NAPCRG 52nd Annual Meeting — Abstracts of Completed Research 2024.

Submission Id: 6166

Title

Face-to-Face or Digital Space: Which is more favorable for a residency applicant?

Priority 1 (Research Category)

Education and training

Presenters

Molly Ormsby, MA, David Evans, MD, Grace Shih, MD, MAS, Amanda Weidner, MPH

Abstract

Context: The Family Medicine Residency Network (FMRN) comprises 33 family medicine residency programs and 10 rural tracks, with >700 residents across Washington, Wyoming, Alaska, Montana, and Idaho. In the 2022-2023 interview season, 6 programs offered interviewees the choice of interviewing in person or virtually, instead of requiring one or the other as recommended by national organizations.

Objective: Explore how a hybrid interview structure (applicant could choose between in-person or virtual interview) might affect rank lists and Match outcomes to determine whether it creates bias.

Study Design and Analysis: Secondary analysis of interview, rank, and match data

Setting or Dataset: Interview, rank, and Match data from FMRN programs using a hybrid interview structure in the 2022-2023 interview season

Population Studied: The 6 FMRN programs who used a hybrid interview structure in 2022-2023

Intervention/Instrument: De-identified rank lists with indication of in-person or virtual interview, whether applicant had another contact with the program before or after interview, such as a subinternship rotation

Outcome Measures: ratio of in-person: virtual interviews, matched locations on rank list, interview types of those who matched, ratio of those who were within the match range ("opportunity to match") by interview type

Results: All 6 programs in FMRN who offered hybrid interviews shared their data (100% response), representing 560 total interviews for 46 residency positions. Of these interviews, 43% (n=240) were held in-person and the remainder virtually. To assess applicants' "opportunity to match" we examined the

ratio of in-person to virtual interviews for all positions up to the final matched position for each program; this included a total of 366 positions. Of these, 147 (40%) were in-person interviews and 219 (60%) were virtual, similar to the overall ratio. Applicants who matched were no more likely to have interviewed in-person (n=24, 56%) than virtually (n=19, 44%; chi-square, p=.074), and when applicants who had participated in sub-internship experiences were excluded, this gap closed even further (n=17, 8% with in person interviews and n=19, 6% with virtual interviews, chi square p=.447).

Conclusion: Type of interview does not appear to disadvantage applicants' ability to match based on their chosen interview type. Likelihood of matching to a program is confounded by whether or not an applicant participated in a sub-internship experience.

Downloaded from the Annals of Family Medicine website at www.AnnFamMed.org.Copyright © 2024 Annals of Family Medicine, Inc. For the private, noncommercial use of one individual user of the Web site. All other rights reserved. Contact copyrights@aafp.org for copyright questions and/or permission requests.