

# Hospitals' communication during residency matching may put stress on OB-GYN doctors-in-training

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Many hospitals offer residency programs for doctors in training, allowing them to complete the education needed to become practicing physicians. Hospitals find those residents using National Residency Matching Program (NRMP) rules, but a new study finds wide variation in the interpretation of those rules.

The NRMP rules are intended to minimize pressure on residency candidates, says lead author Diana S. Curran, M.D., F.A.C.O.G., residency program director for the U-M Department of [Obstetrics and Gynecology](#). But her study, published in the *Journal of Graduate Medical Education*, found that the rules may instead be leading to stress for both OB-GYN residents and program directors.

The results suggest that programs may be communicating their match intentions, especially to favored candidates. Curran and her co-authors surveyed OB-GYN residency program directors across the United States in an [online survey](#).

The majority of [respondents](#) (76.6%) reported that their programs initiated contact with residency candidates after interviewing them either all of the time (28.7%), most of the time (21.3%) or sometimes (26.6%). Only 23.4% reported never initiating post-interview contact with candidates.

Eighty-four percent of the program directors reported that candidates asked about their ranking status after the interview, with 1.1% reporting that they informed the candidate about his/her chance and 16.0% reporting that they provide a vague answer to candidate inquiries. Sixty-percent of programs informed inquiring candidates that their rank could not be revealed, however 51.5% also reported that highly desirable candidates might be contacted to inform them they were ranked to match.

"Our program here at the University of Michigan has a policy of minimal to no communication with candidates after their interview day to avoid any potential impropriety or placing undue pressure on candidates to state their intentions. We instituted a practice change to inform candidates on their interview day to not expect a call or e-mail from us, but the candidates' feedback suggested that perhaps other programs were communicating more frequently with candidates during the pre-rank period. This study seems to support that," says Curran, who also is assistant professor of OB-GYN at U-M.

Curran says U-M has minimal, if any, post-interview contact with candidates, which is the University's interpretation of NRMP rules.

"Our experience is that both candidates and faculty are not always sure what the rules permit," says Curran. "Many of the responding program directors believe that candidates and programs attempt to guess what the other is trying to communicate and that game playing is part of the routine. We asked program directors to comment during the survey, and they showed frustration with the post-interview, pre-Match process."

Curran and her co-authors say adherence to NRMP rules are crucial in the very stressful match process. OB-GYN residency programs are competing for a large pool of highly qualified candidates: in 2009 the number of match candidates exceeded the number of existing positions

in the specialty by 611 residents.

"We hope this study spurs discussion between OB-GYN program directors, the NRMP, the Accreditation Council for Graduate Medical Education, and medical schools is to help restore trust in the original purpose of the NRMP: to protect candidates from inappropriate pressure," says Curran.

**More information:** *Journal of Graduate Medical Education*. DOI: [dx.doi.org/10.4300/JGME-D-11-00114.1](https://doi.org/10.4300/JGME-D-11-00114.1)

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