

Examination of Nondesignated Preliminary Surgery Residents Recruited Since the Inception of Supplementary Offer and Acceptance Program: Lessons Learned From a Large Academic Program

Maria Albuja-Cruz, MD, Claire Travis, MBA, Michael Benge, MHA, Barbara Caufield, BS and Mark Nehler, MD

Department of Surgery, University of Colorado Denver, Denver, Colorado

PURPOSE: The majority of surgery programs roster non-designated preliminary (NDP) residents. We and others have reported on the success of NDP resident mentoring with regard to categorical position placement. Lacking is a focus on the candidates themselves and differences based on initial career of choice.

METHODS: NDP residents' files since the institution of SOAP were reviewed for demographics, initial career choice, financial burden, region of medical school of origin, application and interview history, and pre-screen interview candidate score (high score of 22 – data includes USMLE scores, major clerkship grades, and AOA) used for categorical recruitment.

RESULTS: From 2012-16 79 NDP residents have been recruited at UCDenver (82% via SOAP). Median age was 28 years, majority were single (73%), and male (82%). Thirty percent belonged to an under-represented minority group. Mean debt was \$156,000 but 20% owe over \$250,000. 90% attended US medical schools with 65% from the NRMP "South" region. 86% were recruited as fourth year students. NDPs were categorized as failing to match in general surgery (38%), surgical subspecialties (47%), or other (15%). NDPs applied to median of 68 programs (range 7-200) and granted a median of 8 interviews (range 0-24). NDPs had a mean pre-screening interview score of 13 out of 22 and only 9% would have met the standard threshold to obtain a categorical surgery interview. There were no differences in pre-screening scores in the

three groups. 95% NDPs (excluding present year) successfully completed their R1 year (three resigned – one obtained a general surgery spot mid-year and two after matching in non-general surgery fields). 68% NDPs placed in categorical positions after the R1 year. The placement was better for the surgical subspecialty group compared to the other two.

CONCLUSIONS: The bias is that due to a more competitive applicant pool recruiting NDPs from surgical subspecialties would be optimal. However, those unmatched surgical subspecialty candidates are no better academically than the unmatched general surgery group, often have career interests that do not always align with scheduled rotations, and may not feel compelled to complete the year if they match. They place minimally better when accounting for those unmatched general surgery NDP R1s continuing as NDP R2s. Ultimately the success in a non-designated preliminary R1 surgery program is alignment of clinical educational opportunities with the needs of the trainee. (J Surg Ed ■■■■-■■■. © Published by Elsevier Inc on behalf of the Association of Program Directors in Surgery)

KEY WORDS: nondesignated preliminary residents, SOAP, surgery match

COMPETENCIES: Medical Knowledge, Professionalism, Interpersonal Skills and Communication

INTRODUCTION

Despite recent concerns in the past decade that surgery was losing a competitive edge as a medical student career option, recent data from the 2017 National Residency Matching

Correspondence: Inquires to Mark R. Nehler, MD, Mail Stop C312, 12631 East 17th Avenue, Room 5419, Aurora, CO 80045; fax: +(303) 724-2693; e-mail address: mark.nehler@ucdenver.edu (M. Nehler)

Program (NRMP) demonstrates the opposite.¹ Only a handful of positions were unfilled and over 1000 candidates who applied for categorical general surgery positions did not match. Of course such optimistic near term match success needs to be tempered with the understanding that roughly 1 in 10 actually represents a mismatch with ultimate attrition from the categorical ranks.²⁻¹⁴

There are currently almost equal numbers of preliminary surgery first year spots as there are categorical spots in NRMP. However, these spots are harder to recruit for with 149 unfilled at the beginning of 2017 match week despite roughly 1000 applicants for same not matching for same year—indicating either a less attractive applicant pool or less attractive destination, most likely a combination of both.¹ Given that reality a modest number of preliminary spots will be filled during the Supplemental Offer and Acceptance Program (SOAP) or beyond.

The most prior reports examining unmatched preliminary residents have focused on success in ultimate career goals.¹⁵⁻²¹ These reports tend to focus on the nature of the mentoring program, the academic profile of the applicant, and effect of the program on the success in obtaining a categorical position, including a prior report from our institution.²² However, given the above data what is lacking is a more detailed examination of the prior failed match attempt. What was the result with regard to interview opportunities in the unmatched applicants? Did the applicant have a substantial number of interviews or minimal? The former would indicate a repeat match attempt could be successful. The latter less so unless the target programs or application could be substantially modified.

Over the years our program has risen to the one of the largest volume of preliminary surgery residents in the nation. As such we have taken an interest in examining the issues involved with managing this significant (roughly 25%) part of our overall annual resident roster. A detailed snapshot of these unmatched preliminary residents forms the basis of this report.

METHODS

This is a retrospective review of prospectively collected data from unmatched preliminary surgical residents from 2012 to 2016 at a single tertiary care academic institution. Preliminary residents for this study were selected based on the year the program director began adding data for debt load and prior match details to the resident's personnel file (self-reported during initial meeting with new trainees). The data source for the study included program director intake and follow-up notes from meetings with each resident as well as data from each resident's electronic residency application service (ERAS) file. Resident demographics were recorded. Medical school of origin was recorded. From prior match—discipline of choice, number of applications sent,

and number of interviews granted was recorded. Total resident debt load at the start of the academic year was recorded. Using our standard preinterview scoring system incorporating United State Medical Licensing Examination (USMLE) Step Scores, grades, publications, leadership, advanced degrees/honors, and quality of letters of reference a score for each preliminary resident was calculated and recorded. Finally, success in completing the year and also obtaining a categorical residency position was recorded. The details of the actual mentorship plan for these unmatched preliminary surgery residents is outlined in our previous article describing same.²²

RESULTS

From 2012 to 2016, 79 unmatched preliminary residents have been recruited at UC Denver. Median age was 28 years, majority were single (73%), and male (82%). Although a small number came from the match, 82% were recruited from SOAP. The 30% belonged to an under-represented minority group. Mean debt was \$156,000 with the distribution of same presented in Figure 1. Totally, 90% attended United States medical schools with distribution for each NRMP region as—50% “Southern,” 15% “Central,” 11% “Northeastern,” and 24% “Western.” Totally, 86% were recruited as fourth-year students.

Unmatched preliminary residents were categorized as failing to match in general surgery (38%), surgical subspecialties (47%), or other (15%). The distribution of the results of their match data is summarized in Figure 2. They applied to a median of 68 programs (range: 7-200) and were granted a median of 8 interviews (range: 0-24). They had a mean prescreening interview score of 13 of 22 and only 9% would have met the standard threshold to obtain a categorical surgery interview at our institution. Less than half of the unmatched preliminary residents had a high pass grade in their surgical clerkship (48%) and only one-fifth (19%) had honors on their medical student performance evaluation record. The mean USMLE Step 1 score was 225 (range: 193-256), 19% had a score >240 and 6% < 200

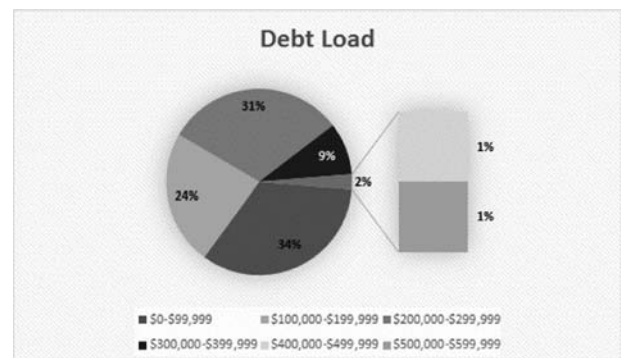


FIGURE 1. Debt load for unmatched preliminary general surgery residents.

Download English Version:

<https://daneshyari.com/en/article/8834728>

Download Persian Version:

<https://daneshyari.com/article/8834728>

[Daneshyari.com](https://daneshyari.com)