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modules are created in the E-Value interface. Learners are required to review objectives, read weekly assigned material and list any additional evidence based medicine resources used to learn the material, submit one remaining question after reviewing material, and submit an ABEM style question utilizing the designed small group modules on E-Value platform. Facilitating faculty can review remaining questions in E-Value to enhance small group discussions. Independent learning plans (ILP), meant to foster self-directed learning in our residents, are completed on E-Value by resident learners. ILP force learners to record a question that developed during small group sessions, and to seek and provide an answer to the question posed.

Impact/Effectiveness: E-Value developers allowed residency leadership to innovate their interface in order to develop weekly small group modules to be completed online. Material was easily and efficiently completed and reviewed by residents and education faculty. Our novel innovation to this well established medical education platform allowed us to keep all education materials in a single, centralized platform. Our design ensured learner accountability in completing the curricular material, and allowed faculty to send prompt feedback to resident learners via E-Value.

Emergenc	y Medi	cine									
Jser Cour	sework	Summary									
Time Period: (Time Period T Report Date: 1	ype: Requ	5 to 11/18/2015 Jest Date 5									
Link	History	Trainee	Activity	Time Frame	Time Period	Coursework	Due Date	Completion Date	Status	Grader	Grad
View Coursework	View	Resident 1 PGY1	November 18, 2015 MSK: Soft Tissue Infection	07/01/2015 - 07/01/2015	07/01/2015 - 07/01/2015	November Week 3- MSK: Soft Tissue Infection	11/16/2015 by 08:00 AM	11/08/2015 at 01:35 PM	Completed	NA	
Compliance	Residen	t 1 1/1=100	0.00%								
Link	History	Trainee	Activity	Time Frame	Time Period	Coursework	Due Date	Completion Date	Status	Grader	Grad
View Coursework	View	Resident 2 PGY2	November 18, 2015 MSK: Soft Tissue Infection	07/01/2015 - 07/01/2015	07/01/2015 - 07/01/2015	November Week 3- MSK: Soft Tissue Infection	11/16/2015 by 08:00 AM	11/15/2015 at 06:56 PM	Completed	NA	
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Compliance			Activity	Time Frame	Time Period	Coursework	Due Date	Completion	Status	Grader	Grad
Compliance Link	History	Trainee	Activity								



Best of the Best Oral Presentations

Residency Applicants Prefer Exact Timelines of Interview Offer Release Dates Over Rolling Admissions

Hern H, Alter H, Duong D, Gisondi M, Roche C, Trivedi T, White M, Wills C /Alameda Health System - Highland Hospital, Berkley, CA

Background: In Emergency Medicine, it is not uncommon for applicants to feel anxiety about applying to or interviewing at enough programs. There is a concern among program directors, that some applicants might be accepting more interviews than they can realistically go to. In the 201516 application cycle, some programs agreed to have a uniform release date of invitations to interview in an attempt to limit the number of excess invitations held.

Objectives: The purpose of this investigation is to examine the effect of unified release dates on the medical student satisfaction as compared to traditional individual program determined release dates as well as the rates of double booking of interviews.

Methods: This is a retrospective analysis performed on a sample of US medical students applicants at any of the 4 Emergency Medicine Residency Program sites participating in the study, 2 of which used a uniform release date, 2 did not. Results analyzed using test of proportions analysis.

Results: There were 555 responses out of 1464 US seniors surveyed (37.9%). Of respondents, 50.1% applied to more programs than their advisor recommended and 45.6% applied to the number recommended. When asked if they ever double booked 2 interviews for the same day, 31.6% replied they had and 6.9% did it 3 or more times. Applicants who were AOA were more likely to have "double booked" interviews (46.1% (41/89) vs. 28.7% (129/449) applicants p=0.001.) Applicants prefer an established date by each program on when they offer interviews. 78.9% listed an established date (either uniform or non-uniform) as their highest preference. Only 15.7% of students reported no preference as their 1st or 2nd preference. Rolling basis interviews were not popular with 59.5% of students placing this as their 3rd or 4th choice.

Conclusions: Applicants tend to schedule more interviews than their EM advisor recommends. In addition, over 30% doubled booked interviews for the same day and AOA applicants were more likely to do so. Finally, rather than a universal date or rolling date, applicants preferred to know the explicit timeline of the interview offers.

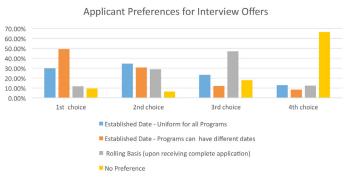


Figure.

2 Impact of Doximity Residency Rankings on Emergency Medicine Applicant Rank Lists

Peterson W, Hopson L, Khandelwal S, Gallahue F, White M, Burkhardt J, Rolston A, Santen S /University of Michigan, Ann Arbor, MI; Ohio State University,