

# Myths and Realities Concerning Step 1 and the EPAs

Medical school admission attempts to select for promising students. Residency recruitment selects for promising clinicians. Residency programs recruit on the same basis as any other job application. They need to know that you can perform the duties required and that you will

## USMLE Step 1

- **Myth** Step 1 is a reward system. You are rewarded for a good score by a residency program giving you a high rank. This is like receiving the "Step 1 Award."
- **Reality** Step 1 is an insurance policy for the residency program that you won't fail annual in-service board exams. It is a probability estimate that successful scores on national exams predict success on in-service exams.
- **Importance of in-service exams** specialty practice. Inadequacy of the required didactic activities, and failure of an in-service exam are a form of intervention possibly including dismissal from the program. If you seem like a problem for you, it is an even bigger problem for the program. They can only hire once a year, i.e. at the match. A hospital, by hiring you, can't hire a physician immediately. Step 1, therefore, is insurance that they won't lose you for failure to pass their exams.

## Core Entrustable Professional Activities for Entering Residency (EPAs)

- **Myth** The EPAs are a list of expectations by medical schools. This is one of the ways to evaluate students in their clerkships.
- **Reality** The EPAs are a list of expectations of residency programs. They are clinical activities that residents can be "trusted" to perform without supervision on day one of residency. The EPAs were detailed in a special report after a study showed that residents were not performing these activities.

your training. Competency is acquired after skill development through several years of supervised practice. A medical graduate who is not entrustable, therefore, must be supervised until they can be left to perform the basic, or "core", entrustable activities in clinical practice. The residency program is burdened by non-entrustable medical graduates because they have to pull residents and/or attendings off of their supervisory duties to supervise the new residents. This is expensive financially and compromises the quality of care provided by the residency program. When a program director can be assured that an applicant will be entrustable, they will be more inclined to rank that applicant above others.