXXXXXXXX
Behavioral Health & Nervous Systems/Special Senses			XXXXXXXXXXXXXXXXXXXX
Musculoskeletal, Skin, & Subcutaneous Tissue			XXXXXXXXXXXXXXXXXXXX
Cardiovascular System			XXXXXXXXXXXXXX*
Respiratory and Renal/Urinary Systems			XXXXXXXXXXXXXX*
Gastrointestinal System			XXXXXXXXXXXXXXXXXXXX
Reproductive & Endocrine Systems			XXXXXXXXXXXXXX*
Multisystem Processes & Disorders			XXXXXXXXXXXXXXXXXXXX
Biostatistics & Epidemiology/Population Health			XXXXXXXXXXXXXX*

M3: What would you have done differently as a lower med which you learned later on?

- I would have started reviewing earlier. Videos are great for review, but I think integrating u world and first aid (about 10 hours total a week from old material would be amazing).
- Reviewing old material should be taken as the same value as new material.

M3: What percent of your class achieved a passing comp score?

- Was not very high. About 1/3 or less passed.

M3: Recommended prep program? Q banks?

- This will be determined when you get closer to med 5, and is a personal decision. I don't think that prep courses are beneficial once you have a good knowledge base.

M3: Would it be wise to transfer to either to Ross or AUA for clinicals?

- I would not advise this for multiple reasons...
 - What does this look like? If I were a boss I would think that it looks fishy. Maybe I would hire you and you would jump to a different location. It doesn't show stability and determination in my opinion. Why didn't you just go to those schools in the first place? Don't jump around just focus.
- But if you know someone who pulled it off and you feel like you want to try go for it.

M3: How long after passing Step till you start clinical rotations? Do you choose when you start or is the date picked for you?

- Good question lol. In a perfect world I would say 3 months. It takes about a month to get the step score back. RLRA takes about a month to write a good paper. It might take about a month to get it reviewed by the school.
- I finished RLRA. It is in the grading process.

M3: Can you write step 1 and step 2 at the same time?

- Nope, only if you have a foreign MD from different Uni. I have heard that they can take boards in any order.

M3: Do you know when you write Canadian board exams? Do you know any Canadians who were successful back in Canada?

- Don't know anything about it. If you want to do this speak with someone who has. There are a few on our website, maybe try and get their contact info.

M3: Does MUA assist/ determine time/ location of clinical rotations? What about electives?

- When you finish the RLRA and it is approved by the school they will talk to you about the rotation schedule. As far as I understand, MUA handles year 3 core rotations, and we need to find our own electives. I still need to look into this further.

M3: Which state has all clinical rotations?

- Don't know for sure if this exists. I know that you can do all cores but 1 (pediatrics) then you need to go to chicago or ny for pediatrics.

M3: What resources did you use for step 1, and how do you organize your studying?

- U world, pathoma, first aid, sketchy

M3: Based on your step score is it true you can pick the state you want to do clinical rotations?

- I believe that if you score well on step you can decide for more competitive rotations, but step scores make a huge difference for 4th year rotations. 4th year rotations will be on you to apply, network, and get a spot. A solid step score can only help you!

M3: What was the amount of time you took to study for step 1?

- I started studying in Med5. I studied 3 months after comp. This is about 8 months.

M3:Did you use any board prep programs?

- Nope

M3: Who assists with getting rotations, and do they help with housing and transportation to hospital?

- Clinical department gets your 3rd year situated, and then everything else is on you.

M2:When did you start preparing for a step 1?

- Med 5

M2: Which test prep tools did you use?

- U world, first aid, sketchy, pathoma
- Q banks, uworld, rx, kaplan, becker. Did all of them and u world 2x. That is about 10,000 questions.

M2: Which test prep question bank did you find most useful ?

- U world is the most like comp and step if you are doing the questions random all systems and all subjects.

M2: Please describe your study habits What UNI GPA?

- I barely got into Uni, and would not have made it if I didn't have a full-ride scholarship b/c of sports... I never knew how to study.
- Now I know it is all hard work and learning how to learn, and not only hard work, but smart work.

M2: Did you attempt any of the NBME Company exams (by purchase) prior to taking the MUA COMP exam and If so when did you start attempting those ?

- Yes we already discussed this.

M1: How did you prepare for step and what did you do on the day to prepare yourself?

- Full time dedicated step studying is exhausting. 12 hours a day. I took 2 nights a week off and watched TV and had a beer, maybe two lol. It is easy to burn out when you study so much.
- I made sure that the week leading up to step that I took every evening off and I was waking up early, eating the same thing, staying healthy and calm. I just did questions at that point.
- The day of step I just stayed positive and said a prayer before I started. The only thing that kept me positive is I knew that I did everything that I could, and did not have any regrets. I did not cut corners, I was ready.

M1: When did you start studying for Step 1?
Would you advise starting in Med 1?

- Start reviewing as much as you can. The important thing is making review important. This is difficult with all the new material on a daily basis. I started reviewing on the break from med2→med3. I reviewed all breaks from then on and made sure to start reviewing biochem and micro in med3, med4.

M1: What do you think is the best way to study a large amount of material? Note-taking? Quizzes?

- Repetition. Just keep looking at that and make connections to other things. Use memory maps, word association, and keep repeating it!

M1: How did you study for blocks vs shelf exams?

- Med1-4
 - Blocks= slides, kaplan, first aid, pathoma, robins, rubins, brs.
 - Shelf= first aid

M1: What resources would you recommend besides First Aid?

- Whatever you can learn from

M1: Where did you get practice questions?

- U world, kaplan, becker, rx

M1: What was your study schedule like to study for step 1?

- Already talked about it.

M1: How did you keep the concepts you learned earlier in the semester fresh in your mind so you could recall for step?

- Just keep repeating the material as often as possible.

M1: Did you feel the school adequately prepared you for comp and step?

- Sure. But it is important to make sure you understand that blocks and your success in a class is not a good judgment of where you stand. Shelf exams are a good judgment for that moment, but you will forget a large amount of that material a few months down the road.
- Preparation for comp and step is a second job you have to make time for and that is the bottom line. Reviewing is key, find the time, you will succeed.

M1: What did you do to learn all the material
from Med 1-5?

- Studied

M1: Difference between blocks vs shelf?

- Most of the time shelf exams are harder. They are different. In order to score well on shelf exams you need to be studying and prepping for shelf exams studying board relevant material. Shelves are less detailed but the questions are very diverse. So you need to be ready for anything. Example: anatomy won't just be cardio. It's a cardio question, then lower limb, then neck, then some embryo... ect. It takes practice to get good at doing questions like this, so prep for shelves with questions.

M1: Resources to study for: blocks? Shelves?
Step? When to start step studying for students
who want a high score for competitive
residency?

- See the earlier slides.

M1: What was the Step 1 test like?
Question difficulty? Subject coverage?
When you receive your score?

- Step is a fair exam. Limit the materials you use and make a plan. Subjects med1-5 are covered on the step. Some classes here are given less emphasis like biostats. Biostats are very very high yield on comp and step. Spend time learning them.

M1: Study schedule Med1 to Med5 (typical day).
How was comp, research paper, step 1. Do you
have to stay on the island for preparing for
these?

- I studied till midnight or later most nights and worked hard from day 1. When I was in orientation for med 1, a med 5 told me to “study the material till you are finished every day, do this every day, repeat all of it on the weekends. Your only time off is the night after blocks.” I stuck to this and it worked for me.
- **Don't be afraid to try new things** and **make sure your time is productive**. If you can't pay attention in class read the slides yourself, or read something else, or take notes, or do note cards from anki on your computer, or do questions. Make sure you find out how to learn. I am still trying new things .
- RLRA is a research paper that is taken seriously at this school. Make sure you do it correctly.

M1: What kind of options were you given for clinical locations?

- See the possible places you can rotate on the website.

M1: Did you have to set up your clinicals by yourself or did the school assist?

- School helps for year 3. We need to do this on our own for year 4.

M1: Can you practice in London after residency?
Can you do clinicals there?

- Talk to the clinical Dean regarding clinical rotations. You can probably practice anywhere in the world given that you have completed boards in the country of interest and you speak their language after residency, but I am not entirely sure. .

Med 1: I need Vit C.

- This is not a question