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Ruiz JG, Mintzer MJ, Leipzig RM. The impact of E-learning in medical education. *Acad Med.* 2006;81(3):207-12. . PMID: 16501260.Article Google Scholar Scott K, Morris A, Marais B. Medical student use of digital learning resources. *Clin Teach.* 2018;15(1):29-33. . Epub 2017 Mar 16. PMID: 28300343.Article Google Scholar Laird-Fick HS, Solomon DJ, Parker CJ, Wang L. Attendance, engagement and performance in a medical school curriculum: early findings from competency-based progress testing in a new medical school curriculum. *PeerJ (San Francisco, CA).* 2018;6:e5283. ♦ Google Scholar Egle JP, Smeenge DM, Kassem KM, Mittal VK. The internet school of medicine: use of electronic resources by medical trainees and the reliability of those resources. *J Surg Educ.* 2014;72(2):316-20. ♦ Google Scholar Bell P, Volckmann D. Knowledge surveys in general chemistry: confidence, overconfidence, and performance. *J Chem Educ.* 2011;88(11):1469-76. ♦ Google Scholar Wynter L, Burgess A, Kalman E, Heron JE, Bleasel J. Medical students: what educational resources are they using? *BMC Med Educ.* 2019;19(1):36. ♦ Google Scholar Volk AS, Rhudy AK, Marturano MN, Ott L, DuCoin C. Best study strategy for the NBME clinical science surgery exam. *J Surg Educ.* 2019;76(6):1539-45. ♦ Google Scholar Choi-Lundberg DL, Low TF, Patman P, Turner P, Sinha SN. Medical student preferences for self-directed study resources in gross anatomy. *Anat Sci Educ.* 2016;9(2):150-60. . Epub 2015 Jun 1. PMID: 26033851.Egartner S, Mutschler A, Tekian A, Norcini J, Brass K. Medical assessment in the age of digitalisation. *BMC Med Educ.* 2020;20(1):101. . PMID: 32234051; PMIDID: PMC7110637.Article Google Scholar Ehrlinger J, Johnson KL, Banner M, Dunning DA, Kruger J. Why the unskilled are unaware: further explorations of (absent) self-insight among the incompetent. *Organ Behav Hum Decis Process.* 2008;105:98-121. ♦ Google Scholar Dunlosky J, Serra MJ, Matvey G, Rawson KA. Second-order judgments about judgments of learning. *J Gen Psychol.* 2005;132:335-46. ♦ Google Scholar Grimes PW. The overconfident principles of economics student: an examination of a metacognitive skill. *J Econ Educ.* 2002;33:15-30. ♦ Google Scholar Serra MJ, DeMarroe KG. Unskilled and unaware in the classroom: college students' desired grades predict their biased grade predictions. *Mem Cogn.* 2016;44:1127-37. ♦ Google Scholar Shanks LL, Serra MJ. Domain familiarity as a cue for judgments of learning. *Psychon Bull Rev.* 2014;21:445-53. ♦ Google Scholar Kötter T, Wagner J, Brühemil L, Voltmer E. Perceived Medical School stress of undergraduate medical students predicts academic performance: an observational study. *BMC Med Educ.* 2017;17(1):256. . PMID: 29246231; PMIDID: PMC5732510.Article Google Scholar Buehler R, Griffin D, Ross M. Inside the planning fallacy: the causes and consequences of optimistic time predictions. In: Gilovich T, Griffin D, Kahneman D, editors. *Heuristics and biases: The psychology of intuitive judgment.* Cambridge, UK: Cambridge University Press; 2002. p. 251-70. Google Scholar Taylor JA, Shaw CM, Tan SA, Falcone JL. Are the kids alright? review books and the internet as the most common study resources for the general surgery clerkship. *Am J Surg.* 2017;215(1):191-5. ♦ Google Scholar Ikonne U, Campbell AM, Wheelhan KE, Bay RC, Lewis JH. Exodus From the classroom: student perceptions, lecture capture technology, and the inception of on-demand preclinical medical education. *J Am Osteopath Assoc.* 2018;118(12):813-23. . PMID: 30476993.Article Google Scholar Kauffman CA, Derazin M, Asmar A, Kibble JD. Relationship between classroom attendance and examination performance in a second-year medical pathophysiology class. *Adv Physiol Educ.* 2018;42(4):593-598. ♦ Google Scholar Zazulia AR, Goldhoff P. Faculty and medical student attitudes about preclinical classroom attendance. *Teach Learn Med.* 2014;26(4):327-34. . PMID: 25318026.Article Google Scholar Tang B, Coret A, Qureshi A, Barron H, Ayala AP, Law M. Online lectures in undergraduate medical education: scoping review. *JMIR Med Educ.* 2018;4(1):e11. Published 2018 Apr 10. SA. No apparent association between lecture attendance or accessing lecture recordings and academic outcomes in a medical laboratory science course. *BMC Med Educ.* 2020;20(1):207. . PMID: 32605579; PMIDID: PMC7329538.Article Google Scholar Burgess A, Dornan T, Clarke AJ, Menezes A, Mellis C. Peer tutoring in a medical school: perceptions of tutors and tutees. *BMC Med Educ.* 2016;16:65. . PMID: 26956642; PMIDID: PMC4784332.Article Google Scholar Menezes A, Burgess A, Clarke AJ, Mellis C. Peer-assisted learning in medical school: tutees' perspective. *Adv Med Educ Pract.* 2016;7:31-8. . PMID: 26848282; PMIDID: PMC4723028.Article Google Scholar Akinla O, Hagan P, Atiomo W. A systematic review of the literature describing the outcomes of near-peer mentoring programs for first year medical students. *BMC Med Educ.* 2018;18(1):98. . Erratum in: *BMC Med Educ.* 2018 Jul 13;18(1):167. PMID: 29739376; PMIDID: PMC5941612.Article Google Scholar Pumilia CA, Lessans S, Harris D. An evidence-based guide for medical students: how to optimize the use of expanded-retrieval platforms. *Cureus.* 2020;12(9):e10372. . PMID: 33062495; PMIDID: PMC7550004.Article Google Scholar Jayakumar KL. Applying feedback lessons to online medical question banks. *J Grad Med Educ.* 2018;10(1):109. . PMID: 29467987; PMIDID: PMC5821013.Article Google Scholar Freeman A, Nicholls A, Ricketts C, Coombes L. Can we share questions? Performance of questions from different question banks in a single medical school. *Med Teach.* 2010;32(6):464-6. . PMID: 20515373.Article Google Scholar Bhatnagar V, Diaz SR, Bucur PA. The cost of board examination and preparation: an overlooked factor in medical student debt. *Cureus (Palo Alto, CA).* 2019;11(3):e4168. ♦ Google Scholar Sheehy R. This is not your grandfather's medical school: novel tools to enhance medical education. *Mo Med.* 2019;116(5):371-5. Google Scholar Page 2 From: The Impact of Educational Resources and Perceived Preparedness on Medical Education Performance Average exam score (survey respondents) Average exam score (overall class) Mean preparedness score Exam #1 85.2 84.5 6.97 Exam #2 82.3 82.0 4.71 Exam #3 83.4 81.9 5.66 Exam #4 71.1 79.0 6.64 Exam #5 73.7 81.2 5.33 Exam #6 72.5 83.6 7.67 Exam #7 74.2 82.8 6.17 Exam #8 73.3 78.7 5.13 At exams 7&8 71.7 6.97 Preparation courses for USMLE Step1 in Moscow and St. Petersburg.Seats are limited. USMLE Step 1. Strategy for Success. Personal experience.Part 1. Preparation for the exam.My first international medical exam I decided to take at the end of student life. It was October 2015 when all the books I and my study partner had ordered finally arrived. It was quite difficult to estimate the volume of the upcoming field of work for our eyes, but, nevertheless, we decided to calculate our strength for 10 months ahead, and after a short period of time we enrolled for an exam in the test center of Tennessee, in the United States, at the end of August 2016. I had the following collection of books in my hands: First Aid USMLE Step 1 - the basic and most fundamental book on all disciplines and organ systems - includes 600 pages. 2. BRS Physiology is a solid book on physiology, comprising about 250 pages but in less than average font. Kaplan Biochemistry and Medical Genetics is a textbook on biochemistry and genetics by Kaplan, one of the most fashionable in the American educational market.4. Kaplan Anatomy is an anatomy textbook.5. Kaplan Physiology is a textbook on physiology, it did not set out the course of the discipline in as much detail as in BRS Physiology, and quite clearly. Enough for the exam.6. Kaplan Pharmacology - Pharmacology textbook.Microbiology is made ridiculously simple - a seemingly thick book, but, in fact, printed on thick dense paper in large print with many drawings. Yes, it is not graphs and boring tables (they are also there, of course, but without overloads), namely pictures in the genre of comics / cartoons, laughing at which you can easily remember many details in matters of microbiology and immunology.8. Pathoma - a book ordered on the website of the same name (pathoma.com) along with a course of lectures for approximately 30 hours - an excellent note-taking tool when viewing lectures. Just to clarify that before ordering books, my partner and I did a fairly thorough search on the forums and groups where the arsenal of textbooks for preparation was discussed. There are a lot of companies producing books for USMLE, but not all books of even one series contain the most relevant information set out in human English. Therefore, we did not take the books of the Kaplan series on pathology, microbiology and immunology. Behavioral and social science. In the list above, I indicated the textbooks on which we really prepared in these 10 months. We also had Colgan Pathology and Lippincott Pharmacology, but we chose not to even take them because of our pace and strategy, and the books themselves were very cumbersome. In addition to books, we used materials Lectures on pathoma.com website - whole pathology course 2. Kaplan Q-bank (www.kaptest.com) - Kaplan firm's Question Bank 4. Wikipedia and sometimes different videos on Youtube to locally clarify some details whether to see the process in a graphic image.5. Pharmacology cards - to remember the characteristics of drugs.6. 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