AOA Council of Orthopaedic Residency Directors (CORD)
Letter to Orthopaedic Surgery Residency Programs
May 27, 2020

The leadership of AOA/CORD has been working with our delegates to the AAMC and OPDA to develop a policy statement that is in line with the leadership throughout graduate medical education. The Coalition for Physician Accountability’s Work Group on Medical Students (CoPA) in the Class of 2021 is a collaborative effort with members of AACOM, AAMC, ACGME, AOGME, AMA, AOA (American Osteopathic Association), CMSS (OPDA), ECFMG, FSMB, LCME, NBME, and NBOME working together to mitigate the effects of the COVID-19 pandemic and its effects on our residency training programs and medical students. On May 11, 2020, this collaborative group released a consensus statement with wide-ranging recommendations for the upcoming application cycle. Along these same lines, on May 8, 2020 the AAMC outlined the principles upon which each decision should be made but ultimately defers to individual subspecialty organizations (such as CORD) to create guidelines for their specialty.

In preparation for the upcoming 2021 residency application cycle, we have developed the following guidelines for programs to adopt and incorporate into their recruitment procedures. We will disseminate these recommendations nationally in collaboration with other national organizations and other subspecialty organizations via the AAMC web page for students: https://students-residents.aamc.org/applying-residency/article/specialty-response-covid-19/?edit

Our primary goals are to optimize the recruitment process for the learner and the program, and while balancing the national efforts of social distancing and virus control, we aim to establish a level playing field for both groups by doing the following:

1. Create a fair and equitable application process for medical student applicants and residency training programs.
2. Provide mentorship for each medical student to find programs that match their career goals and learning styles.
3. Provide a consistent approach for training programs as they enter the residency recruitment process.
4. Establish a timeframe to make a final decision regarding face-to-face versus virtual interview format for the completion of this application cycle.

The COVID-19 pandemic is having a significant effect on our medical education system, including:

1. Altering medical students’ exposure to orthopaedic surgery as a field.
2. Cancellation or significantly altered medical student clerkships, including sub-internships, which affects both students’ experiences and also their ability to earn strong letters of recommendation.
3. Interruption and cancellations of away rotations.
4. Postponement of USMLE Step 2 CK and CS and COMLEX Level 2 CE and PE.
5. Interruption of research and extracurricular activities.
6. Travel restrictions, which will interrupt in-person interviewing.
7. Disproportionately impacting some regions of the country, orphan medical students, international medical graduates, and those from lower socioeconomic status backgrounds.

Therefore, the AOA/CORD recommends the following guidelines for the upcoming residency application cycle:

1. Provide adequate exposure to orthopaedic surgery and advocate for at least 2 months of orthopaedic surgery for students at their home program.
2. Consider how to help students at your institution learn more about orthopaedic surgery both in-person and virtually.
3. Programs should not allow away rotations for the 2020-2021 residency recruitment cycle. The exceptions to this are for: (1) learners who have a specialty interest and do not have access to a clinical experience with a residency program in that specialty in their school’s system; or (2) students who have a graduation or military requirement to complete such a rotation. In this case, the student should be given access to same-state or regional ACGME accredited training program(s) for up to two one-month Sub-internships.
4. Programs should consider offering virtual didactic sessions and grand rounds to give outside applicants access to learn more about your program.
5. Decrease any requirement of ortho-specific letters to two ortho letters and not require an away rotation letter. Due to decreased student experience, Chairperson’s letter should not be mandatory.
6. For interviews, the CoPA Work Group has recommended that all programs commit to online and virtual interviews for programs. Based on this recommendation and widespread adoption of these recommendations by universities across the United States, CORD supports this decision and will recommend programs take steps to develop strategies that will showcase your program virtually. We will work with all programs to help share best practices and help prepare our students and faculty for this.
7. Recommend not reviewing applications until November 1, with first interview invitations being sent November 15 or later.
8. Recommend letting all applicants know by January 15, 2021 if they will be offered an interview, waitlisted, or not offered an interview.
10. Since programs will be dependent upon the ERAS application alone this year to select applicants to interview, CORD recommends the following guidelines for applicants to limit the application burden on programs and allow programs to thoroughly evaluate each application and not be as dependent on screening criteria such as USMLE Step 1 scores.

(1) Each student should discuss their individual situation with their orthopaedic advisors to determine the number of residency programs they should apply to. CORD will create a resource to help students without orthopaedic residency programs find a mentor.

a. The AAMC site “Apply Smart” lists data to consider when applying to residency programs: https://students-residents.aamc.org/applying-residency/filteredresult/apply-smart-data-consider-when-applying-residency/

i. In general, it is recommended that allopathic students with Step 1 scores >235 apply to no more than 40 programs.
ii. It is recommended that **allopathic students** with **Step 1 scores < 235** apply to no more than **60 programs**.

iii. Step scores should be considered in the context of other strengths or areas of concern in a student’s residency application.


c. Finally, a strong plea: **Please do not apply to more than 60 programs** unless you have had some academic difficulty, are couples-matching, or are advised to by your orthopaedic medical school leadership. The data supports that the vast majority of applicants do not need to apply to more than 40 programs. We want to ensure that applicants get a holistic review, but this will be difficult to do if programs are flooded by applications.

The AOA/CORD group recognizes that there is a significant amount of stress regarding this application cycle for both the medical student applicant and the residency training program. Both parties need to be flexible and adapt to this process for the safety of the students involved as well as the members of the residency training programs. The guiding principles of equity and fairness will lead us through this process. Please continue to mentor your students and update them regularly through these troubling times. The current recommendation is to plan for an all virtual interview cycle. If national policy changes, we will promptly communicate this to the CORD community.

In order to maintain the highest levels of professionalism and demonstrate solidarity of our programs through this difficult time, CORD is requesting that all programs agree to follow these guidelines. It is the consensus of CORD that this will provide the most equitable process for programs and applicants during this challenging application cycle.

“I have reviewed the CoPA recommendations and agree with the CORD recommended guidelines that our program specifically will not allow students to perform visiting rotations (unless they meet either of the 2 exception criteria) and will not allow in-person interviews.”