A few months after she began her residency in 2020, Liz Southworth, MD, wanted to help the next batch of future physicians successfully navigate the residency application process and find fulfillment as they enter the next phase of medical training—and no group has ever had a more unusual residency application process to traverse than this year’s crop of fourth-year medical students.

Students who will transition from medical school to residency as part of the 2021 application cycle are encountering a disrupted process. Dr. Southworth has worked to get as much information as possible to applicants unable to visit programs due to restrictions put in place during the pandemic, most notably by offering programs and students feedback on how social media can be an asset to the residency program research they are undertaking with FREIDA™ and other high-quality tools.

Dr. Southworth also is a member of the AMA Ambassador Program, which equips individuals with the skills and knowledge to confidently speak to the AMA’s initiatives and the value of membership. The program also increases overall awareness about what the AMA does for physicians and their patients.

Dr. Southworth, a first-year ob-gyn resident at Michigan Medicine, recently spoke to the AMA about her own experiences as a resident, an applicant and now as an expert on the Match.
AMA: You made it through Match and are adjusting to life in a demanding residency training program during a global pandemic. Why are you making it a personal priority to help medical students and other residency applicants? Dr. Southworth: A lot of my passion for helping people find and discover the right specialty and program comes from the process I went through to discover my specialty and go through the Match process as an applicant last year. I had a great experience, one that confirmed I was making the right choice in the specialty I had chosen. Reflecting on that, I found some of the key components of my process were my mentors and a lot of self-reflection. My medical school taught us to be reflective and work to clarify our goals and values as physicians. Clarifying what was most important to me before applications were submitted set me up for a really fun and exciting Match process.

The Match has always been a stressful time for applicants for a number of reasons. As applicants feel pressure to apply to more programs, it was become increasingly financially tolling. The stress of successfully navigating the residency application and Match process undoubtedly contribute to student burnout. As a medical community, there’s a ton of discussion around how to prevent that burnout. Personally, the application process, going on interviews, and ultimately getting to meet my future colleagues was invigorating. Thinking about how to help other students come through the process feeling affirmed in their decisions is one of my main goals.

AMA: What role should younger physicians and residents play in offering feedback on the residency-selection process? Dr. Southworth: Serving as a sounding board and encouraging goal and value clarification are crucial for applicants entering this cycle. Asking critical questions that drive at the core values that are guiding the applicant’s decision to pursue a given specialty is key for mentors at any
level. As a recent applicant, articulating why you choose the field and ultimately the factors that played a significant role in your ranking process can help focus medical students considering what types of programs to apply to.

Overall, acknowledging that the application process is challenging and stressful for a number of reasons. The Match itself—the platform, the algorithm, etc.—is not necessarily the driving piece of the puzzle that makes the process challenging. It’s multifactorial. That’s why it takes working with all the stakeholders that interact with the application process and the Match—applicants, medical schools and residency programs. Historically, the medical student voice has been missed. But I'm very excited that in recent years people are looking to medical students to innovate and help work toward a better process.

Applicants and residents that have recently gone through the process have an opportunity to advocate to optimize and provide solutions to some the biggest issues—cost, raising application numbers, assessing fit with a program. As trainees are increasingly coming to medicine from a variety of fields and previous careers, it will be important to tap into the knowledge and expertise that this diversity of experience could lend to the process. What can we learn about applicant selection from those with experience in business, technology, education, and other industries?

AMA: What do you see as the impact of the residency interview process going virtual?

Dr. Southworth: Well, this year is going to be an interesting trial run. Projecting into the future, the adaptations seen in this cycle may lead to long-term solutions. While I don’t think that solely virtual interviews is the final answer... think about the financial benefits of it. We have to travel, potentially many times across the country. Rent cars. Take flights. All of that for less than 24 hours in a location. That is geographically and financially very challenging.

Medical students sometimes have to open a new credit card just to fund their interviews. Going through a virtual interview process in some part will help reduce the cost. At the end of this cycle, it will be interesting to study the switch to virtual interviews to learn about its effectiveness and how they could be incorporated in the future to reduce cost of interviews for applicants. Might programs do an initial round of interviews virtually followed by in-person interviews for applicants in a second round? Might programs continue the townhall-style information session leading up to the submission of applications to provide students more information about programs?

AMA: What advice do you have for students in this year’s Match?

Dr. Southworth: The application process can be very overwhelming and disorienting. Being able to ground yourself throughout the process in your core values and career goals will serve you well. As a medical student building reflection into your approach, knowing your values, and forcing yourself to distill down: Why medicine? Why a certain specialty? And, ultimately, what do you want to do with
your career? For some people, a 100% clinical focus may be their driver. For others, research or advocacy might be a big part of your passion. Framing out what you want your future to look like can help you navigate this next step.

As a student, I was fortunate to have mentors who indulged me as I explored all those different aspects of medicine and help me better understand what I wanted my career to look like. Because of that, I was able to have a framework for going through the Match process. Having some anchor to fall back on as I went through was so helpful.

**AMA:** With students not able to go to campus for virtual interviews, how are you guiding them to find more information about a program? **Dr. Southworth:** The NRMP [National Resident Matching Program] does a great survey of applicants where they address the criteria people generally look at when they consider ranking programs. One of the top criteria is in-person interview-day experiences. That’s not possible this year.

Social media has really come into the forefront of work I’m doing with my co-resident Sara Santiago, MD (a classmate of Dr. Southworth’s at Michigan), along with APGO [the Association of Professors of Gynecology and Obstetrics] and ACOG [the American College of Obstetricians and Gynecologists]. We’ve had a number of calls with program directors to help them set up their social media accounts and to share ideas.

We just finished a national social media showcase week with ACOG. Ahead of the ACOG Residency Showcase, residency programs created accounts and during the showcase programs posted daily. Via social media accounts, programs showed applicants things like the rotation schedules and facilities, but they also showed the human side of their programs, where people live and their families. It was impressive. Most of these posts were driven by residents. It was an example of how residents at all programs across the country can work with faculty to get engaged in making the application process more personal and informative for applicants this cycle. **AMA:** What were some of the driving factors in your decision to put Michigan Medicine at the top of your rank-order list?

Well, one of the big reasons I wanted to come to the University of Michigan for residency is Maya Hammoud, MD. I had the privilege of meeting her at an ACOG meeting and then the AMA ChangeMedEd Conference, and as the PI for the AMA Reimagining Residency grant awarded to APGO to reexamine the Match, I knew my passion for medical education would be embraced. I ultimately found that many residency programs would have helped me grow into an excellent educator to both my patients and colleagues. Finding a place that aligned so well with my interests—medical education and research—was one of my top priorities.

Having a program that—before I even got there—wanted to help partner with me on this project to use social media as a tool allowed me to hit the ground running. As an intern, I was able to launch a social media campaign across our entire specialty. I don’t know that that would’ve been able to happen had it not been for the place I’m at. Michigan is so focused on optimizing the transition from medical school to residency. It’s been a phenomenal experience, and it has made intern year—for all
of the hard work and long hours—a really positive experience and makes me so excited for the road ahead.