

The Interviewing of the Fellows



The interview season has begun once again. Prospective fellows are paraded around, looking like missionaries with their pressed suits, shining faces, and shined shoes. I had looked through 350 applications to glean the top 50 young men and women to interview for 4 fellowship slots. I start off each interview day with the same introductory talk, including the same jokes, and I try to keep sounding as enthusiastic every time.

The decision-making process has been made increasingly challenging. It starts with the application itself, which blocks such information as age, birthplace, citizenship, ethnicity, marital status, and whether the applicant has children. It does not contain any information on potential visa issues, which can be important for a variety of reasons—including the potential financial commitment of my hospital. I rarely pay attention to the personal statements, truth be told, as they all sound the same. Their curricula vitae give me clues as to what the applicants have accomplished both in and out of work (see my letter from September 2013 on the hobbies of fellowship applicants).

What should be giving me the most guidance is the letter from the program director. Unlike faculty members who have been selected with the idea that they will provide a good review, I would expect the program director to be an honest soul. Nonetheless, it is like Garrison Keillor's mythical Lake Wobegon, where all the children are above average. In this case, all the candidates are in the top 5% to 10% of residents, leaders of their group, and suitable to care for the letter-writer's own family member. Those who write the letters of recommendation certainly do not speak the language I am searching for to guide my decision: "very good" means "not so good." "Excellent" is "not outstanding." One candidate was recently described as "exceptionally exceptional" (lest I miss the fact that she was quite good).

The interview itself becomes all-important. I was given a list of questions I was allowed to ask, and a longer list of questions not to ask. I am not allowed to inquire whether applicants are married, what their spouse does for work, or if they have or plan to have children. Also on the exclusion list is asking where applicants were born, whether they are a US citizen or lawful permanent resident, whether they go to church, whether they smoke, or if their name

is Irish (what the list-writer has against the Irish is beyond me). I cannot inquire whether the person has a disability or ever has had back problems, has sought any medical treatment in the past year, or is on any medications.

I can ask whether the applicant is authorized to work in the United States—although if the answer is no, I cannot ask whether the person is eligible to receive work authorization. I can ask interviewees if they can perform the position without accommodation. In other words, I can be deceptive and get the same information.

When I ask the interviewees to describe what they think they will be doing in 10 years, almost all say "academics." What floors them is when I ask them what sets them apart from the rest, and then beg them not to start off with, "I am a hard worker." I understand that all the applicants are hard workers; otherwise they would not be in this hot seat. Despite this admonition, I have yet to get a response that is other than generic.

Following the interview, all of the applicants write me a thank you note in which they describe how my institution (of the 15 or more at which they are interviewing) is clearly the one for them.

When the visits are all over, the hard work begins: ranking those who we think would make outstanding fellows, and not listing the others. I do think that most of those who pass through have the potential to be outstanding in whatever sector of hematology-oncology they decide to pursue. They have made it this far, and have impressed people at their institution who work with them on a daily basis. It is up to us—the teachers, the mentors—to bring out and nurture what lies within. We cannot assume that one program structure is suitable for all fellows. We have to help them figure out where their passion lies and provide them the opportunities to cultivate that passion.

Until next month...

A handwritten signature in dark ink that reads "Bruce D. Cheson". The signature is written in a cursive, slightly slanted style.

Bruce D. Cheson, MD