In business it has been said that your network is your net worth. Startups can fail or flourish depending on the connections their leaders have within the community. This concept has trickled down into our everyday lives, where the right connections can get your child into a preferred school or introduce you to a venture capitalist willing to invest millions into your idea.

Networking, unfortunately, can have a negative connotation. Those without connections see networking as fundamentally unfair, a system where "who you know" matters more than your own accomplishments. Truth be told, networking certainly can give you a leg up in a number of situations. But, in the words of Ice-T, "Don't hate the player, hate the game."

You are probably wondering what this has to do with medicine. The entire idea of networking is one reason why medical students who have a program at their institution in their residency field of choice can gain an advantage over those who do not have such a program, given their greater exposure to that field and faculty members in active practice. This is why I encourage students to do rotations away from their institution, especially if they do not have a home program.

A study of medical students wishing to pursue orthopedic surgery, a highly competitive field, found that 57% matched either with their home program or with a program at which they rotated.¹ Similar results have been seen in plastic surgery, findings amplified after the COVID-19 pandemic.² Another paper emphasized that orthopedic surgery

program directors were more likely to rank internal candidates, as the pandemic made gauging student interest more difficult through virtual interviews.<sup>3</sup> John Falcone, MD, a surgeon at the University of Pittsburgh Medical Center, defined this phenomenon as "home field advantage."<sup>4</sup>

Why is this? It all comes back to the value of networking.

Medical centers simply prefer students who have rotated through their department: they *know* you. They know your work ethic, your goals, your drive. They know that when they take you, they are getting a great resident; one who has already proven their mettle. This extends to letters of recommendation. It is true that letters of recommendation can be biased<sup>5</sup> and often are not reliable predictors of resident success. But a letter from someone the recipient knows makes it easier to trust their recommendation.

The move to the new pass/fail grading system from the original numerical score on the United States Medical Licensing Exam (USMLE) Step 1 examination only adds to the importance of networking. When the National Residency Matching Program (NRMP) surveyed program directors across all specialties, Step 1 was the most important factor in their selection of applicants to interview. In urology, over 80% of program directors felt that a pass/fail Step 1 removes an important objective measure of the applicant's qualifications.

What does this mean for you? Again, it highlights the importance of your network. Networking is important at every stage of your career. Getting from

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medical school into residency, getting from residency into fellowship, and even getting from fellowship into your first job—your network will be an invaluable asset throughout your entire career.

## **How to Build Your Network**

It is easier than you may think to build your network of professional contacts and colleagues.

First, you must be visible. Attend institutional events at which faculty will also be present. Also attend local, regional, and national conferences. Meetings of The Radiological Society of North America, American College of Radiology, and the American Roentgen Ray Society are great places to start. Subspecialty conferences such as those of the American Society of Neuroradiology, Society of Breast Imaging, and Society of Thoracic Radiology conferences can be invaluable once you have chosen a radiological subspecialty (even if you have not!).

Be sure to attend lectures and special events to meet as many people as you can to get the full value of networking. Indeed, after-hours events such as "speed-mentoring" and "power hours" can make networking easier. These are nearly always open to trainees; some conferences offer the option to select a mentor when you register, providing an easy way to begin networking even before you step foot in the conference center.

Making use of email and social media is another good way to build your network. Lecturers often include their contact information at the end of their slide presentations. Reach out to those who you think would make great mentors and tell them how much you enjoyed their talk and your interest in pursuing a career in the specialty. Radiology is a very open and welcoming field; challenge yourself to contact five people at the end of each meeting. You are bound to make a meaningful connection with at least one person.

Like most things, the more effort you put into building your network, the more you will get out of it. I have called upon my network when thinking about pursuing a fellowship and more recently, while looking for a position. Something you will commonly hear is that the best jobs are not posted on job boards; that's because they are usually filled before they make it to that point. Why is that? Networking, of course! In fact, of three jobs I recently considered taking, not one appeared on a job board. I was interviewed because either I reached out to someone else in my network, or they reached out to me.

Your network is truly an invaluable resource that will continue to assist you throughout the many phases of your career. The effort you invest today will continue to pay dividends well into the future.

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