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The History and Rationale of the American Urological Association Residency Matching Program

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Abstract

Introduction: Before the AUA Urology Residency Match Program medical students and residency programs would pair up without the aid of a centralized system. We report the history and rationale of this program. **Methods:** AUA archives regarding the AUA Urology Residency Match Program were searched. Interviews were done with physicians and AUA personnel involved in the creation/facilitation of the Urology Match, including Drs. Eugene Carlton, August Colenbrander and Carl Olsson, and Randy Berndt.

Results: Before 1985 there were significant problems in the urology residency job market as a result of not having a formal matching system. An offer/counteroffer system existed that was inequitable, produced suboptimal pairings and created tremendous anxiety for applicants and program directors. The first AUA match was implemented in 1985. The match was done using a deferred acceptance algorithm, which matched applicants and programs according to preferences. Key figures who facilitated the match included Director of Education Dr. Eugene Carlton, Assistant Director of Education William Brubaker, Data Processing Manager Randy Berndt and Dr. August Colenbrander, an ophthalmologist who established the Ophthalmology Residency Matching Program. Although the Urology Match has been a success, a single mismatch occurred in 2005. Dr. Carl Olsson, the AUA Secretary, investigated the erroneous match and led a committee that initiated additional match safeguards. The AUA Residency Match Program has run smoothly since.

Conclusions: The AUA Urology Residency Match Program has taken away the problems associated with the offer/counteroffer system that existed before the Urology Match, setting into motion the career trajectories and lives of thousands of urologists.

Key Words: urology, history, internship and residency, career mobility, game theory

Abbreviations and Acronyms

AUA = American Urological Association

NRMP = National Residency Matching Program

RMP = Urology Residency Match Program

In 2015 the specialty of urology will celebrate the 30-year anniversary of the AUA RMP. This program has undoubtedly affected the lives and careers of thousands of urologists. Each year hundreds of medical students strive to match into the highly competitive specialty of urology. In urological academia we depend on the Urology Match to decide which applicants will successfully match and where the urological careers of these matched applicants will begin.

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Before 1985 the AUA RMP did not exist. During this time medical students and program directors were faced with the challenges of pairing up without the aid of a centralized matching system. We present the history of and rationale for creating the AUA RMP.

Materials and Methods

The William P. Didusch Center for Urologic History was searched for material pertaining to the history of the AUA RMP. Key figures responsible for creating the AUA RMP were identified, including Dr. Eugene Carlton, Director of the AUA Education Office; William Brubaker, Assistant Director of Education; Randy Berndt, Data Processing Manager; and

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Dr. August Colenbrander, the founder of San Francisco Match for ophthalmology. We interviewed Carlton, Berndt, Colenbrander and AUA Member Services personnel to ascertain the history of the AUA RMP. Unfortunately Brubaker passed away before this project commenced. Given that a mistake in the initial 2005 match outcomes was noted upon review of the archives, Dr. Carl Olsson was interviewed because he was appointed to investigate the mistake.

Results

Before Urology Match

The first annual urology residency match occurred in the winter of 1985. Before this inaugural match no formal algorithm existed to pair applicants and programs. Applicants and program directors would speak on their own and a due date existed by which agreements for positions were required to be submitted to the AUA. There was an offer/counteroffer system. Applicants would receive an offer and accept the offer or take the risk of awaiting a counteroffer from a preferred program, knowing that they were in jeopardy of not receiving a position. There were many frustrations with this system, as described by Louisa H. Shaw, former AUA Residency Match Coordinator, in 1990:

"Gone are the days remembered by some urology program directors as exhausting and confusing, fraught with tension and misunderstanding. Those were the days when program directors made a 'gentleman's agreement' not to make offers to applicants before a certain day in order to give everybody an equal chance at the candidate. It must have been like a horse race. The gun went off at midnight, the gates opened and some fast starters bolted down the empty track. Others waited for dawn and found their candidate already committed. Then came the negotiating, telephone tag and waiting games. Hard on directors and candidates alike, it must have been a stressful time, testing friendships between dedicated program directors trying to get the best young talent into their departments."²

Many problems were evident in the urology residency job market during the time before the AUA RMP. For 1 thing although there was a "gentleman's agreement" among program directors to not pressure applicants into accepting a residency position exceedingly early in their medical school career, program directors did not always follow this policy. In an effort to fill available residencies with the brightest minds program directors offered positions to medical students considerably before their fourth year. To capture the phenomenon of students forced to consider a residency position at an unreasonably premature time Colenbrander offered the quotation, "Father, can you get me into medical school because I was just offered a urology residency."

Another problem with the urology residency job market preceding the formal Urology Match was suboptimal or "unstable" matches. As discussed, a cardinal feature of the Urology Match algorithm is that it produces optimal or "stable" matches. A stable match was defined by Nobel Prize winning economist Alvin E. Roth as a match in which "no applicant and

hospital who were not matched with one another preferred each other to their assigned matches."³ Before the AUA RMP applicants were constantly faced with the possibility of failing to be hired by another program if they turned down an initial offer. In this sense final pairings were unstable because many applicants said yes to programs that were less preferred.

Two matching programs for other specialties were in place during the time preceding the AUA RMP. The NRMP began in 1952 and the ophthalmology matching program began in 1977. These matching programs were created to address the problems of premature offers and unstable matching that existed in the respective residency marketplaces.³ The specialty of urology was continuing the trend in graduate medical education to provide a centralized matching system for applicants and programs.

Creation of Urology Match

Describing the prematch system as haphazard, Carlton along with his described "fabulous" team comprising Brubaker and Berndt decided that it was time to push for a formal urology match.

Carlton had taken over the Office of Education from the leadership of Dr. Russell Scott in 1980 and relocated the office from Aspen, Colorado to Houston, Texas. Carlton had enormous dedication to the Office of Education. In addition to serving the office for almost 2 decades, he led many other related boards as president.⁴

Brubaker, the Assistant Director of Education, was a Certified Public Accountant who had worked for the accounting firm Arthur Andersen LLP. His accounting knowledge was instrumental in developing the formal AUA RMP. Brubaker passed away in 2013 and Carlton wrote a tribute to him.⁵

Berndt served the Office of Education as Data Processing Manager. Before his career in the AUA he served in the military and was an excellent computer programmer. His expertise was valuable to the Office of Education and he wrote the computer algorithm for the AUA RMP.

Understanding the need to reform the urology residency job market, Carlton asked Berndt to meet with Colenbrander. In addition to practicing ophthalmology, Colenbrander had an interest in coding and in 1977 he founded the ophthalmology match. During their meeting Berndt learned of that matching system and discussed its possible application to urology. Colenbrander offered the use of his computer algorithm program and also offered to perform the urology match. Wishing to write a separate computer program algorithm, the Office of Education declined this offer.

The rationale for urology not simply participating in the NRMP or the ophthalmology San Francisco Match of Colenbrander was twofold. 1) Given that general surgery internships and urology residencies were not coupled, eg one could complete a general surgery internship in Florida and a urology residency in New York, an earlier/separate urology match process had to exist to allow applicants time to match into urology and then participate in the NRMP match for a general surgery internship. 2) Office of Education personnel

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