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**APPD/COMSEP/AMSPDC/FuturePedsRes/NextGenPediatricians Letter to Our Pediatrics Community
About the Residency Recruitment Process
June 13, 2022**

The leadership of APPD, COMSEP, AMSPDC, FuturePedsRes, and NextGenPediatricians have been working collaboratively with Undergraduate Medical Education (UME) and Graduate Medical Education (GME) leaders and learners to optimize the residency recruitment process for applicants and programs. Through this process, we have sought substantial input from applicants, program leaders, chairs, the greater pediatric community, and other specialties. In addition, we have reviewed and appreciate the Coalition for Physician Accountability 2021 Recommendations, AAMC 2022 Recommendations, and AACOM 2022 Recommendations.

Our primary goal is to optimize the recruitment process for both learners and programs by:

- (1) Helping learners find programs that support their career goals while providing an atmosphere conducive to how they learn best.
- (2) Creating a fair and equitable application process for both learners and programs.

These past interview seasons have opened our eyes to ways of improving equity in our processes. In addition, a number of studies of applicants and programs have been conducted and will continue to be performed.

Given that planning and advising for the upcoming application season hinges on how interviews will be conducted, we present that recommendation up front, followed by additional recommendations about other key aspects of the application cycle.

Interview recommendations

Following many conversations and surveys with each of our organizations, we strongly recommend **only offering virtual interviews** for the 2022-2023 recruitment cycle. These recommendations are generated for several reasons:

- (1) **Effective assessment:** The majority of applicants and programs highlighted that they thought the assessment of applicants was effective using virtual interviews in the 2020-2021 and 2021-2022 cycles.
- (2) **Equity:** Virtual interviews are more equitable for applicants and programs, both in terms of cost savings and in terms of any remaining restrictions from the COVID-19 pandemic.
- (3) **Cost savings:** Virtual interviews save significant money for applicants and programs.
- (4) **Minimize time away from clinical endeavors:** Recognizing that our medical students' clinical time has already been significantly impacted, virtual interviews decrease their time away from clinical training.

- (5) **Environmental impact:** Virtual interviews will decrease the environmental impact of travel (Donahue, JGME 2021).

Virtual interviews should be used for all applicants, including local ones, to have a more equitable process. In addition, programs should follow all institutional rules set by their DIOs regardless of any other recommendations.

In-Person Second Looks

Offering in-person second looks can put undue pressure and economic burden on applicants and extend the interview season for both applicants and programs. For the 2022-2023 application cycle, we recommend programs **do not host or participate in in-person second looks**.

As alternatives to in-person visits:

1. Programs may provide information about the surrounding area. Applicants have asked for guides/recommendations for applicants to get to know the region/city/area on their own.
2. Programs may hold virtual sessions.

If an applicant reaches out to meet during the recruitment process, then we recommend that program leaders not meet in person with the applicant.

Commitment to continuing to study and learn what is best for pediatrics

There are many studies in progress to understand virtual and in person interviews. We will continue to review this data as it is available to recommend what is best for the applicants and programs in pediatrics for subsequent years.

In addition, we have developed the following recommendations for applicants and programs to adopt and incorporate into their recruitment planning processes.

Information for students:

You have chosen an outstanding field dedicated to the health and well-being of children. Our program leaders are here to help you navigate this process!

- (1) General considerations for the 2022-2023 application cycle:
 - a. We recognize that you have had variable clinical, research, advocacy, and other extracurricular experiences due to the impacts of COVID-19.
 - b. With the goal of developing a more diverse workforce to meet the needs of our children, families, and communities, we have provided program directors with guidance on how to perform a holistic review of applicants.
 - c. Please see the following recommendations to residency programs as indicative of our commitment to you, the future pediatric residents, and to the children and families you will serve throughout your careers.

(2) Away Rotations:

- a. We want to highlight that applicants in pediatrics do not need to do an away rotation to be considered seriously by programs.
- b. We anticipate most pediatric programs will continue to offer away rotations for those students who choose to pursue one.
- c. A number of pediatric programs have developed funded visiting rotations for underrepresented in medicine (UIM) allopathic and osteopathic students:
<https://www.appd.org/careers-opportunities/urim-opportunities/>

(3) Learning about programs:

- a. APPD + [FuturePedsRes](https://www.futurepedsres.com/) will offer the #PedsMatch23 Webinar Series featuring all of our programs again this June-August. Webinars will include (1) general recommendations for applying, (2) regional reviews of programs, (3) session for osteopathic students, and (4) session for international medical graduates. For more information, please see: <https://www.appd.org/resources-programs/recruitment/> or www.futurepedsres.com/pedsmatch2023
- b. NextGen Pediatricians (NGP) is a national virtual mentoring and residency preparation program that provides guidance to underrepresented in medicine (UIM) applicants applying into pediatrics or any combined pediatrics program. The organization hosts monthly webinars to assist these applicants with all aspects of the residency applications process, provides 1:1 virtual mentorship with residents/fellows/attendings, and NGP Office Hours to provide guidance unique to individual applicants. For more information, please see the following opportunities for students to connect with NGP:
 1. Email: nextgenpediatricians@gmail.com
 2. Social Media: @NextGenPeds (Twitter and Instagram)
- c. Program websites are another great way to learn about programs.
- d. Additional information can be found at [FREIDA](#)
- e. Program-sponsored virtual information sessions and social “Meet and Greets”: in addition to the webinars mentioned above some programs may offer virtual information sessions addressing general or specific aspects of their program to highlight throughout the application season.

(4) Number of programs:

- a. We recognize that applicants often look for guidance on how many programs to apply to per specialty. The current evidence for pediatrics residency programs is included below. However, it is important to recognize that the following studies only take into account some, but not all, of the important aspects of a pediatrics residency application. Therefore, **our strongest recommendation is that students should discuss their individual applications with their advisors prior to submission.**
- b. The AAMC site “Apply Smart” provides data to consider when **applying** to residency programs: <https://students-residents.aamc.org/applying-residency/filteredresult/apply-smart-data-consider-when-applying-residency/>
- c. Data from 2022 NRMP Charting the Outcomes will help students and pediatric advisors assess how an individual student’s application characteristics will affect their likelihood of matching: <https://www.nrmp.org/main-residency-match-data/>

- d. **To reiterate each student should discuss their individual situation with their pediatric advisors to determine the number of residency programs they should apply to. As a broad, general recommendation, most students do not need to apply to more than 20 programs unless they have had some academic difficulty, are couples-matching, or are advised to by their pediatric medical school leadership.** We want to ensure that applicants get a holistic review, but this will be difficult to do if programs are flooded by applications.
- (5) ERAS Supplemental Application, Geographic Preferences, and Signaling:
- a. With feedback from APPD, COMSEP, FuturePedsRes, and NextGenPediatricians, we have decided to join the ERAS Supplemental Application Pilot for 2022-2023. More info at: <https://students-residents.aamc.org/applying-residencies-eras/supplemental-eras-application>
 - b. This includes 3 components:
 - 1. Supplemental application with 5 most meaningful activities highlighted (top 5 activities out of extracurricular/research/job/etc) and why
 - 2. Geographic preferencing (applicants able to identify top 3 out of 9 regions or say "no geographic preference")
 - 3. Signaling (applicants able to identify top 5 programs that they would like to interview at)
 - a. **We recommend that applicants signal their home program if it's one of their top 5, unless their program says it is not necessary.**
 - b. **We recommend that applicants signal any away rotation programs if they are one of their top 5.**
- (6) Interview Offers
- a. **Highly consider letting the program know if you won't be interviewing with them by November 15th. And definitely let programs know at least 2 weeks ahead of time if canceling an interview.** This will allow programs to open these spots to other candidates.
- (7) Pre-interview:
- a. Please make sure you have a secure internet connection for your interview. If you have any concerns about this, please let the student affairs office or your advisors know and they can help you.
 - b. Please review any materials the programs send you in advance of your interview.
- (8) Interviews:
- a. **Please do not record interviews.**
- (9) Post-interview communication:
- a. We discourage post-interview communication unless it is a thank you note (and this is considered optional) or you have specific questions or updates to provide.
 - b. Please do not send letters of intent or "love letters".

Recommendations to residency programs:

- (1) To provide adequate exposure to pediatrics and pediatric subspecialties:
 - a. Consider how to help students at your institution learn more about pediatrics and pediatric subspecialties in general.
 - b. APPD + [FuturePedsRes](#) will offer the #PedsMatch23 Webinar Series this year. Webinars will include (1) general recommendations for applying, (2) regional sessions to share programs, (3) session for osteopathic students, and (4) session for international medical graduates. For more information, please see: <https://www.appd.org/resources-programs/recruitment/> or www.futurepedsres.com/pedsmatch2023
 - c. NextGen Pediatricians (NGP) is a national virtual mentoring and residency preparation program that provides guidance to underrepresented in medicine (UIM) applicants applying into pediatrics or any combined pediatrics program. The organization hosts monthly webinars to assist these applicants with all aspects of the residency applications process, provides 1:1 virtual mentorship with residents/fellows/attending, and NGP Office Hours to provide guidance unique to individual applicants. For more information, please see the following opportunities for students to connect with NGP:
 1. Email: nextgenpediatricians@gmail.com
 2. Social Media: @NextGenPeds (Twitter and Instagram)
 - d. Please limit any individual program virtual open houses to a single virtual open house, which is recorded and available for applicants. Please consider attendance at open houses to be optional and do not use as an indication of an applicant's interest.
- (2) Away Rotations:
 - a. Aligned with our goals of developing a more diverse workforce, consider offering in-person or virtual visiting clerkships for UIM allopathic and osteopathic students: <https://www.appd.org/careers-opportunities/urim-opportunities/> If programs would like to list their UIM visiting rotation on this site, please fill out this brief form: <https://forms.office.com/pages/responsepage.aspx?id=4EPAu3WMOEae1Lb136nk6zIxiJ26stRFoLxV1Kd1rORUMzk5NVoxRThKMTBBNzBUUIY3MTBKRjIJSy4u>
 - b. Look out for an upcoming list of best practices for UIM Rotations: <https://www.appd.org/careers-opportunities/urim-opportunities/>
- (3) ERAS Supplemental Application, Geographic Preferences, and Signaling:
 - a. With feedback from APPD, COMSEP, FuturePedsRes, and NextGenPediatricians, we have decided to join the ERAS Supplemental Application Pilot for 2022-2023. More info at: <https://students-residents.aamc.org/applying-residencies-eras/supplemental-eras-application>
 - b. This includes 3 components:
 - i. Supplemental application with 5 most meaningful activities highlighted (top 5 activities out of extracurricular/research/job/etc) and why
 - ii. Geographic preferencing (applicants able to identify top 3 out of 9 regions or say "no geographic preference")

iii. Signaling (applicants able to identify top 5 programs that they would like to interview at)

1. **We recommend that applicants signal their home program if it's one of their top 5, unless their program says it is not necessary.**
2. **We recommend that applicants signal any away rotation programs if they are one of their top 5.**

(4) Reviewing applications:

- a. **We support holistic review of applications**, recognizing that access to different clinical, research, extracurricular, work, and other experiences vary significantly at baseline due to structural and systemic barriers due to race/ethnicity, gender, gender identity, LGBTQ+, disabilities, socioeconomics, and have been further impacted by the COVID-19 pandemic.
- b. Recognize that many medical students will have experienced non-traditional clerkships during the pandemic, including virtual learning experiences and on-line educational programming.
- c. Decrease any requirement of peds-specific letters to one peds letter.
- d. Do not require that a sub-I be completed by time of initial application review.
- e. Do not require that Step 2CK be completed by time of initial application review.

(5) Offering interviews:

- a. **Please do not offer any interviews before Tuesday, October 11th, to allow all programs 2 weeks to review applications and promote holistic review.**
- b. Offer at least as many interview spots as applicants invited
- c. Interview offers should be sent in the late afternoons, recognizing that applicants are often busier with clinical work in the morning (please note time zones).
- d. Allow a minimum of 72 hours to respond to interview invites before releasing the spot to another applicant.
- e. Recommend letting all applicants know if they will be offered an interview, waitlisted, or not offered an interview by December 1 (two months after ERAS opens).
- f. In preparing for the interview day, recommend asking applicants if they need any accommodations to make their interview experience the most productive possible.
- g. Please offer a tech check for applicants to test their systems prior to the interview either earlier the same day or at a convenient time prior to the interview.

(6) Pre-interview Materials:

- a. Programs are encouraged to provide as much program information ahead of the interview day as possible so that the interview day can be focused on 1:1 or small group interactions.
- b. Recommend updating websites, digital brochures, videos, and other resources that highlight important aspects of your program
- c. Consider highlighting/pre-recording an example teaching session.
- d. Ahead of the interviews, please share with the applicants:
 - i. What platform will be used for the interview (e.g. WebEx, Zoom, BlackBoard)
 - ii. Specific information about back-up procedures to use if there are technical issues (e.g. exchange of cell/phone numbers)

- iii. Structure of the interview day
- iv. Planned format for the interview(s) (e.g. open format conversations, faculty asking specific questions)

(7) Interviews:

- a. We strongly recommend only offering virtual interviews for this year's Match cycle for the reasons listed on page 1 of this document.
- b. Virtual interviews should be used for all applicants, including local ones, to have a more equitable process.
- c. Programs should develop strategies that will showcase your program virtually. The APPD Coordinator Executive Committee has developed an outstanding virtual interview toolkit available in the APPD ShareWarehouse to help programs prepare (<https://www.appd.org/resources-programs/share-warehouse/>).
- d. Please offer the daytime components of the interview day (individual interviews, conferences, tours, etc) on the same day (i.e., not spread across multiple days) to make scheduling easier for applicants.
- e. Remember the time zones that your applicants are in when scheduling interview days.
- f. It is reasonable to offer a few optional virtual informational sessions/programmatic overviews or social/meet and greet with residents/fellows over the course of the interview season that are not on the official interview day.
- g. Consider hosting an optional virtual information session with UIM faculty and fellows as an informal chance to meet members of the UIM community at the program.
- h. Please do not record interviews.
- i. Of note, this recommendation of virtual interviews is only for the 2022-2023 cycle, and we will reevaluate future cycles as we collect more information.

(8) Second looks:

- a. For the 2022-2023 application cycle, we recommend programs **do not host or participate in in-person second looks**. Offering in-person second looks can put undue pressure and economic burden on applicants and extend the interview season for both applicants and programs.
- b. As alternatives to in-person visits:
 - 1. Programs may provide information about the surrounding area. Applicants have asked for guides/recommendations for applicants to get to know the region/city/area on their own.
 - 2. Programs may hold virtual sessions.
- c. **If an applicant reaches out to meet during the recruitment process, then we recommend that program leaders not meet in person with the applicant.**

(9) Post-interview communication:

- a. All communication needs to abide by NRMP requirements.
- b. We recommend post-interview communication to be limited to:
 - i. One follow-up with contact information of leadership/interviewers.
 - ii. One program update at end of recruitment that goes to all applicants together, to remind applicants that they will not hear from you unless they have specific questions.

- iii. Only individual communication if applicants/program have questions for each other. Post-interview communication is permitted for responding to specific questions or for linking with mentors and/or research colleagues.
- iv. Consistent with NRMP rules, we recommend stating “we don’t expect a response back” for any post-interview communication.
- c. Keep in mind that even positive communications with applicants can be stressful to them.

(10) Throughout the recruitment season:

- a. Since programs have had significant financial constraints due to COVID, some programs continue to have reduced administrative and coordinator support and increased administrative needs, and because the students, residents, and fellows on our action team said that these are not necessary, we strongly recommend:
 - i. Do not provide food or gift cards for food
 - ii. Do not distribute swag (e.g., pens, mugs, t-shirts, other gifts with institutional logo) to applicants

We will continue to share updates, innovations and best practices with you as they arise. We are grateful for your commitment to our students and developing outstanding leaders in children’s health.

References:

1. Coalition for Physician Accountability. Initial Summary Report and Preliminary Recommendations of the Undergraduate Medical Education to Graduate Medical Education Review Committee (UGRC). April 2021. (<https://acgme.org/Portals/0/PDFs/UGRC-Initial-Summary-Report.pdf>)
2. Donahue L, Morgan H, Peterson W, Williams J. The Carbon Footprint of Residency Interview Travel. JGME 2021.