

Your school/program	When did you start studying specifically for Step 1, what resources did you use, and when did you use them?	Did study materials for Step 1, Step 2, and shelf exams overlap at all? If not, how did you schedule your studying for the different tests?	Did you take Step 2 CK soon after Step 1, and if so, would you do that again?	How did you balance studying and rotations?	Did your third year rotations strengthen your understanding of the pathophysiology or did the gap cause you to forget details?	Are there any distinguishing changes to the curriculum or support systems that helped your class succeed?	Finally, would you recommend taking Step 1 after third year, and/or do you have any other tips, comments, or suggestions?	When did you take Step 1 and how did that affect VSAS application timing, if at all? Did you have to delay your application for aways?	Could you briefly describe your curriculum, specifically how long the pre-clinical period is and when you take Step 1 in relation to core rotations?
Vanderbilt	I used First Aid throughout my preclinical year, but I didn't start studying in earnest until my dedicated 6 week study time. During that time, I used First Aid, Pathoma, and UWorld.	My study materials for Step 2 significantly overlapped with what I used for shelf exams (MKSAP and UWorld). However, I didn't take these at the same time. I took the shelf exams throughout my second year (that's when we do our clerkships), and I took Step 2 CK in March of my third year.	I didn't simply because I was too burnt out from studying. However, if I had been able to find the discipline/motivation to do it within a couple of months of Step 1, I would have. Mostly because I was closer to all the shelf exams then, which were more pertinent to Step 2.	I didn't study for Step 1 during rotations. I studied for Step 2 during 2 light rotations (Radiology and primary care) when I had a lot of afternoons off.	I definitely forgot a lot of the details from my preclinical year after going through clerkships. However, I knew the clinical presentations cold from having done all of the shelf exams.	Yes, we only have one preclinical year, and we do all of our clerkships during second year. This means that we have essentially all of third year (which is all electives and research) to take Step 2.	I do think I had an advantage on Step 1 by taking it after my clinical rotations, but I think that worked specifically in the context of my curriculum (where we only have one preclinical year, so we still take it right after 2nd year). I think it would be insanely stressful to have to do both Step 1 and Step 2 after 3rd year, when you have so much else going on (ERAS applications). Plus, I think knowing your Step 1 score earlier is important for career planning. It would be really difficult to be planning on a career in a competitive specialty and have to readjust your expectations because of a Step 1 score in the very few months between the end of 3rd year and when ERAS is due.	I didn't do any aways, but it wouldn't have affected that for my classmates since most people had almost a year between Step 1 and their aways (since we took step 1 in August after our second year and most people didn't do aways until maybe June at the end of third year).	See previous questions
[Missing data]	6 months out. USMLE-RX 1st + First Aid Review. Pathoma and Sketchy Micro/Pharm. Then UWorld and DIT in dedicated time period.	Yes. Shelf exam studying often helped for both step 1 and 2. Created spreadsheets to keep track of what I've studied and what I have left.	I did not, many of my colleagues did after only 2-3 weeks of dedicated step 2 CK study time and they have all reported great results.	A well planned schedule.	Strengthen.	3rd year first is a MAJOR advantage. It plays out that way for all students I've spoken with in the end despite the anxiety up front.	Yes. Make a schedule. Stick to it.		

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FIU	<p>The biggest benefit to taking step 1 after third year is the ability to reinforce basic science details during the entire duration of third year. Everything you review/learn while studying in a clerkship will benefit you on step 1; Thus, if you study well for clerkships and truly try to master the material you will be benefiting your future self. My institution allocated 5 designated study weeks at the conclusion of third year (April) and expects most students to sit for the exam between May and early June. Most individuals at my institution find that the 5 week study period is sufficient to perform well on the exam. If one was applying for an especially competitive residency (i.e. ortho, derm., plastics, etc.) that highly regards step scores many students began casually studying towards the end of December or beginning of January usually a few hours a week or setting small work goals to cover a resource or study material prior to designated time. The most regarded/widely used resources were: First Aid, Uworld Q bank, DIT, Pathoma, CBSSA practice exams, Sketchy micro/pharm., UMSLE Rx, Kaplan Q bank, and Kaplan videos.</p> <p>I cannot speak on behalf of all my peers but I can describe a basic use of resources/timeline that several of us used.</p> <p>December - March: Watch and annotate relevant pathoma into First Aid 2016, print/watch/annotate Sketch Micro and sketchy pharm. Some students opted to do USMLE Rx in their spare time outside of clerkships. The bank is written by the writers of First Aid and is an excellent way to review first aid / learn core material with explanations taken right from the book itself.</p> <p>April - May: First Aid reading/annotating, USMLE World Q bank mixed timed tutor blocks, reviewing sketchy micro/pharm, DIT</p> <p>Our school offers to purchase either a 6 month UWorld subscription or Doctors in Training (DIT) for students. Most opt for DIT since it is more expensive. It is a solid review course to lay a foundation for studying but is not enough to achieve very high scores.</p>	<p>Yes. Virtually everything you study for a shelf is in some fashion relevant and beneficial to step studying. Most students studied exclusively for shelf exams until December/January of third year. At that point in time most students overlapped studying for step with shelf studying. For example, if you are on neurology students would study first aid neurology, CNS pathoma, etc. Many of us found that shelf studying and step studying was virtually the same. Shelves contain the same basic knowledge and principles as step studying just with the added step of treatment or diagnostic testing.</p>	<p>I did not due to scheduling conflicts with away rotations for orthopaedics. about half of the student body takes CK within 4-6 weeks after step one some people in the immediate 2-3 weeks after step. The other half will take CK at some point later in the fall. The time to take CK is very dependent on desired specialty. Internal medicine, Gen. Surg., etc. require scores for interviews so students need to and opt to take CK quickly after step 1. For other fields that dont value CK as much students take CK later. Generally, most students wish they took step 2 CK closer to Step 1. The exams are both converging and becoming more clinical. Most students find that outside of the monotony and not wanting to buckle down for another exam Step 1 details and concepts are frequent on CK and you will often do better if you take the exams closer together. Many students outperformed their already excellent Step 1 scores on CK taking the exam soon after step 1.</p>	<p>Varies from student to student. Some would study rotation relevant step material (like FA neuro on neurology) for half the rotation then use more clinically relevant resources for the second half. Some student studied only relevant step material and performed well. It varied substantially person to person. Overall, if youre studying either for a shelf with shelf geared materials or for step they both are going to benefit your score and knowledge base.</p>	<p>Absolutely. The easiest way to conceptualize the benefit of third year is this - you master 90% of the pathophys. and now go back and fill in the 10% composed of tiny step details. For example, you will learn about wilsons disease on internal medicine how it presents, the pathophys., treatment, etc. and then when it comes time to study for step you have to just fill in small gaps by learning the names of the genes their inheritance patterns and some other minutia.</p>	<p>Nothing that sticks out in my mind. We have a new curriculum implemented since our schools founding in 2009.</p>	<p>Absolutely. Step 1 after third year is a full calendar year to further solidify concepts and knowledge that is beneficial to step 1.</p>		

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University of Minnesota - Twin Cities	This survey response is specific just to me (I happen to be the OSR rep, but I'm one of the few people at my school that took step 1 after taking my 8 week medicine rotation). I started studying for step 1 after our last block of course work for 4 weeks, then took an 8 week medicine rotation, then spent the next 6 weeks studying for step 1. I used Doctors in Training, Sketchy Medical, USMLE Rx, and First Aid. I used DIT the first 4 weeks and the rest after completing my medicine rotation.	The medicine shelf and step 1 overlapped a tiny bit, but I mostly focused on step 1 during my dedicated studying time and then just studied for the shelf during the medicine rotation.	No, I will be taking step 2 in the fall of 2017 and took step 1 August of 2016.	I didn't - it was nearly impossible to overlap step studying with shelf studying/rotations.	NOPE - definitely forgot the details step 1 asks.	No, this is a new thing at our school and I was one of the few people that did it that way.	I would not recommend taking step after any rotations. It is too hard to get the studying done while trying to balance long rotations (especially medicine where I was at the hospital 70-80 hours/week) and shelf studying with step information. I ended up failing my medicine shelf because I did not focus on either the shelf or the step exams and I did not have the knowledge base from having already taken step 1. I do not think that the clinical rotations really help you with the information that step 1 focuses on because those questions are too detailed. The residents and physicians that you are working with on the rotations do not even know that information anymore so if you ask questions about it during the rotations you really don't get great answers.		
Duke Medical School	Most Duke students take 4-6 weeks to study for Step 1 right after their MS2 rotations or between fall and spring semesters of MS3. USMLE UWorld and First Aid are the most popular resources.	Speaking only from personal experience, Step 1 and shelf exams overlap quite a bit.	I didn't and wish that I had.	1-3 hours of scheduled reading/questions every night after coming home, depending on the time demands of the rotation.	I took Step 1 after rotations. Rotations helped a lot with the big picture, while some of the finer details had to be relearned for Step 1.	Flexibility. Students can take Step 1 at any point during their third year. Some students--like me--felt that studying for Step 1 right after taking shelf exams was very helpful, while others felt burned out after rotations and were able to better approach their dedicated study time after spending a few months doing research.	Overall, flexibility is key. No single solution will work for every student.	VSAS application timing has never been an issue at Duke. We take Step 1 during our research year.	MS1 -- basic science, MS2 -- clinical rotations, MS3 -- research/scholarly experience, MS4 -- clinical rotations. Step 1 is most commonly taken during MS3, either at the very beginning or over the winter break.
NYU School of Medicine	First Aid and Uworld questions. Began after core clerkships during dedicated study time for Step	Most of us used uworld for step 2ck for shelf exams and for Step 2. We studied for the shelf throughout the clerkship using the qbank and one rotation specific book (ex. blueprints, step up to medicine, case files ect.). Step 1 does not overlap at all.	Most of us take Step 2 CK within a few months of Step 1	Less sleep	Me personally it probably caused me to forget pathophys for certain things like drug mechanisms, but strengthened things like organ systems.		I would recommend reading step 1 during pre-clinical years on the subject that your coursework is covering. Taking Step 1 after clerkship year does seem to help the majority of people perform better on the exam.	February, and it didn't delay VSAS	pre-clinical of 1.5 years followed by core rotations of 1 year and then Step 1.
NYU	Typically students start studying in late December/early January after completing core clerkships. They take approximately 6 weeks. I personally used Uworld and First Aid during those six weeks and did not study specifically for Step 1 outside of that dedicated time	For Step 1, no overlap. For Step 2 and shelf exams, I used Uworld Step 2 qbank almost exclusively. For shelf exams, I supplemented with relevant text/review books (e.g. pestana's, first aid for psych, case files for obgyn) but for Step 2 I exclusively used Uworld	I am an MD/PhD, so I took Step 2 five years after taking Step 1. Typical students at my school take Step 1 in February of third year and then take Step 2 sometime between July and January of 4th year, depending on personal preference.	During rotations I tried to study for a bit on at least half the days when I got home and also on weekends. I took two weeks of dedicated study time for Step 2	I think it strengthened my understanding. I definitely have gaps but they tend to be in the very basic biochem and pharmacology type of stuff that we learned first year and less the pathophysiology	not sure, although the average step 1 score did go up after the change to an 18 month preclinical curriculum and taking step 1 after clerkships	yes, I think it helps	I didn't do aways. I don't really have a sense from my classmates whether this was an issue	18 month preclinical. MD/PhDs take Step 1 at the end of the 18 months. All other med students go on to do 12 months of core clerkships and take Step 1 at the end (approximately February of the third year of med school total)

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<b>Baylor College of Medicine</b>	N/A	studied for shelf exams exclusively in M2, haven't started Step 1 studying	N/A	relying more on the overlap of clinics and Step 1 material rather than exclusively studying for Step 1	I forgot details, but the knowledge that I gained clinically has probably helped me master pathophys more than book studying would have.	not that I can think of	Although I haven't taken Step 1 or started dedicated test prep, I really like the way our system works. I feel like I have a much better understanding of the material than I did in my first two years, and I think that seeing a lot of the material firsthand in the clinic has helped me retain much more knowledge.	N/A	1.5 years preclinicals --> 1 year core rotations --> Step 1 in February-ish of M3
<b>BCM</b>	January of MS3 year. Used UWorld, Kaplan, Rx	Absolutely, having done UWorld Step 2 was very helpful for Step 1	Have not taken yet	Studied a few hours every night on weekdays and most of the weekends	Strengthened, clarified many misconceptions		Absolutely	Mid-July (most take in Feb/March though). Have not done VSAS because currently on a research year	1.5 preclinical, then step after 1 year of rotations (usually all but 1 core rotation)
<b>Perelman School of Medicine at UPenn</b>	Midway through third year (February). First Aid, UWorld, Pathoma. Did not start using these resources until third year.	Shelf exam and Step 2 study materials overlap. Also, shelf questions were helpful in prepping for Step 1.	No, took Step 2 December before graduation.	By mapping out which study resources and questions I needed to do before the start of the rotation	Strengthened	Flexibility is key. After clerkship year finished, we only had 12 months of graduation requirements to complete over an 18 month span. We were allowed to schedule our Step 1 and free blocks however we wanted to.	Yes, absolutely. Taking shelf exams before Step 1 really helps prepare you for NBME style questions. Also, going through clerkship year makes any pharm or treatment question very easy. Lastly, there is much more flexibility to schedule the exam after the end of clerkship year.	April 2015. It never affected VSAS.	1.5 year (18 month) pre-clinical period which includes a 6 week summer break. Step 1 is taken after clerkship rotations.

Survey conducted by Elliott Fox, Medical Student at the Netter School of Medicine, in the Fall of 2016 via OSR Listserv  
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