

Impact of Doximity Residency Navigator on Graduate Medical Education Recruitment

Bradford B. Smith, MD; Timothy R. Long, MD; Andrea A. Tooley, MD;
Julie A. Doherty, MBA; Heather A. Billings, PhD; and Eric J. Dozois, MD

Abstract

Objective: To assess residency applicants' use and perceptions of Doximity Residency Navigator (DRN) and to analyze the impact of Doximity reputation rankings on application, interview acceptance, and match list ranking decisions.

Participants and Methods: We developed and distributed a survey seeking feedback from residency applicants to describe their use of DRN during the 2017 residency recruitment and match process. The dates of the study were March 1, 2017, through May 8, 2017.

Results: We received responses from 2152 of 12,617 applicants (17%) across 24 graduate medical education programs. Sixty-two percent of respondents (n=1339) used DRN during the residency application, interview, and match list process. Doximity reputation rankings were noted to be valuable or very valuable to 78% of respondents (958 of 1233). Overall, 79% of respondents (977 of 1241) reported that Doximity reputation rankings influenced their application, interview acceptance, or match list ranking decisions. When asked about the accuracy of Doximity reputation rankings, 56% of respondents (699 of 1240) believed that rankings were slightly accurate or not accurate. The most commonly used resources to research potential residency programs were residency program websites, American Medical Association resources, and DRN.

Conclusion: Most survey respondents used DRN during the application, interview, and match ranking process. Doximity reputation rankings were found to be the most valuable resource in DRN, although more than 50% of responders had doubts about the accuracy of reputation rankings.

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The process of selecting residency programs to submit applications to and interview with can be a daunting task for those seeking graduate medical education (GME) positions. Applicants have a variety of resources available to research potential residency training programs. The National Residency Matching Program (NRMP) surveyed applicants to residency programs in 2015 and found residency program reputation, geographic location, interview day experience, and perceived goodness of fit to be the most important factors that applicants considered when applying to and ranking residency programs.¹ Accurate assessment of a residency program's reputation has long been a difficult task due to varying degrees of interpretation and bias.

Doximity is the largest social networking application for health care professionals and

medical students. The Doximity Residency Navigator (DRN; Doximity, Inc) was developed to "help medical students make informed residency decisions and to increase transparency in the residency match process."² The DRN provides several tools to help applicants research prospective training programs, including reputation rankings for residency programs across multiple specialties, resident and alumni satisfaction surveys, and objective data (eg, training program size, board certification rate, sex balance, alumni publication data).

Previous studies have called into question the validity of Doximity reputation rankings of residency programs due to the lack of objective and outcome-based data used to formulate these rankings.^{3,4} Nonetheless, previous studies using surveys have shown that Doximity reputation rankings influence



From the Department of Anesthesiology and Perioperative Medicine (B.B.S., T.R.L.), Department of Ophthalmology (A.A.T.), Department of Medical Education (H.A.B.), and Department of Colon and Rectal Surgery (E.J.D.), Mayo Clinic College of Medicine and Science, Rochester, MN; and Operations Manager, Mayo Clinic School of Graduate Medical Education, Rochester, MN (J.A.D.).

applicants' behaviors when applying to and ranking residency programs.^{5,6} To date, there are no large cohort studies evaluating the impact of DRN on medical students' residency selection across a wide distribution of GME programs. Therefore, the purpose of this study was to assess residency applicants' use and perceptions of DRN and to analyze the effect of Doximity reputation rankings on the application, interview acceptance, and match list rankings of applicants at a single sponsoring institution.

PARTICIPANTS AND METHODS

This study was approved by the Mayo Clinic Institutional Review Board and was conducted from March 1, 2017, through May 8, 2017. During the 2016-2017 NRMP Main Residency Match application period, the authors identified 12,617 applicants to 24 Mayo Clinic School of Graduate Medical Education (MCSGME) residency training programs. A survey was developed seeking feedback from applicants about their use of DRN during the residency application, interview selection, and match process. The survey was developed by 2 of us (B.B.S. and T.R.L.), with demographic questions modeled after a similar study of anesthesiology residency applicants.⁷ The survey was reviewed and edited independently by all study authors. For additional content validity, the survey was reviewed by the Mayo Clinic Center for Clinical and Translations Science support staff, including 2 analysts and a statistician. The survey was piloted for content validity by administration to 15 current postgraduate year 1 residents with experience using Doximity across medical and surgical specialties at MCSGME. The edited survey was reviewed again by all the authors and then finalized ([Supplemental Appendix](#), available online at <http://www.mcpiqjournal.org>).

The survey included questions about demographic characteristics, type of medical school attended, specialty(s) applied to, number of residency program applications submitted, NRMP Main Residency Match results, applicant use and perception of DRN and Doximity reputation rankings, and other resources used to research residency programs. Applicants who did not use DRN were asked why they chose not to use the tool and then were

asked what resources they did use to research residency programs during the application process. Additional space was provided for applicants to add comments where survey choices were not comprehensive (eg, specialty[s] applied, reasons not to use Doximity, other resources used to research residency programs).

The survey was distributed to all applicants to MCSGME programs participating in the NRMP Main Residency Match in April 2017. Weekly reminders were sent to nonresponders for 3 consecutive weeks. We used the Research Electronic Data Capture (REDCap) tool at Mayo Clinic for survey distribution.⁸ A 4-point Likert scale was used to score the DRN features that applicants found most valuable (*very valuable, valuable, slightly valuable, not valuable*) and to assess applicant views of the accuracy of Doximity reputation rankings (*very accurate, accurate, slightly accurate, not accurate*).

Data analysis consisted of descriptive statistics using REDCap. Comments were reviewed individually by a study author (B.B.S.), grouped according to common themes, and reported.

RESULTS

During the study period, 12,617 applicants to MCSGME residency training programs participating in the NRMP Main Residency Match were identified. A total of 2152 applicants (17%) completed the survey and were included in the data analysis. Minor differences are present in the denominators of the data because not all survey respondents answered each question. Demographic data for residency applicants are outlined in [Table 1](#).

The use of DRN by residency applicants is outlined in [Table 2](#). Of the 2152 applicants who completed the survey, 1339 (62%) actively used DRN during the application, residency interview, and match list process. Of the 1335 applicants who used DRN and answered the question, 1157 (87%) used the tool before sending out applications, 906 (68%) used it during the interview process, and 686 (51%) used it while creating their rank order lists. Of the 1186 applicants who matched into a GME training program, only 314 (26%) believed that the use of DRN helped them match successfully.

Resources available in DRN identified by applicants as very valuable, valuable, slightly

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