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Medical Student Forum

AN OVERVIEW OF THE ALLOPATHIC MATCH

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Abstract—The number of allopathic emergency medicine (EM) programs has been progressively increasing over the years. In 2018, allopathic EM postgraduate year-1 spots, compared with 2012, increased by around 60% to reach 2278 positions. EM is considered a competitive specialty and therefore, in this article we help guide students interested in EM through the allopathic match requirements, application process, interviews, and ranking EM programs. Additionally, we tackle the combined emergency medicine residency programs, namely the combined EM-Family Medicine (FM), EM-Anesthesiology, EM-Internal Medicine (IM), EM-IM-Critical Care Medicine, and EM-Pediatrics residency programs. Finally, we explain the increased likelihood of matching with the single graduate medical education accreditation system expected to happen in the year 2020. © 2018 The Authors. Published by Elsevier Inc. This is an open access article under the CC BY-NC-ND license (<http://creativecommons.org/licenses/by-nc-nd/4.0/>).

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INTRODUCTION

Matching for residency may seem like one of the most daunting processes you have faced along the difficult path to becoming a physician. You have agonized over

your choice of college and medical school, conquering difficult and exhausting standardized tests to stand where you are today. Now you must not only choose a specialty for the rest of your professional life based on very limited exposure in medical school, but also decide where in the country you want to live and potentially practice. Your success and happiness hang in the balance.

Relax. You have already succeeded, and you are about to embark on the most exciting, challenging, and rewarding part of your medical career thus far. Matching for residency today is about choosing a field that will stimulate you for the rest of your life, and the process is not as difficult as it may first appear.

DISCUSSION

Let's start with the numbers. In the year 2018, 220 allopathic programs offered 2278 positions, as compared with the 1668 emergency medicine (EM) positions offered by 153 allopathic programs in 2012. The number of offered postgraduate (PGY)-1 positions has been steadily increasing over the past years, reaching its highest number ever in 2018 (7.5% of all PGY-1 slots) (1,2). Allopathic programs are those programs that qualify graduates to sit for the American Board of Emergency

Medicine certification process administered by the American Board of Medical Specialties (2). Of these PGY-1 spots in 2018, 2265 positions were filled. There was a total of 2901 applicants to the 2278 positions (2693 of which ranked EM first), and of the total applicants, 1838 were “U.S. seniors,” that is, 4th-year medical students in U.S. allopathic medical schools. The other spots were filled by a combination of U.S. graduates (i.e., graduates of a U.S. allopathic school of medicine), osteopathic medical school graduates, and international medical graduates. In addition to the allopathic positions, there are a number of spots offered by osteopathic programs.

Admittedly, for both the osteopathic and allopathic tracks, EM is a competitive field, but the numbers do not define an impossible task. In 2018, around 8.6% of U.S. seniors applying to EM were unable to match in the field (2). Your interest in EM defines you as a capable and enthusiastic candidate, and you should approach the Match with optimism.

WHAT IS THE “MATCH”?

The “Match,” short for the National Resident Matching Program (NRMP), is the nationally accepted, unified process through which applicants for residency positions are placed within their preferred allopathic programs. Eligible applicants include senior students and graduates of: 1) U.S. allopathic and osteopathic medical schools; 2) Canadian medical schools; and 3) foreign medical schools who have been certified by the Educational Commission for Foreign Medical Graduates (ECFMG).

Most specialties—including EM—participate in the NRMP. Today, a computer algorithm matches applicants and programs based on the preferences they each have. As recently as 1996, this process was weighted slightly to the benefit of residency programs. Today, the algorithm favors *you*, the applicant (3).

HOW AND WHEN WILL YOU APPLY TO RESIDENCY PROGRAMS?

The application process is managed and organized via the Electronic Residency Application Service, or ERAS, which is administered by the Association of American Medical Colleges. U.S. seniors typically register during the fall of their fourth year of medical school with ERAS and fill out a common electronic application. Using a computer application, the applicant will fill out your demographic information, a personal statement, and his or her curriculum vitae, which will be entered into ERAS using their format. The application can be saved and resumed at any time. In addition, the Medical Student Performance Evaluation (Dean’s letter), USMLE

or COMLEX scores, and recommendation letters will also be electronically sent.

The applicant should be also aware of the different kinds of letters or recommendations he/she may receive. Narrative letters of recommendation are usually very subjective and not very reliable (4,5). In order to provide a clearer picture of a student’s performance on an EM rotation, standardized letters of evaluation (SLoE) were developed by the Council of Residency Directors in Emergency Medicine. The SLoE can be found at www.cordem.org and is updated annually. A SLoE should be filled out exclusively by EM faculty, whereas narrative letters of recommendation are to be filled by non-EM faculty. Moreover, many programs offer “Group SLoEs” for students who have rotated with them. These are faculty consensus evaluations written on behalf of the program by a key faculty member, such as a clerkship director or residency program director. Applicants may select which letters are sent to which programs, allowing them to mix and match as necessary.

Usually, the medical school’s student affairs department assists U.S. seniors and U.S. graduates with this process. International medical graduates, on the other hand, can use the ECFMG as the primary contact in addition to the assistance that can be provided by their medical schools. The Medical Student Performance Evaluation (MSPE), formerly referred to as the “Dean’s letter,” will be uploaded onto ERAS, usually on the first of October. The application is completed once the applicant fills the ERAS application and uploads the USMLE scores, MSPE, and three or four letters of recommendation. Although not recommended, the applicant can push the deadline red zone because transmission is electronic. Soon after the application is complete, applicants will receive invitations to interview with programs. Some programs invite applicants for interviews before the MSPE comes out, but many do not. The applicant should be patient if he/she didn’t hear from all programs at the same time. Each program has its own review process, and some take a bit more time. These interviews are typically offered in November, December, and January (3).

After applicants complete their interviews, they will be asked to rank programs with which they would like to match. This rank order list is submitted via NRMP and is due in February of the fourth year of U.S. seniors. Your rank list should reflect *the applicant’s* true preferences in descending order. Programs also submit similar lists of their preferred applicants. In mid-March, at a specific hour of the day (currently noon Eastern Standard Time) on “Match Day,” applicants nationwide will open envelopes revealing their one and only Match. Unlike college and medical student application processes, applicants will not receive acceptances from multiple programs. Note that the applicant at this point would

Table 1. Summary of the Launching Year, Length of Training, and Number of Programs, Positions, and Applicants in 2018 for Each of those Programs

Program	Launching Year (6)	Length of Training, Years (6)	Number of Programs in 2018 (2)	Total Number of Positions in 2018 (2)	Total Number of Applicants in 2018 (2)
EM-Anesthesiology	2016	5 or 6*	1	2	3
EM-FM	2005 (7)	5 or 6†	2	4	27
EM-IM	1989	5	11	26	94
EM-IM-Critical Care Medicine	1999	6	6 (9)		
EM-Pediatrics	1998 (8)	5	4	8	42

EM = emergency medicine; FM = family medicine; IM = internal medicine.

* If the institution offers a 4-year EM program.

† If the institution offers a 4-year EM or a 4-year FM program.

have signed an agreement in advance to attend the one program selected for him/her by the Match (3).

Also, it is worth noting that in addition to categorical EM residencies, there are five types of combined EM residency programs (6). These include combined EM-Family Medicine (FM), EM-Anesthesiology, EM-Internal Medicine (IM), EM-IM-Critical Care Medicine, and EM-Pediatrics residency programs. Table 1 summarizes the launching year, length of training, and number of programs, positions, and applicants in 2018 for each of those programs. The number of applicants applying to these programs has been relatively constant over the past 4 years (2,6–9). Studies report high career and residency choice satisfaction among graduates of combined EM residency programs (8,10,11). Graduates of the combined EM-Anesthesiology program, for example, are expected to “capitalize on the complementary strengths of both programs” (12).

Now, in the less likely event of not matching with any of the programs on their rank list, applicants will be notified by their medical school (or ECFMG, if appropriate) on the Monday prior to Match Day. As such, these applicants can enter a secondary Match, which, as of this writing, is a new process.

Keep in mind that matching will be more likely after combining the allopathic and osteopathic match processes, which is expected to happen in the year 2020 according to the Memorandum of Understanding. All programs are required to complete this single accreditation process. This will provide numerous additional programs for allopathic students (13–15).

HOW EASY IS ALL OF THIS IN PRACTICE?

Today, the ease of the Match process may tempt the applicant to apply to every program nationwide, driven by rumors like describing the case of a brilliant and hard-working friend who was rejected by all 30 programs to which he or she had applied. Instead, our advice to you is to take a deep breath, step back, and think about the

months and years ahead. Every EM residency program meets high standards for academic and clinical training. All allopathic EM programs participating in the Match are accredited by the Accreditation Council for Graduate Medical Education to assure that residents get a high-quality education. All matched applicants *will* be eligible for board certification regardless of the program they matched with, and life will not end if that program is not the applicant’s first choice.

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