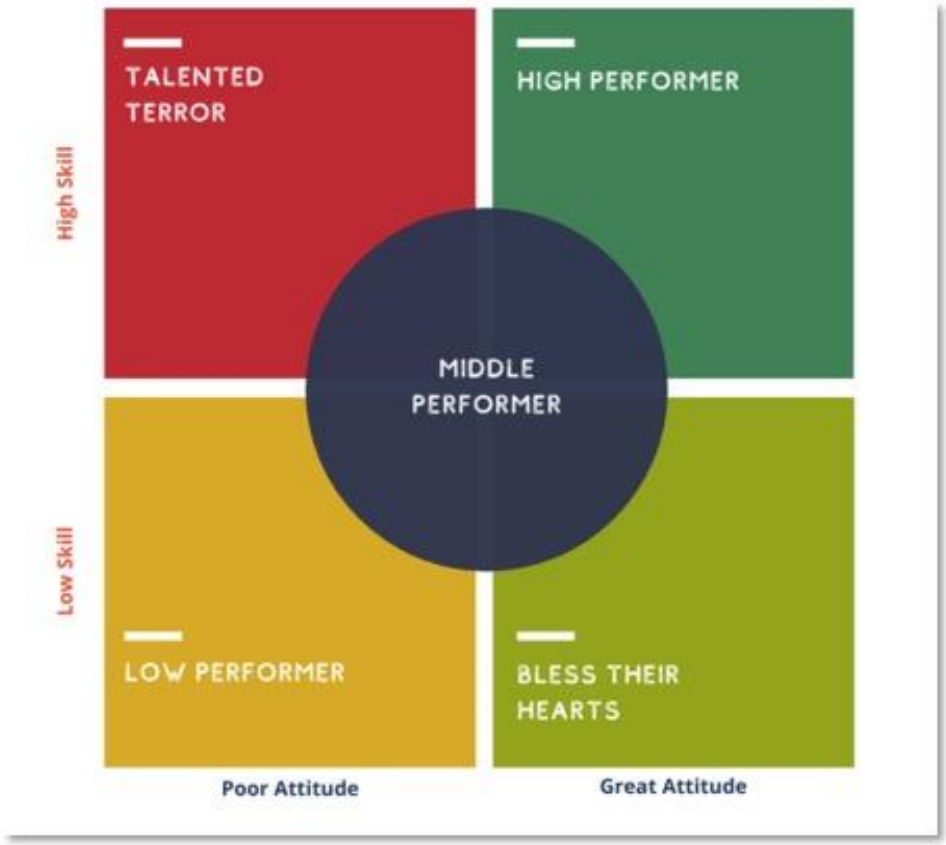
Reflections on the Recruiting Season **February 23, 2025**

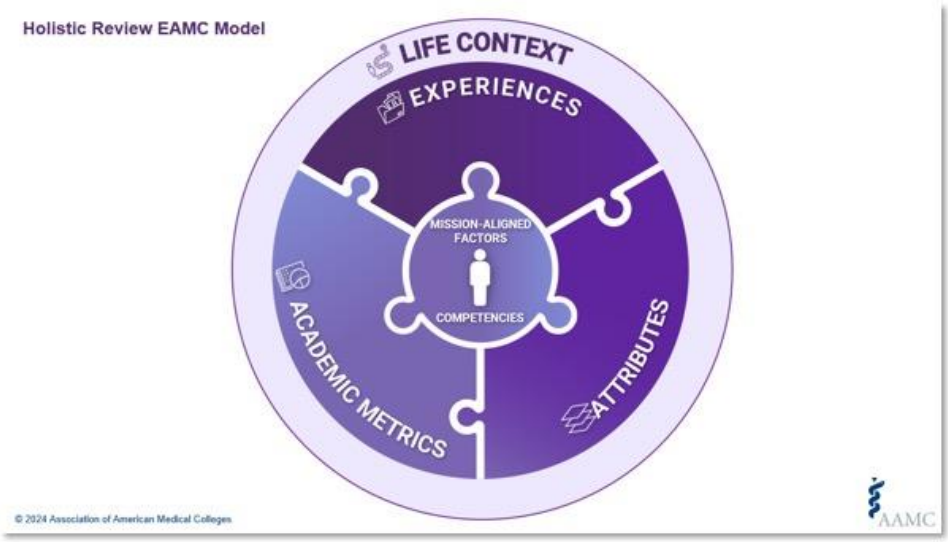
Dear Residents,

This latest cold spell is almost over, and I keenly anticipate Spring's arrival. We're nearly done ranking the applicants we interviewed, and I eagerly await the results of the NRMP Match next month. I want to express my sincere gratitude for your invaluable assistance in the recruitment process. Each year, we observe intriguing trends. What particularly captured my attention is the gradual yet consistent rise in the USMLE Step 2 score. The mean score has increased from 220 a decade ago to approximately 250. Several factors could potentially contribute to this "score creep," and it's not exclusive to the USMLE. Similar patterns have been observed in IQ testing, leading to the concept of the Flynn effect, named after James Flynn, a renowned social scientist from New Zealand known for his work on the determinants of IQ tests. The Flynn effect has been linked to smaller family sizes, the positive impact of the industrial revolution, improved education, and enhanced nutrition. While intelligence tests have their controversies and limitations, it's undeniable that human intelligence is a multifaceted construct that cannot be fully encapsulated by standardized testing alone. This principle extends to how we assess and rank applicants. While I'm not certain if we've fully resolved this issue, we've made progress towards a holistic review approach. There are numerous characteristics that influence the ideal candidate, some measurable, while others remain intangible. We've increasingly placed greater emphasis on soft skills and other intangibles, striving to assemble a diverse group of prospective residents.

Mark Murphy in his book, Hiring for Attitude, emphasizes that success in any job is more driven by "attitude" rather than "technical skills." He underscores the importance of: coachability, emotional intelligence, motivation and temperament and rates these skills as more important indicators of success in a job over technical competence.



People with high technical skills but a poor attitude have been aptly described as talented terrors and it's easy to accumulate such individuals if the only metric one uses is technical skills assessment. This has implications for application review, interview methods and final ranking. The AAMC holistic review EAMC model does its best to emphasize that metrics alone do not provide a comprehensive picture of someone's true and full potential.



Much work remains to be done for this process to be successful. It begins with a commitment to adoption and formal study of the effectiveness of holistic review. MSPEs and letters of recommendation may need to be adapted accordingly. Not everyone is in the "top 5%" as many letters claim. Situational judgment tests have gained popularity, but designing, implementing, and assessing these tests requires extensive training. Application and interview inflation necessitate an "all-hands-on-deck" approach to recruiting, resulting in inconsistent practices.

It will be intriguing to observe whether generative artificial intelligence will prove beneficial or not. Program signals and geographical preferences have had a modest impact on application volume. The Association of American Medical Colleges (AAMC) has introduced a residency explorer tool, to promote a more targeted application process, but its success remains uncertain. Another potential approach could be a two-match system. This involves an early match with a limited number of applications permitted (perhaps 3) followed by a traditional match. Another proposal is to have an early match for the most competitive specialties to address the issue of dual specialty applications and interview hoarding.

I'm particularly intrigued by the dynamics of signals this year, especially considering the significant increase in available signals for internal medicine from 7 to 15. Last year, 70% of applicants who matched in our program matched had signaled us. This indicates that signals benefit both the applicant and the program. However, there are a few challenges to address. Firstly, 80% of signals go to only 20% of the programs, potentially favoring programs like ours. Secondly, signaling may disadvantage applicants who are couples or international medical graduates. The match rate for international medical graduates is half that of US graduates. While US graduates need about 15 interviews to match, international medical graduates may need to apply much more widely to match.

We find ourselves in an intriguing Information Age, where some have aptly dubbed it the "tyranny of information" due to the pervasive presence of misinformation. A few years ago, program directors made a pledge to refrain from scrutinizing the social media accounts of applicants, but I anticipate that some may still engage in this practice. Amidst the overwhelming amount of information available in ERAS, the challenge of accurately assessing applicants becomes an arduous task.

Our program continues to attract a diverse range of highly skilled individuals. We are fortunate to have an abundance of talented applicants. While there has been a slight decline in applications for programs in the Southern United States, this has not impacted our program. Our most compelling selling point is the genuine assessment of your experience here that you convey to applicants.

Wishing you a warm and sunny week ahead!

Dino Kazi