



**APPD/COMSEP/AMSPDC Letter to Our Pediatrics Community  
April 28, 2020**

The leadership of APPD, COMSEP, and AMSPDC have been working collaboratively with Undergraduate Medical Education (UME) and Graduate Medical Education (GME) leaders and learners to mitigate the effects the COVID-19 pandemic is having on our learners, educational programs, and health systems. To prepare for the 2021 residency application cycle, we have developed the following recommendations for programs to adopt and incorporate into their recruitment planning processes. We will soon develop and disseminate recommendations for the 2021 fellowship application cycle in collaboration with the Council of Pediatric Subspecialties (CoPS).

Our primary goal is to optimize the recruitment process for both learners and programs by:

- (1) Helping learners find programs that match their career goals while providing an atmosphere conducive to their learning styles.
- (2) Providing educational programs with a consistent approach to residency recruitment.
- (3) Creating a fair and equitable application process for both learners and programs.
- (4) Minimizing the disruptions created by the COVID-19 pandemic and assure reasonable health precautions during this interview season.

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

- (1) Altering medical students' exposure to pediatrics as a field
- (2) Cancellation or significantly altered medical student clerkships, including sub-internships, which affects both students' experiences and also their abilities 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 may interrupt in-person interviewing
- (7) Disproportionately impacting some regions of the country, international medical graduates, and those from lower socioeconomic status backgrounds

Therefore, APPD, COMSEP, and AMSPDC propose the following recommendations for the upcoming residency application cycle:

(1) Recommendation to students

a. General guidance:

- i. You have chosen an outstanding field dedicated to the health and well-being of children. Our program leaders are here to help you navigate this process!
- ii. We recognize that you have had variable clinical, research, advocacy, and other extracurricular experiences due to the impacts of COVID-19. We have provided program directors with guidance on how to perform a holistic review of applicants in order to mitigate the challenges created by the COVID-19 pandemic.
- iii. Please see the following recommendations to residency programs as our global commitment to you and the children and families you will serve throughout your careers.

b. Number of programs to apply to:

- i. Each student should discuss their individual situation with their pediatric advisors to determine the number of residency programs they should apply to.
- ii. 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/>
  1. In general, it is recommended that **allopathic students** with Step 1 scores between 216-234 apply to 15 programs. Allopathic students with higher scores can apply to fewer programs, while students with lower scores should apply to more programs.
  2. It is recommended that **osteopathic students** with Step 1 scores >220 apply to 16 programs. Osteopathic students with lower scores should apply to more programs.
  3. Step scores should be considered in the context of other strengths or areas of concern in a student’s residency application.

- iii. A study of LCME-accredited **allopathic medical students**, found that **if students have no academic difficulty** (no course failures, Step failures, no other academic probation/remediation), they only need to **rank** 10 programs to have 99% match (Vinci 2017)

<https://www.appd.org/meetings/2017FallPres/ThursHTMatchFrenzySlides.pdf>

- iv. Data from 2018 NRMP surveys will help students and pediatric advisors assess how an individual student’s application characteristics will affect their likelihood of matching:

[https://mk0nrmp3oyqui6wqfm.kinstacdn.com/wp-content/uploads/2019/10/Charting-Outcomes-in-the-Match-2018\\_Seniors-1.pdf](https://mk0nrmp3oyqui6wqfm.kinstacdn.com/wp-content/uploads/2019/10/Charting-Outcomes-in-the-Match-2018_Seniors-1.pdf)

- v. Finally, a strong plea: Please do not apply to more than 15 programs unless you have had some academic difficulty, are couples-matching, or are advised to by your pediatric medical school leadership. We want to ensure that applicants get a holistic review, but this will be difficult to do if programs are flooded by applications.

(2) Recommendation to programs

- a. To provide adequate exposure to pediatrics and pediatric subspecialties:
  - i. Consider how to help students at your institution learn more about pediatrics and pediatric subspecialties in general.
  - ii. We strongly urge students and programs to limit and not require away rotations. The exception to this is the situation when a student cannot get a similar experience at their home institution.
  - iii. Consider offering virtual visiting clerkships.
- b. In reviewing applications:
  - i. We support holistic review of applications, recognizing that access to different clinical, research, extracurricular, work, and other experiences vary significantly at baseline, and are further impacted by the COVID-19 pandemic.
  - ii. Recognize that many medical students will have experienced non-traditional clerkships during the pandemic, including virtual learning experiences and on-line educational programming.
  - iii. Decrease any requirement of peds-specific letters to one peds letter.
  - iv. Do not require that a sub-I be completed by time of initial application review.
  - v. Do not require that Step 2CK and Step 2CS be completed by time of initial application review.
- c. For interviews:
  - i. If COVID-19 continues to pose a significant health and safety risk to our students and programs, we strongly recommend only offering virtual interviews for this year's Match cycle for two reasons:
    - 1. First and foremost, to minimize the health risks of traveling during this coronavirus pandemic.
    - 2. And importantly, to provide a more equitable structure for applicants and programs since some areas are disproportionately more affected by COVID-19 and some applicants are disproportionately impacted by the health and financial ramifications of COVID-19.
  - ii. In moving to virtual interviews, programs should develop strategies that will showcase your program virtually. We will work with you to help share best practices and help prepare our students and faculty.
- d. Timing:
  - i. Recommend not reviewing applications until October 7, with first interview invitations being sent October 12 or later.
  - ii. Recommend letting all applicants know if they will be offered an interview, waitlisted, or not offered an interview by December 15 (or two months after ERAS opens, whichever is later).

In addition, we urge the AAMC to:

- a. Not release ERAS documents until October 7.
- b. Release MSPE and other elements of application at the same time.
- c. Create a tiered application process for ERAS submissions – for pediatrics, we would recommend that applicants apply to no more than 15 programs maximum for the first round.
- d. Recommend MSPE language explaining how the medical school responded with curriculum changes during the COVID-19 pandemic.

We recognize that the interview season needs to be moved a bit later than usual due to medical students and faculty needing additional time to complete requirements. However, we also caution not to move the season too far forward and would not recommend changing the NRMP ranking dates and match date, as time is needed to on-board new learners post-match. In addition, should there be another wave of COVID-19 in the fall/winter, we want to ensure that there is sufficient time for interviewing.

We recommend creating a tiered application process so programs are not overwhelmed with so many applications that it would prevent a holistic review.

APPD, COMSEP, and AMSPDC recognize that these proposed changes may place a larger burden on residency programs and we appreciate all of your flexibility in order to best serve our learners and the field of pediatrics. We will continue to share updates, innovations and best practices with you as they arise. We are grateful for your commitment to our students and developing outstanding leaders in children's health.