The Physician Assistant School Interview

ESSENTIAL STRATEGIES

to Blow ‘Em Away and Claim Your Seat in Class!

PAUL KUBIN, PA-C
Author of Crafting a Winning PA School Essay
The Physician Assistant School Interview

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How This Book is Different

When I became interested in interview coaching for PA school hopefuls, I looked for books and websites that would provide me with the expertise to teach students how to make great impressions—how to give an interview that would get them in. What I found was definitely lacking.

The most “popular” books were oriented toward:

*Teaching you how to respond to every question you might be asked.*

Just as schools are different, so are their interviews. You’re never going to prepare for all the questions they might throw at you. If you do get lucky and have a prepared answer for one of the many questions they ask you, it’s likely to sound rehearsed—particularly if you’re reading the same books I found before I started this one. Rehearsed answers, my friends, are the kiss of death. Some schools actually score your interview in part on how scripted your answers sound!

I have even spoken with PA school interviewers who say they can even tell what interview book a student read by how they answer particular questions! That’s because many students read the same books and use the same answers given in them nearly verbatim.

You wanna sound like all the other clones? No thank you. It makes absolutely no sense to answer the way you can be pretty sure everyone else will. You want to stand out as an individual.

**Encouraging interviewees to morph themselves into what schools are looking for.**

Seems like bad advice to me. Trying to be someone you’re not doesn’t help you look credible, because you’re acting. It also assumes that you actually know what they are looking for, and believe me—you don’t. There are 180+ schools, and each one is different. Finally, if you pretend you’re someone else to get in, and you’re “successful,” there’s a good chance you will find yourself in a school that’s a bad fit.
Providing shallow, common sense suggestions, such as “Make eye contact,” and “Dress professionally.”

This kind of information gives the readers of those books something to ease their anxiety, but do you really need a book to tell you to look at someone when you talk to them? Or not to sport your Wranglers at an interview? These bits of the obvious do very little to help you get your strengths and personality across. It’s not bad advice, but it comes cheap.

Perhaps worst, most of these books instructed their readers on “How to sell yourself.”

Selling yourself in a professional medical environment is just dumb. Don’t try telling them “My efficiency plan decreased care delivery times by 15% increasing overhead costs.” And don’t tell them, “My experience triaging and treating high risk patients in the back of an ambulance will be an asset to your program.” Statements like these illustrate what’s funny about one of my favorite jokes:

“Jim is the best salesman there is—just ask him!”

Do you trust used car salesmen? Of course not. I’m not saying they’re bad people, but when we walk into a store and an employee gives us a slick song and dance about why we should buy from them, our guard goes up. We sense that they aren’t trying to help us as much as they are trying to make a sale. Somehow, we know they’re not being genuine.

Doing that sort of thing in a professional school interview is no different; interviewers know that if you’re going on and on about about your merits, they can’t trust you.

In short, after reading the books the other books about interviewing for PA school, I knew there must be a better way to make a good impression.

As it turns out, there’s plenty you can do.
This Book’s Approach

Taking a tack much different from other books, this one will:

- Teach you to be yourself. When you’re being yourself, you’re more credible, real, and charismatic than when you try to be someone you aren’t.
- Give you strategies, rather than pat responses, to help you answer any question you’re asked.
- Get you thinking deeply about the questions that matter most — which will ready you for other questions without needing to memorize and recite canned spiels.
- Train you to “share yourself,” and give the interviewer space to approach you with true wonderment and appreciation. Great interviews are less like buying a car, and more like seducing a lover. (Less expensive too!)

Sound too good to be true? I assure you it’s not. It just takes knowledge and practice.

In the following pages you’ll learn that you can be your best self, feel great about your interview, and claim your seat in PA school.
Introduction

When I was a senior at Virginia Military Institute, I nearly blew off my final exams. Grades were not my only concern. The Institute had me in classes 6 days per week in addition to regular inspections, military duty, athletics, and clubs. “VMI is a good place to be from,” we would say, “but a sucky place to be at.” Four years into it, I was tired and just wanted to snag my bachelor’s degree in Biology and be done. It was tempting to do just enough—just enough to pass my exams, just enough to end my 4 years without running myself into academic trouble, and just enough to get me the hell out of there.

My mom back in California, knowing me very well, did what she could to keep me motivated. “It’s just one last push, Paul,” she would tell me, as she had many times before over the years—and as much as I love her, I hated hearing it.

But she was right.

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*I’ve always considered myself to be just average talent and what I have is a ridiculous insane obsessiveness for practice and preparation.*

-Will Smith
Putting in the extra time and effort — which I usually couldn’t help but do after hearing her words—often made the difference between getting a B in a course and getting an A.

If you are reading this book, then you are “one last push” from joining the best field in the world. What remains is to crush your interview.

You have beaten the odds so far.

According to the Physician Assistant Education Association’s 28th Annual Report, in 2013-14 academic year, over 21,000 students applied to PA school, and 7,887 students were enrolled in 168 PA programs. By the time applicants got to interviewing, they were up against the cream of the crop. Odds of gaining acceptance were somewhere between 1 in 2 and 1 in 3, meaning 50-65% of those who interviewed were denied admission and sent packing.

Not enough has been written about physician assistant school interviews. This isn’t surprising considering PA is a fairly new field, but after talking with and advising thousands of applicants and formally coaching hundreds of them, it’s clear that there’s plenty you can do to improve your chances by preparing for your interview. Interviewing is a learned skill, and like any learned skill, with basic knowledge, practice, and feedback, you can master it.

After coaching Pre-PA students on preparing for and gaining admission, I know the huge difference that great interview preparation can make. Notice that I wrote great interview prep. Plenty of students prepare for interviews. Unfortunately, because they lack of interview experience or have misconceptions about what the PA school interview is about, their preparation often doesn’t change the outcome. The majority of interviewees commit typical and avoidable mistakes, or simply fall prey to being average, and therefore forgettable.

If I’m scaring you, that’s not my intention. My intention is to emphasize that the difference between great preparation and good preparation is usually the difference between getting in and getting a letter that begins, “We had many great applicants this year, and regrettably…”

I take my work very seriously. I love helping bright students of all ages break into this profession, and this book has been a labor of that love. Used properly, It will provide you with great interview prep.

Hear me: you can dramatically enhance your interview by studying the basic principles presented here and PRACTICING. I’ll even share with you how to go about that practice. After learning the skills presented here, you will even be at an advantage when you begin applying for your first job as a PA.

Of course, no book or person can guarantee you admission. But this little baby will maximize the chances of success on your big day, and leave you proud that you shared the real you.
The Physician Assistant School Interview

Tips and information in this book have been culled from everything I know about the PA school interviewing process after studying and writing about it since I started Inside PA Training as a PA student. I have drawn from after-action reports from successful and unsuccessful interviewees, discussions with admissions committee members, and best interviewing practices in other fields. Heck, I’ve even drawn from Mom. And with my mom on your side, I’d say you’re in very good hands.
Inside the PA School Interview

Interview day is always a whirlwind.

Most applicants are so nervous when they get to their interview that they focus only on their own internal dialogue. *I need to remember what to say if they ask me about blah blah, be sure not to mumble, project confidence, blah blah blah...*

Nothing wrong with that—it’s natural—but there’ll be plenty of other things going on around you, and understanding them will give you an advantage.

What You See at Your Interview

Interview days have predictable structures. If you’re lucky, your interview invitation will describe a little about how the day is supposed to go, but often it won’t tell you much beyond when and where to show up.

**Commonly, interview days may include:**

- A greeting talk from one or more faculty members
- A talk from someone in the financial aid office
- A tour of the facility
- The chance to meet students in the program
- A writing exercise on a topic they give you
- The actual interview (one or possibly multiple)

The entire experience will usually take the better part of a day—say 9 AM to 1 or 2 PM, with the actual interviews usually lasting less than 30 minutes each. This means much of your time will be spent on things other than your “actual” interview.
Insider Tip:

Soak in as much as you can about the program while you aren’t interviewing. It can give you great hints about what values the program holds, how the curriculum works, and the “personality” of the school. If you’re lucky enough to have a tour before your interview, ask questions and pick your tour guide’s brain. This can lead to valuable insights you can share if you are asked “Why do you want to go to school here,” or “Why do you think you are a fit for our program?”

The Interview is the Whole Experience

Plenty of books recommend treating the entire day as your interview, so I’ll touch on this only briefly. Conduct yourself professionally and appropriately at all times. If you meet students in the program, know that they may be evaluating you as part of the interview. Be friendly and courteous to everyone you come across, including the receptionist, your tour guide—even the janitor—because you never know who is reporting on you...

Formats

Several interview formats you may encounter, either singly, or in combination, include:

- Individual interview (one on one)
- Group interview (one or more faculty member interviewing a small group of 3-5 applicants, usually in a “discussion.”)
- Group task, such as writing a mission statement or building something as a team with other interviewees.
- “Multiple Mini Interview” (MMI) format—growing in popularity—in which there are several stations, each with its own mini-topic or purpose.

These will be discussed specifically in a later chapter; for now it’s enough to know that there may be surprises, and you should be ready for anything.
Open vs. Closed File Formats

*Open File format* interviews are the most common. Here, all of your application will be in front of the faculty when you go in, and they’ll know a lot about you already when you hit the door. Because they have your information in front of them, your job will be either to

1. Give more detail (paint a picture) about the things they already know about you, or
2. Enrich what they already know about you with things that didn’t make it into your application. Job interviews, for example, are almost always Open File.

*Closed file format* interviews are less common. In a closed file interview, your interviewer won’t know anything about you when you hit the door. Schools that use this format do so out of the belief that the closed file format is more objective, because your performance in person can’t be influenced by what you said in your application at all. They won’t know your GPA, they won’t know what you wrote in your essay, and they won’t know what kind of experiences you’ve had. In closed file formats, be ready to tell them the basics about you as you answer their questions. This means you will need to drop more information about yourself as you answer questions. You still shouldn’t “sell” yourself — just assume you’re talking to someone who doesn’t know anything about you.

Usually you will be told in advance if you will undergo an open or closed file interview. If your interview invitation doesn’t indicate open or closed, it’s fine to call them and ask. Just realize that they may not tell you.

What You Don’t See at Your Interview

If you have seen *The Wizard of Oz*, you will remember that the wizard was intimidating and God-like until Toto pulled back the curtain to reveal a frumpy old man talking into a microphone and pushing buttons. The audience’s perception of the wizard had a lot to do with which side of the curtain they saw him from. PA school interviews are that way too.
A few things that go on behind the curtain:

**Interviews are a chore**

Choosing a new class is a huge job, and to many of the faculty, it’s a major distraction from what they see as their primary job: teaching students and running a program. Whether they love interviewing prospective students or hate it, it's a hassle. And because it's an intermittent duty, it isn’t always smooth. Interviews are the most labor intensive part of selecting candidates, and when each interview cycle is over, most of the committee members breathe a collective sigh of relief.

**Interviews can be chaotic**

As I said above, things aren’t always smooth. Many faces come to interview, and sometimes just keeping them all straight is a challenge. After the interviewees are gone, the faculty members are left with a mountain of data to sort through, and at times they struggle to keep it all straight. They will have notes about each candidate, but much will be left to their memories. They think things like, That one interviewee that I liked so much—was that the girl who was a physical therapist in Canada, or the one who spent a summer in South Boston as an EMT? Even at the most organized schools, with that much information, things can get confused.

**Committee Members Get Bored**

Faculty members are human, and therefore prone to boredom. After asking the same set of questions to a large cadre of applicants (sometimes year after year), much of what they hear from applicants will blend together. When someone a little different walks in or when someone says something unexpected, they perk up in their chairs and listen with keen interest.
What All This Means For You

“Help” your interviewer

Your attitude should be one of helping the interviewer. I don’t mean by offering to get them a cup of coffee or tie their shoes for them. There are however, several ways that you can make their job easier:

- Help them by understanding what they (your interviewers) go through. In my own PA school interview, during one of the moments of inevitable small talk, I made sure to tell them “I sure don’t envy you guys. It must be a huge job to pick a class.” I didn’t do this to suck up. I did it to communicate that I have empathy (I’m able to put myself in their shoes), and that I’m humble (I don’t assume I’m the only one there who was worthy of admission). I learned this as a psychotherapist— sometimes you don’t need to fix anything to help someone. You just need to help them feel understood. Everyone appreciates the feeling of being understood. Communicating that helps you connect with your interviewer. Knowing what goes on for interviewers is particularly helpful if there is any mix-up or delay during your interview day. A little statement like “No problem—I’m sure this is a hectic day for you guys,” is a nice way to “help” your interviewers.

- Help them by starting your answers with a short summary. Don’t plunge into a story or a long explanation of your opinion on something. Instead, give a summary of what you intend to say. In the military, they say “First, tell them what you’re gonna tell them. Then tell them. Then tell them what you told them.” It’s good advice, and it avoids confusion. When they ask you to talk about yourself, start with your name, age, and the most important 2 or 3 facts about yourself. “My name is Kelly Lee and I’m a 26 year old graduate of Franklin College in Biology.” This factual summary will help keep your interviewer focused on who you are. Everything else can wait until later in your answer. This is particularly important in closed file interviews, since by design, they won’t know anything about you at the start.

- Help them by answering the question you are asked. Easy enough right? When I do mock interviews with PA school applicants, they often ramble on about things that I haven’t asked them, and then leave out the answer to what I need to know. Not wasting time trying to “sell yourself” will help here. Of course, if they ask you a question that relates directly to one of your experiences—even if it means you need to tell them a story—by
all means, share that experience with them. But avoid filler, and make sure that your responses give them the answer to the question they have asked.

- Help them by being concise. If you can answer the question in either 60 or 90 seconds, 60 is usually better. I’m not telling you to cut things too short — just don’t blather on and on. They have many people to interview, and rambling is unhelpful and annoying. Remember, your interviewers have a hard, sometimes chaotic job. Help them by not wasting their time.

You Must Stand Out

The cardinal rule to interviewing for anything when there are many other candidates, is to be unforgettable. You needn’t be odd or do a standup comedy routine, but you should strive to be the real you. You will read much more about this in the “Basic Principles” chapter coming up, but for now, understand that blending in is a mistake.

Several ways to stand out:

- **Stand out by giving a unique answer.**
  Start by being sure that your answer isn’t exactly like (or very similar to) any response you read in this book! Think for yourself. Ask yourself: how would the “typical” candidate answer this question? I took an SAT exam prep course years ago by Princeton Review, and they had a term for the generic, “typical” test taker. They called him “Joe Bloggs.” Their mantra while studying SAT questions was to start each question by asking yourself, “How would Joe Bloggs (the average, not particularly bright test taker) answer this question? They then told you to look at the answer choices and cross out the Joe Bloggs answer(s)—because Joe Bloggs is a sucker, and what he chooses will, 9 times out of 10, be wrong. Great advice, people!

- **Stand out by letting your freak flag fly, baby.**
  Okay, I’m exaggerating. The point here is that you should let your personal quirks and peccadilloes out, instead of hiding them. Real people — interesting, unique people — have quirks. No good novel has a protagonist without flaws. In The Hunt for Red October, Tom Clancy’s protagonist Jack Ryan is a sharp FBI agent who is afraid of flying. In the TV show Monk, detective Adrian Monk has OCD, which causes him all kinds of entertaining problems. Flaws make people interesting. Sure, you’re not going to tell them that you
hate people, or describe your sexual fetishes. But what’s different about you? Do you obsessively collect Star Wars figurines? Have sweaty palms? Dream of learning the trapeze? Like to turn kelp into gourmet dishes? Don’t be afraid to share it if it might be relevant to knowing the real you. More on this later.

- **Stand out by being a big thinker.**
  The vast majority of interviewees want nothing more than to get into PA school — any school. Well, I have news for you: that’s not your goal. If your goal was to get into PA school, you would become a Starbucks Barista or a singer or something the minute they offered you admission, because you would have achieved your goal of being accepted. Your goal is to become a PA. Not just a PA, a great PA. Obviously, you want to be humble about it, but interviewers are enraptured by big thinkers. Big thinkers have opinions that they aren’t afraid to express. Big thinkers aren’t satisfied to barely make it into a class or to do what most other people do. How will you change the world? What do you want to accomplish in medicine? When an interviewer sees a big thinker before them, they think, “Wow, this person is on to something. We don’t want to miss out on this one.” More on this later too.

- **Stand out by having a convincing story.**
  Every interviewee will have some story about why they are there. Many of those stories are simply not convincing. Some applicants won’t paint a picture that makes becoming a PA the natural next step in their life. Indeed, many will have decided to apply to PA school very late in the game, as a “Plan B,” in case they don’t get into medical school, or not fully understanding what they are getting themselves into. Your story needs to make sense and be believable, so that they can really see why you are sitting in the interviewee chair. We will discuss stories in more detail ahead — they are crucial to your interview.
Summary

Plenty goes on behind the scenes at PA school interviews. Your ability to understand the forces that are at play is important to coming across as a helpful, empathic, organized, big thinking, unique person who deserves admission. Your ability to tell an interesting and convincing story about who you are can make you stand out from the “typical” applicants who all sound very much alike. Being 100% genuine with them about who you are is the only way to reliably accomplish this.

We will give you the tools to get your best self across. But first we need to spend a little time helping you understand the basics that will guide you when you decide how you will answer any question.
9 Principles for a Great Interview

Great interviews sound much different than “bad” ones, typical ones, or even decent ones. Even though great interviews are not predictable per se, the ways that they stand out are. Learning some best practices will help find a path to a great answer, even if the question catches you off guard. I have distilled these practices into the absolute essentials, so that no matter what question you are asked or how you answer it, if you adhere to these principles, you will do well.

1. First “Know Thyself”

Socrates was a sharp dude, and from him, we get the first principle of giving a great interview: know who you are. It should go without saying that you need to be that person. But it’s harder than it sounds—it’s human nature to puff yourself up when you’re being evaluated, or to try to be what someone else is looking for. Job interview coaches routinely teach this approach. But you aren’t going to impress anybody if you act or lie. A seasoned interviewer will pick up on the subtle unease that goes through you if you say, that you want to go into primary care when really
you don’t. Not only should you not try to be someone else, you should do your best to be yourself, warts and all. I cannot stress this enough: be human. Your flaws make you come alive among a sea of applicants who are careful to avoid sharing opinions, careful to avoid talk of life mistakes, and careful to remain conventional.

The most amazing interviews come from applicants who are genuine, even if they share (and often because they share) some of their quirks. This doesn’t mean that you need to tell them you are disorganized, introverted, or forgetful — some flaws you shouldn’t share. But if you show none, your interview will not be as strong for it. If the truth is embarrassing, unflattering, or risky — and you speak about it — you will share it in the most flattering light, and you will make it clear that you possess self-awareness. More on this when we get to “The Big 12.”

2. Be likeable

Being polite isn’t enough. Be friendly. Medicine is a very personable field, and in school you will need to get comfortable meeting others (patients, students, preceptors) and developing strong, trusting relationships with them. How do you go about being likeable? There are many ways. Start by smiling. As I said above, show a few little flaws. Be truly grateful to be interviewing. Be humble—this is a biggie. Don’t say that you want to become a PA so that you can teach PAs—you aren’t even a PA yourself yet! Nervous? Admit it right away. Laugh at yourself.

Insider Tip:

I used to make a point to find a place in every interview to tell about how awful I am at parallel parking. It wasn’t a flaw they could really hold against me, and sharing it lightened things up and showed that I wasn’t afraid to be a little vulnerable. If you have a little flaw like this, share it and you’ll be surprised how much it will be appreciated.

Don’t you appreciate people who admit that their house is usually a mess, instead of acting like it always looks as great as it does when they have company? What if the qualities above are hard for you? What if you’re introverted? Try sharing other things about yourself that are likeable — perhaps the good side of your introversion: “I tend to be quiet because I choose my words carefully.” Or: “I can seem a little standoffish at first, but once you get to know me, it’s a different story.”

Your interviewer must find something to like about you in order to feel a connection with you.
3. Use stories

Stories are better than plain narrative answers. Stories are interesting, convey emotion, help the listener put themselves in your shoes, and are memorable. They’re also a nice way to say positive things about yourself without bragging.

If your interviewer asks you about your work ethic, a story that demonstrates a time when you worked hard is far more interesting than just saying “I work very hard.” Give your story enough detail that it’s more than “One time a patient said that I made his surgery a lot less frightening.” Use the first names of the people in the story. Share the look on your supervisor’s face when she saw how you solved the problem. Share how you felt before you resolved the conflict with your supervisor. Tell them how the snow stretching out to the foot of Mt. Kilimanjaro looked when you saw it from the summit. Use stories to illustrate your points. You probably shouldn’t share a story for every answer, but to make an important point, a story is usually the quickest, most interesting way.

4. Summary, details, summary

Keeping with the military rule of “Tell them what you’re going to tell them, then tell them, then tell them what you just told them,” I suggest that most of your responses use the following format:

1) A summary statement of your answer that is one or two sentences (“Tell them what you’re going to tell them”).

2) Details to flesh out your summary (“Then tell them.”)

3) A summary statement to wrap things up (“Then tell them what you told them.”)

For example, they may ask you “What is your opinion of the new health care reform?” Before you go into details, start with a summary. Here, it’s okay to use a generalization.

I think it has major problems that will need to be sorted out, but in general, I support it.
You have summarized your answer in one sentence and they know where you are headed. Obviously they will need more — so next come the details. You might say:

The new health care reform has done a great job of leveling the playing field. Now just about anyone can get health insurance, no matter their age, even if they have a pre-existing condition. But costs have still not been addressed. An MRI of your back is just as expensive as it was before the new legislation.

You have explained your summary and your answer is clear. Finally, you emphasize your answer with a summary statement that uses different words than your first one:

But what has been accomplished so far is a big improvement, and I support it because it’s definitely more fair.

Notice the format: summary, details, summary. You shouldn’t use this structure for every answer, but it’s possible to use it for just about anything you are asked.
5. Pause before you speak

Confession time: this is my biggest weakness when I interview anywhere. I consider myself a consummate BS artist, so sometimes I just start talking. My words _usually_ come out right, but sometimes not. There are excellent reasons _not_ to start talking until you have your answer in mind:

1. Most people are not consummate BS artists like me, and even the best BS artists bad days!

2. If you don’t come up with an answer in time, you will be in major trouble. You might talk randomly until you figure out what you’re going to say and end up with a crummy, convoluted answer.

3. Research evidence supports the idea that people who pause before speaking are seen as being more charismatic. Think about it — when someone is asked a question and they pause for a few seconds, don’t you get a little hungry to hear what they’re going to say?

4. Pausing makes it clear that your response matters to you, which in turn makes the interviewer feel that their question matters to you.

5. In a pinch, it’s a great way to stall. More about this in the “Miscellaneous Situations” chapter.

Pause before most of your answers, particularly when you are asked to come up with something on the spot, like a “What would you do if…” question. Pause long enough to at least outline what you’re planning to say. This will seem like an eternity to you, but in reality, it’s usually only 5 or 10 seconds.

**Insider Tip:**

- If you really want to sound great, try pausing from time to time
- in the middle of your response!
6. Back up claims you make about yourself with “evidence”

All applicants make claims about themselves, like “I love to help people,” “I’m a strong leader,” or “I’m a team player.” (These wordings are pretty overused, and just examples). But most applicants don’t follow them with proof, so the interviewer has no idea if these are true. The applicant could be lying or sharing their own “wishful thinking.” Or they could just be plain wrong.

If there’s something you want to convince your interviewer about yourself, follow your claim with some evidence from your experiences. You can use something from your resume, or you can give a brief anecdote to illustrate your people skills, your leadership, cooperative ability, or whatever you’re claiming.

For example:

*One of my strengths is taking initiative. I remember last year—our clinic had a problem with blood specimens being lost and left out too long before being centrifuged. They would coagulate and need to be redrawn from the patients. The MAs all blamed each other for it, which didn’t help matters. So I came up with a workflow solution that used different sections of the lab space to make clear what step each specimen was at in the process. I invited a couple of the MAs to help me so I wouldn’t seem like I was bossing anyone around. We labeled the lab areas and then explained to the others how the system worked. It eliminated the problem and my bit of initiative brought the staff together as a team.*

Or simply:

*I’ve always been good at listening to people so that they feel heard. I spent two years volunteering at a suicide hotline. I must have talked with 300 people who were in crisis, so it’s something I’ve had a lot of practice with.*

Again, you aren’t going to do this with every answer. But you should for any important claim you make about yourself, particularly if it allows you to share something very positive and desirable about yourself as a candidate.
7. Use your own words

Just as it’s tempting to pretend you’re someone you’re not, it’s tempting to use language that isn’t yours. Applicants often do this, and it’s usually because they’re intimidated, and they think that dressing up their language makes it sound “smarter,” or more formal. “Thus” and “therefore” are good examples. No one really uses those words in conversation, and as I’ve said, we want you to be real. Applicants also use trendy catchphrases that they have read or believe will impress the interviewer. Doing this sounds “stiff,” and creates distance from the interviewer, the opposite of what we want.

Use your own language. Don’t talk like cop at a press conference. Don’t talk like you’re with Queen Elizabeth. A good rule of thumb is to talk with your interviewer just as you would with a good family friend (leaving out content that is inappropriate, like expletives). If you wouldn’t say it to a friend while at lunch or on a drive, then you shouldn’t in your interview. Some examples:

1. Contractions like I’m, you’re, it’s, etc. Example: “I am a firefighter in Chicago and at times it is a difficult profession.” Do you really talk like that with a friend? No way. Yuck. Instead, just say “I’m a Chicago firefighter. Sometimes it’s a tough job.”

2. Big words (even medical ones). Would you say to a friend, “He had an acute myocardial infarction and expired”? Of course not. You’d say “He had a heart attack and died.” I worked with a nurse who loved to use the phrase status post. Everyone was status post something. “He is status post MI.” “She is status post Starbucks.” That might fly if you’re in an ambulance talking to an emergency department, but in an interview it’s just ridiculous. Avoid all medical jargon.

3. Euphemisms. Don’t tell them “I want to work with underserved populations.” Use your own words. I like to say “I want to work with people who have nothing.” or “I hope to work with the poor.” (See APPENDIX A: Things Not to Say)

Insider Tip:

Most applicants are far too formal when they interview. I tend to use the word “cool” in interviews because that’s how I really talk. “It was a really cool chance to...” is more believable, endearing, and representative of who I am than, “It was an excellent opportunity.” As long as you aren’t vulgar or inappropriate, your PA school interview should be more personal than professional. Using your own language will help you connect with your interviewer.
8. Know the profession

Even if physician assistant medicine isn’t a new career direction to you, you need to do your homework. Find out what the job is really like so that you can speak about it intelligently. What are the current issues in the field?

Often applicants say what they like about the field is that “You can switch specialties easily.”

Hmmmm. Not exactly true.

You can switch specialties, but that doesn’t mean it’s easy. PAs don’t usually go bouncing around from one specialty to another, because it takes years to become proficient in a new one. Saying “You can switch specialties easily” comes across a little flighty, like you plan to dabble in orthopedics until you get bored and decide to work in psychiatry for a year. You sound naive.

Other things to get very clear on:

- The supervision relationship between a PA and a supervising doc (click)
- The history of the profession (click)
- The licensing process (click)
- Bachelors/Masters—what’s the difference?
- How healthcare reform affects PAs (click)

Inside PA Training has articles on most of these things, but look elsewhere too.

You wouldn’t move to Moldavia without getting a pretty good picture of what your life there might look like. Why would you join this profession without a good picture of what it entails? This is an area that will kill you if you are unprepared.
9. Practice makes perfect

Practice is central to giving a strong interview. I have seen articulate and skilled professionals blow their interview because they either didn’t have time to practice or didn’t think they needed to. It is possible to give a decent interview without practice, but we aren’t aiming for a decent interview—we want a great one.

I will show you later exactly how to practice, but for now understand that practicing your answers is a basic principle. Plan on it to make a strong showing.

Weakness as Strength

Everyone has a weakness somewhere in their application. With so many people applying, sometimes one weakness is enough to take you out of the running. Instead of avoiding it, you must represent it as a strength. Why as a strength? Because perception is all relative. If they don’t buy it as a strength, at least it won’t be nearly as big of a weakness.

If you’re of a certain age, you’ll remember the 1984 Presidential debate when Republican candidate Ronald Reagan sparred with Democrat Walter Mondale. Asked by the moderator if he was too old to be president, 73 year-old Reagan said with a smile:

"I will not make age an issue of this campaign. I am not going to exploit, for political purposes, my opponent's youth and inexperience."

That line got a laugh from the audience, and even from Mondale. Reagan won the debate—and the election—by a landslide. He took what he knew was a potential weakness of his candidacy (his age) and turned it into a strength (experience).

You can and should turn your weaknesses into strengths. You can do it yourself, before being asked, by describing a strength that corresponds to a weakness on your application. (Don’t mention what you think the weakness is!) Or when asked about an area of weakness, you can present the counterpoint and invite them to see things differently.
The 10 Questions You Just Gotta Know

I know you want to get to the questions. Reading them will definitely help to curb your anxiety. That’s why so many applicants scour books and websites to get ready for as many questions as they can.

But the premise of this book is simple: there aren’t that many questions you really need to know - if you know the right ones and you know them well.

Sure, there are hundreds, even thousands of questions that you could be asked. But having an okay answer to a hundred different questions won’t help you nearly as much as having great answers to the ones that matter most. Besides—there aren’t many books out there, so applicants tend to memorize similar—or even the same—answers.

Instead, you’ll want to get great at answering what I call “The Big Ten.” These are far and away the most important ones to be ready for. Why are the Big Ten the most important questions? Because if you can answer them you will be able to tell a story that makes clear to your interviewers:

1) Who you are
2) What you know and believe
3) What you have done
4) What you hope to do in the future

Whether your interviewers ask you these questions specifically, or different ones, these are the things they really want to know. Tell an interesting, convincing, and true story about these, and I promise you: everything else will fall into place.
1. “So tell us about yourself.”

This is the mother of all interview questions, and often the one that makes the difference between admission and rejection.

It doesn’t sound like a question, but it is: “Who are you?” They may not ask it exactly this way, but you must prepare for some version of it. Most students have a hard time with it because it’s broad and it requires them to talk about themselves, which for some, feels a little narcissistic or weird.

Think of this question like a gigantic wrapped birthday present. Yank the ribbon off of this gift and shred the paper just like you did when you were six, because this question is a softball, and you may not get another one. This is your chance to tell your interviewers just what you want them to know about you. Savor this question and make the most out of it.

**Approach**

Remember “Summary, Details, Summary”? Start with a summary of the facts only. At this point you’re not trying to sell them on what an amazing PA student you will be; you’re making sure that they actually know who you are. Think “big picture” in your summary, and keep it to 3 sentences. What you share in your summary depends a lot on what the most important aspects of your life are.

**Insider Tip:**

**Things to summarize:**

- Name
- Age
- Degree & Major
- National origin
- City, state
- Types of experience
- Family situation
- Culture
- Licenses, if any
Here are a few examples of good opening summaries:

Well thanks for having me! My name is Kelly Lee, and I’m a twenty-five year old graduate of Washington and Lee University with a bachelor’s degree in Biology and a minor in psychology. I work part time as an EMT in McLean, Virginia.

I’m Kelly Lee. My family immigrated to the US from Taiwan when I was 13 and I just graduated from Texas Tech with a bachelor’s degree in civil engineering. I chose not to become an engineer after I learned about the PA field and I haven’t looked back.

It’s great to be here! I’m Kelly Lee, and I’m 36 years old. I spent 12 years in business as a manager for Charles Schwab and Company, so medicine is a second career for me. But my youngest child just left for college, so it’s kind of a new era in my life.

Well, my name is Kelly Lee—I’m 26—and I’ve done a lot of work in the helping professions, including working as an EMT, paramedic, and firefighter. I’ve been in Advanced Life Support for the last 4 years, so I’m a returning student, and I’m really excited to be here.

Notice that all these summaries give them the big picture right up front, so there’s no mistaking who you are and what you’re about. By the way, not all students tell them “thank you for having me,” but if it feels natural to you, then say it. Don’t try to make them like you by saying things like “I’m a strong leader” or “I have over 5000 hours or experience with patients.” Nobody likes being sold, especially from the moment they meet someone. These things will come out more naturally later.

After you summarize who you are, it’s time to fill in the details. Start again with the big points, then fill in the little ones. At this point, you can emphasize any of the points in your summary. Don’t go into agonizing detail. Just tell them enough for them to understand your major influences.

An example that might follow the first summary above:

I really got into Biology and W&L and knew right away that I wanted it to be a part of my career in some way. I did rat research on learning as an undergrad, but I didn’t care for being isolated in a laboratory by myself, or with just one other researcher. After school I noticed that human biology appealed to me much more. For the last 3 years I have worked full time as an EMT in McLean, which is a busy suburb of Washington, D.C. I spend a lot of time talking with patients, which I love. We respond to motor vehicle accidents, do interfacility transfers, and even live music events at the convention center — all kinds of settings really.
Part of giving details is letting out a little about what kind of person you are. This isn’t good/bad information—it’s about giving them some idea of how you differ from everybody else. You want to share a taste of things about you that help you come alive in their minds. You can do this by talking about your personality traits, beliefs, likes/dislikes, or even what your friends say about you.

*Nathan, my partner on the ambulance teases me. He calls me “Oprah,” because when I’m in the back of the rig with a patient, it’s like an interview show. I just get curious about people and try to learn about who they are. I like the old Will Rogers quote that “A stranger is just a friend you haven’t met yet.” Oh yeah: he also calls me Oprah because I love to cook and I love to eat!*

After you have given them a good sense for what makes you YOU, it’s time to summarize again before stopping. Use different words in your summary than you did the first time around:

*So I’d say that I’ve naturally gravitated to patient care. I’ve been a lover of the life sciences and I’ve gotten to see and do a lot as an EMT. I think PA medicine fits with my social and curious personality.*

At this point you will have shared a lot about what makes you tick. Kelly has used about 200 words start to finish and only took about 60 seconds, but we’ve learned a lot about Kelly. We already have a sense for Kelly’s personality, experiences, and education. Kelly is clearly likeable, positive, smart, and curious.

I generally discourage making any judgments about who you are in your answer to this question. Avoid statements like “I realize that I’m a young applicant” (if you are, say, 21). These statements add nothing positive to your response, and invite negative judgments. Doubt me? Then imagine you are on a first date. If your date opens up in the first two minutes with “I’m not a stalker” or “I’m different from other people you could be out with tonight,” the only things you will wonder are, *Could he/she be a stalker? Different how? Is there a collection of heads in his basement?*

Just tell them about who you are — no judgments.

**DO NOT UNDERESTIMATE**

“So tell us about yourself.” This is probably the most important question you will answer. It will get a first impression about you across. As you know, first impressions can be lasting.

Though your answers should for the most part be unscripted, for this question and perhaps the next, you should probably have your answer memorized and practiced. We will revisit how to do that without sounding rehearsed when we get to [How to Practice for your Interview](#).
2. “Why do you want to become a physician assistant?”

Similar to #1, this question focuses on your motivations and beliefs more than your personality traits and experiences.

**Approach**

You must tell a convincing and engaging story about your decision to pursue a career as a PA. You need to be convincing because they will get lots of BS answers to this question, and you don’t want them doubting your motivations. Your answer should be engaging, because frankly, most applicants give bland, forgettable, or typical answers to this one. Rarely will they tell a story. Remember from the last chapter that stories are naturally engaging and this question warrants a good story.

**Insider Tip:**

AVOID these overused phrases:

“I love learning.”

“I want to help people.”

“I’ve always loved the sciences.”

“I want to work collaboratively...”

“I’m a team player.”

“I’m passionate about...”

For other things to avoid, see [APPENDIX A: Things Not to Say](#)
These statements are overused, predictable, and unoriginal. There’s nothing wrong with being a team player—it’s a great motivation, but using a story or some other wording that is yours alone will make you stand out as an individual. Far better to say, for example, “I learned so much biology out of a book. It was fun and I’m sure I’ll learn more from books, but I’m ready to see it, to feel it, and to influence it.” These are your words (well, okay, mine—but you get the idea), and therefore, much more powerful.

You want your convincing and engaging story to show them a good reason that PA is the right move for you. If possible, it should explain why you want to become a PA as opposed to firefighter, physician, nurse, or other helping professional. Just be sure not to say anything disparaging about those fields.

Here are a few examples of convincing, engaging answers to this question:

I wish that I could say that I’ve always wanted to be a PA, but the truth is I haven’t. I thought I was going to be an accountant, because I love numbers and I’m good with them. I was working on a degree in accounting when my dad was in a very serious car wreck. My mom and I visited him in the ICU for weeks. We could hardly move with all the tubing and IV stands and equipment. The worst part of it was that we couldn’t get straight answers to our questions about what was going on. We rarely saw the doctor there, and the nurses were great, but they never communicated the big picture to us. Except for this one woman who called herself Mindy. I assumed she was a doctor because she looked like one and was giving orders. Whenever she was around, the mystery and fear we felt would stop for a while because she would help us understand what was going on. Not only that—she listened to us. She made us a part of the decision making process. After a few days of this I called her Dr. Mindy and she explained that Mindy was her first name, that she was a PA, and what a PA is. Over the year after my dad’s discharge I gradually decided that I wanted to become a PA to be a part of making sure that patients and their families like my mom and I got answers and support. When I am in the middle of life-or-death decisions, I feel fulfilled and like I’m using my gifts. Don’t get me wrong; accounting is a noble profession. But it doesn’t do for me what I know physician assistant medicine will.

Or:

I was volunteering at UCLA’s Student Health Center because I was a senior in Women’s Studies and I wanted to participate in care for women that took into account their identity as women, not
just sick people. I did basic medical assisting in the women’s health wing and one day did a urine dip test that determined that one of my student patients was pregnant. The doctor there referred her to an OB/GYN off campus, but she would still check in with us regularly. Since I worked with her from the start, I got to know her really well. One day she said to me, “When you go to medical school, don’t lose your great attitude.” I was a little stunned. I never envisioned myself as a doctor because it seemed a little removed from working directly with women. I mean I’ve never had a doctor spend more than about ten minutes with me solid. But I was intrigued by the idea and chatted with the doctors there about my future. They suggested that I look into a career as a PA, because as a PA I could continue to be a part of women’s health care, and still have time to advocate for women’s issues. I just sent that student a baby shower gift and told her that thanks to her, I’ve had found my calling. All thanks to a cup of urine — funny where life takes you, you know?

Both of these answers tell powerful stories about the applicant. They are engaging, and free of simplistic answers like “I like to help people.” Both show the pursuit of a PA career as a personal and intentional decision. Both share flattering information about what the applicant hopes to accomplish in the future. Neither is boastful.

Have a good reason why you want to become a PA, and share it in story form, if possible. As always, there’s no need to lie about it and make one up, but it’s okay to blend/amalgamate several different experiences that really happened in order to make your point clearly.

You may think that you don’t have an interesting story about why you want to become a PA, but you do—even if you haven’t put it into words before. Dig a little deeper into what it is about this field that is so attractive to you. What part of your story is totally different than any other applicant’s? Let your story have quirks, missteps, and surprises —because real, engaging, convincing stories do. In the end, this question is really another version of “Tell us about yourself.” Answered well, it will tell them more about who you really are than perhaps any other question, because it is about where you want your life to go. And remember to pause before telling your story. If you don’t, you’ve proven that you have it memorized!
3. Where do you see yourself in five years?

This question gets directly at your plans. Most applicants dislike this question because they worry that it will pigeonhole them into a path that they can’t change. They’re just asking you to share your vision of the future, not to commit to it. That is, if you tell them you want to become an orthopedic surgery PA, no one is going to give you a hard time if you end up working in infectious diseases after you graduate.

I hear you wondering: “If your answer doesn’t matter, then why do they ask?”

Your answer does matter. They ask because people who are highly motivated, driven, goal oriented, and confident in their ability—envision their futures. They plan in detail. On the other hand, people who say—last minute—“I guess being a PA would be cool. Maybe I’ll apply to PA school and see what happens,” will have only a vague answer to this question.

**Approach**

To answer this question, you need to show them that you’ve given this some thought. You might think that you don’t have plans for what happens after PA school because you’ll “think about that when the time comes.”

But think again.

Most people have at least some vision of what their future will look like that they haven’t yet put to words. If you don’t have a vision of your future in the field, then you have some thinking to do.

Imagine your future as a PA now. Here are some details to consider:

- What specialty do you think you will be working in? You may know exactly, or you may just know a group of specialties that interests you. Maybe you like specialties that are more surgical, as opposed to more medicine-ish.

- Where do you picture yourself working?
  - A hospital
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- A clinic
- Some other setting (entertainment venue, state or federal government, rehabilitation center, etc.)

- Will you be working as part of a large team, a small group, or something in between?

- What kind of patients will you be working with?
  - Adults
  - Children
  - Older adults
  - People with disabilities
  - Gay/straight/bisexual/transgendered
  - Rich/poor/middle class
  - A little of everything

- What geographic area will you be working in? (Careful here - many PA programs don’t want to educate you, only to see you move out of their state. If you think that’s you, better to leave it out).

- What kind of relationship do you see yourself having with your patients?
  - Do you know your patients well, know their names, and see them regularly?
  - Do you barely know them, such as in trauma surgery? Be careful here not to make it sound like you really don’t care about people.
  - Are you an impartial, cool-headed health “consultant”?*
  - Are you nurturing with your patients, or are you giving them doses of “tough love”?

- What does the rest of your life look like? Will you have a partner/spouse, kids, hobbies or community involvement? If you’ve really considered your life as a PA, they will assume that you have some ideas about this.
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You don’t need to know everything about your future. But tell them what parts of it you are fairly certain about. If there are things that are uncertain about, but you are open to multiple options, tell them that.

Here are some stronger responses:

Five years from now I see myself as a PA in pediatrics. I love children and believe that I can make going to the doctor a more positive experience for them than it can sometimes be. I’m good at dealing with parents because I’m a parent myself and I understand what it’s like to worry about your child’s health. I see pretty clearly that I will be in a group pediatric practice, primarily in a clinic setting. I’m open to working in the hospital, but I don’t know yet how well that suits me. Hopefully my rotations will make that part more clear. I want to have a warm and professional relationship with my patients and want to watch them grow and pass through developmental stages so that I’ll be a constant in their lives as they grow. Just as their families are important to me, so is my own. My husband and I may decide to have another child, and I want my work to fit into our life together so that I can practice the same kind of life balance that I will help my patients work toward.

Or:

In five years I see myself working as a PA in the hospital setting. There are several specialties that interest me, including general surgery and radiology, but I’m open to what grabs me during my training. Having a field that I’m proud of and enjoy is supremely important to me, and I plan to take my time to fully explore which will fit me best. My personality is quieter and more reflective than some, and I want to work in a field where this will be an asset, rather than a hinderance. I want to provide the best care that I can, so I picture myself possibly working toward a CAQ, if one is available in my chosen area of medicine. I’m single and I have no children, so I’m looking forward to pouring myself into becoming the best PA that I can be.
Or:

I’m an outgoing and social person with high energy. Emergency medicine seems like it could be a good fit for me, and I can picture myself working in a busy inner city ED. I like working with a variety of problems and types of people. Having ongoing relationships with my patients is nice, but not as much of a priority to me as knowing that I can handle whatever comes in the door. I tend to work hard and play hard. So having a few days off to enjoy skiing and softball as outlets for stress seems like a great way to keep my work life fresh.

The examples above showcase three very different applicants, and that’s okay; it takes all kinds. Notice that all played to their strengths and areas of interest. They seem to have self awareness and a good picture of where they are headed.

**Insider Tip:**

**Have a Vision of Your Future**

Strong applicants visualize what they want for their future. You don’t need to stick to your plan completely, but when you prepare a delicious dish, having a recipe to work from tends to improve the outcome. Have a pretty detailed picture of where you want this career to take you, and be able to describe it so that your interviewers can see how real your plans are.

Many schools specifically emphasize primary care because primary care providers are in such short supply and schools want to fill that need.

What do you say if they ask you for your thoughts on primary care?

First, be truthful. If you aren’t big on the idea of primary care, it’s best to give an answer that is some version of “I don’t know—I would consider it, but I need to learn more about it.” Alternately, you can tell them that you are “curious about it, but I would be foolish not to remain open to all options.” Even schools that emphasize primary care understand that many of their graduates—no matter how they answered this question when they were interviewed—go on to other specialities.
4. What are your strengths?

Savor this question — it’s an enormous gift to you! That said, remain humble, and know that there’s a fine line between “I’m proud of my ability to XYZ” and “I’m a badass and I should have your job.”

**Approach**

I recommend that you have three strengths ready to share. Plan to talk about two of them, or possibly only one, if time feels short. The third will be ready to go in case you have already talked about one of them while answering another question, or if one feels more relevant to you based on how things are going. It’s better to share a new positive about yourself than to repeat one you’ve already shared.

Cook it down to as few words as possible. This will be your “summary” on which you will then elaborate by providing details. The following are strengths that are commonly shared. Obviously, if you use one of them, you should put it into your own words, so that your answer is not “typical.”

**Sample Strengths**

- Good with people
- Attention to detail
- Patient advocate
- Sense of humor
- Initiative
- Good listener
- Varied experience
- Positive
- Assertive
- Diligent student
- Caring
- Creative
- Fairness
- Problem solver
- Scientifically minded
- Pick your battles
There are many other potential strengths. Share ones that you genuinely possess. Also, pick strengths that are diverse. For example, if you share that you are driven, then you might not want your other two strengths to be initiative and goal oriented, since these three overlap somewhat.

Here’s where the basic principle “Back up every claim you make about yourself with evidence,” comes into play. After you share each strength, you will share something from your past or your resume that exemplifies that strength. Without this important bit of detail, you are just making an unsubstantiated claim. Your interviewer might think How do I know that he really has good people skills? They won’t until you share a story about how you confronted an angry patient who was smoking in the waiting room at your clinic and got him to go outside.

Here are some examples of good answers to this question:

I’m really proud of my ability to think clearly when everyone else is freaking out. I remember one time when I was working as an EMT and we arrived at a nursing home where there was a code going on because a patient had become cyanotic while eating lunch in a recliner. There were CNAs and orderlies running all over trying to figure out how to get the patient flat, and yelling for a backboard in case she needed CPR, but no one could find one. Since I knew that there was no trauma involved, I just grabbed one of them and said “Help me lift the patient out of the chair and onto the floor.” Once the patient was supine on the floor, we didn’t need a backboard. Fortunately, we didn’t need to perform CPR anyway, because once she was supine, her color improved and she came to.
I guess one of my other strengths is my sense of humor, which I save for the right time, so as not to be inappropriate. When I’m transporting seniors from facilities like that one, I like to say things like “That’s a lovely sweater you’re wearing. Do you think I could borrow it sometime?” Suddenly a drab ambulance ride becomes fun.

Or:

I think I have a strong and well-timed sense of humor. One time my ambulance partner was in a foul mood because it was his birthday and we got so many calls that he missed his own party with his family. So when he was in the bathroom at a McDonalds, I called our dispatcher and got supervisor approval to have each unit that was working go on the radio and tell him one thing they really love about him. I went last and said “And I’m honored that he’d skip his birthday party just to work with me.” and gave him one of those greasy 7-Eleven muffins with a lighted birthday candle in it. “Happy Birthday, buddy,” I told him. He said it was the best birthday present anyone ever gave him.

Or:

One of my strengths is definitely my ability to connect with people quickly. I used to work in a psychiatric facility and I learned how to listen twice as much as I talk (they say ‘You have two ears but only one mouth for a reason,’ and it’s true.) I had one woman tell me that she had been at that unit 20 times over the last 5 years and talking with me was always the highlight of her stay. When she got there, the staff would ask me to work with her because when I did, she didn’t give them any problems. It’s a strength that comes in handy.

If you’re one of those people who doesn’t like to ring their own bell, this question can be a challenge. Don’t worry too much about singing your own praises, because guess which question always comes next?
5. What are your weaknesses?

Just as sure as night follows day, after “What are your strengths?” you will generally be asked, “What are your weaknesses?” Most students do abysmally on this question because they:

1) Dodge the question
2) Are afraid that any sign of weakness will count against them
3) Use the same old strategy that job interview books have taught for years

Unfortunately, that strategy, which you will read about below, is weak, overused, and bankrupt.

The weakness question is used by interviewers to invite you to reveal something about yourself that you don’t want them to know. They will read into your answer and try to determine if the weakness you share could be a reason not to admit you. Don’t do what interview books have taught students to do for decades: share a weakness that is actually a strength.

What not to say when asked about your weaknesses

The “traditional” approach to this question, as taught in the business sector, is for the interviewee to share a positive in disguise. Don’t do this. All it communicates to your interviewer is that you are willing to BS your way out of a question that you think is a trap.

That doesn’t make you look good; it makes you look defensive, suspicious, and disingenuous. Nor does it help the interviewer trust what they hear from you. In fact, it makes them think Oh, this guy is clever. He knows what to say to sidestep the truth.

“Weak” Weaknesses

The following lame, unbelievable weaknesses represent how not to respond to this question:

- “Sometimes I care about the results too much and that can frustrate the people around me who see what they do as ‘just a job.’” (Pa-lease. Gag me.)
- “I can be a workaholic.” (And that’s a weakness why?)
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- “I can be intolerant of closed-minded people.” (Duh. Who isn’t?)
- “I have a hard time disengaging from technology.” (You think that’s forgivable because it’s irrelevant? With computers in every patient exam room these days, that sounds terrible.)

And my personal least favorite:

- “I’m bad at public speaking” (Everyone says this. You think this is okay because it’s the most common phobia? The ability to communicate effectively is paramount to the work of a PA. You can do so much better.)

Basically, when I hear these answers, I smell cheese. Answers like these prove to me that I can’t trust you—you’re singing me a tune—and you probably have some worse weakness that you’re afraid to share.

Approach

View this question as another opportunity.

Everyone has a weakness. Having one doesn’t mean you won’t be a good PA. In fact, if you know about and compensate for your weaknesses, you will be even more effective as a PA.

You will score points if you can show them that:

- You know your weak areas
  and
- You have a plan to neutralize them or even use them to your advantage

Knowing your own weakness is a real strength. So don’t hide it, B.S. about it, or deny it. Instead, share it—but do it in a way that makes you look good.
Strategy: share potential weaknesses come from key strengths.

The idea here is to share a potential weakness of someone who has strengths like yours. Convince them that you know what your Kryptonite is and because you know it, you can avoid it.

To do this:

1) Start with a strength that you have mentioned in the previous question, and acknowledge that it poses a potential weakness for you. Usually the weakness comes from taking your strength too far.

2) Let them know that you are aware of that potential and work every day to avoid it. Be sure to tell them how you successfully avoid it.

Be believable. You are being truthful about what could trip a person like you up.

*Note that you aren’t actually admitting that you have that weakness—just that you could fall prey to it if you weren’t so self-aware.*

When answering the question this way, you are being honest—you’re demonstrating your self-awareness and maturity, and you’re highlighting the strengths you genuinely possess. Voila! You have turned a real weakness into your selling point.

Examples of strong answers to this question:

Knowing that I’m a person who is very driven, I need to be careful not to be a bull in a china shop. I can’t let my enthusiasm and drive alienate my coworkers, and I can’t blindly charge through every obstacle; I need to ‘negotiate’ them. Like when I came up with the new system of tracking lab specimens at Dr. Sharp’s office. There were some “old hands” there who my plan could have rubbed the wrong way. So I was careful to include them and to ask for their feedback. It got me their buy-in. Driven is good, but I’ve learned that if it isn’t tempered with flexibility and teamwork, it just comes across as overbearing.
Or:

As I said, the ability to listen actively with patients is a strong suit for me. I lean on that skill in interpersonal relations. But sometimes good listening can make it hard to see beyond the person you’re listening to. I mean, what if they’re lying, or trying to manipulate me? Like when I work in the Emergency Department. Say, for instance, that an abusive parent tells me a touching story about his kid falling down the stairs, but the truth is that the child’s injuries were the result of abuse. If listening well invites me to take everything people tell me at face value, then I’ll miss a case of child abuse! So I listen well, but then I put it together with everything else I’m seeing. This way I don’t miss the big picture.

See how both responses address a potential weakness, not an actual weakness? You’ve proven that you know where your vulnerabilities lie, and that you’re ready for them, making answers to this question much more convincing and relevant than the ones in the box above.

**Just to review:**

1) Pick a weakness you could have for each of your three strengths.
2) Be ready to explain how that the weakness could result from your strength—usually when the strength is taken too far.
3) Don’t admit that it’s really ever a problem for you—just that you are always on the lookout for it.
4) Have a story to use as an example to make your response more interesting and real.

6. What is a PA?

This question is a “gimme,” meaning that you should be ready for it, and if you are, it’ll be a breeze. If it seems kind of dumb, just remember how many people apply to PA school every year. Thousands of students throw their hat in the ring, and many of them aren’t really serious contenders. They may have decided on a lark that they might want to be PAs, or they may have decided that a career as a physician wasn’t for them. As a consequence, they may not really know as much about the PA profession as they should. Their ignorance puts them at risk for dropping out of a class, or worse still, becoming a PA and later finding out that they don’t really want to be one. No school wants to admit students like that.

Have no fear, dear reader: their ignorance is your strength.
Approach

At this point, I’m going to go ahead and assume that you’ve done your research and you actually know what a PA is in some detail. That said, you need to organize your answer to make quick and thoughtful work of this question. My advice for you here is to answer the question in two separate parts:

Your Response, Part I - The facts about PAs.

Your answer should begin by hitting the highlights of what PAs are and do. This summary can include any of the following facts about PAs:

1) “PAs are licensed health care providers.” “Provider” has become an accepted term to refer to PAs, NPs, and MDs as a group. They all provide care. You can also use the word practitioner here, but provider is more commonly used.

2) “They work under the supervision of a physician.” You can describe the PA-MD relationship a little, or you can describe how this works in practice. Just communicate the relationship. If you aren’t clear on how that relationship works, Get clear on it! You wouldn’t become a sous chef unless you knew exactly what “sous” meant in that context. Right?

3) “PAs work with patients providing ____________ .”

4) Fill the blank in with a list of the many responsibilities of PAs. This could include diagnosing, ordering lab tests, imaging, planning/prescribing treatment, and communicating with other healthcare professionals. You can also explain this by walking them through a hypothetical patient interaction, and describe what the PA would actually do for the patient. Don’t call them “midlevel providers,” “physician extenders,” or “physician associates.”

Most Interviewees Will Quit Here, But Not You.

Now that you’ve given some simple facts, I encourage you to “go the extra mile” say something a little more eloquent about PAs—some opinions. What’s so cool about them? Where do they fit into our healthcare system, particularly in this era of healthcare reform? What philosophies do you see the field embracing?


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Give your opinion. Remember how we said that strong applicants are big thinkers? Well, big thinkers have opinions, and they aren’t afraid to share them. Alternatively, you could share a little of what you know about current issues in the field of PA medicine. If you do this, please say something a little more important than “There’s debate about if the name of the profession should be changed.” That’s waaaay too easy, and everyone says it.

**Alternate Versions of this question:**

- “Tell us about what a PA’s typical workday might look like.”
- “How would you describe what a PA is to a friend who thought it was some sort of medical assistant?”
- “How would you describe what a PA is to a 10-year old in two sentences or less?”
- “How is a PA different from a nurse?” A doctor? An osteopath?

For these last three, usually some sort of analogy works.

**An example of how you might answer this question:**

A PA is a licensed healthcare provider who works under the supervision of a physician. Some work closely with their supervising physician, and some with a lot of autonomy. PAs work with patients diagnosing illnesses and injuries, ordering diagnostics, and planning treatment. Besides these particulars, I think PAs fill a need in our healthcare system. They are trained first as primary care providers, but have some freedom to specialize, educate, and coordinate care.

This is just an example — use your own thoughts and words—but it should give you the idea.
7. Tell us about a time when you had a conflict with someone who supervised you, and how you handled it.

The conflict question is usually used to assess your ability to deal with a supervising physician. While the relationship between PAs and MDs is usually collegial and positive, as in any working relationship, there are times when disagreement, poor communication, and misunderstandings creep in. As a PA, at some point you will experience it, and your interviewer needs to know how you will deal with it. Will you blow up and storm off, seething? Or “stuff it,” and feed an unhealthy reservoir of resentment? As a good communicator, you’ll handle it with aplomb, and you need to convince your interviewer of this.

**Approach**

The conflict question, as it is usually asked, invites you to tell a story. I strongly suggest that you have an anecdote ready to illustrate how deftly you will handle situations like these. “I really can’t think of a conflict to talk about.” is not acceptable.

Everyone has conflict. If you think you don’t, then you might be a conflict avoider. If so, this question is designed to shine a bright light on that serious red flag in your character. Conflict avoidance is a bad trait in a PA.

The superior that you talk about could be a boss, a coach, a more experienced co-worker, or your photographer (if you’re a model!). If you can’t think of a perfect story like this, don’t make one up. In my opinion, it’s acceptable to share a story that is a blend of several things that have really happened to you, even if they didn’t happen all at once. This is particularly true if you’re in your early 20’s and haven’t had a lot of experience in the world of work.
Once you have a story in mind, there are a few things that your story should probably communicate:

1. You handled the problem *directly*—by talking to the supervisor in person—not *indirectly* by emailing them. You didn’t report it to some third party, such as your supervisor’s boss or just swallow your issue, hoping that it would go away.

2. You handled the problem *privately*. You didn’t tell him/her off in front of all the other employees. Your supervising physician will be your boss, and it’s okay to disagree, but you should avoid embarrassing or humiliating him/her.

3. You focused on the *solution*, not the problem. Problem focused: “You’re always rude and I’m not going to put up with it!” Solution focused: “I need you to speak to me respectfully.”

And finally:

4. You share how things turned out. If it turned out well, share that. If it didn’t turn out well, share what you learned from it and why you feel good about how you handled it. Don’t feel good about how you handled it?—then pick another story to share.

As with any story, tell this one with compelling details, including how you were feeling. Being in touch with your own emotions is a strength that good communicators possess.

Examples:

“One time when I was working at Smashburger as a cashier, my boss, Mary, really laid into me one day because, she said, ‘When I came in this morning, the alarm wasn’t on, and it was the third time this month. Every time you forget, we risk getting robbed!’ I was embarrassed and upset, because it was my first night closing, and I remembered locking the door very clearly. So at the end of the day I asked her if I could speak with her privately. We sat in the office and I said, ‘Mary, I’m really sorry that the store didn’t get locked last night. I’m not sure exactly what happened, but I would definitely admit it if I had forgotten.’ I told her ‘I really want to be on good
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terms with you because we work together. Next time you think I’ve done something wrong, do you think you could ask me about it so that we could go over what happened?’ She apologized for snapping at me and suggested that we close together when we were finished talking. So when she locked the door that night I realized that there was a step to setting the alarm that I was never taught in training. Sensing an opportunity, I told her that I would be glad to go over that step with the other employees as a way to make sure that I wouldn’t forget it, and to assure that the other employees wouldn’t either. She agreed, and things turned out so well that I ended up being promoted a month later. ‘I liked how you handled the situation with the alarm,’ she told me, ‘and I realized that you deserved a little more responsibility.’”

Or:

“One time in college, my football coach thought (mistakenly) that I had been involved in some vandalism of our locker room. Over the next month he benched me at every opportunity and worked me out harder than anyone else on the team. I almost quit. Then one of my teammates told me that Coach Byer had grumbled to him about me being the vandal, but that he couldn’t prove it. I was shocked, and I realized the connection. So I went to him in the office and said: ‘Coach, you’ve been working me hard lately, which is fine, but I heard through the grapevine that you might think I was involved in the locker room being messed up. Is that true?’ He told me yes. ‘I’m not afraid of a good workout, coach, but I would rather be benched and run to death than do something like that. I hope next time you think I’ve done something wrong you’ll give me the chance to speak to it.’ I wanted to make it clear to him that I wasn’t afraid of him, and that I wasn’t going to let an accusation like that go unanswered. He ended up telling me that he believed me, and he was glad I brought it up. He didn’t apologize for it, and just to show that he hadn’t been punishing me, I think, he continued to work me harder than anyone else for the rest of the year. But it made me strong—physically and mentally—and he was always kind to me after that.”

Notice from both of these examples that the applicant told a complete story—beginning, middle, and end—and explained her emotions and thinking throughout. Both responses focused on solving the problem, rather than getting into a debate. They took care of things respectfully and privately.

Prove to your interviewer that they don’t need to worry about conflicts that you will encounter as a PA. Sometimes you will even have conflicts with patients, and this question will also demonstrate that you will be able to handle them with grace, tact, and direct communication.
8. Why do you want to go to our school?

An extremely important question, asking, essentially, “Why our school?” You would be startled by how many students choke here, despite the fact that it’s almost impossible to imagine an interview where they wouldn’t ask you this one. The truth is, most students just give a bad answer here.

**Five bad answers to “Why do you want to go to our school?”**

1. “Because your first-time PANCE pass rate is ______ percent.”

Please don’t say this. Everyone says it. Worse, the majority of schools have an FTP rate that is in the (high) nineties. This means that pretty much every decent student passes the PANCE on their first try. It’s not that hard of a test, and you take it right after graduating, so most have no trouble with it. There’s nothing impressive, or even unusual about a PANCE pass rate of 98% or even 100%. Forget it, people! Besides, there’s way more to a PA school than its ability to get you through a licensing exam.

2. “Because your school has a great and prestigious reputation.”

Another of my peeves. Reputation, shmeputation. This doesn’t tell them you know anything about their school, and it makes you sound like a suckup. You can do much better.

3. “Because your school is only two miles from my home.”

What if I told you that I wanted to be your best friend because you live only two miles from me? “It’s way more convenient than being best friends with that other guy who lives 10 miles away!” Sounds pretty weak, doesn’t it? Geography is not a good reason to spend 2-3 years of your life and untold dollars on an education.

4. “Because your school works with indigent/underserved populations.”
Not a bad reason, but if you say it like this, you are proving that you have studied from their website. I mean, who uses words like *indigent populations*? You mean poor people? Then say that! And for heaven’s sake, have a good story ready to substantiate your claim.

5. “Because your tuition is very reasonable and my funds are limited.”
You’ve just communicated to them that you are applying because they are the budget option, the cheapo school, and in the process, that you’re a cheapo too. Don’t do it.

**What They’re Looking For:**
The “Why our School? question is aimed at one thing only: making sure that you have chosen them for the right reasons. Ever since CASPA *(the Centralized Application Service for Physician Assistants)* became part of the application process for PA school, it’s been easy for weaker applicants—wisely—to apply to many schools, hoping that they will get lucky with one of them. All it takes is a little more money and checking off a few extra boxes on the application. But PA schools want you because you are passionate about their school, not because you’re not very selective. In short, they want to know that you’re a good fit for their program.

**Approach**
Despite the bad answers to the question “Why us?”, we all know that reputation, cost, geography, and similar factors are big reasons that people choose where to go to a school. Heck, if you’re a weaker applicant, you’d be foolish not be willing to go to any school that would have you.

There’s really only one way to prepare a good answer for this question, and that is to...

**Do your homework.**
Learn about the school(s) where you are interviewing. Give good reasons to go there, reasons that show that you are a great fit for their program. Make your motivation for their particular program shine through in your answer.
Great ways to learn about programs:

- Read the program’s webpage in detail. It’s true—many of these pages are alike. They talk about “creating PAs who provide great patient care,” “treating indigent populations,” and “emphasizing primary care.” However, if you read between the lines, you can often notice things that seem to matter to them more than others. Maybe they talk a lot about the diversity of their students or their hospital affiliations for clinical rotations in several places. This should tip you off that this is something they take great pride in.

- Do a Google News and Google Blogs search. Google News and Google Blogsearch are aggregators of internet news and blog articles. To use them, go to www.google.com/news and www.google.com/blogsearch. In the search line, type—in quotations—the name of the PA program. For UC Davis’ Family Nurse Practitioner and Physician Assistant Program, for example, search for “uc davis fnppa” or “us davis physician assistant program” Any internet news articles or blog posts about their program should come up. Read everything you can get your hands on, until you know all about:
  - New faculty
  - Program awards
  - The most recent incoming class
  - Special programs that the school runs, such as student run clinics, immunization/STD/mental health clinics in the community
  - History of the program
  - What their graduates are doing now

- Talk with anyone you know who went to their program. If you ask them, some schools will even connect you with a current student. You don’t need to tell the school that you want to know because you’re preparing for an interview. Just tell them you’re researching their program. When you talk with your contact who went to their program, ask that person “What did you think about your school? What did you like and dislike about it?” Ask their permission before using their name in an interview.

- Use the tour. If you are lucky enough to have a walking tour of the school before your interview, be on the lookout for qualities that stand out to you, like student behavior, the facilities, and what people tell you about the program as you tour. Ask questions of your tour guide to check your perceptions.
Avoid using simplistic reasons for wanting to go their school.

Simplistic reasons for attending a program are usually factual, black and white things like because:

- “You are part of a medical school.”
- “Your program is 36 months.”
- “Your program was ranked #4 by US News and World Report.”

Use reasons that speak to values, fit, and things that aren’t obvious.

Once you know what is different about a PA program, you can speak intelligently about why you value theirs so much. Focus on things that really matter to you, so as not to sound fake or stale, like you just read a bunch of stuff and memorized it to prove that you researched them.

In all of this, keep your eye out for the personality of the program. What do they value?

Some factors to use to compare and contrast programs include:

- The size of the class (students and faculty)
- Clinical emphasis (primary care, surgery, other)
- Type of curriculum (do they teach with case studies AKA “problem-based learning,” or straight lecture about diseases, or something else?)
- Use of technology
- Affiliation with other schools/programs
- Charity work
- Are they formal, clinical, traditional, progressive, welcoming, down-to-earth, pious, or religious in character?
- The age of the program
- The age of the students
- Research performed. Keep in mind that research isn’t a huge emphasis in PA education. Perhaps it should be, but there isn’t usually time, and the MD degree really owns the field
of medical research. Research should probably not be your biggest reason for attending a particular PA program.

In my own PA school interview at UC Davis, I felt very comfortable. The interview was casual, and they made no attempt to put me on edge. In fact, they told me “We think we get a better sense for who we’re interviewing if they are comfortable and at ease,” which told me a lot about their philosophy. I had already guessed that they had a warm and supportive program, and this just emphasized that fact. When they asked me why I wanted to go there, I spoke about the disarming and supportive feeling their program had, and how important it was to me. They readily agreed, and it turned out to be very much the case — theirs is a very human program (as opposed to a traditional, rigid, hierarchical, clinical program).

Steps to structure your answer

1) Start with a summary statement—think about the factors that make you want to choose that school and share what they have in common with your own values.

2) Share the factors that have made you apply to their program, starting with the most important, and progressing to the least important.

3) Share things from your resume/background that fit with what you have learned about their school.

4) Remember to show them your enthusiasm!

Examples:

There are several reasons I want to go to University of Lexington’s PA program, and they all have to do with the structure of the learning that takes place here. I’ve read about many programs and yours seems progressive in its curriculum. The online resources for learning physical examination, for example, show me how hard this program has worked to keep current and to evolve with medical technology. I want to attend a school where what and how I am taught really matter to the faculty. The fact that many of the courses are taught in small group seminars tells me that student interaction and relationship with faculty is a priority. With that, I know that I won’t be just a number. I love that as a student I will have the opportunity to put my new knowledge to use right away by working in student-run programs like Clinica Esperanza in downtown Lexington. I’ve worked at community clinics in Kentucky already, and that emphasis on helping the Latino community is refreshing to me!”
Washington and Lee University really surprised me when I read about it. It was the only school that guaranteed I could work with patients (as opposed to patient actors) right from the start. I’m a hands on kind of person and I can’t wait to start working with patients. I have a strong interest in working in psychiatry when I graduate, so W&L’s push for mental health parity was reassuring to read about. Your program is affiliated with one of the largest inpatient psychiatric hospitals in the south, so I know I will get great clinical exposure there. Oh, and it’s a small point, but W&L is very close to me, so you can’t beat a 15 minute commute!

Both of these responses make it clear that the applicant has done her research and is someone very intentional about where she goes for her PA education. What she likes about the program mirrors flattering values that she also possesses. Her reasoning is quite specific and could not be used at another school.

Notice that in Example #2, the issue of location was thrown in at the end, like an afterthought—as it should be. The bigger issues came first, and they reflect a student who knows where she is headed, and who is proactive about finding the right place to learn.

When you answer the question, “Why our school?”, let your answer speak to what you value, and in doing so, prove your fit for their program because they share some of those values.

**Just to review:**

1) Pick reasons that are qualitative, nonobvious, and speak to what you and the program both value.

2) Start with the big picture and proceed to lesser details later in your response.

3) Don’t suck up! It’s not about flattering them. It’s about demonstrating that you and that program are a good fit.

4) If you can’t tell how the program you are interviewing for is different from other programs, you probably haven’t done enough research.
9. Why should we choose you?

This question usually comes toward the end of the interview, and if you’ve been following my advice, you haven’t tooted your horn very hard up to this point. The “Why should we choose you?” question is aimed squarely at giving you one, (usually final) chance to make the case about your fitness and deservingness for their program. Your interviewers will likely (and hopefully) carry your answer to this question with them as they trod off to the bathroom or the water cooler after your interview is over. Your answer can make-or-break this question!

**Approach**

It’s finally time to toot your horn! By asking the “Why you?” question, they are giving you permission—in fact, requesting—you to brag a little. Obviously, you’re not going to be vain and conceited here, you are simply going to share your pride in who you are and what you have accomplished.

Start with a summary statement that uses “I think” or something indicating that it’s your opinion. This making bragging a little less “braggish.”

1) *I think the breadth of my experiences should be tough for your program to pass up.*

Or:

2) *I think my experiences show that I have values that reflect your program’s, such as…*

Or:

3) *I think you can teach any good student medicine—but you can’t teach them to really care.*
Next, elaborate on your summary statement and provide supporting evidence.

Following Approach #1, above:

*You can see that I’ve worked in several different settings—hospitals, clinics, and schools,” and that exposure to different types of medicine has helped me develop a versatile set of skills.*

Following Approach #2:

*Many of my experiences have been about helping those who are not as fortunate as have been, and my experiences say a lot about what matters to me. I’m not just claiming I want to help others—I’m showing that I have.*

Following Approach #3, above:

*Compassion, I think, is just a part of who I am. I grew up in a big family, and became very attuned to the needs of others. I sleep better at night knowing that those I come into contact with are better for our meeting.*

Give them two or three reasons in total. Prove to them that you aren’t a “one-trick pony.” Giving them 27 reasons just sounds silly.

Following any of the above examples, you could add:

*I also think my personality is an asset. My friends say that I’m hopelessly positive and energetic, and some of my extracurricular interests show that too. My work in ______ and _______ as a leader speaks to that as well.*
Summarize

“So I think I have a number of qualities and experiences that would make me a strong student and a good PA in time.”

The “Why you?” question is one you should be ready for so that you can navigate the line between humility and pride.

10. What questions do you have for us?

After all has been asked (including the final question in the next chapter), your interviewers will probably give you a chance to question them. This is for your benefit. They don’t want you to spend the day with them and walk away without answers to your own burning questions—that would be pretty one-sided. It’s also an opportunity for you. **Strong candidates ask good questions**—questions that say more good things about who they are, how smart they are, what matters to them, and how much research they have done. Prepare for this question.

Approach

I suggest you get a faux leather folio at an office supply store—the kind that holds a legal pad—and write three or more questions in it. Bring the folio to your interview, unless they won’t allow it, as in Multiple Mini Interview Format (MMI) interviews. Put the folio on the chair or floor next to you when you sit down, and leave it there, so you aren’t tempted to fidget with it.

Once you are asked “What questions do you have for us?” reply by saying some variation of “As a matter of fact, I do!” Then grab the folio and let ‘er rip with your three questions. Consider making notes as they respond to your questions.

Tips:

1) **Begin with the question that is most important to you**, as you would if you really had a question that you were aching to have answered. Make it something big and important, rather than some detail, like what kind of jello they serve in the hospital cafeteria. Make it open ended, meaning that it can’t be answered with a simple yes or no: “What is X
like?” is far better than “Do you offer X?” Open-ended questions are more likely to lead to a discussion than a simple answer.

2) Ask at least one question that you would ask if you had an acceptance to another school. The point here is not to try to fool them into thinking that you have an acceptance (don’t do that!)—it’s to show them that fit is important to you too. In the words of Groucho Marx:

“I don’t want to belong to any club that’ll accept me as a member.”

Groucho had it right: no one wants someone who is desperate in their club, and the same is true for PA schools. People are weird; they tend to want things that seem out of reach. To make yourself just a tad out of reach and “not-desperate,” ask a question that indicates that their school might not be for you, depending on the answer they give you.

In my own interview, for this task, I asked them “Do you have any job placement assistance for new grads?” It seemed to me the kind of thing that would be a selling point for one program compared to another’s. The interviewers shifted in their chairs, clearly a little caught off guard to be asked something like that, and finally one of them said, “No, we really don’t. But if it makes you feel better, none of our students seem to have any difficulty getting a job out of school.” Notice that this response indicates that they are actually trying to sell their program to me!

Doing this part right will invite your interviewers to think more highly of you and to think “This girl has options. She’s shopping around. We would be lucky to get her.” Some disagree with me on this point. A little like a Pickup Artist tactic, it can be powerful, when executed well. There’s really no way it can run you into trouble if you ask politely, and not as if you think you’re superior.

3) Save anything trivial, detail-oriented, or lightweight for last. It’s fine to ask if they require you to use a particular type of computer, such as PC or Mac, or what the program’s summer calendar looks like, but make it last, as if the question is sort of a throwaway.
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Things to Avoid

- “I don’t really have any questions—you answered them all,” is unimpressive, and a lost opportunity. It’s what applicants say when they’re nervous and just want to get the heck out of there. If you were really fired up, wouldn’t you have a million questions? There is no excuse to not ask them something.

- “What do you think of my application—am I a strong candidate?” This sounds insecure, and it puts them on the spot. What if they aren’t sure about you?

- “What do the most successful applicants to your program look like?” While not horrible, if you have to ask this, then you probably haven’t researched them enough. Besides, you’re probably asking this because you’re too afraid to ask what you really want to know: “Do you think I’m going to get in?”

- “Are there any opportunities to do research?” This is usually asked by candidates who have done research as Pre-PAs. Focus on why you’re there—to become a clinician, not to indulge in your other interests. You probably won’t have time while you’re in school anyway. You can do research as a PA, but if it’s that important to you, then you probably should be applying to medical school instead.

- “Does your anatomy class use cadavers?” That’s what you’ve been itching to ask them? Amateurish; proves you haven’t done your research.

- “Do you have a deferral option in case I want to wait a year before starting?” You have just communicated that you aren’t eager to get started. Don’t! Besides, they usually don’t like to defer students. If you must, ask later—preferably weeks after your interview.

- “Can I hold a job while in your program?” If you have so much time outside of school, then you and the student who wants to do research should take a vacation together, not a seat in a PA school class!

- “When will I hear about acceptance/rejection?” Hold your horses, Speedy. You sound a little desperate. Besides, they’ll tell you—you can bet on that.
Obviously, you should use your own questions, but here are some examples of good ones:

“What do you like most about your program?” Open ended, invites the interviewers to sell you on themselves and indicates that you’re not desperate—gets them in a positive state of mind.

“If there were something that you thought your program needed to work on, what would it be?” Open ended, worded positively, you’re clearly not desperate, and you’re really working to be sure that you and they are a fit.

“Your program focuses more on technology than others. Does that ever get in the way for students, and if so, how do you protect against that?” Note the second part is open-ended; it shows that you have researched their program and have a legitimate concern. You are offering them a chance to reassure you about it.

“Can you tell me about the relationships you have with clinical rotation sites?” Open ended. These relationships are something everyone wants to and should know about, so even though it’s probably the most asked question by applicants, some version of it is a good idea.

“Are there any major changes that you anticipate in the program in the next two years?” Not open-ended, but understandable. You’re making sure you won’t fall prey to a bait and switch.

“Your accreditation is probationary. Can you tell me a little about that?” Totally open-ended—they have the option to talk about it in whatever way is comfortable for them. This is a reasonable question that shows you have done your research. You’re also being careful not to get started in a program that is in danger of closing. Just be sure to ask it appropriately. Be satisfied with whatever they tell you, even if you aren’t.
Just to review

- Have three questions ready
- Write them down so you won’t worry about forgetting them
- Important ones first, trivial one last
- Ask questions that would really matter if you were seriously considering going to their school
- Grab the opportunity to project yourself as a strong, confident, and respectful, discerning applicant
The 10 Questions Above Can Make or Break Your Interview

If you’re ready for these, you’re well armed for most of the crucial questions you may be asked in your interview.

But There’s One More You Gotta Know…

The eleventh question is the hardest one for many people. Because it’s a rocky shoal where many fine ships run aground, I have dedicated an entire chapter to getting it right…
The Ethics Question

Most PA school interviews will include at least one ethics question or scenario. Ethical issues trip many students up, as they can be complex and difficult to answer on the spot. For this reason, I am devoting a chapter to this question alone.

For our purposes, the ethics question will be:

“Tell us about an ethical dilemma a PA might encounter at work. If you were that PA, how would you handle it?”

Ethics is a branch of philosophy that deals with right and wrong. Good PAs are ethical, meaning that their actions are guided by a strong sense of moral principles. In medicine, we often make decisions about people’s lives. Having that kind of power and responsibility, we have to consider the ethical implications for our patients and society before we act.

There is plenty of debate around the study of broad concepts like “right” and “wrong,”. For example, if there is a problem with a woman’s labor and you can’t save both, is it better to save the mother, or the baby? Should people with drug addictions be given addictive medications if they are in great pain? Is it ever okay to tell your patient only part of the truth? To lie?

These are not questions with a single answer. They require discussion, and some students discuss them better than others. PA schools want to know that you are a person who 1) is ABLE to understand the ethical implications of your actions, and 2) actually CARES about those implications. Ethical questions are a good way for PA schools to gauge your logic, your caring, and willingness to work for what is right.

In your actual interview, you will usually be given the ethical dilemma in the form of a short vignette, which is easier than what I have above. But it’s better to prepare using the worst-case-scenario, which requires you to come up with the dilemma AND your solution. Many students won’t even be able to come up with a good ethical dilemma, let alone explain what they would do with it. Having an ethical dilemma ready in your mind before your interview is an easy way to grab an advantage.

Before my suggestions on how to handle this question, let’s have a (brief) medical ethics lesson. Don’t worry—I’ll give you the Sparknotes version.
Medical Ethics 101

There are five principles that you must understand to answer this question well. Your ethics question will often come from debates that people have about each of these principles.

Think of these as gray areas, which I will describe for each.

The five principles are:

1. **Non Maleficence** ("First do no harm"). Non maleficence, means that as a provider, you are tasked, before anything else, with not making things worse for your patient. If you can’t help them, you at the minimum, shouldn’t hurt them. Implicit in this principle is the idea that sometimes it’s better to do nothing than to do something, because at least then you haven’t added to the patient’s problems. This is an important concept in the Hippocratic Oath that doctors and many other providers take when they are licensed. Gray areas for the principle of non-maleficence include issues like abortion, physician assisted suicide, lethal injection, and “pulling the plug.”

2. **Beneficence** ("Do the most good"). An extension of no maleficence, beneficence means that if you do something, you should strive to do that which will help your patient the most. This concept is useful when you aren’t sure which of several courses of action you should take. Ask yourself, “Which course will help the patient the most?” Gray areas here include problems that arise because people disagree on what would be the best for the patient. What if a patient needs an appendectomy to live, but they don’t want it because of a religious belief? What if a woman who has low self-esteem wants a 12th cosmetic procedure on her nose? Would you do it, or tell her “I don’t think your nose is your problem—it’s your head that needs work”?

3. **Autonomy**. Patients have a right to control their own destiny and what happens to their health and body. Implicit here is that as long as patients are not impaired (drunk, mentally ill, senile, or unconscious) we don’t make decisions for them, hide information from them, and they have the right to refuse treatment. Gray areas here sometimes deal with conflicts with beneficence. For example, is it okay to keep some information from a patient to make them more likely to choose the type of surgery that you know will give them the best outcome? Is it okay to scold a patient for smoking, or to refuse them pain medication until they quit? How should we make decisions for patients who can’t make them for themselves, like when they are in a coma?
4. **Justice.** Exercise fairness in your work with patients. We don’t play favorites, waste resources on people who won’t benefit from them, or help a patient without first considering how doing so could impact him or her. Gray areas: is it okay to do lung transplants on patients who need them because they smoke? Should a person’s inability to pay for their treatment make it harder for them to get an expensive procedure? Who deserves the donor heart—the man who already had a transplant that failed, or the man who has never had one?

5. **Confidentiality.** Patients have the right to decide who has access to their private health information. We do not share their information with others without the patient’s consent. Gray areas: what if a patient is suicidal or homicidal—under what circumstances should you break confidentiality? What if your patient has AIDS and doesn’t want to tell his/her partner? Do you keep that confidential?

**Approach**

Ethical questions are usually structured in terms of ethical *dilemmas*, meaning one possible course of action is almost always at odds with another possible course of action. Do yourself a favor and have an ethical dilemma picked out and ready to talk about. You can make one up, or google “medical ethical dilemma” to find one that you feel you can discuss to get you thinking in ethical terms. That way, if you are asked to come up with the situation, you’ll have it in the bag.

**Steps to Answer the Ethics Question:**

Before launching headlong into what you would do, breathe. In ethical questions, what you would do is the least important 20% of the question. Your ability to accurately describe the problem, which shows that you understand how to break it apart and analyze it ethically, is much more important (the other 80%).
Once you’re ready, here are the steps I recommend for an excellent answer to your ethical question.

1. **Picture a scale.**

Before opening your mouth, I encourage you to picture a scale—the balancing kind that you see on an judge’s desk. They look like this:

![Balance Scale Image]

The scale should get you focusing on at least two possible courses of action that are at odds, as is the case with most ethical dilemmas. Your job in the next steps is to tell your interviewer what is on each side of the scale, and why.

2. **Think Aloud.**

Your response should have you thinking about and sharing the various things you could do, and why they might be the right or wrong thing to do.

Imagining that scale, think aloud to your interviewer about what competing interests are on each side of the scale. Tell them why there are conflicting possible courses of action. You might even use your hands to mimic the action of the scale. To illustrate this point, you can say “I suppose I could keep to myself that the patient is in crisis, like they are requesting me to.” Then discuss what might result: “If I did that, then the patient would have confidentiality that they want. But on the downside, they wouldn’t have the help of friends and family who might help them with...
such a difficult situation, so there’s a sacrifice if I do that.” If you still aren’t clear on this point, don’t worry—there are sample answers ahead.

3. **Explain which of the 5 principles are involved (beneficence, nonmaleficence, autonomy, justice, and confidentiality).**

There may be more than one ethical principle involved. If so, share all that you see coming into play. Draw attention to the conflict by using terms like “On one hand...” and “But on the other hand...” You can also say, “There is a conflict here between X and Y.” Be sure to mention the positives and negatives of each course of action. If each action didn’t have some merit, it wouldn’t be a dilemma, now would it? Explaining these possible actions in detail proves to your interviewers that you aren’t going to see only one side of an issue, and blindly slap your one-size-fits-all answer on it.

4. **After you have explained the dilemma in detail, explain what you would do about it and why — not before!**

Notice that this step is last. That’s because it’s really only about 20% of your answer. The important 80% came before when you explained the dilemma completely. Use the ethical principles you just mentioned to guide you, along with your best judgment. If they give you a tough dilemma that you aren’t sure what to do about, consider each of the five principles (do no harm, do the most good, autonomy, justice, and confidentiality) and how they might factor into how the situation could be handled.

5. **Consult.**

Remember that as a PA, you won’t be alone. You are supervised by a physician for a reason. Make it clear that if you had any doubts about how to proceed, you would consult your supervising physician. Willingness to consult shows that you aren’t going to go it alone and that you’re big enough to ask for help. It also proves that you understand the PA-MD supervision relationship.
You might say:

This is a tough situation. One of the ways my actions will be judged if this situation ever went to court would be by asking if I did what a ‘reasonable clinician’ would do. The only way to know that is to ask another clinician. So in this case I would be sure to ask my supervising physician for her opinion and to document carefully why we are taking a particular course of action.

Example 1:

Interviewer: Tell us about an ethical dilemma a PA might encounter at work. If you were that PA, how would you handle it?

Interviewee: “Well, I know that PAs often need to deal with patients who don’t have a great understanding of medicine. Let’s say, for example, that a patient with a new breast lump came to me asking for a double mastectomy because her second cousin just died of breast cancer. That would be quite a dilemma. On one hand, the ethical principle of autonomy says that the patient has a right decide what happens to her body. She is obviously not doing this for bad reasons—she doesn’t want to get cancer! So, I think her request is worth considering. But on the other hand, a second cousin is not a close relative, and this patient’s risk of cancer may be much lower than her second cousin’s was—low enough that the risks of surgery (infection, psychological stress of mastectomy, etc.) outweigh the risks of cancer. It’s a tough situation! I think my approach would be to assess her risk of cancer through genetic testing, and try to educate her until I was sure she understood the potential risks and benefits of the surgery. If she insisted and I didn’t think she understood the relative risks, it would be hard, but I think I would tell her that I was not able to help her. She of course still has the option to find another surgeon. If I did think she understood, I would probably go ahead with the surgery, documenting carefully why I have chosen to do so. I would be sure to consult with my supervising physician on this one—that’s why I have one!”

See what I mean about thinking aloud? Notice what is on each side of the scale in this case:
Autonomy Vs. Non-maleficence

Autonomy - right to make her own medical decisions)

Non-maleficence - avoid potential for harm)

Also notice that the applicant’s response didn’t jump straight into “what I would do is…”

Just like when your math teacher told you that you get 75% credit for showing your work and 25% credit for your actual answer, here you get more credit for describing the question fully than for explaining what you would do about it. The interviewee also made the two sides clear by saying “On one hand,” and “On the other hand.” These are helpful phrases in ethical questions.

Example 2:

Interviewer: Tell us about an ethical dilemma a PA might encounter at work. If you were that PA, how would you handle it?

Interviewee: “Okay...well, I can picture a situation where a patient tells me that he is suicidal but doesn’t want his wife to know because ‘it would stress her out too much.’ My patient might also worry about how having an inpatient psychiatric hospitalization could affect his ability to find a job. In law enforcement, for example, having a history of hospitalization in a psych facility is usually a disqualifier. So I understand why he wants it to stay secret. These concerns involve his right to confidentiality. Also, the ethical principle of patient autonomy says that he has a right to make decisions about his care.

But at the same time, what if I respect his wishes, don’t tell anyone, and he attempts suicide? Sure, if he survives, he will be glad it isn’t public. But what if he dies? In that case I have to think that keeping things confidential has probably contributed to his death, the grief of his girlfriend, and the grief of his children. The principle of beneficence says that I have a responsibility to do the most good. In this particular case, I think preventing my patient’s death outweighs his concerns about confidentiality. In the end, I would probably try to convince him to go voluntarily to a psychiatric facility, but if he wouldn’t go and I really thought he was going to attempt suicide, I would probably break confidentiality in order to intervene. Obviously, I would include my supervising physician in this tough situation.
Did you picture the scale as you were reading this answer?  

On its two sides we have:  

**Confidentiality & Autonomy Vs. Beneficence**  

Confidentiality - privacy, make his own decisions)  

Beneficence - preventing patient’s death  

The interviewee did a good job describing the implications of keeping things confidential, and of breaking that confidentiality. She described the ethical principles involved. *Then and only then did she explain what she would do.*  

If you’re ever stuck on an ethical dilemma, start by thinking about how you can put the patient’s welfare first. Defaulting to patient welfare isn’t *always* the best course (sometimes your biggest responsibility is to protect the public at large), but it’s usually the safest bet if you aren’t sure.  

Explaining all of the “whys” is key to getting the ethics question right. If your interviewer asks you about an ethical scenario such as, “How do you feel about providers giving away free medication samples to patients?” and you say simply, “I think it’s fine,” or simply, “I’m against it,” and you don’t explain why, then you have failed the question. Like I said, your explanation—showing your work is more important than what you would actually do. For that question you would be much better off saying something like:  

*Well, having free medication samples from a pharmaceutical rep is really handy. It allows a provider to give medication directly to the patient when finances are an issue, or when the provider is worried about the patient’s ability to follow through on the recommended treatment. But on the other hand, medication samples don’t just appear on clinic shelves. They get there by way of pharmaceutical reps who know that giving something to doctors and PAs makes them more likely to prescribe the thing that is given. And if that’s true, then I could picture a situation where a provider might give that medication, even though he or she knows that there is a better*
medication that the patient can purchase at the pharmacy. By giving away a medicine that isn’t the one I most want the patient to have, am I doing the patient a disservice? Possibly. In the end, I think I would try very hard to ask myself what is the ideal therapy for my patient, and only grab that sample pack of medication if it’s really the one. If it isn’t, I’d probably explain to the patient why the needed medication is important and therefore worth if going to the pharmacy to purchase.

The Special Situation of Student Ethics

Sometimes the ethics question in your interview will involve what is right and wrong for you as a student. For example, you may be asked “What would you do if you saw another PA student in your class cheating on their exam?” Treat these questions just the same, but realize that they want you to become an ethical practitioner, which starts with you being an ethical student. Meaning, that as much as you sympathize with other students, your job is to “do the right thing.” Plan to uphold the rules and codes of conduct of your PA school. If you would let another person lie, cheat, steal, etc., as a student, then you have proven to them that you will likely do so one day as a licensed physician assistant.

Just to review:

1) Picture a scale
2) Think aloud
3) State which of the 5 ethical principles apply
4) ONLY THEN explain what you would do and why
5) Say you would consult with your supervisor

Reminders:

- Have an ethical dilemma ready to discuss. It may not be the one that they will pose to you, but you will have a framework for your answer, and that’s a big part of the battle with this question type.

- Don’t rush into what you would do in the scenario. That’s the smallest part of this question! The biggest part is about the nature of the dilemma. If you can explain the why part and then tell them you would do something that turns out to be “wrong,” you will
be forgiven. If you give them the right action, but can’t explain why, you probably won’t be forgiven.

- Become an ethical practitioner now. Get in the habit of doing what you feel is right, based on the ethical principles as you understand them. It shouldn’t matter who else is involved, or who else is watching. Sometimes doing what is right is hard. But if you are operating according to ethical principles, you are committing yourself to behaving ethically even when it’s inconvenient, embarrassing, or uncomfortable.
How To Practice For Your Interview

At this point, it should be clear that knowing the answers isn’t enough to do well in your interview. It’s possible to say all the right things but state them poorly (good content but bad delivery). Practice will create good content and great delivery.

*Practice is essential.*

Practice helps you organize your thoughts, remember what you want to say, share your ideas clearly, and prepares you for the inevitable nerves that show up on interview day. There are plenty of ways to practice, and after coaching hundreds of applicants, I’ve identified certain methods that seem to work better than others.

What follows is the specific system of practice that I recommend you use. You can alter it to fit your needs.

**Start with one question at a time, without notes**

Rather than going through all the questions that you’ve just read about in sequence and then repeating the sequence, work on just one question at a time until you feel that you have it down. Repetition speeds your learning, and solidifies what you will say in your memory. It will demonstrate that you are accomplishing something a lot more quickly than waiting for all your answers to sound right. Not until the final stages before you answer the questions in sequence.
A Note About Notes

Notes are a huge and perilous crutch. Other than writing the questions themselves (not answers), consider not working from notes at any stage of the process. Notes interfere with giving a conversational answer, and make you dependent on reading/memorizing what you will say. With the exception of bullet points (see below), notes slow your preparation and reduce the quality of your responses.

Practice aloud

Saying your answers aloud—to yourself, your dog, your boyfriend, your mom, in the shower, whatever—is crucial. To do this, think about the question you are working on, and say your answer aloud, just as if you were talking to your interviewer. Pretend that your interviewer is right there listening to you. Hearing the words coming out of your own mouth gives you an idea of how you sound.

Evaluate your answer

Once you’ve stated your answer aloud, take a minute to reflect on how it sounded to you. Was your response clear? Did you remember to answer the question that was asked? Were there parts where you didn’t like what you said or how you said it? Did you leave anything out? Take a minute or so to think about how you will do it differently next time.

Complete before you repeat

Now start over, responding to the same question again, this time improving on the areas that were lacking the first time around. If you mess up, do not start over midway through your response. Finish it, no matter how stuck you get, or how lame it sounds. This is a part of the process, and I promise you’ll get better. Finishing your answer trains you to keep thinking while you are actually talking, and not to let little errors throw you off your game. On your big day, you don’t want to ask for a “do over.”
But there’s one catch...

Each time you answer the question, you must use different words. The ideas you share can stay the same if you’re happy with them, but don’t use the same words from your previous answer.

Why different wording every time?

If you don’t change up your language, you will quickly become dependent on using certain phrases, and you’ll memorize your answer. We do not want that! Recall that we don’t want you to be reciting. Reciting keeps you from connecting with the interviewers, who can identify a memorized answer when they hear one. Some schools will actually give you a subscore for how memorized/recited your responses sound. Instead, get in the habit of answering differently every time, and you will remember what you want to say, not how you want to say it. Your answer will be well organized, extemporaneous and sound natural.

An example of your first practice answer to the question about strengths:

I think one of the things I’m best at is putting people at ease. After talking with so many people in the Emergency Department, I’ve gotten comfortable with just about any subject, and I don’t judge. Most people appreciate that, and it helps them to be honest about whatever is going on, because I understand what they’re going through.

After giving this answer in practice, you might decide that you didn’t punch the theme of patients “feeling heard” enough. So your next go might sound like this (note that the answer’s wording is totally different):

One of my strengths is making people feel comfortable. I work hard to listen actively when patients talk to me, and not only does this make their needs clear to me quickly, it helps to relax them and give them the space to say whatever’s on their mind. It’s a skill I’ve developed in my work as an EMT in the emergency room. In the end, the people I’m helping always seem pleased with the encounter, and they feel heard.
These two responses are very similar in what is shared (the content), but they’re worded totally differently (the presentation). They’re both pretty good answers, in my opinion. In the beginning, your first responses may not sound great, and you may leave out important bits. But keep practicing, and you will improve.

**Move on**

After you’ve worked on a response, you will start to feel confident that you can consistently say everything you need to using different words each time. Once you can do that three or four times in a row, it’s time to move on to another question. Don’t worry—you’ll be coming back to work on each question more later.

Certain questions are going to be harder than others, and that’s okay. You will end up spending much more time on some questions than you will on others. Let your comfort guide you; if you feel good about your answer, it’s nearly time to work on a different question.

**When you have all the questions down, practice them in sequence.**

At this point, you’re polishing your responses, and getting used to going from question to question. Remember to use different words every time, even in the final stages of practice. Don’t cut corners! Once you start a question, complete it, even if you think have it down. It’s what you don’t practice that can cause problems in your interview.
The Physician Assistant School Interview

Other Techniques

Though not necessary for most interviewees, the following strategies can be helpful as well, depending on your needs:

- **Bullet points.** In the beginning, make a 3x5 card for each question. On the side opposite the question, write out super brief (not more than 4 words) bullet points you want to cover in your answer. Remember to use new language each time you respond. The point is to remember the idea you want to share, not the words you will use to share it.

- **Video.** Set up a smartphone or camcorder to video your responses to the question. Imagine the camera lens is the eye of your interviewer. Answer questions and then review the video to see how things come across. Are you making enough eye contact? Do you look relaxed? Don’t record every response—it can become a big waste of valuable time. Do it once when you’re making progress, and once when you love your answer. Generally video is best left until the end of your preparation so that you don’t get distracted by the mechanics of the video making process.

- **Feedback from friends/family** can be helpful if you know someone who is good at interviewing, and particularly if they are a PA or similar professional. You do need to be careful about whom you ask for help. Choose only people who are supportive and who are good at this kind of thing. Have them wait to give you all their feedback until you have finished your response. Encourage them to make notes during your responses so that they don’t need to stop you until you’re through.

Just for review:

1) Practice aloud
2) Use different words every time
3) Complete before you repeat
4) OPTIONAL: use video and/or feedback from others only later in the game
5) REMEMBER: the goal is to have a good, natural response that doesn’t look as if you’ve memorized anything
Other Formats

In addition to the “traditional” one interviewer vs. one interviewee format, there are several other ways your interview could go.

These include:

1) Panel Interviews
2) Multiple Mini Interview (MMI) format
3) Group Interviews
4) The Writing Sample

Panel Interviews

Panel, or “Firing Squad” interviews are actually quite common. In panel format, rather than interviewing with one faculty member, you will be with several at the same time. A typical number of faculty is three, but there can be more. Generally the faculty will take turns asking you questions, and you will respond to the panel as a unit.

Panel format isn’t much different in terms of what you will say. But you should see it from their perspective, as we did when we pulled back the curtain on the traditional interview process. Each member of that room will form an opinion about you. To be liked by the panel, you will need to be liked by all of its members. That said, there are a couple of things you should keep in mind:

Beforehand

Before your interview, you would be wise to review the program website’s faculty page. Often the faculty members who will interview you will be listed with a portrait, and a description of their training, clinical interests, research published, and the classes he or she teaches. You might not remember names, but if you can remember their faces, and a little about them, you can tailor your interview answers to their interests.
The Physician Assistant School Interview

Approach

Introduce yourself.

Shake hands with each faculty member before you sit down.

Try to remember their names. This can be hard, but it will serve you later if you chat with one of them away from the interview setting, and when you send a thank you note.

Don’t Rush.

It’s tempting when you have three or more pairs of eyes staring at you to feel that your answers need to be immediate, but they don’t. Do as you normally would: take a nice breath and think about what you want to say before you open your mouth. Sometimes in panels, the faculty will be a little more bold, play good-cop / bad-cop, and ask more pointed questions. Don’t let this rattle you—take your time and give thoughtful answers.

Begin your answer to the person who asked the question.

Start your responses by looking that faculty member in the eye and speaking to him or her as if there were no one else in the room.

Give the others some love too.

After you have spoken to the person who asked the question for about ½ of your answer, make some eye contact with the other members. Look at each of them for at least a few seconds as you speak, being careful to spend a similar amount of time on each person. If there is one member whom you get a negative vibe from, you might want to make a little extra eye contact with him or her. Remember, one person you haven’t won over can negatively impact the panel’s scoring of your interview.

Finish by returning to the person who asked the question.

The person who addressed you with the question deserves the most attention. This is just common courtesy.
The Physician Assistant School Interview

Address your questions at the end to the right person.

If you know a little about your interviewers because you have researched them, you would do well to target your questions (AKA “What questions do you have for us?”) to the right panel member. For instance, if you know that one of your interviewers is in charge of securing rotations for students, any question you have about that should be addressed to them. Spread your questions out, so that you aren’t addressing the same person each time.

Panel interviews aren’t usually any “harder” than any other kind of interview, but since there are more people waiting on you for an answer, they may increase your nerves. If this format causes you a lot of anxiety, see APPENDIX B: “Nerves.”

Multiple Mini Interview (MMI) Format

Use of Multiple Mini Interview Format is a growing trend in PA school interviews. It’s a structure for conducting interviews that focuses on individual tasks, such as answering a question, or participating in a role play with a patient. Unlike the traditional format, where you sit before one or more interviewers, answer the questions, and then go home—MMI interviews will have you moving from one station to another, dealing with a separate task in each station. It’s a little like a decathlon. Each of the ten events is scored separately and challenges you in a different way, and you’re going for a gold medal in the whole thing, not just one event.

MMI Interviews are growing in popularity because they are efficient, behavioral, and (some believe) more fair. The theory is that it’s more fair because each station tests every interviewee’s ability in one sub-skill which can be scored objectively, and if one evaluator doesn’t seem to like you, he or she won’t influence the scoring of your other stations.

How MMI Works

Most MMI interviews include between 5 and 8 “stations.” You will be given a time limit, usually on the order of 5-7 minutes per station. Each station is in a different physical location, and tests something different. You go to a room and complete the task put before you, and when you finish it, you move to the next room to be tested on something different.
An MMI interview might look like this: instructions are given before entering a series of rooms, where you perform a given task while being observed by a faculty member. A score is given for your performance on each task/room and tallied after the last room. The end score is then used to help the committee decide if you should be selected for the program.

**Common Types of MMI Tasks**

- Questions about yourself
- Questions or a scenario about ethics - “What would you do if…”
- Questions relating to the PA profession
- Questions relating to American health care and its reform
- A critical thinking / problem solving activity
- A role play scenario with an actor who portrays a patient or physician
- A writing task (essay)

**Conquering MMI**

Since the questions are essentially the same for MMI as for traditional interview format, the biggest thing you can do to prepare is to get used to being timed. Start practicing at home by talking on a subject for 5 to 7 minutes until you’re familiar with what that length of time feels like.

**Approach**

Your best approach to MMI questions is a systematic one. Have a set of steps that you always take, and go through them every time, so you don’t forget anything, make assumptions, or reach a bad decision. Here’s the format that seems to work the best for my interview coaching clients:

1. **Focus on the instructions**

Because much of the stress of MMI involves being up against the clock, take as much time as you are allowed to read the instructions. You will usually receive a laminated instruction page at each
station. If you have time, read it through two or three times to be sure you understand it completely. *Get clear on exactly what you’re being asked.*

2. **Ask questions to clarify the situation**

Ask as many questions as you need to to get all the necessary information. Don’t jump to conclusions! Don’t assume anything! Wait to act/respond until you have all the data.

3. **State the problem to your interviewer**

“So as I see it, the problem is that....” If possible, ask “Do I have that right?” They will sometimes tell you if you are off, but you have to ask. Other times they won’t give you any direction at all.

4. **Share with them all the possible solutions**

Even if one of the possible solutions to the question/problem seems a bad one, share it. In the next step you can tell them why you wouldn’t choose that solution. “Well, there are a number of ways I could proceed. First, I could _____ , or I could _____.”

5. **Evaluate each solution**

If a particular solution won’t work or is a bad idea for some reason, say so and explain.

“I really don’t like the idea because ____ and because ____.”
The Physician Assistant School Interview

6. Choose a solution

Pick the solution that is both ethical, and most likely to please everyone. If it’s not possible, explain why you’re choosing this solution, even though it won’t please everyone.

7. Consult.

Whenever you have a difficult decision to make, remember that you are supervised by a licensed physician. This is one of the joys of the profession—you have someone you can fall back on when things seem “above your pay grade.”

Insider Tip:

When in doubt, err on the side of patient safety (First, do no harm), and doing the most good.

Examples

Let’s say you are asked, “What would you do if you suspected that another provider in your clinic was abusing drugs?”

Going through the steps above:

1. Ask questions to clarify the situation.

In this case, they say pretty specifically, “What would you do?” Your answer should tell them what actions you would take. To clarify the situation, there are a number of things you could ask them.

“Is the person telling me this trustworthy? Do they get along with that provider?”

“How well do I know the provider involved in the situation?”
The Physician Assistant School Interview

“To my knowledge, has anything like this ever happened before with this provider?”

“Do we know if the provider has been abusing drugs while working, or while off work, or both?”

2. **State the problem.**

“So it seems that the provider may be using drugs, which could endanger her patients.”

3. **Share possible solutions.**

There may be more, but three of them in this case might be:

“Well, I could mind my own business and say nothing, report this provider to the state medical board, or I could confront the provider about it and see what she says.”

4. **Evaluate each solution.**

“Well, if I say nothing and someone gets hurt, that would be tragic and completely avoidable, so I think that’s a bad option. I need to tell someone—but who? I could tell the state medical board, and they could deal with it—but maybe this is a one-time thing. Maybe it’s a misunderstanding on the patient’s part—and by reporting it, I might unnecessarily jeopardize the provider’s career. That’s a huge waste for the provider and the clinic, so I think that’s better, but still not a great option. If I confront the provider, the claim might turn out to be totally false—but if not, I could still notify the board. Talking to them preserves some good options, like helping them talk about it with their supervisor so they could get help. It doesn’t eliminate too many options, and I like that.

5. **Choose a solution.**

“I think I would ask the provider about it and see what she says. With that information, I would still be able to notify her supervisor, if needed. I would do this because it helps protect patients, but it keeps other options open. Obviously, if I had any reason to believe that the provider was impaired while working with patients, I would report it immediately to a supervisor. Patient safety has to come first.
7. **Consult.**

“I would probably want to bring my supervising physician in on this one, since it’s a very sensitive situation, and that’s why they’re there.”

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**Other MMI Tips**

**Manage your time wisely.**

When you actually interview—as with traditional format—it’s best to take a deep breath and think about what you want to say/do before you say/do it. If possible, get the most obvious and important points out first, in case you run out of time.

**Think aloud.**

*Thinking aloud is the cardinal rule of MMI.* Unless it’s inappropriate (say, you’re talking with a patient actor) share your thought process by verbalizing it. You can hear the thinking aloud in the example above. You don’t need to give a continuous monologue; just get in the habit telling them what you’re thinking.

**Listen carefully for cues and prompts.**

Often, depending on what you say, the interviewer will prompt you for more information—indicating that you’re leaving something out or need to explain more. The question, “Then what would you do?” might indicate that you haven’t fully answered the question. “What would you do if your solution to the problem didn’t work?” indicates that you need to come up with something else, and not just tell them that you would do more of the same. These cues can help you deduce what more needs to be said.

**With actors, be a good listener.**

Often you will be asked to have an interaction with an actor who will represent a patient, or a supervising physician. They may be emotional in some way—angry sad, scared, etc. Breathe. Resist the urge to fix the problem immediately. At first, it’s more important is to demonstrate...
your good communication skills. Start by listening intently, then, ask questions to clarify the problem as you see it. Once you understand the problem, reflect it back to the patient so they understand that you have heard them. Be sure to reflect their emotions and empathize, rather than just trying to solve the problem. For example:

**YOU:** “So, If I understand you, you’re angry because you’ve been waiting for over 40 minutes and no one has even come to give you an update on how much longer it might be. Is that right?”

**ACTOR:** “Yes. That’s right. My appointment was for 2:00, and it’s almost 3:00 and you just walked in!”

**YOU:** “Wow. I’m sorry you’ve been waiting so long. I know how frustrating it is to feel like you’re wasting your time waiting for someone else. You’ve been really patient. Let’s see if we can’t…”

**Insider Tip:**

With patient actors, if you do nothing else, be a good and empathetic listener. In doing so, you may be forgiven for other flaws in your response.

**If you screw up, let it go.**

Definitely easier said than done, I know. In an MMI interview, if you flub a station, the evaluator in the next station won’t know it, so you’ll start with a clean slate. Practice telling yourself, *The last station is ancient history. I’m starting fresh with this one.*

No one will kill every question. If you get 6 good answers out of 8 stations, you’re probably doing very well.
Group Interviews

My personal favorite! Group interviews have you interviewing with faculty and *multiple candidates at the same time*. Usually everyone is seated at a round table (so no one is at the head of the table). The interviewer will ask a question of the group. Usually they will wait until someone wants to respond, but sometimes they will address the question to interviewees by name. When they’re done, someone else goes, until everyone has a chance to answer the same question.

Group interviews are used by some schools because they are more efficient. Because the questions are delivered en masse, they reduce the many days that it can take to interview for an entire class using an individual format. They also require fewer faculty to administer.

Applicants tend to have different feelings about group interviews, usually based on their personalities. If you are shy, they can be intimidating, because you’ll be speaking not just to one or two faculty, but another 2-5 applicants as well. People also worry because they’re being interviewed right alongside their “competition.” Rather than thinking of the other students, as your competition, take a more positive approach: think of them as your future classmates, members of the same team. An attitude of inclusion will keep you feeling and acting collaboratively, as opposed to feeling and acting competitively.

Before your interview

In the group interview, as with all the interview types, be very familiar with the school you are applying to, your own resume, and the PA field in general. Practice by having multiple-person conversations about current event topics with friends or family.

While you’re waiting for the group portion to start, you will usually be waiting with other candidates. Be social. Such interaction will get you in a friendly, conversational mood, and knowing the members joining you at the table—even a little—will help you to relax and maybe even enjoy the experience.

Approach

Although, the answers you give will be similar to the other formats, there are some differences specific to group interviews.
**Wait your turn**

Interrupting is a tiny mistake that can make a huge negative impact on the interviewer. Wait until it’s your turn unless you are answering a question that is directed to the group.

**Listen to everyone else and try not to repeat what others have said.**

In repeating what others have said, you can come across as saying “Me too!” which doesn’t exactly showcase leadership. That said, don’t contradict others just to seem original.

**Be polite.**

Most interviewees are at least a little intimidated by the group process, and obsess about being polite to other applicants so they won’t look like the jerk of the group. Note: being polite doesn’t mean you have to agree with everyone.

**Be yourself.**

Let your personality show. Go ahead and make a little joke or tell a brief anecdote to make your point. Inject a little humor into your answer, if you’re comfortable with it—it will be appreciated. Just like in an individual interview, you want to be genuine. Use your own words and think of it like a conversation between good friends.

**Validate and give credit.**

You’re not going to come up with the best response at the table every time, so don’t try to “win.” Along these lines, if you agree with someone else, rather than wasting time by repeating what they’ve said, don’t be afraid to say “I agree with what Kelly said about...”
Inject your own opinion.

Inject some of your own opinion so that you are adding to the discussion. You can say, “I might take it a step further by...because to me,...”

If you disagree, be diplomatic about it.

Instead of saying “I think Shane got it wrong,” or “I disagree,” you can say “I see this a little differently. To me,...” or “I understand your point, Shane. At the same time, it concerns me that...”

Strive for “interesting” conversation.

Rather than trying to score points by being the “most right,” try to score points by moving the conversation forward and making it interesting and insightful. Think of the interview as an opportunity to have a stimulating talk with others.

The Writing Sample

One of the newer activities you may run across at your interview is the writing sample—a short essay or series of essays that you write in real-time while at your interview.

“Why are they making me do this?”

Applicants often panic at the prospect of being handed a page with essay questions they have to answer, but in truth, this activity usually serves one major purpose: to make sure that your written English is adequate for practice as a PA.

This is a bigger issue for foreign medical graduates and other non-native English speakers. Schools receive many applications from people whose English skills are limited, and they have no way of knowing for sure if someone else wrote these essays for them. To make sure you’re not one of those folks, they have you write an essay in their presence—then they know if you can write or not.
First things first.

Say it well. Use complete sentences, good spelling and punctuation, and clear thoughts. If your answers aren’t brilliant, at least this communicates that you’ll be able to write a letter when you’re a PA. Graduating new PAs who can’t write well is embarrassing for any school.

What will they ask you?

It varies, but the writing sample is a great place for them to ask questions about:

- Medical Ethics (see “The Ethics Question.”)
- Current events, particularly those that relate to PAs and medicine in general.
- Opinion questions, such as “What was the last book you read? What did you think of it, and why?”
- Questions about yourself, such as “Describe your personality.”
- Opinion-seeking questions, such as “What is your ideal vacation?”

Approach

First, make note of the time, so you don’t run out of it! Next, I encourage you to again use the Summary, Details, Summary structure to:

1. Tell them what you’re going to tell them.
2. Then tell it to them.
3. Then tell them what you’ve told them.

Outline

Start by making a super brief outline of what you plan to say. Pencil it in a margin or on another sheet of paper if they give you several. The outline isn’t something that requires great detail—just a skeleton of your intended answer so you won’t get off track and fail to answer the question.
If your essay question is:

“Describe the hardest thing you have ever done.”

Your outline might look like this:

1. Intro: hardest thing = becoming an Eagle Scout
2. Huge variety of tasks
3. Takes time, easy to procrastinate
4. No one makes you do it, must be disciplined
5. Conclusion: I’ve learned perseverance, many skills, self direction

Write

Now write 2-4 sentences for each point on your outline, using examples when necessary to make your points. Don’t use big words or abstruse, intellectual reasoning—this is usually a straightforward task.

Proofread

Once you’re done, read through what you have and make sure it makes sense, answers the question asked, and is free of spelling/grammar/punctuation errors. Correct it as needed. Take as much time as you are given so that you can make sure the finished product looks great.

Your response might look something like this:

The hardest thing I’ve ever done was becoming an Eagle Scout. Eagle Scout is the highest rank of advancement in scouting, and only one out of fifteen scouts reaches it.

Becoming an Eagle Scout is tough for all kinds of reasons. Foremost for me, was the fact that it requires the completion of an enormous variety of tasks—at least 21 separate merit badges. So many areas of skills are developed, from knot tying to understanding weather, to demonstrating leadership, that it put me in a position of going far beyond what I ever thought I could do. But it’s
about more than the many tasks. All of this development and attaining of merit badges takes time. It’s not an accomplishment that one can complete in a month. In fact, there are requirements that you remain a lesser scout for a total of 2 years and 4 months before attempting the Eagle project, which is the culminating task. It’s very hard for most 16 or 17-year olds to focus on any project for that long, but doing so taught me determination that many of my peers who weren’t in scouting never learned.

Finally, although you receive support from family members and your troop, no one pushes you to complete your Eagle. You learn through the process that the most satisfying things in life take long, hard work to accomplish, and that being the case, the only person who can adequately motivate you is yourself.

I’m very proud to call myself an Eagle Scout. It was years ago, but I still remember so much from the experience that has made me a stronger, more persistent, and confident person.

You see? This isn’t anything too complicated—it’s just organized thinking and clear writing. Notice that the essay has paragraph breaks to keep major thoughts grouped together. Notice also that the essay had some very positive things to share about the writer — he is patient, persistent, and self-motivated. The essay was long enough to give several points that speak to the question, but no longer than it needed to be. Don’t worry about whether or not yours is long enough; they aren’t looking for a book. They just want to see you put thoughts together on paper.

**If your English isn’t solid**

If you are a foreign student, a recent transplant to the US, or if you’ve never been good at writing essays, you should practice the writing sample so that you won’t be caught off-guard when they ask you to do one at your interview. This task is aimed squarely at your vulnerability, so you must prove that you can succeed at it. Start by writing essays without time limits and progress to working against the clock. 15 minutes for each essay question you do is a reasonable amount of time to practice with.
Final Words

Thanks for reading The Physician Assistant School Interview: Essential Strategies to Blow ‘Em Away and Claim Your Seat in Class—I sincerely hope it helps you get in. If you’ve found it helpful, a positive review on Amazon.com is greatly appreciated!

If you have questions about the book, or any Inside PA Training publication, please contact us. You can reach Paul directly at paulkubin@gmail.com. We’d particularly love to hear your interview stories and how things turned out after using this book.

NEED MORE HELP? JUST CLICK THIS BOX!

If you’re interested in individualized coaching for your interview, Inside PA Training offers Skype interview coaching with Paul, the author of this book. Paul has coached hundreds of applicants to success and can give you tailored attention to make sure that you deliver your best on interview day.

To read more about our 1-on-1 interview coaching service, ask questions, or sign up, just click this box.
About the Author

Paul Kubin, MS, MFT, PA-C is both a Physician Assistant and Marriage & Family Therapist. He holds a bachelor’s degree in Biology from Virginia Military Institute, a Master’s degree in Counseling Psychology from San Francisco State University, and physician assistant certification from UC Davis School of Medicine’s Family Nurse Practitioner and Physician Assistant Program. He has worked in and around the San Francisco Bay Area as a psychotherapist, physician assistant, and pre-PA coach, and has even hosted his own radio show, State of Mind, on FM 91.3 KSVY in Sonoma, California.

Paul began Inside PA Training, the blog about his PA school experiences, in 2010, which grew into what it is today: the free blog, forum, podcast, and smartphone app for anyone who wishes to become a PA. He writes and speaks on the subject of PA education and careers and works in urgent care, primary care, and industrial medicine in Carmichael, California.
APPENDIX A

Things Not to Say

This isn’t an exhaustive list, but it should keep you out of the bigger problem areas that many students who are less prepared find themselves in.

1. “PASSION”
   Describe it, but don’t use this VERY OVERUSED word.

2. “UNDERSERVED POPULATIONS”
   Again, describe in your own words. Everyone uses this term. Don’t be an everyone.

3. “CURRENTLY”
   Strange, I know, but everyone uses this word in their essay and their interview. (“I am currently a Medical Assistant at...” Just say “I’m a Medical Assistant.”) You’ll have to trust me because I’ve interviewed many applicants: this word is used over and over again, and it grates on the interviewers’ ears.

4. “PRIMARY CARE”
   Not horrible, but everyone uses it. Instead, I suggest “Family Practice.” It’s more believable. (Technically, primary care includes general medicine, pediatrics, family practice, and OB/GYN).

5. Any praise for their first-time PANCE pass rates.
   Ugh. Don’t bother. Almost everyone passes the PANCE on their first try, no
matter what school they went to. The average first time PANCE pass rate is 90-95%. It tells you nothing about a program.

6. “PHYSICIAN EXTENDERS,” “PHYSICIAN ASSOCIATES,” or other euphemisms for PAs. Use only “PA,” “physician assistant,” or “provider” (provider means PA, NP, MD, or DO — anyone who provides medical diagnosis and treatment).

7. “MID-LEVEL PROVIDER.” Some don’t mind this one, but some really bristle at it, and you don’t know which camp your interviewer is in, so just avoid it.

8. Your actual GPA. Giving your actual numeric GPA is just poor form, like telling people your salary or how much money you have. Instead of saying “I had a 3.9 in college,” just say something like “I did well,” or “My academic record is solid.” Your exact GPA is on your application, so don’t worry—they’ll know. When talking about your GPA being low, you still shouldn’t call their attention to it by using numbers. Just say “With all that was going on during my first semester of college, I really struggled academically.”

9. “SWITCHING SPECIALTIES” and the like. Yes, PA’s can move around, but it’s not easy, and PAs who do face a steep learning curve. Talk of switching specialities makes it sound like PAs bounce around, which they don’t, and it makes interviewers wonder if you’ll bounce around when you become one. Instead, just tell them that you like how the PA field “offers a lot of flexibility” in what you can do.

10. “COLLABORATION” & “TEAM/TEAMWORK” Just like the word “passion,” applicants tend to overuse these words. These words really do describe certain aspects of the PA/MD relationship, but there’s much more to it. I spend days and sometimes weeks without sharing anything I’m doing with my supervising physician. If that doesn’t sound like collaboration to you, then you’re getting
my point. For other PAs, the work is much closer to that of their supervising physician’s, so it depends on a lot of factors. More important, the words collaboration and team sound a little campy, a little Kumbayah, a little trite. When every student—or at least most of them—uses it, it starts to sound like they’re all reading from a script. Say it another way. Use a whole sentence of your own words to describe the concept if need be, but avoid these.

11. “THE INTRICACIES OF THE HUMAN BODY” or any similar term.
Most students who become PAs do so in part because at some point they began to really enjoy studying Biology and its related sciences. For you it may be a big deal, but it isn’t to your interviewer. More important to PA schools than your love for your Bio textbook or words like “phospholipid bilayer,” is your interest in working with people.
Nerves

“Man is not worried by real problems so much as by his imagined anxieties about real problems.”

— Epictetus

"The brave man is not he who does not feel afraid, but he who conquers that fear."

— Nelson Mandela

If you get nervous when you interview, controlling your anxiety can make a huge difference in the outcome. There are all kinds of concrete things you can do to prepare for your actual interview day.

What follows are some ways to think about your nervousness to get control of yourself so you can make a great impression.

Practice, practice, practice.

Often my coaching students will tell me that they’ve practiced for several days and they still feel awkward, worried, and nervous. My answer is almost always “You need more practice.” Sure, they may have practiced enough to come up with good sounding answers to their interview questions, but usually, they are still thinking too much. By continuing to work on their answers—repeating and refining them—the nerves tend to fall away, because when the actual interview takes place, it feels pretty effortless. How can I be nervous about something I’ve rehearsed until it’s easy?”
Incidentally, if after practicing, your answers still sound rehearsed, the answer to that problem is usually more practice too! Only when you are so prepared that screwing up seems impossible, can you let go of saying things a particular way, and be in “the zone.” When you’re in the zone, you perform at your peak, and things become effortless.

**Strategy: accept that anxiety is normal**

Trust me, you will not be the only nervous person at the interview. In fact, the overwhelming odds are that you won’t be the most anxious person interviewing (there’s only one of those per school!) Anxiety is a normal part of interviewing and accepting and expecting that will take you far.

Your interviewers will know about your anxiety too. They will see many applicants during a season of interviewing, and will get so familiar seeing tense, nail-biting applicants that they just ignore much of it. So start by acknowledging that you don’t need to make your nervousness go away. That’s right: there is no need to. As a psychotherapist, I can tell you confidently that the worst thing about pre-interview nerves is that things get worse when you try to make them go away.

**Thoughts like these pop into your head:**

*I need to calm down.*

*I’m sweating bullets! That’s got to look bad! I need to stop sweating!*

*My words are coming out all choppy—stop, start, stop. I’ve got to get a grip!*

When we think these things, the tendency is to beat ourselves up further for not being in control of our anxiety. The talk about what we are experiencing can be worse than whatever it is we are experiencing! Then a deadly and paralyzing spiral takes shape, until you overanalyze everything you are doing, saying, and even thinking.
Do yourself a favor: realize that nerves are normal, and give yourself permission to be nervous. When you hear yourself thinking the types of thoughts above, say these things:

- Nerves are normal.
- I’m nervous. That doesn’t mean there’s anything I need to do differently.
- My nerves aren’t good or bad; they just are.
- I’m being pretty unforgiving of myself. I’m probably doing better than I’m giving myself credit for.
- I’m sure they will forgive me for being a little stressed and scattered—they know that this is a nerve-wracking process.
- If I let myself be a little nervous, rather than fighting it, I’ll be able to think about more important matters.

Strategy: tell them you’re nervous

That’s right: early in your interview you should admit aloud to your interviewers that you’re nervous. All you need to do is say something like:

- “Forgive me—I’m a little nervous about this whole process.” My personal favorite—short and to the point. If you’re very nervous, then say that.
- “I need to come clean by letting you know that I’m nervous. But if you’ll bear with me, I’m sure I’ll loosen up as we talk.”
- “This is a big day for me, so the nerves are working overtime. I just thought I’d let you know.”
- “If I get a little jumbled or lose my train of thought, it’s because I’m a little anxious. It happens when there’s something really important to me is on the line. I hope you understand.”

By admitting that you’re nervous, you take some of the power out of your worry — now you don’t need to hide it. You also help them to see why you might be a little less articulate than in your essay. Being honest and sharing something that others might try to hide is usually endearing to interviewers. In most cases they will appreciate that even though, as you’ve just admitted, you’re scared/anxious/nervous. Not only are you not letting your worry prevent you from being fully present, you’re bold enough to admit it.
If you’re particularly prone to anxiety in interview-type situations, plan to share it. Promise yourself that within the first 15 seconds of sitting down with your interviewers, you will throw it out there. Take the steam out of it right away so that your brain can move on to more important things.

**Strategy: use the pause**

Pausing is an important skill for many reasons we’ve already discussed, but nerves is perhaps the biggest. The overwhelming tendency among those who interview is to feel that they need to start talking immediately after they are asked a question, and keep talking because they feel like they are “on stage.”

**Insider Tip:**

*You don’t need to talk the second you are asked a question. Period. Take a little time to think about what you want to say. Pausing gives you time to organize your thoughts.* If you’re interested in learning about pausing for another purpose—to stall while you come up with an answer—see [Pause Before You Speak](#)

**Strategy: be yourself**

Finally, if you put these points together, it spells an unbeatable strategy: be yourself, anxieties and all. Rather than trying to project an unainted image—an image of the perfect applicant who has all the answers, allow yourself to be who you are. If that’s nervous, fine. It means you’re real, flesh and blood, and therefore more personable than the other 150 “plastic” candidates. Congratulate yourself for accepting who you are.

*If you can accept yourself as you are, believe me, they they can too.*
APPENDIX C

The Interview Day Checklist

_____ Arrive early. If you’re there from out of town, get a hotel room so you can arrive the night before and settle in.

_____ Scope out the interview site the day before if possible. Poke your head into the program’s administrative office. “I have an interview tomorrow and I wanted to make sure I knew where I was going.” If you have the wrong location, they’ll let you know!

_____ Get a good night’s sleep. If you believe that will be hard, consider getting a prescription for a sleep aid from your physician. Take it a week or so before, so you know exactly how it will affect you.

_____ Eat a light meal that is low in fat. Fats take longer to digest, and tend to “sit there” make things worse.

_____ Fill your gas tank.

_____ Get to the interview 30 minutes early. You never know when there will be traffic, restricted parking, etc.

_____ Go over your application. Focus on sharing weaknesses as strengths.

_____ Bring professional looking notebook ($10 or less at office supply stores). Inside it, bring any documents sent to you about the interview day.
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____ Write at least three questions for your interviewers in the notebook.

____ Bring any personal items you might need — floss, personal hygiene items, cash, ID, etc.

____ Turn off your cell phone. Not on vibrate—off.