

Surgical Residency Market Research-What Are Applicants Looking for?

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OBJECTIVES: We propose that one of the integral parts of building a stronger residency program is the ability to recruit top applicants. Little is known about the factors applicants use to evaluate residency programs. Given that the top applicants are likely to be ranked highly by multiple programs, we sought to determine which factors applicants themselves used to evaluate potential residency programs.

DESIGN: An anonymous, voluntary survey was distributed to all interviewing applicants, asking them to rank 12 factors when choosing a residency. They were additionally asked about any prior research or international medical experience.

SETTINGS: Surveys were distributed at the beginning of the interview day and collected in sealed unmarked envelopes.

PARTICIPANTS: All applicants interviewing for general surgery residency at the University of Virginia during the 2009-2010 and 2010-2011 seasons.

RESULTS: Resident satisfaction was rated the highest, 8.7 out of 9. In descending order of importance, applicants ranked record of the chiefs (8.0), resident case volume (7.8), academic reputation (7.6), geography (7.4), research opportunities (7.3), laparoscopic laboratory (6.2), elective time (5.4), international opportunities (5.1), benefits (4.8), and vacation (4.7), respectively. No correlation was found between prior research experience and research ranking score. A significant positive correlation was found between those applicants with prior international experience and their ranking of international opportunities during residency ($p < 0.0001$).

CONCLUSIONS: Applicants rated a program on a broad range of factors and commonly cited a "gut feeling" or "esprit de corps." The ability to pursue an identified area of special interest, in this case an international opportunity, proved to be an additional major selection factor for a subset of candidates. (*J Surg* 70:232-236. © 2012 Association of Program Directors in Surgery. Published by Elsevier Inc. All rights reserved.)

KEY WORDS: internship and residency, educational measurement, NRMP, Match, rank list, specialization, international medicine

COMPETENCIES: Systems-Based Practice

INTRODUCTION

The competition to attract the best applicants to a surgical residency program is a long-standing one. Numerous articles attempt to identify those admission criteria and selection processes that will predict the future performance of a resident.¹⁻⁷ Factors ranging from the date of application submission² to the validity of clerkship grades⁴ have been examined along with closed file reviews³ and analytic hierarchy rankings.⁵ Despite the imprecise nature of such institutional traditions, all programs consider some combination of an applicant's academic record, clinical evaluations, and leadership potential in determining which applicants to prioritize on their own rank list.

For the strongest candidates, however, their own ranking of residency programs may be more influential to the outcome. These candidates excel in all measures, from their standardized test scores to their letters of recommendation and overall interview scores. Undoubtedly, many residency programs are interested in recruiting these top applicants; however, very little is known about what factors these applicants use when creating their own rank lists. DeSantis and Marco attempted to examine this among applicants to their emergency medicine residency program. Not surprisingly, applicants cited both subjective and objective factors from the perceived friendliness of the program and its academic reputation to geography or the presence of a flight program when selecting a residency.⁸ Stefanidis et al. similarly looked at 14 factors influencing decision making in surgical residency applicants with a specific focus on the importance of skills training.⁹ They found the top rating factors to be the quality of life of the current residents, the volume and variety of cases, and the quality of the curriculum. The importance of a skills curriculum was ranked much lower, but positively influenced decision making for 92% of the applicants.

For a particularly strong applicant interviewing at a number of excellent programs, the factors that distinguish one program from the rest are not well understood. When viewed as a mar-

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TABLE 1. Survey Questions Rating Scale 1–9 (1 Not Important, 9 Most Important)

1) What factors are important to you with regards to choosing a residency? (on a rating scale 1–9)	
Academic reputation	Elective time
Research opportunities	Vacation time
International opportunities	Benefits (meals, parking. . .)
Laparoscopic training lab	Night float
Resident case volume	Resident satisfaction
Record of the finishing chiefs (fellowships, publications. . .)	Geography/Personal factors
2) Do you have research experience?	
3) Do you have international medical experience?	
4) What aspect(s) of a program would most set it apart when creating your rank list?	

ket, in which multiple programs compete to attract the strongest applicants, we became interested in the differentiating factors between programs, rather than their commonalities. We hypothesized that an uncommon special interest opportunity available only at a handful of programs might allow an individual residency program to stand out at the end of a long interview season. While such a factor would not be expected to outweigh core components, such as operative experience or academic reputation, it could potentially sway the rank order when applicants are considering several great programs. We chose the role of an international elective as an example of such a special interest given the increasing number of medical students and residents interested in the field.¹⁰ Similarly, we looked at the importance of research opportunities among applicants when evaluating a program, although clearly other niche opportunities from exposure to rural surgery to pediatric cardiology could be strongly influential to select applicants.

We hypothesized that applicants with greater international medical experience or prior research experience might rank the importance of international or research opportunities during residency differently. Given the brevity of a single interview day compared with the 5 to 7 years a resident will typically train, it is well worth taking a closer look at the factors applicants themselves are looking for. This information may provide a competitive edge to residency programs trying to recruit the best candidates.

METHODS

We distributed an anonymous survey to all surgical residency applicants interviewing at the University of Virginia in 2009–2010 and 2010–2011 seasons. Applicants were asked to rank 12 factors on a 9-point Likert scale with regards to their importance when selecting a residency. These included such aspects as research opportunities, laparoscopic training laboratories, and elective time (Table 1). Additionally, they were asked about prior research or any international medical experience, including the dates involved and the subject of their project or their role abroad. Surveys were distributed in paper form at the beginning of the interview day, and applicants were asked to return the survey at the end of the day in a sealed unmarked envelop. Results were stratified based on prior international medical experience and prior research experience. Most of our interviewees had prior research experience with a median expe-

rience of 18 months. We, therefore, chose to categorize their responses above and below the median experience, with respondents listing less than 18 months being classified as “less research experience” and those above 18 months being classified as “greater research experience.” International experiences were classified into “yes” and “no” categories. Responses were compared using a Student’s *t*-test; *p* values of less than 0.05 were considered significant. IRB approval was obtained before the study.

RESULTS

Surveys were completed by 113 out of 181 applicants interviewed over 2 years (62% response rate). Not surprisingly, resident satisfaction was rated the highest, 8.7 out of a possible 9. Six main factors, resident satisfaction, the record of the chiefs (i.e., fellowships, publications. . .) resident case volume, academic reputation, geography, and research opportunities rated on average 7 out of 9 or higher (Figure 1). By comparison, opportunities, including a laparoscopic laboratory, elective time, and an international experience rated 6.2, 5.4, and 5.1 respectively. Responses to the final question “What aspect(s) of a program would most set it apart when creating your rank list?” commonly listed a “gut feeling” or the perceived “fit” of a program. Additional comments closely reflected the responses above.

Nearly all applicants interviewed, 93.8%, had prior research experience. The average cumulative experience was 22.8 months with a median of 18.0 months. Responses classified based on greater research experience, defined as 18 months or greater, showed no significant differences in any category (Table 2). Specifically, the importance of research opportunities was markedly similar, rating a 7.28 among those with significant prior experience compared to 7.23 for those with less experience (*p* = 0.86).

Over 41.6% of applicants had prior international medical experience. Responses stratified based on that experience showed a significant positive correlation with their interest in international opportunities during residency (*p* < 0.0001) (Table 2). Otherwise, there were no significant differences in responses between applicants with prior international experience and their less traveled colleagues.

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