AMA Innovations in Medical Education Webinar Series
Residency application process: What’s new for the 2022-2023 cycle?

Bukky Akingbola, MD
Maya M. Hammoud, MD, MBA
Nicole Mott, MD
Steven Pletcher, MD
Today’s Host

John S. Andrews, MD
Vice President, GME innovations
American Medical Association
Objectives

- Recognize the challenges associated with the residency application process
- Describe changes to the 2022–2023 residency application process
- Discuss the effects of these changes on residency applicants and programs
Presenter

Nicole Mott, MD

General surgery (PGY-1)
University of Colorado
Presenter

Maya M. Hammoud, MD, MBA

J. Robert Willson Research Professor, obstetrics and gynecology
Professor, learning health sciences
Associate chair, education
University of Michigan Medical School
Presenter

Steven Pletcher, MD

Professor
Residency program director, otolaryngology
University of California, San Francisco
Presenter

Bukky Akingbola, MD
Obstetrics and gynecology (PGY-2)
University of Minnesota
What is your primary responsibility in education?

• UME
• GME
• CME
• Medical Student
• Resident
• Allied health profession
• Not for profit organization
• For profit company
• Other
Challenges Associated with the Residency Application Process

Nicole Mott, MD
General surgery (PGY-1)
University of Colorado
Breaking Down the Match

Congratulations! You have matched!
Match 2022

Considering – all active applicants – the overall match rate was 80.1%
Match 2022

Match rate *varies widely* by medical training

<table>
<thead>
<tr>
<th>Medical Training</th>
<th>PGY-1 Matches</th>
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<tbody>
<tr>
<td>U.S. MD Seniors</td>
<td>0.1%</td>
</tr>
<tr>
<td>U.S. DO Seniors</td>
<td>2.2%</td>
</tr>
<tr>
<td>U.S. Citizen IMGs</td>
<td>1.9%</td>
</tr>
<tr>
<td>Non-U.S. Citizen IMGs</td>
<td>3.3%</td>
</tr>
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</table>

**Percentage point increase in matched applicants since 2021**

- 92.9% match rate
- 91.3% match rate
- 61.4% match rate
- 58.1% match rate

Source: NRMP
Match 2022

Match rates are calculated for active applicants.

Register for NRMP Match

Submit Rank Order List
Match 2022

Not all programs participate in the NRMP Match.

SF Match
Urology Residency Match Program
Military Match
Match rate varies widely by specialty.
Match rate is only a **crude** outcome.

Too Few Spots?

Ratio of Available PGY-1 Positions per Applicant
NRMP Main Residency Match®, 1997-2022

- US MD seniors
- All Active Applicants

Source: @jbcarmody
Too Many Applications?

Applications Per Applicant

ERAS 2017  ERAS 2018  ERAS 2019  ERAS 2020  ERAS 2021  ERAS 2022

DO  IMG  MD  Overall

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### Consequences of Application Fever: Programs

<table>
<thead>
<tr>
<th>Year</th>
<th>Number and % Filled</th>
<th>Average Length of ROL</th>
<th>Average Ranks per Position</th>
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<td>55.04</td>
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<td>2004</td>
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<td>2006</td>
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<td>2007</td>
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<td>2009</td>
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<tr>
<td>2010</td>
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<td>2011</td>
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<td>2012</td>
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<tr>
<td>2013</td>
<td>4,029 (87.9%)</td>
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<td>2014</td>
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<td>2015</td>
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<td>2016</td>
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<td>2017</td>
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<td>2018</td>
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<td>2019</td>
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<tr>
<td>2021</td>
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<td>2022</td>
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<table>
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<th>Year</th>
<th>Number and % Unfilled</th>
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<th>Average Ranks per Position</th>
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<td>623 (13.2%)</td>
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<tr>
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<td>36.01</td>
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<td>630 (12.5%)</td>
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<td>795 (13.4%)</td>
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<td>2022</td>
<td>896 (14.7%)</td>
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Source: NRMP
Consequences of Application Fever: Applicants

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<th>Year</th>
<th>Matched Applicants</th>
<th>Average Length of ROLs</th>
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<td></td>
<td>Number and % Matched</td>
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<td>2003</td>
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<tr>
<td>2022</td>
<td>17,064 (93.0%)</td>
<td>14.31</td>
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<table>
<thead>
<tr>
<th>Year</th>
<th>Matched Applicants</th>
<th>Average Length of ROLs</th>
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<tbody>
<tr>
<td></td>
<td>Number and % Matched</td>
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<td>2009</td>
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<td>2015</td>
<td>24,918 (75.9%)</td>
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<td>2016</td>
<td>25,481 (76.3%)</td>
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<td>2017</td>
<td>26,186 (77.7%)</td>
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<td>2018</td>
<td>27,424 (78.9%)</td>
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<td>2019</td>
<td>29,044 (80.2%)</td>
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<td>2020</td>
<td>30,582 (81.3%)</td>
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<td>2021</td>
<td>31,546 (78.7%)</td>
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<td>2022</td>
<td>32,305 (80.6%)</td>
<td>12.58</td>
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Source: NRMP
Residency Application Process
Physicians’ powerful ally in patient care
Changes to the 2022-2023 Residency Application Process

J. Robert Willson Research Professor, Obstetrics and Gynecology
Professor, Learning Health Sciences
Associate Chair, Education
University of Michigan Medical School

@Maya_Michigan
Disclosures

• I am:
  • Paid consultant for the American Medical Association
  • Board member and Past President of the Association of Professors of Gynecology and Obstetrics (APGO)
  • Member of the NBME Executive Board
  • PI on the AMA Reimagining Residency Grant “Transforming the UME to GME Transition: Right Resident, Right Program, Ready Day One”

The opinions reflected in my presentations are my own and do not necessarily represent Michigan Medicine, APGO, NBME or AMA views.
Residency Application and Recruitment

• Most applicants go through the process once
• Many depend on faculty advisors, peers, and social media for advice
• Many changes in the last 3 years to improve the process
• Highlight planned changes in the upcoming cycle
2022-2023 Residency Application Cycle

- Application timeline
- Standardized dates for application and interview offers
- Application review:
  - Step 1 Pass/Fail
  - Supplemental application
  - Altus
    - Standardized letters
- Signaling (Pletcher)
- Virtual Interviews
- Resources (Akingbola)
**ERAS Match 2023 Timeline***

- **August 1, 2022**: Supplemental ERAS App opens
- **September 15, 2022**: NRMP registration opens
- **September 16, 2022**: Supp App closes
- **September 28, 2022**: Programs may begin viewing applications
- **January 31, 2023**: NRMP registration deadline
- **February 1, 2023**: NRMP ranking opens
- **March 1, 2023**: NRMP rank order lists due
- **March 13, 2023**: Match week

*This timeline does not apply to the early match specialties*
Standardized Interview Offer Dates

- Ophthalmology: October 17, 2022
- Urology: October 21, 2022
- Obstetrics and Gynecology: October 25, 2022
- General Surgery: October 26 to Nov 1, 2022
- Dermatology: Nov 7, Nov 21, Dec 5, 2022
- Orthopedic Surgery: TBD
Time to Respond to Interview Offers

• General Surgery, Obstetrics & Gynecology: 48 hours
• Emergency Medicine, Urology: 72 hours

Spots Available for Interview Offers

• Dermatology, Emergency Medicine, General Surgery, Obstetrics & Gynecology, Urology

Interview Caps

• Ophthalmology: 15
### Summary Standards

<table>
<thead>
<tr>
<th>Specialty</th>
<th>Supp App</th>
<th>Signaling</th>
<th>Interview Offer (IO) Dates</th>
<th>Time to respond to Interview Offers</th>
<th>Spots available for Interview Offers</th>
<th>Virtual Interviews</th>
<th>Interview Cap</th>
<th>Standard Letter</th>
<th>Altus</th>
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<td>Friday, October 21, 2022</td>
<td>72 hours</td>
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https://docs.google.com/spreadsheets/d/1VZvXZNxc6oJx-YYRK-c8dtBn8fLBzo6/edit#gid=409222890

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Application Review

• Step 1 Pass/Fail
• Supplemental application
• Altus
• Standardized letters
Step 1 Pass/Fail: Now what?

• Step scores are only one small component of the application
• With so many specialties using signaling, more likely applications will receive holistic review
• Important for applicant to tell their story, what makes them unique, and how their values align with those of the specialty/program
• Demonstrate competencies essential to being a successful resident/physician
  • Integrity, reliability, resilience, motivation, initiative, teamwork, compassion
• Discuss future goals as appropriate
ERAS Supplemental Application

• 16 specialties will be using a supplemental ERAS® application for Match 2023
• The supplemental application is to help applicants share more information about themselves with programs

- Available August 1 to September 16
- Optional for applicants and programs
- All details on AAMC website

https://students-residents.aamc.org/applying-residencies-eras/supplementalerasapplication
Participating Specialties in ERAS Supplemental Application

- Adult Neurology
- Anesthesiology
- Dermatology
- Diagnostic Radiology and Interventional Radiology
- Emergency Medicine (*Program Signals only*)
- General Surgery
- Internal Medicine – Categorical
- Internal Medicine/Psychiatry
- Neurological Surgery
- Obstetrics and Gynecology (*Program Signals only*)
- Orthopedic Surgery
- Pediatrics
- Physical Medicine and Rehabilitation
- Preventive Medicine
- Psychiatry

Review each specialties policies on whether to signal home/away in person sub internships.
Altus

- Altus assessments are to help selection committees perform holistic reviews
  - Evaluate social intelligence, professionalism, communication, motivation, and more
  - Give applicants more opportunities to stand out, earlier in the process
- Ophthalmology: all programs
- Obstetrics & Gynecology, Anesthesiology, Internal Medicine, General surgery: some programs
- Participating programs and testing dates listed on Altus website

https://takealtus.com/dates-times/
What is Altus Suite?

Built on years of academic research, Altus Suite is a multi-part assessment that provides programs with insights on applicants for key personal and professional characteristics, in a fair and reliable way, to support their admissions decisions. It gives applicants multiple opportunities to showcase their unique personal and professional strengths, looking beyond their book smarts.

CASPER
SUMMATIVE SJT
Tests applicant abilities related to social intelligence and professionalism

DUET
VALUE-ALIGNMENT ASSESSMENT
Measures alignment (“fit”) between applicants’ values and priorities for training with your program

SNAPSHOT
ONE-WAY VIDEO INTERVIEW
Assess applicants’ communication, self-reflection, and motivation

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Standardized Letters of Evaluation

- Emergency Medicine
- Internal Medicine
- Obstetrics & Gynecology
- Orthopedic Surgery
Virtual Interviews

• AAMC
• Specialties:
  • Emergency Medicine, General Surgery, Internal Medicine, Obstetrics & Gynecology
• Many academic medical centers
• Important to check individual program website
• Some will give option to applicant
Take Home Points

• Many different initiatives across different specialties
• Strong desire to improve equity and the applicant experience
• There will be variations between programs in a single specialty
• Make sure to check each specialty guidelines
• Many specialties publish which programs are following the recommended guidelines
• Make sure to check individual program websites
PREFERENCE SIGNALING IN THE 2023 MATCH CYCLE

STEVEN D PLETCHER
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UNIVERSITY OF CALIFORNIA, SAN FRANCISCO

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@steve_pletcher
Today’s Talk

• What is Preference Signaling?
• What impact do Signals have?
• How should I approach this process?
What is Preference Signaling?

• System that allows Applicants to send a signal of interest to a defined number of Residency Programs
  • Number of Signals varies based upon specialty
  • Programs only see a list of Applicants that signal them, NOT other programs Applicants have signaled
• This process occurs prior to the release of applications and is designed to be used for Interview Selection
  • Most applicants screened out prior to interview day
  • No formal method to align applicant and program interests prior to interviews
Goals of Signaling

• Improve ability of Applicants to obtain interview offers from programs of particular interest

• Improve ability of Residency Programs to identify Applicants with particular interest in their program
  • The average Otolaryngology Applicant applies to more than half the programs in the country

• Innovate in an area of stagnation
Impact of Signaling

Interview Offer Rate

Overall
Non-signal
Signal
Closest non-signal

Impact of Signaling

Interview Offer Rate

Impact of Signaling

Interview Offer Rates

Overall
Non Signal (Home/Subl)
Comp non-Signal
Signal
Subl
Home Prog

2022 2021
Impact of Signaling

2021

Interview Offer Rate

- 4th Quartile
- 3rd Quartile
- 2nd Quartile
- 1st Quartile

2022

Interview Offer Rate

- non-signal/sub/home
- comp non-signal
- signal
Does the Impact of Signals Vary Across Demographic Groups?

- Gender?
- URM Status?
- Data from Collaboration with ERAS/AAMC
  - Primary outcome: “Selected for Interview” status in ERAS
  - Final Dataset
    - Gender – 212 Female vs. 340 Male; 89 Programs (75%)
    - URM Status – 376 non URM vs. 86 URM; 76 Programs (64%)
Probability of Interview Invitation by Gender
Probability of Interview Invitation by URM Status

- Did not send signal (URM): 0.25
- Did not send signal (non-URM): 0.15
- Sent signal (URM): 0.88
  Multiplier = 3.6
- Sent signal (non-URM): 0.53
  Multiplier = 6.3

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Impact of Signaling

• Signals increase the likelihood of receiving an interview offer from Programs of Interest
How should I approach this process?

- Learn the rules for your specialty
  - Signals to Home/SubI programs?
  - Dates and Logistics
  - ERAS for most specialties
  - Otolaryngology & Urology through specialty websites

<table>
<thead>
<tr>
<th>Specialty</th>
<th># of Program Signals</th>
</tr>
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<tbody>
<tr>
<td>Adult Neurology</td>
<td>3</td>
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<tr>
<td>Anesthesiology</td>
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</tr>
<tr>
<td>Dermatology</td>
<td>3</td>
</tr>
<tr>
<td>*Diagnostic Radiology and Interventional Radiology</td>
<td>6</td>
</tr>
<tr>
<td>Emergency Medicine</td>
<td>5</td>
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<tr>
<td>General Surgery</td>
<td>5</td>
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<tr>
<td>Internal Medicine (Categorical)</td>
<td>7</td>
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<tr>
<td>Internal Medicine/ Psychiatry</td>
<td>2</td>
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<tr>
<td>NeuroSurgery</td>
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<tr>
<td>Obstetrics and Gynecology</td>
<td>3 (gold) 15 (silver)</td>
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<tr>
<td>Orthopedic Surgery</td>
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<td>Pediatrics</td>
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<td>Physical Medicine and Rehabilitation</td>
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<tr>
<td>Preventive Medicine</td>
<td>3</td>
</tr>
<tr>
<td>Psychiatry</td>
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</tbody>
</table>
How should I approach this process?

- Identify programs of interest
  - Alignment with training goals, culture, geography
- Review application with a trusted advisor
  - Will you be competitive at your programs of interest?
  - Metrics important to programs present in your application?
  - Cross-check with available resources
- Signal programs of interest where you anticipate being a competitive applicant
Final Points

• A Signal does not guarantee an interview offer
  • Signals are only one part of the application package
Final Points

- For most specialties, there are many more interview offers than preference signals
  - Very few programs will receive more signals than interview slots
  - Programs will interview many applicants who did not send them a signal
Final Points

• Signals are a resource for you – plan but don’t over-strategize
  • Don’t assume your preferred programs will offer you an interview offer without a signal
  • Program Directors may be looking at your application “great applicant, seems like a good fit for our program, but they didn’t signal …”
Thank You!

Sonya Malekzadeh, David Chang, Marc Thorne, Eric Dobratz, Barry Schaitkin, Rosemary Stocks, John McGinn Emily Maurer, Katie Fitzgerald

Acknowledge AAMC/ERAS Collaborators: Bobby Naemi, Dana Dunleavy, Renee Overton, Joe Costa
Resources for the Residency Application Process

Bukky Akingbola, MD
Obstetrics and gynecology (PGY-2)
University of Minnesota
Resources

- AAMC: ERAS, Residency Explorer
- AMA: FREIDA
- NRMP: Match data
- Specialty sites
- Program websites
- Social media
- Faculty advisors
- Friends and family
MyERAS Resources

Supplemental Application

The Electronic Residency Application Service® (ERAS®) is offering a supplemental application designed to help students share more about themselves and assist program directors in finding applicants that fit their programs’ setting and mission.

About the supplemental ERAS® application

In addition to the main MyERAS® application, 16 specialties will use a supplemental ERAS® application during the ERAS 2023 season. This short, free supplemental application features questions to help applicants share more information about themselves with programs.

Specialties participating in the supplemental ERAS® application

With the support of their specialty leadership organizations, programs from the following specialties may participate in the supplemental ERAS® application for the 2023 ERAS season.

Very important to understand each specialty guidelines

For dual applicants: Same supplemental application goes to all programs
Residency Explorer

https://www.residencyexplorer.org
Residency Explorer

https://www.residencyexplorer.org
AMA FREIDA - OBGYN ONLY - Available August 2022

Alignment Check Index

This tool is a pilot for an Alignment Check Index for the OBGYN specialty. It allows residency applicants to compare their experiences and characteristics to the domains that residency programs consider in their own assessment of their program's values and interests. The Alignment Check Index (ACI) creates an alignment index that applicants can use in helping them determine to which programs to apply.

Alignment Check Index developed in collaboration with the OBGYN specialty

ACI WORKSHEET

FAQS FOR APPLICANTS
NRMP Match Data

NRMP Match Data
Specialty Sites
Other Resources

• Program websites
• Social media
• Faculty advisors
• Friends and family
AMA Innovations in Medical Education Webinar Series
Residency application process: What’s new for the 2022-2023 cycle?

Questions