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## Title

Virtual Recruitment Effects on Matched Residents in Family Medicine

Priority 1 (Research Category)

COVID-19

## Presenters

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## Abstract

Context: As a result of the COVID-19 pandemic, interviews during the 2021 U.S. residency match were conducted virtually; a practice again recommended and repeated by many programs in 2022. The impact of transitioning to virtual interviews on match outcomes is not well studied. If not detrimental, continuing virtual interviewing in the future may be preferred by applicants and programs. Objective: To evaluate the impact of virtual interviews by comparing a baseline of in-person resident interviewing outcomes from 2016-2019 to virtual interviewing outcomes using data from the 2020-2022 virtual interview seasons in three Family Medicine (FM) residency programs. Study Design and Analysis: Retrospective cross-sectional analysis of National Residency Matching Program<sup>®</sup> data between 2016-2022. Aggregate in-person data (2016-2019) was compared to aggregate virtual data (2020-2022) for each program using chi-square, Fisher Exact test or 2-tailed t-tests to 95% confidence. Setting or Dataset: Three Pennsylvania FM residency programs affiliated with Penn State Health (PSH): the M.S. Hershey Medical center in Hershey, a three-year University-based program; the Mount Nittany Medical Center in State College, a three-year community-based university affiliated program; and Saint Joseph Hospital in Reading, a three-year community-based university affiliated program. Population Studied: FM residency applicants at three programs affiliated with PSH. Intervention/Instrument: Retrospective chart review. Outcome Measures: Fill rate, MD/DO ratio, average position on rank list, average distance from residency site to current and permanent address, and % URIM matched resident. Results: One program had significantly more unfilled positions during virtual recruitment (p=0.006); two had significant differences in the proportion of MD:DO matched applicants (p=0.001; p<0.001), and one program had a significant difference in distance of matched resident's current address (p=.048). Virtual interviews were not associated with significant differences in average position on rank list, average distance from permanent address zip code, or percentage of under-represented in medicine demographic status for matched applicants. Conclusions: The impact of virtual interviewing on FM match result is likely site specific and generally small. Further research is needed to confirm the

generalizability of these results to determine major match differences between virtual and in-person interviews.