



Recent NRMP Examinations of Internal Medicine Data: Signaling and Ranking Behaviors in Relation to Match Outcomes of Applicants Pursuing IM Residency Positions

Sara Balestrieri, PhD, Senior Director of Research, National Resident Matching Program

January 14, 2026

Reproduction of slides and data prohibited without permission from the NRMP.

THE MATCH[®]
NATIONAL RESIDENT MATCHING PROGRAM[®]

Agenda

1. Impact of program signaling on ranking and matching outcomes
2. Ranking behaviors of residency applicants who ranked IM and/or received a position in IM





Impact of program signaling on ranking and matching outcomes

Reproduction of slides and data prohibited without permission from the NRMP.

Background—IM Program Signaling

- Started signaling with the 2023 Match cycle
- Allotted 7 signals for the 2023 and 2024 Match cycles
- Adopted a tiered approach [3 (gold), 12 (silver)] for the 2025 Match cycle

Methods

Sample

- 2025 Match cycle applicants to Internal Medicine
- 566 programs
- 23,978 applicants

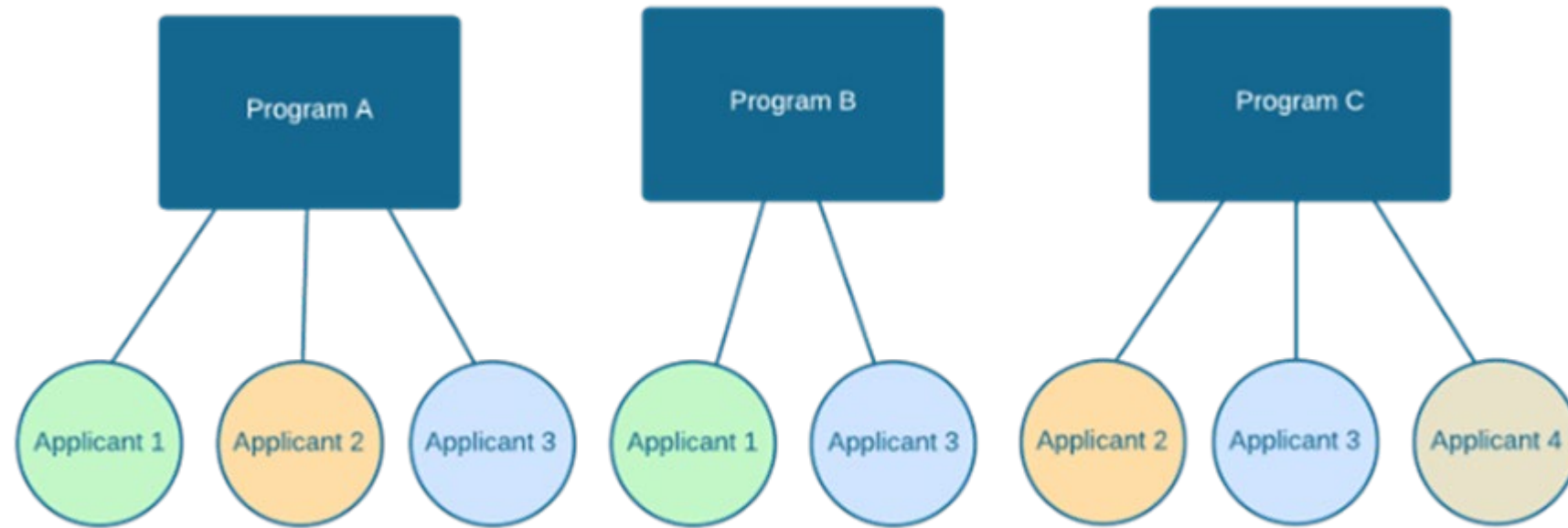
Analyses

- Descriptives (counts, boxplots)
- Program $n \geq 30$ ranks to be included
- Multi-level model (MLM)
 - Signal, applicant type, school-program state alignment, affiliate/sponsor institution, ever failed Step 1, ever failed Step 2, Step 2 CK score, signal-to-application ratio

Outcomes

- Placement on ROL, Competitive Placement on ROL, Matched

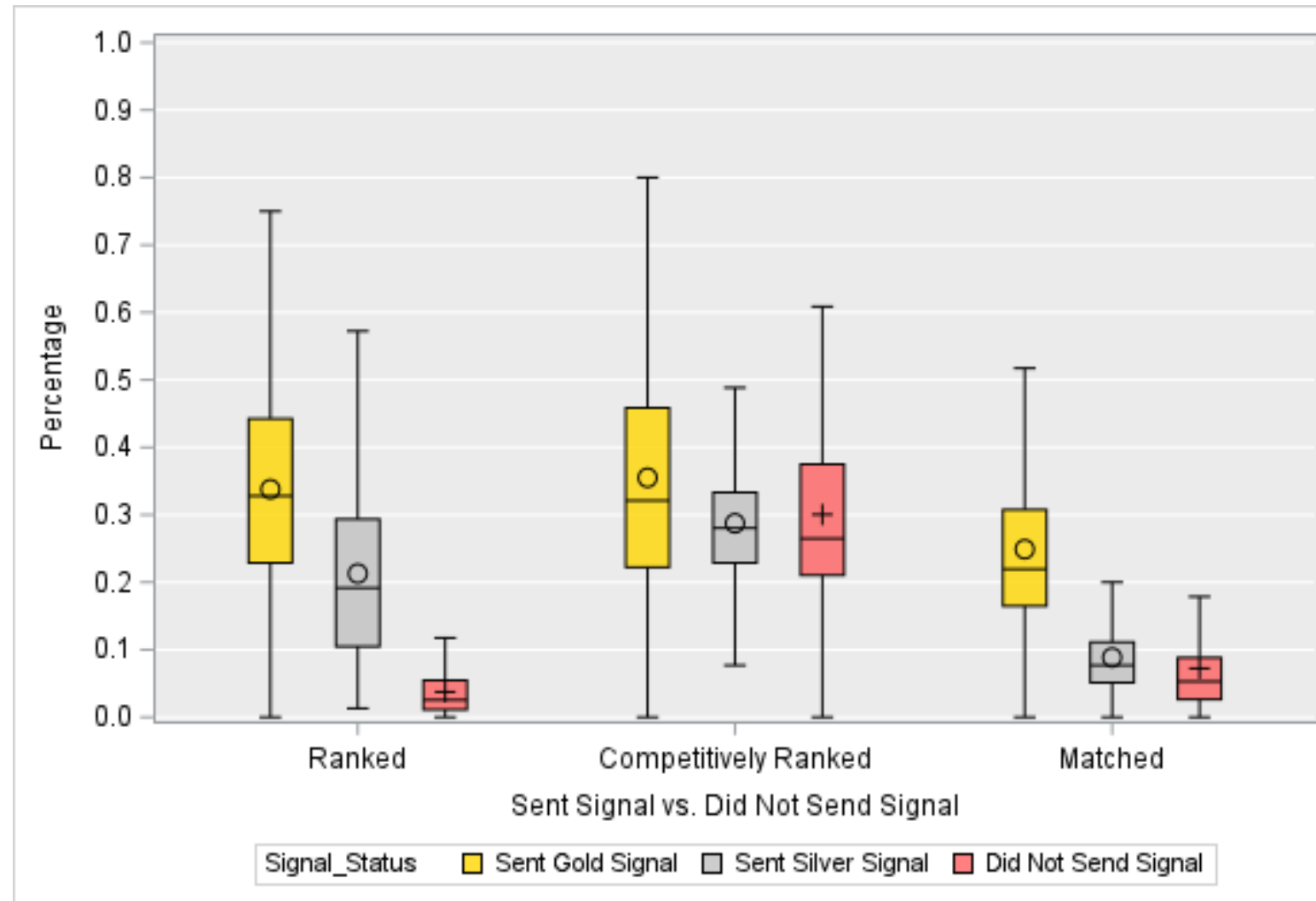
Multi-level Model (MLM) Methodology



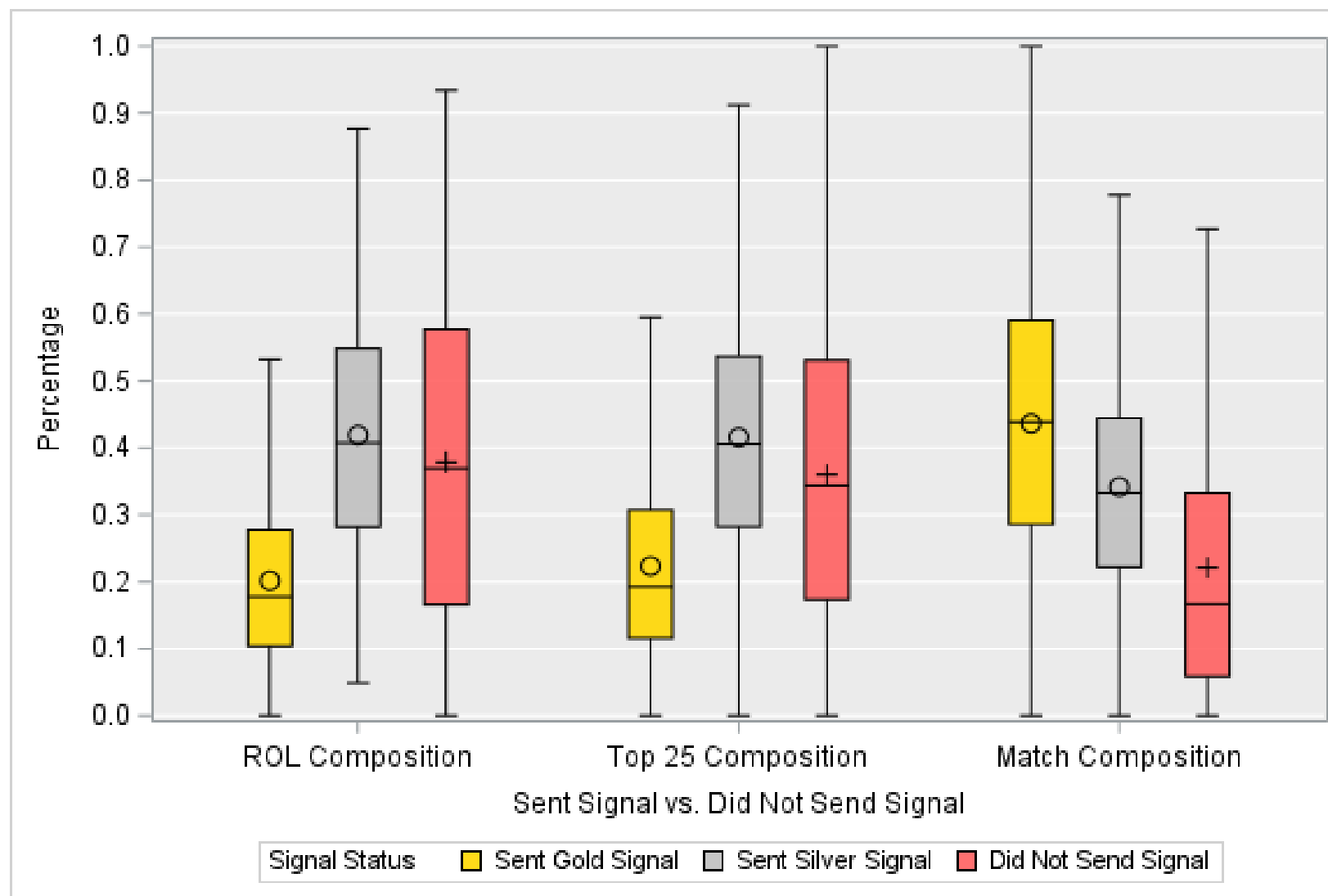
Why MLM?

- Comprehensive Inclusion: Incorporates all key variables without excluding due to sample size constraints
- Retention of Programs: MLM allows for a larger number of programs in the analysis compared to traditional linear regression
- Between-Program Effects: Enables examination of factors like the signal-to-application ratio across programs.

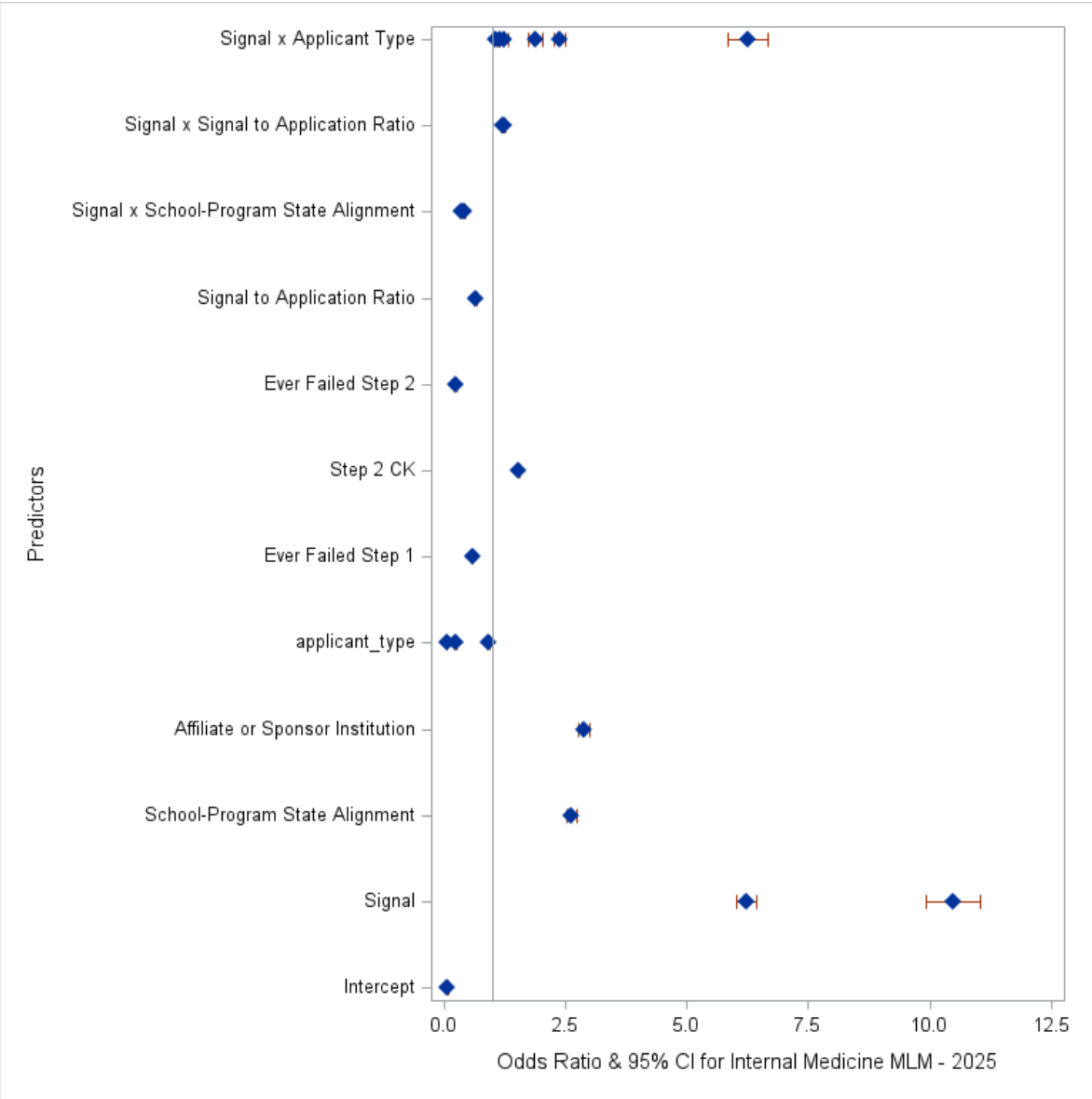
Descriptive Analyses: Ranked, Competitively Ranked & Matched



Descriptive Analyses: ROL, Top 25, and Match Composition

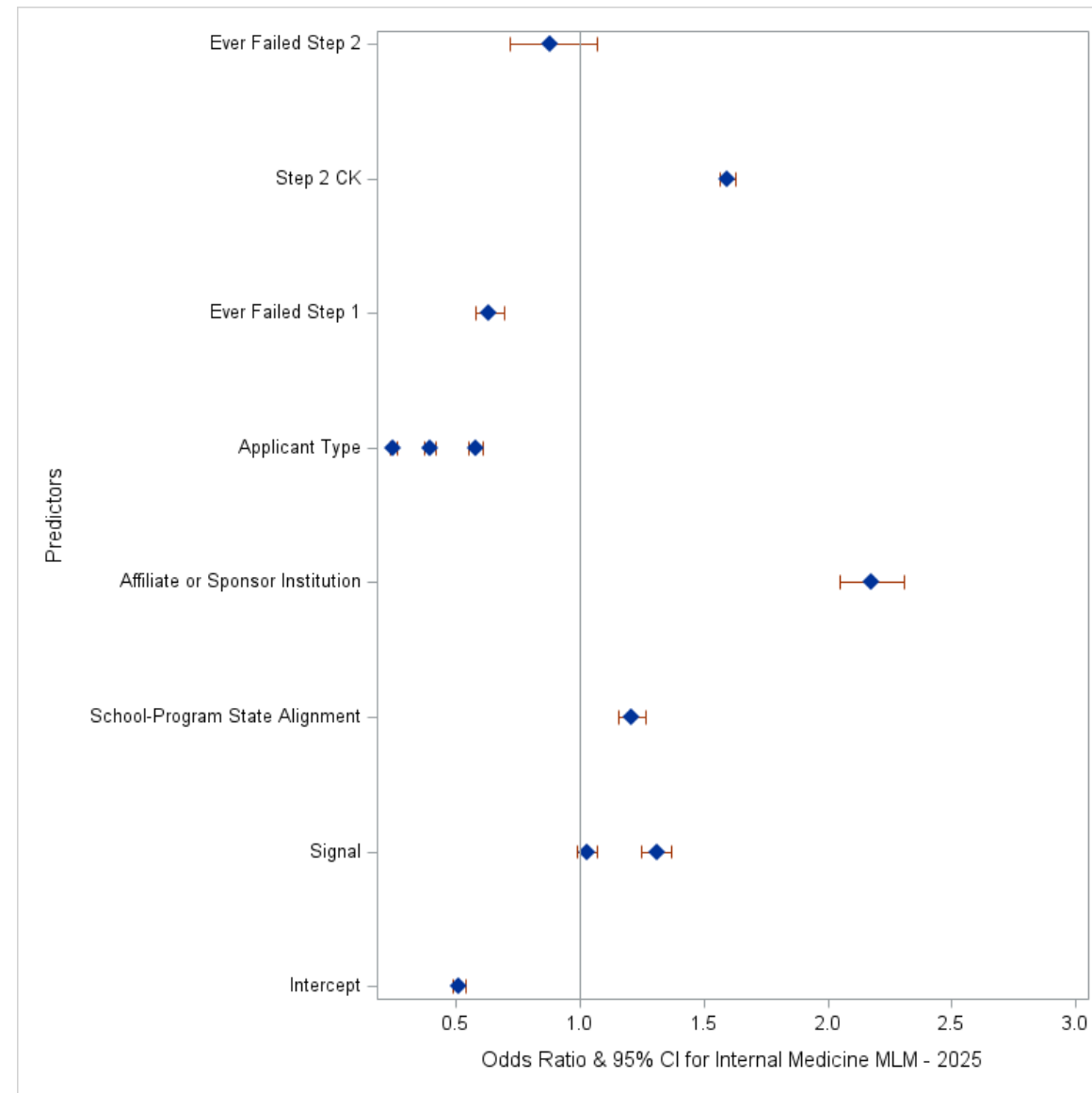


Ranked Multi-level Model



Reproduction of slides and data prohibited without permission from the NRMP.

Competitively Ranked Multi-level Model



Key Takeaways—Descriptives/Boxplots

- ↑ odds of being ranked and matching
 - Both tiers ↑ non-signalers
 - Gold ↑ silver
- Negligible effect of signaling on competitive ROL placement
- ROL & top 25 composition ↑ silver & non-signalers (compared to gold)
- Match composition ↑ gold
- Wide boxplots indicate variability among programs within IM

Key Takeaways—Multi-level Models

- Odds of being *ranked*
 - Sending a signal ↑ effect (and greater for gold than silver)
 - Other factors are still predictive of the odds of being *ranked* when accounting for sending a signal:
 - ↑ UME and program state alignment, applications to an affiliate/sponsor institution, and higher Step 2 CK scores.
 - ↓ having an applicant type other than US MD (DO and IMGs), having ever failed Step 1 or Step 2, and applications to programs with a higher signal:application ratio.
- Odds of being *competitively ranked*
 - Results largely mirror the previous outcome

Limitations

- Lack of data on DOs who did not take USMLE
- Lack of data on away rotations
- Did not model all variables
 - Do not account for the impact of the interview experience, professional characteristics, and applicant demographics on the relationship between signaling and ranking/matching
 - Advice applicants receive on signaling and ranking behaviors
- Applicants that don't use signals as intended



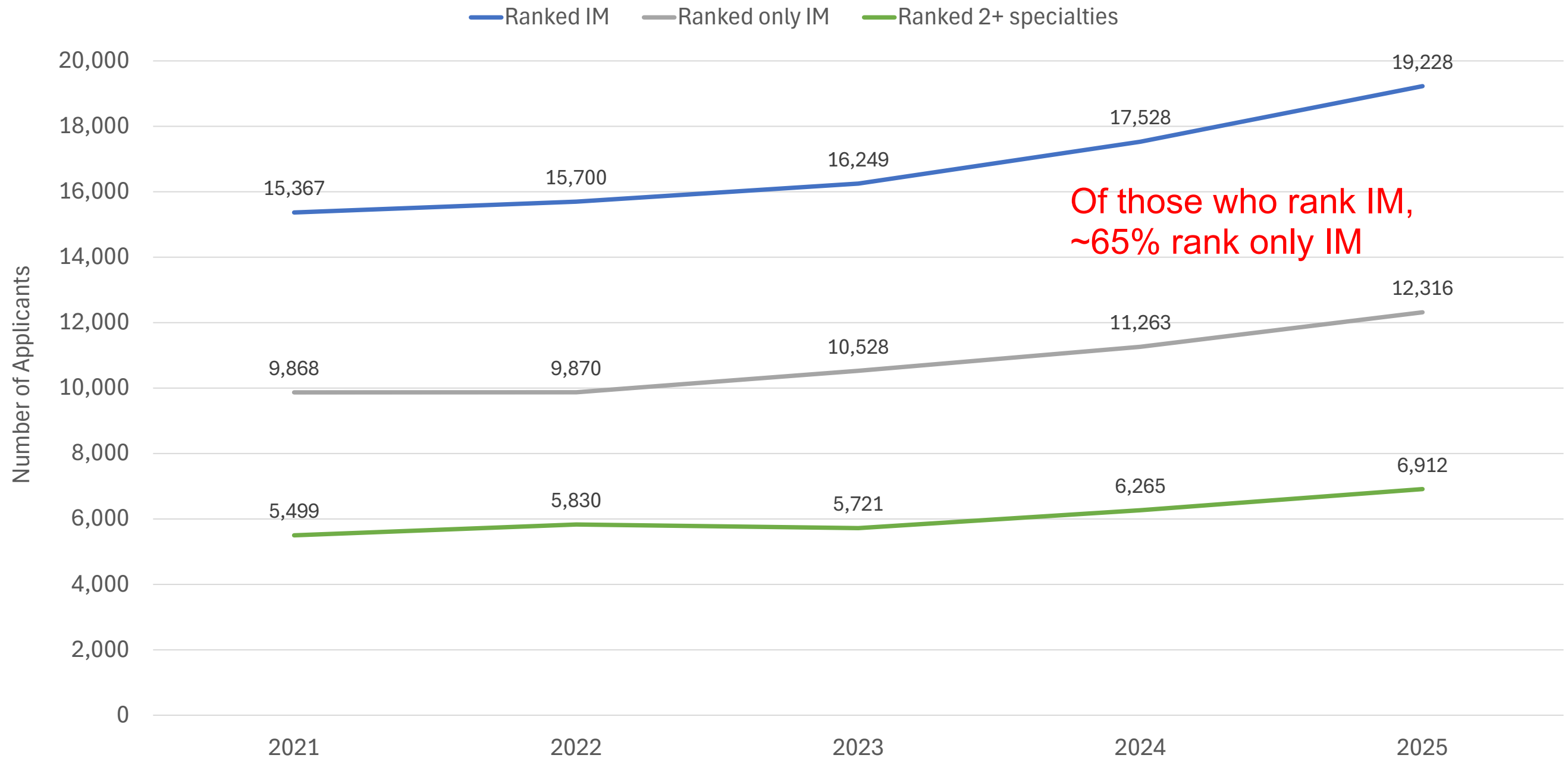
Ranking behaviors of residency applicants who ranked IM and/or received a position in IM

Reproduction of slides and data prohibited without permission from the NRMP.

Methods

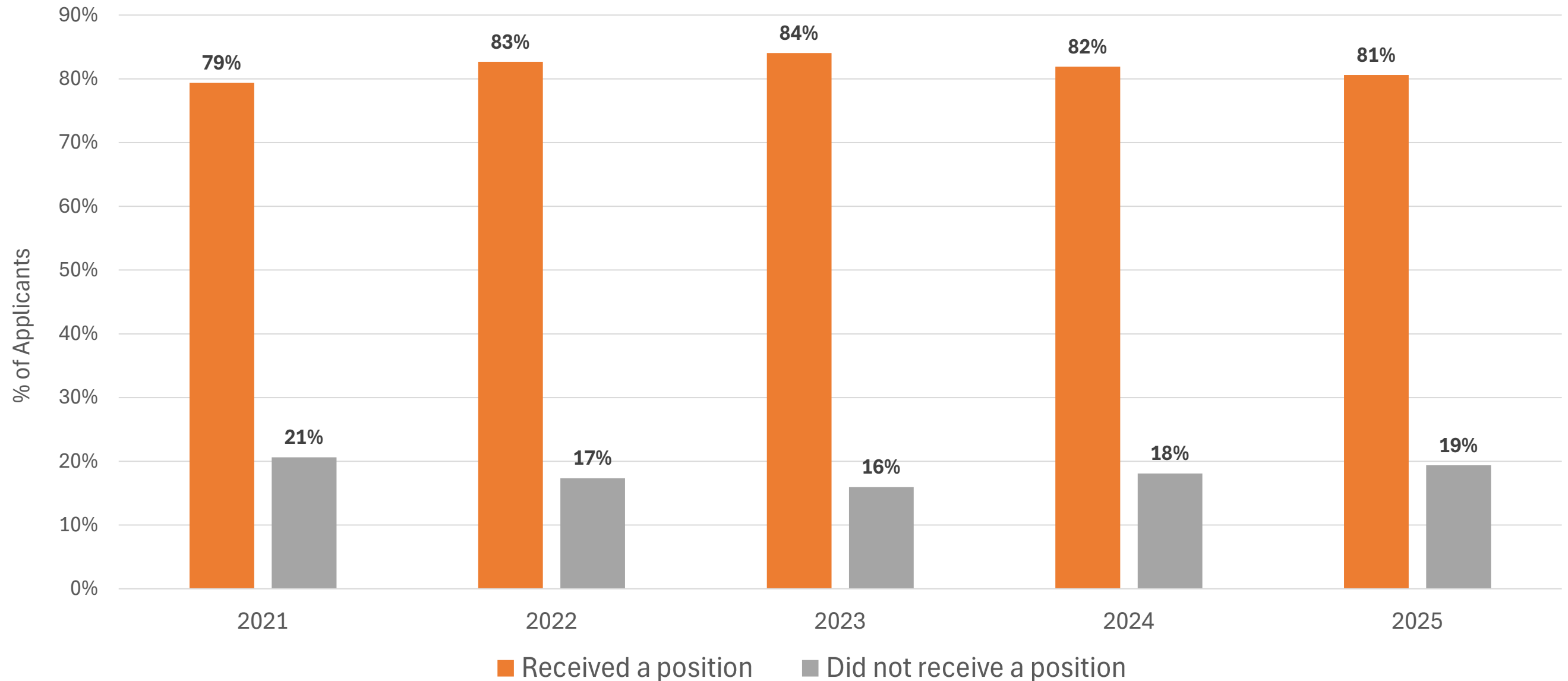
- 2021-2025 Main Residency Match (MRM) data
- Exclusion criteria:
 - Canadian and Fifth Pathway applicants
 - Applicants who ranked only Preliminary Ophthalmology programs and/or who received a Preliminary Ophthalmology position
 - Combined IM specialties excluded
- All position types were considered (i.e., Preliminary positions were included in analyses)
- Receipt of a position (through algorithm and/or SOAP)
 - Received a full set of training in a single Match cycle (i.e., Categorical, Primary, or Preliminary + Advanced position)
 - Received only partial training in a single Match cycle (i.e., Preliminary only, Advanced only, Reserved)

IM Ranking Behaviors



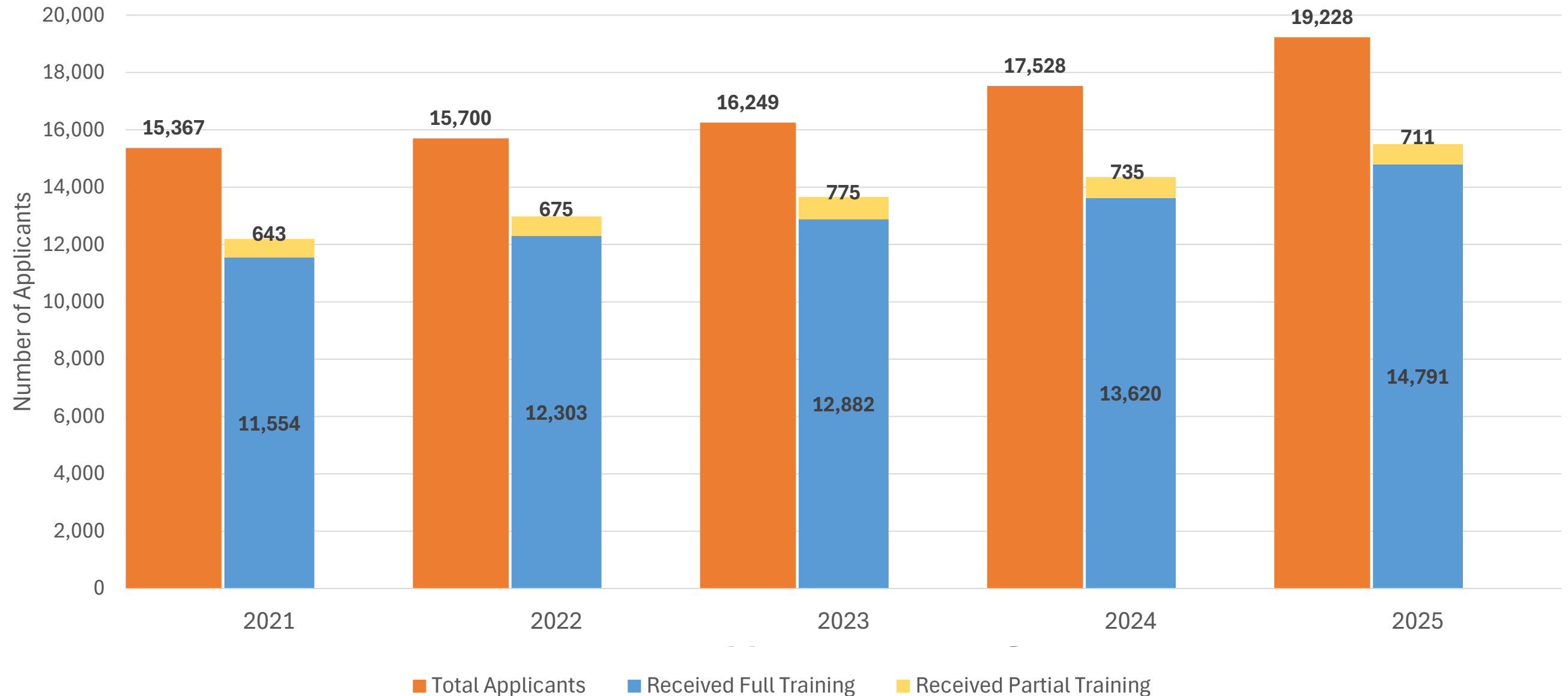
Receipt of a Position

Outcomes of Applicants Ranking IM

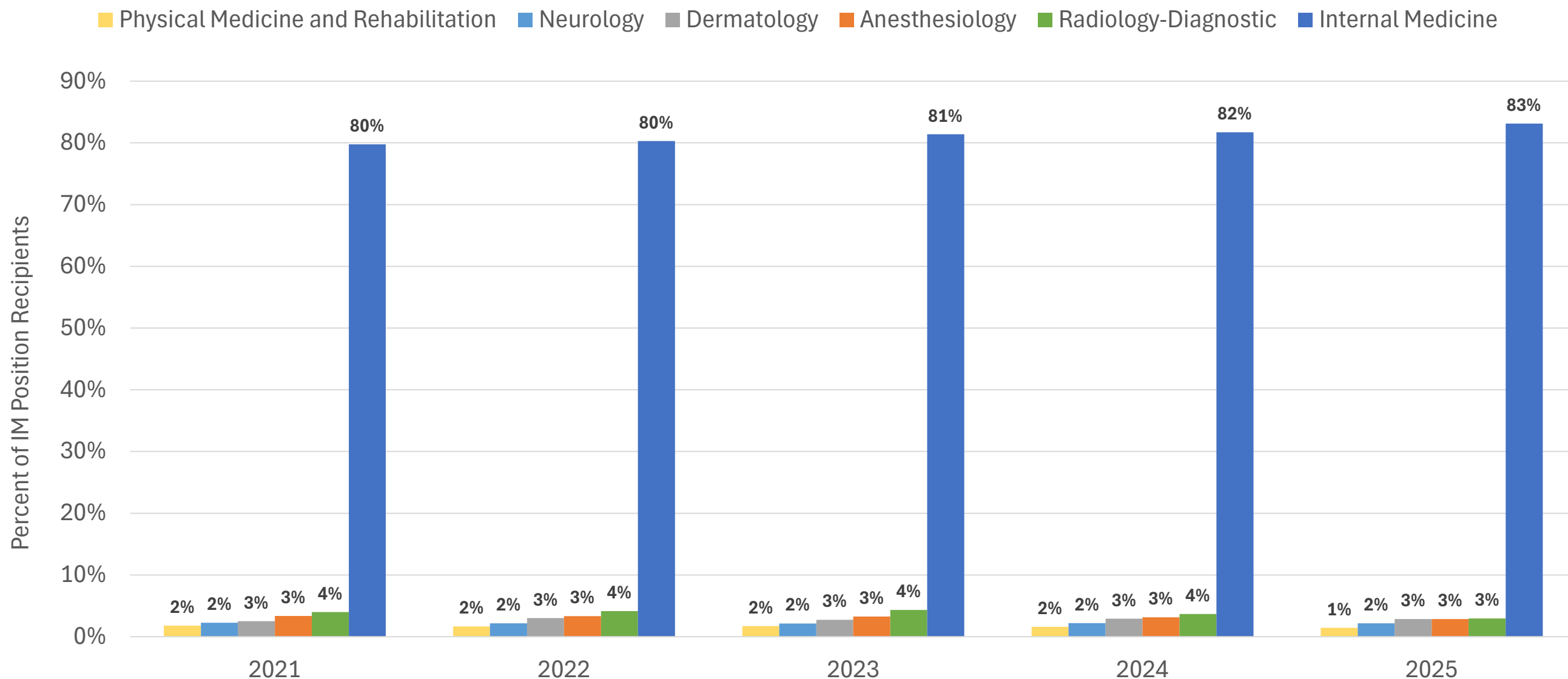


Receipt of a Position

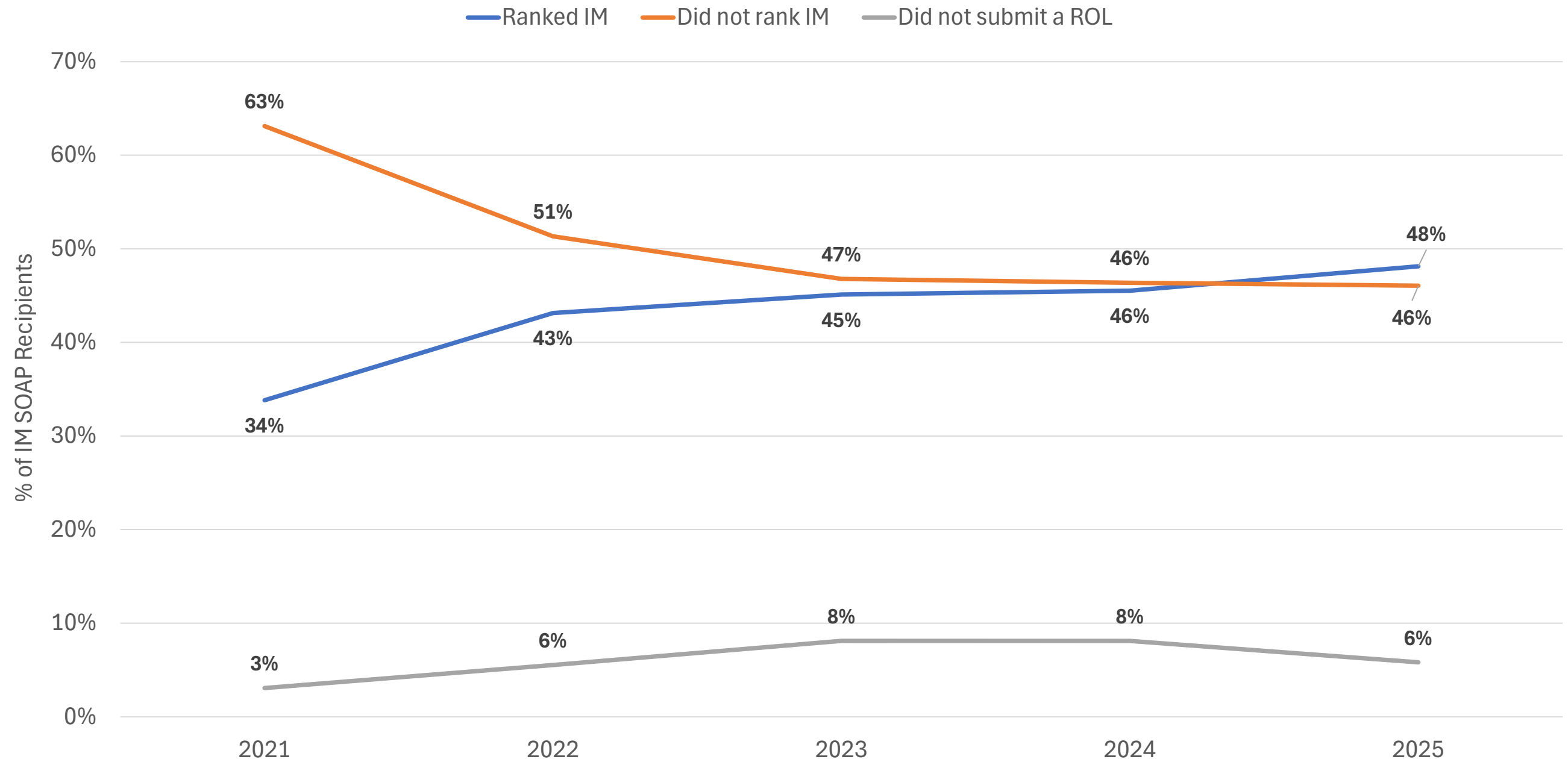
Outcomes of Applicants Ranking IM



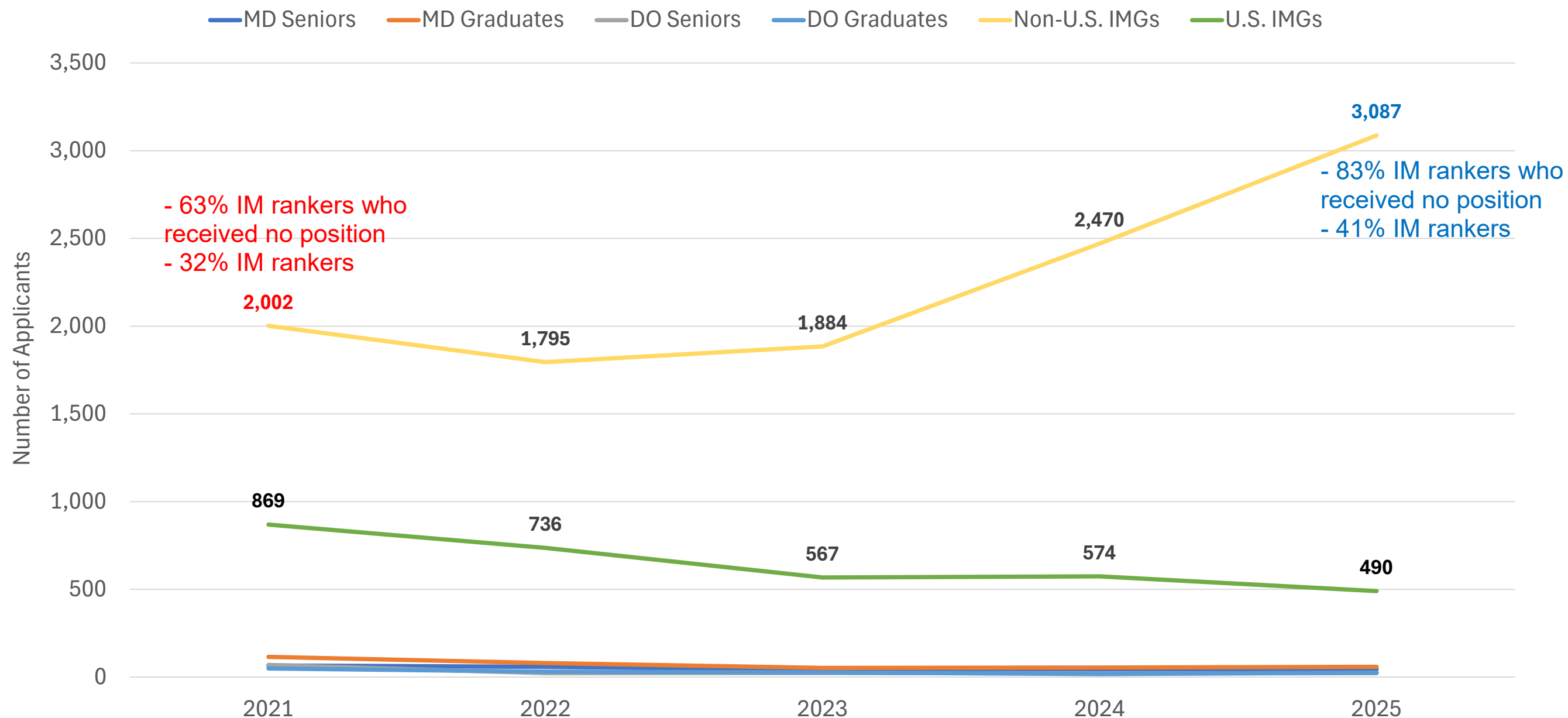
Preferred Specialty of IM Recipients



Ranking Behaviors of Those Who Accepted IM through SOAP

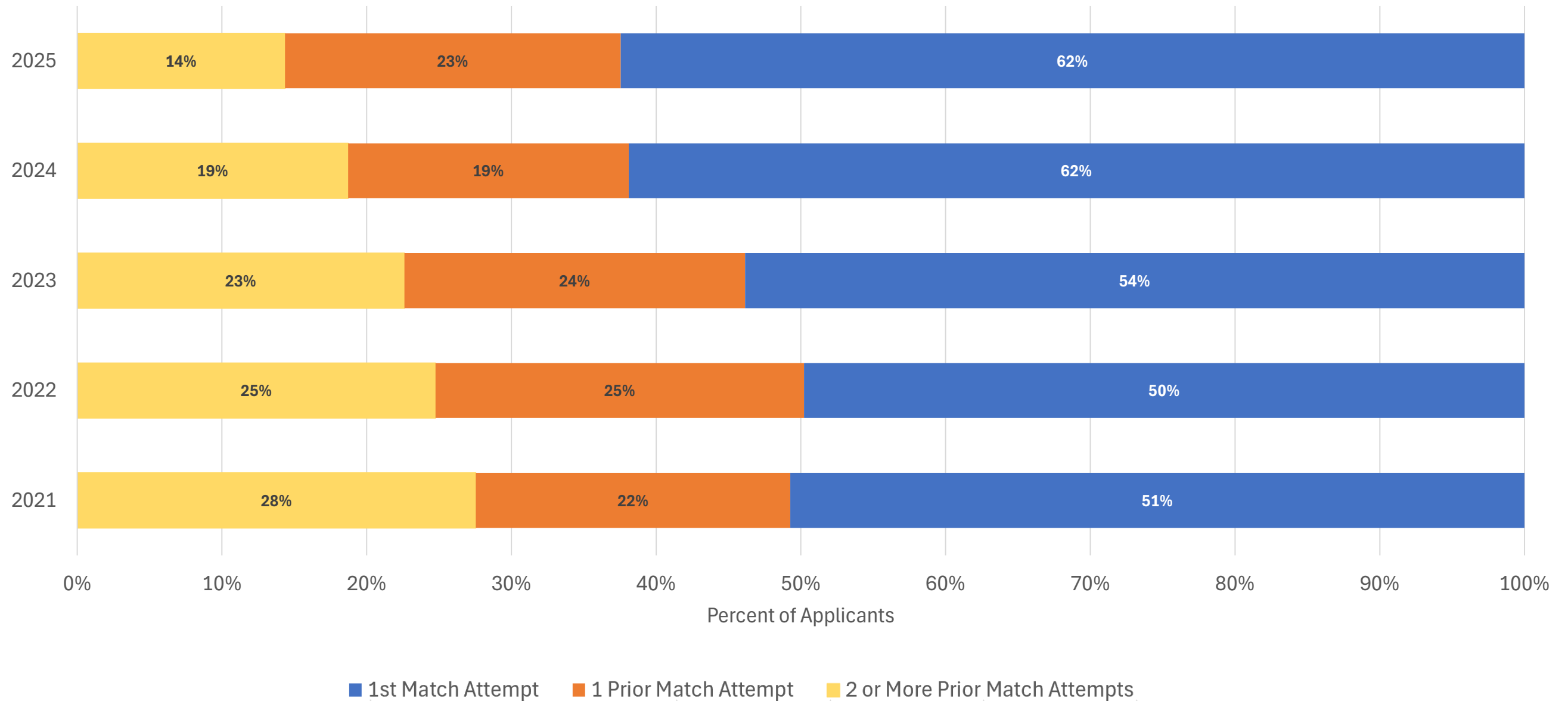


IM Rankers Who Did Not Receive a Position by Applicant Type



Prior MRM Participation of Applicants Who Did Not Receive a Position

Ranked Internal Medicine



Key Takeaways

- IM rankers = consistent ranking behaviors over time
- IM applicants receiving a position fairly consistent over time
 - ~95% of applicants receiving a position receive full training
- ~95% of IM positions received via algorithm
- 2023-2025 about half of applicants who accepted an IM position via SOAP had ranked IM
- Non-U.S. and U.S. IMGs disproportionately represented among those who ranked IM and did not receive a position
- ↓ prior Match participation among applicants who did not receive a position

Thank you!

Questions? Comments?

Contact us at research@nrmp.org