

# TIPS AND TRICKS FOR ACING USMLE STEP 3



A practical, no-nonsense guide for the busy resident.

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If you are like me, the United States Medical Licensing Examination (USMLE) Step 3 is the one exam that continues to get pushed down the to-do list until it becomes urgent. This quick, honest guide answers common questions and reviews strategies to help busy ophthalmology residents get through Step 3 without losing their minds (or vacation days).

## CAN I COMPLETE THE EXAM BEFORE INTERN YEAR?

If possible, it is a great move to squeeze in Step 3 before residency starts. You will have more control over your schedule, and the exam will be one less thing to juggle during intern year. That said, if you are already in training, you

can still manage Step 3 with a little planning.

## HOW LONG DO I NEED TO PREPARE?

That depends on the individual. Some people can prepare in 2 to 4 weeks with focused studying. Others may need to take a couple of months and study a bit every day. The amount of preparation required varies from person to person, but it is important to be intentional with your time.

## DO I NEED TO COMPLETE MOCK EXAMS?

No, you do not necessarily need to include mock exams in your preparation. Step 3 differs from Step 1 and Step 2 in that the score does not hold the same weight for most

programs. Do not stress yourself out trying to crush every mock exam. However, completing a few practice tests, especially the computer-based clinical simulations (CCS), can help you grow more comfortable with the exam format and timing. Think of these as a dress rehearsal, not a final performance.

## HOW LONG IS THE EXAM?

USMLE Step 3 is a 2-day exam. Day 1 includes 232 multiple-choice questions that are divided into six blocks of 38 to 40 questions, with 60 minutes allotted to each. Day 2 includes 180 multiple-choice questions plus 13 CCS cases.

## WHAT IS ON THE EXAM?

The first day focuses on foundations of independent practice. Participants can expect the following:

- Step 1 plus quality improvement, ethics, and research;
- A focus on public health, statistics, patient safety, common risk factors, and prevention; and
- Questions that include “most common cause of ...” and “risk factor for ...”

The second day focuses on advanced clinical medicine. Test takers can expect the following:

- Clinical-heavy topics, such as diagnosis, management, next step, and the most definitive diagnostic tools and

## AVAILABLE RESOURCES

Some additional resources to consider using for USMLE Step 3 preparation are listed below.

- **UWorld Step 3 Question Bank** | [medical.uworld.com](http://medical.uworld.com)  
Solid explanations and good breadth
- **UWorld CCS Cases** | [medical.uworld.com](http://medical.uworld.com)  
Must-do for day 2 prep
- **NBME Step 3 Materials** | [usmle.org](http://usmle.org)  
Especially helpful to get an idea of pacing or case layout
- **OnlineMedEd** | [onlinemeded.com](http://onlinemeded.com)  
Great for brushing up on clinical reasoning and for those who prefer video-based learning
- **First Aid for the USMLE Step 1 and First Aid for the USMLE Step 2 CK**  
Recommended guides for those who want to refresh basic concepts.

**“YOU HAVE ALREADY DONE THE HEAVY LIFTING BY COMPLETING USMLE STEP 1 AND STEP 2. THIS IS THE LAST HOOP. YOU DO NOT NEED TO BE PERFECT; YOU JUST NEED TO PASS COMFORTABLY.”**

- CCS cases that test real-life reasoning, such as how you manage your own clinic day while the clock is ticking.

#### **TIME MANAGEMENT STRATEGIES**

Do not spend too long on each question. Mark your answer and move on. Use your break time wisely: Stretch your legs, eat a snack, visit the bathroom, and do a quick mental reset. For CCS cases, act fast but think logically. Start with a full history and physical exam and stabilize the patient before diving into diagnostics.

#### **TIPS FOR SCHEDULING THE EXAM**

You have two options for scheduling USMLE Step 3: (1) back-to-back days or (2) split across 1 to 2 weeks. The former approach is useful for those who want to get the exam over with, and the latter is helpful for those

who want to focus on preparing for CCS cases between days. If you are already in residency, splitting up the exam may be easier on your brain (and call schedule).

#### **HOW MUCH EXAM SCORE WEIGHT IS CARRIED BY THE CCS CASES?**

The CCS cases account for 25% of the overall exam score, so it is a crucial area to target during your preparation.

#### **HOW DO I PREPARE FOR THE CCS CASES?**

Practice is key, not only for learning the content but also for determining how to navigate the CCS interface. Complete the official National Board of Medical Examiners CCS interactive cases. Become accustomed to ordering labs, imaging, and consults and admitting patients versus sending them home.

#### **CCS TIPS**

Always stabilize your patient. Address the ABCs (airway, breathing, and circulation) first. Then, build your workup. If the patient “gets worse” or “is still in severe pain,” that is your clue your score has lowered. Be aware of the “setting” the patient is in; if they present to the clinic but are unstable, then you need to “transfer” them to the ER.

Know ahead of time the preventive measures to order for patients. For example, a 25-year-old woman needs a pap smear, whereas a 60-year-old man needs a diagnostic colonoscopy and the pneumococcal and meningococcal vaccines. Other preventive measures to be aware of include smoking cessation for patients who smoke and alcohol cessation for those who drink.

#### **FINAL THOUGHTS**

You have already done the heavy lifting by completing USMLE Step 1 and Step 2. This is the last hoop. You do not need to be perfect; you just need to pass comfortably (this is truer for certain specialties than for others). Above all, be sure to make a plan, stick to your timeline, and practice CCS cases ahead of time. Good luck! You’ve got this! ■

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