

Match rank order list advice with former program director Louito Edje, MD, MHPE

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Featured topic and speakers

In today's AMA Update, former residency program director Louito Edje, MD, MHPE, shares what fourth-year medical students need to know when making rank order list for NRMP (National Resident Matching Program). Dr. Edje, associate dean of graduate medical education and designated institutional official at the University of Cincinnati Medical School, discusses what makes a good residency match, ranking residency programs by specialty and more tips for creating your #ROL this Match season. AMA Chief Experience Officer Todd Unger hosts.

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Speaker

- Lou Edje, MD, MHPE, associate dean, GME, University of Cincinnati Medical School

Transcript

Unger: Hello and welcome to the AMA Update video and podcast. It's that time of year again, where medical students are starting to create their rank order lists in preparation for this year's main residency match. And we're going to talk with Dr. Lou Edje, the associate dean of graduate medical education and designated institutional official at the University of Cincinnati Medical school about her advice. I'm Todd Unger, AMA's chief experience officer in Chicago. Welcome back, Dr. Edje.

Dr. Edje: It's a pleasure to have me back and I'm really glad to be here.

Unger: Well, we are moving into what can be a very stressful time for fourth-year medical students. They're beginning to submit their rank order lists on February 1. And they have to finish that up by March 1.

Before we get into your specific advice on that, we've talked in the past about how, during the pandemic, students missed out on a lot of things, like clinical rotations and in-person interviews, that help them determine which residency programs would be right for them. Now that we are where we are, are students and programs having a more normal experience for Match at this point? And if not, are we still seeing lingering effects from the pandemic?

Dr. Edje: Absolutely. So you're right. I think the pandemic did, I guess, disadvantage a fair number of our learners, especially in their fourth year as they're trying to do audition rotations, be in places that they think they may want to go ahead and finally do their residency. That has opened up a little bit with rotations being allowed and a lot of institutions having external rotators in their spaces.

I will say that the Association of American Medical Colleges did put out five recommendations for interviews to be virtual, again, the '22-'23 year cycle. And, specifically, that including local applicants, that those should also be virtual as well and that they shouldn't have anything hybrid within a single program.

I think, for the most part, applicants should be feeling a little bit more comfortable about their opportunities and their experience. We have seen application inflation, though. That has been an issue. So, for example, we've had some folks that are applying to 75 different programs, which is not necessary. And it can be very debilitating to the program directors.

Unger: Wow, we'll talk about that a little bit more. As students and program directors enter this phase, in your view, what makes a good match? And is there anything such as a perfect match?

Dr. Edje: There is not a perfect match. There is the best match possible for the programs that you ranked. And I think there are so many things that go into determining what that is. I think virtual interviewing actually made it a little bit more difficult for learners to get the organic experience and see residents in a program they're interviewing at, interact with one another and really assess the culture.

Unger: So in thinking about this good match and what it looks like and then applying it to rank order lists, what criteria should students be considering? And I know some people subscribe to the go with your gut approach. Some are with follow your heart. What advice do you give students in terms of your own philosophy?

Dr. Edje: I am not a go by your gut kind of person until the very last minute when you've done all your great decision-making. So I think it has to be very intentional along the way. Picking your programs, you have to have some intentionality there. And I think really align your values and your goals with those of the program.

I think there should be a question rubric that you have that is pretty standard that you use across all programs. And then really assess the responses that you got with those programs. And, again, of course, the interactions you have with those who interview you are critically important in making sure whether you've got a fit there.

Unger: Before we go on to our next question, I did want to circle back. And you talked about this application inflation issue. I mean, what is driving that? And by the time you get to starting a rank order, I mean, are people dealing with pretty big lists at that point?

Dr. Edje: Yeah, so the fact that things are virtual—we actually did a study back in 2012 when Skype was a big thing and the pandemic was not on the horizon. And we found that it was really quite a bit more expensive for the students both in time and resources, money to go ahead and go to multiple programs. Certainly, I doubt there's a medical student who could afford going to 75 in-person visits, not only the time taken from their schooling, but also the money to travel there.

You pretty much got the dinner the night before. You have the full day and then you travel back. So that's about 48 hours we found was taken out for each interview. With everything going virtual, 75, while it's a lot, it's something that actually could be done in a fourth year and definitely not recommended. But, certainly, clicking on for a half day of interviews is a totally different thing.

Unger: Now when it comes down to ranking, one of the things that I know that students struggle with is how to rank big-name programs that may be considered more competitive. How should they think about this?

Dr. Edje: So I think it has to be based on your specialty. So, for example, you may have a big-name institution that is not really good at your particular specialty or is not prominent in your specialty. They may not even have a department with your specialty. So I think it's very important to really align what the prestigiousness of the actual program is at your institution that you're picking. That's an important thing.

Certainly, if you don't rank a program, you will not match in that program. So if there's something that will cause you significant regret, make sure it's on the rank list. And then there's consultation that you probably need to do about where on that rank list it should be.

Certainly, if you are not willing to go to a program, you definitely should not have it on your rank list. We had an example, where somebody—she actually was interviewing for family medicine. She put a program in OB at the bottom of her rank list in a specific location. And she matched into that OB program when her primary specialty really was family medicine. And that was a problem for her. She regretted it. She got her first OB choice, but she didn't get family medicine.

Unger: Now, how would you apply your same philosophy to a student who considers his or her dream program a reach or pretty competitive, but who got an interview? How should they think about ranking that compared to other maybe more reachable programs?

Dr. Edje: So I think if a program actually offered you an interview, definitely, you need to rank them. That's for sure. And I think that fear is a poor counselor. So if you are not ranking someone because of fear and they've already offered you an interview, I think that's a good sign.

One thing for sure, programs are actually not allowed to tell you where they ranked you. So I think there is a certain amount of comfort that people think, "Oh, you know, this program said I'm definitely a shoo-in." They can change their mind at the last minute and that's their purview. And so that's why they're required not to state those things.

It's a difficult thing. We should have good counseling as to whether you have what it takes to be at that program. But, certainly, if it's your dreams, but it should be on your rank list if they offered you an interview.

Unger: So just a question for that. Is there ever a reason to leave a program off your rank list if you've interviewed with them?

Dr. Edje: Absolutely. Absolutely. If you did your interview and their values did not align with yours, if there were misogynistic or racist comments or ignorant questions that were lopped your way, that's a problem because that gives you an insight into the culture, that maybe it was just that interviewer. But that interviewer was able to thrive in that space to the point that they're actually interviewing outside candidates. And that's a problem.

So that should be a red flag. Certainly, if it's your top choice and that occurs, doing some additional research, possibly talking to alumni of the program. Those are other opportunities.

Unger: So let's say that you've ranked one of your programs first. What do you think about sending a letter with the intent to that program to let them know that you've zeroed in on that particular one?

Dr. Edje: So that's a great question. When I interviewed back in '95, yep, I sent a letter to every single person that I interviewed with. And each one was tailored specifically to the interaction I had with that person. But things have gone in a different way.

A lot of program directors are rubbed the wrong way with that. And, certainly, not a letter of intent. Even a brief thank you can sometimes go the wrong way. So I would definitely be deliberate about determining if, do they have a policy on this or not? If they have a policy against you sending information after the interview, absolutely adhere to that. Resist the urge to send a thank you note.

So, again, I would find out. Usually, they'll be able to give you some idea about whether that's an acceptable thing to do or not.

Unger: All right, Dr. Edje, time for you to take your crystal ball out. You said you have seen, over the past few years, everything. When you look at the upcoming Match, do you think it's going to be any more difficult or easier than the last couple of years? And if it's going to be different, what's driving that?

Dr. Edje: So I think, again, it depends on the specialty. So, for example, ophthalmology actually went ahead and only offered 15 interviews per candidate. So they put a ceiling on that, which was very important.

OB and ENT have gone ahead and used preference signaling, a situation whereby a candidate can actually express their serious interest in a program. It doesn't obligate the program to express that same feeling. So I think there's some new nuances that are in this interview cycle that will change the process.

Definitely, having everything be virtual, I think, levels the playing field. And despite the fact that the pandemic is coming to a close, we found that having virtual interviewing actually has leveled the playing field. And so equity is an issue that has not changed, even though the pandemic has changed. So I think that virtual interviewing may be something that's here to stay.

And I think because of that, we have some challenges. Number one, USMLE went to pass/fail. And that was a metric that was used by program directors, not a good metric to assess their applicants. So they'll be looking for other things. And, especially, again, if you think of getting a huge number of applications, it's very difficult to do screening and decide how you are going to holistically approach on the situation.

Regarding the testing, we know that USMLE scores are not an indicator of whether you're going to be a good clinician or not. And so it should not have been used in the first place as markers. But we do know program directors who usually try and pick some metric to at least narrow down the large pool.

Unger: Anything top of mind in terms of those kind of criteria that folks are looking at, given that the pass/fail is now in process?

Dr. Edje: Yeah, it may mean that the can is kicked down the road. And they're looking at the next test that's out there, USMLE Step 2, as an option. The other thing, though, is making sure that we're doing holistic reviews.

So that would mean, what has your leadership experience been? What has your engagement in your community been? And all of these other metrics that are actually better predictors of how physicians are actually going to be when they get done.

Unger: I know this is obviously very stressful time. The good news is that about 80% of medical students typically match with at least one of their top four choices. And so those are pretty good odds. But there are always some who don't match. What would you say to medical students who are in a situation right now where they haven't been offered any interviews?

Dr. Edje: Yes, definitely, a stressful time. There's no question. Usually, your associate dean of students should be able to provide support directly boots on the ground in the institution. But never give up hope. There are so many stories where folks have actually gone through. And we know that 96% of applicants do end up matching within the subsequent year.

The question is, how do you spend your next year as you go ahead and try and either boost your CV? Do you do an MPH? Do you do research? I think it's just important to make sure that the time is not wasted. But rest assured that the vast majority of people who go ahead and not match the first time do end up matching.

Unger: Dr. Edje, thanks so much for being here. And all your medical students out there in your fourth year, we're thinking about you. And for all those that are going to be coming to this in the coming years, just think about a lot of the leadership opportunities that the AMA offers and a chance for you to really show commitment to medicine and your patients. Thanks for being here again, Dr. Edje.

For more resources to help with the journey toward residency, visit FREIDA—that's F-R-E-I-D-A—[ama-assn.org](https://www.ama-assn.org), which not only gives you access to FREIDA, the AMA's residency and fellowship database, but also our Road to Residency video series and other helpful content.

In the description of this episode, you're also going to find a link to the AMA Senior News Writer Brendan Murphy's podcast series "Meet Your Match" as well as a registration link for our Physicians of the Future virtual summit that takes place January 28 and 29. It's a great place to connect with other students and get more advice.



We'll be back soon with another AMA Update. In the meantime, you can find all our videos and podcasts at ama-assn.org/podcasts. Good luck to all of you that are going through this year's Match. I'll look forward to seeing all your posts on Facebook. Take care. Thank you.

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