AAIM Recommendations to Prevent Interview Inflation

Shared Goals
AAIM acknowledges that the goals and best outcomes of the Match process are the same for students, their advisors, and residency programs. These goals include:

- Matching all students to a residency program where they will receive the support and training they desire.
- Filling training programs with new physicians ready to learn internal medicine and well-suited to help individual programs pursue mission-specific goals.
- Promoting a process that allows applicants to demonstrate their unique talents and goals, and that simultaneously allows programs time for realistic, holistic review of each applicant.
- Helping students understand their chances of interviewing and matching at specific programs.
- Ensuring a process that is open and transparent, and reflective of the high ethical and moral standards of the wider internal medicine community.
- Minimizing the overall amount of work, expense, and mental anguish for all involved.

Background
Over the past several years, internal medicine residency programs have seen an increasing amount of applications, which has placed an expanding burden on programs without affecting match rates for students. NRMP data suggest that this markedly increased number of applications is not a result of a marked increase in the number of applicants, but rather the result of applicants applying to more programs. The increased time and effort needed for recruitment on the part of residency program directors, especially when utilizing holistic review of applications, takes time away from enhancing educational programming for their existing residents. Similarly, applying to more programs increases financial, energy and time burdens on applicants and takes away from the educational value of their fourth year of medical school.

According to NRMP, in 2020, among US MD seniors whose preferred specialty was internal medicine, 97.1% matched in internal medicine. Figure 1 from NRMP data from 2020 shows that there was almost no benefit to US MD applicants to rank more than nine programs. Going on more than nine interviews can be described as excessive, as doing so has had almost no mathematical impact on a student’s exceedingly likely chance of matching. Despite this data, students continue to apply to and accept interviews with many more programs. If left unabated, the effects of COVID on the upcoming application cycle have the potential to not only continue this trend but to amplify the problem.

US MD graduates who matched in internal medicine ranked an average of 12.4 programs. US MD graduates who ranked but did not match in internal medicine ranked an average of 3.9 programs. NRMP has not published comparable data for US DOs applying in internal medicine in particular, however among US DOs applying to any field in 2020, 90.8% matched, with an average of 11.45 programs on their rank lists. Data for IMGs has not been published by NRMP; however, given that program directors have limited interview capacity and tend to use a constant interview-to-intern-position ratio, it stands to reason that although IMGs may need to apply to more programs to receive as many interview offers, those with similar length rank lists will be very likely to match, thus US DOs and IMGs are also unlikely to derive benefit from interviewing with and ranking more than about nine programs. This is likely to be true for students who are couples matching as well, however given that
these numbers may be different for different fields (e.g., not internal medicine), students who are couples matching should consult with their advisors and deans to discuss appropriate strategies.

Because time and resources spent on recruitment are time and resources taken from other aspects of residency programs, interview slots are a finite resource. Each interview slot taken by one student cannot be offered to another qualified student. A student who goes on an excess number of interviews takes potential interview opportunities away from his or her peers.

To help decrease the number of internal medicine applicants applying to an excessive number of programs and going on an excessive number of interviews, AAIM proposes the following recommendations for medical school advisors, programs and students.

Recommendations for Advisors and Dean
- Advisors should help students define those priorities most important to them in the Match process so they can focus their applications on programs that are likely to be the best “fit” before they apply. Some resources to assist with this focus include FREIDA, AAMC Residency Explorer, and individual residency program websites. “Fit” may encompass many aspects of a program, including location, setting, size, patient population, mission, particular areas of expertise, special training tracks or rotations, board review or other skills training, research opportunities, or resident classmates.
- Using historical data from their school, advisors should help students predict where they will get interviews and encourage them to limit applications when possible to result in no more than 12 to 15 interview offers.
- Advisors should be familiar with the NRMP data noted in this document and share it with students.
- Advisors should instruct students to only interview at one program per day.
- Advisors should recommend students only go on approximately 10 and not more than 12 interviews, and cancel interviews in a timely fashion at programs lower on their list once they have adequate interviews that are of interest to them.

Recommendations for Students
- Students should take the time to learn about programs and reflect on what is important to them before they apply. Some resources to assist with this focus include FREIDA, AAMC Residency Explorer, individual residency program websites, and residency program social media accounts. Pay attention to what features programs highlight about themselves; these will be areas of particular importance to applicants.
- Students should not apply to a program that they would not rank.
- Students should not interview with more than one program in a day.
- Students should feel comfortable cancelling interviews as the season progresses if the scheduled interview is no longer at a program likely to end in the student’s top 10. In this virtual season, such cancellations are recommended at least seven days in advance to allow programs time to offer the interview slot to another interested student. Students should cancel via an email with a professional tone and with gratitude for the opportunity.
- Students may consider reaching out to programs using the preferred contact methods listed on their websites after program directors have had time to review applications on ERAS if they have particular questions about the process that are not answered using the information sources above, to express particular interest in a feature of the program, or to request a re-review of
their application. Students should be truthful in these interactions and should not expect responses to such contact, but some programs may choose to respond.

Recommendations for Programs

- Programs should post clear information on FREIDA or elsewhere regarding statistics for their matched applicants and/or traits particularly valued by their program in its decision-making process (e.g. average USMLE scores, medical schools of their current or recent residents, whether research, leadership, service activities, experience with particular patient populations or knowledge of other languages are highly valued in the process, etc.)
- Programs should provide updates to applicants on their application status and expected timetable for subsequent decisions.
- Programs should provide regular updates to all applicants regarding the recruitment process, including dates interview invitations are likely to be released, when waitlist decisions will be made, and when rejections are likely to be issued.

Figure 1. Probability of US MD Seniors Matching to Preferred Specialty by Number of Contiguous Ranks (Internal Medicine)