



Supplemental ERAS[®] Application Guide

July 2022

The AAMC (Association of American Medical Colleges) is a nonprofit association dedicated to improving the health of people everywhere through medical education, health care, medical research, and community collaborations. Its members comprise all 155 accredited U.S. and 16 accredited Canadian medical schools; approximately 400 teaching hospitals and health systems, including Department of Veterans Affairs medical centers; and more than 70 academic societies. Through these institutions and organizations, the AAMC leads and serves America's medical schools and teaching hospitals and the millions of individuals employed across academic medicine, including more than 191,000 full-time faculty members, 95,000 medical students, 149,000 resident physicians, and 60,000 graduate students and postdoctoral researchers in the biomedical sciences. In 2022, the Association of Academic Health Centers and the Association of Academic Health Centers International merged into the AAMC, broadening the AAMC's U.S. membership and expanding its reach to international academic health centers. Learn more at [aamc.org](https://www.aamc.org).

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Contents

| | |
|---|----|
| Introduction | 1 |
| About the Supplemental ERAS Application | 1 |
| Before You Begin | 1 |
| Eligibility | 1 |
| ERAS Policies | 2 |
| Supplemental Application Timeline | 2 |
| Confirming Your Email | 2 |
| Accessing the Supplemental Application | 3 |
| Supported Browsers | 3 |
| Confirming Your AAMC ID | 3 |
| Submitting the Supplemental Application | 3 |
| Preparing for the Supplemental ERAS Application | 4 |
| Past Experiences | 4 |
| What is the past experiences section? | 4 |
| What will be shared with programs? | 4 |
| Tips for Completing This Section | 5 |
| Geographic Preferences | 6 |
| What is the geographic preferences section? | 6 |
| What will be shared with programs? | 6 |
| Tips for Completing This Section | 7 |
| Program Signals | 7 |
| What are program signals? | 7 |
| What will be shared with programs? | 7 |
| Tips for Completing This Section | 8 |
| How Programs Use the Supplemental Application | 8 |
| Past Experiences | 9 |
| Geographic Preferences and Program Signals | 9 |
| Contact ERAS Client and Technical Support Team | 10 |
| Appendix: Supplemental ERAS Application Questions | 11 |
| Past Experiences Questions | 11 |
| Geographic Preferences | 15 |
| Program Signaling Questions | 16 |

Introduction

This guide is designed to help you prepare to complete the supplemental ERAS® application. It provides an overview of the supplemental application, lists the participating specialties, and outlines the timeline for accessing and submitting the supplemental application. The guide also provides guidance and tips for completing each section and highlights evaluation results from the 2022 ERAS cycle, which included three specialties (Dermatology, General Surgery, and Internal Medicine) and over 20,000 applicants. Finally, the appendix displays all supplemental application questions and instructions.

About the Supplemental ERAS Application

The [supplemental ERAS application](#) is being offered by the AAMC (Association of American Medical Colleges) as part of ongoing efforts to improve the MyERAS application. It features new questions that will help applicants showcase their interests and experiences to programs. This information will help residency programs better understand how applicants' interests and experiences align with their program environment, mission, and goals.

The supplemental application is separate and distinct from the standard MyERAS application. Your participation in the supplemental application is optional. It will be administered online and consists of three sections:

- Past Experiences
- Geographic Preferences
- Program Signals

Before You Begin

Eligibility

There are no fees for the supplemental ERAS application. Applicants to the 2023 ERAS cycle who are applying for a residency position in the following 16 specialties may be asked to complete the supplemental application:

- Adult Neurology
- Anesthesiology
- Dermatology
- Diagnostic Radiology and Interventional Radiology*
- Emergency Medicine (*Program Signals only*)
- General Surgery
- Internal Medicine (Categorical only)
- Internal Medicine/Psychiatry
- Neurological Surgery
- Obstetrics and Gynecology (*Program Signals only*)
- Orthopedic Surgery
- Pediatrics
- Physical Medicine and Rehabilitation
- Psychiatry
- Public Health and General Preventive Medicine

* These two specialties are listed together because they collaboratively decided to combine their program signals. For more information about this decision, please see the [Program Signaling Questions](#) section.

Program participation is optional. Some programs in each specialty may decide not to participate. A list of participating programs will be available on the supplemental ERAS application website in early July.

All sections and questions within the supplemental ERAS application are optional. No questions are required to submit the supplemental ERAS application.

ERAS Policies

Applicants must agree to the ERAS terms and conditions before starting the supplemental ERAS application. All information regarding ERAS policies can be found on the ERAS website at students-residents.aamc.org/applying-residencies-eras/eras-policies.

Supplemental Application Timeline

The supplemental ERAS application will open on Aug. 1, 2022, at 9 a.m. ET, and close on Sept. 16, 2022, at 5 p.m. ET. You will be able to complete and submit the application anytime during this window. A complete list of dates and milestones are outlined in the table below.

| Date | Milestone |
|----------------------------------|---|
| Aug. 1, 2022, at 9 a.m. ET | <ul style="list-style-type: none"> Supplemental ERAS application opens. The AAMC begins sending invitations to the supplemental application. Invitations are sent daily (Monday-Friday). |
| Sept. 14, 2022, at 11:59 p.m. ET | <ul style="list-style-type: none"> Deadline for applicants to register an ERAS token to receive an invitation to the supplemental application. |
| Sept. 16, 2022, at 5 p.m. ET | <ul style="list-style-type: none"> Deadline for applicants to submit the supplemental ERAS application. Supplemental ERAS application closes. |
| Sept. 28, 2022 | <ul style="list-style-type: none"> Program Director Work Station (PDWS) opens to programs. Supplemental ERAS application data available to programs along with all other ERAS data in the PDWS. |

Confirming Your Email

As you create your AAMC account or log into a previous AAMC account with your ERAS token, please verify that your email address is correct in the My AAMC Profile tab in the MyERAS application. **The supplemental ERAS application invitation and subsequent reminders will be sent to the email address you provide in your profile as of Aug. 1. This email address will be used for all emails related to the supplemental ERAS application even if you update it after Aug. 1.**

Accessing the Supplemental Application

The supplemental ERAS application process will be initiated when an applicant uses their token from their Designated Dean's Office to [register for the 2023 ERAS season](#) in the MyERAS application. All applicants who have registered in the MyERAS application, regardless of the specialties to which they intend to apply, will receive an invitation to complete the supplemental ERAS application. Completion of the supplemental ERAS application is optional.

1. **The AAMC will begin sending email invitations on Aug. 1, 2022. Emails will be sent from the email address SuppERASApp@aamc.org.**
2. Applicants must register an ERAS token before **11:59 p.m. ET on Sept. 14** to receive an invitation.
3. The AAMC will send invitation emails daily (Monday through Friday) from Aug. 1 through Sept. 15 to applicants who register an ERAS token.
4. The AAMC will send regular reminder emails between Aug. 8 and Sept. 15 or until you submit the supplemental application.
5. The AAMC will send a confirmation email after you submit the supplemental application.

You do not need to complete the entire application in one sitting. You may save it and return to the point where you left off by using the personalized link in your invitation email. **Do not share your personalized link to the supplemental application with others as they will have access to your personal information.**

We recommend using a computer (desktop or laptop) to complete the supplemental application to ensure that you can see all questions and your responses on the screen. However, you may complete it using any internet-enabled computer, tablet, or smartphone.

Supported Browsers

The application is supported by the latest versions of Chrome, Firefox, Edge, and Safari. For optimal performance, Internet Explorer 9, 10, and 11 are not recommended. Applicants should access the supplemental ERAS application in one browser window at a time to ensure all responses are saved and prevent loss of data.

Confirming Your AAMC ID

Upon entering the supplemental ERAS application, your AAMC ID will appear at the top of the User Agreement screen on the first page. Please verify that your AAMC ID is correct. If your AAMC ID is *not* correct, close out of the application immediately and email SuppERASApp@aamc.org with the following subject line: "Supplemental Application: Incorrect AAMC ID".

Submitting the Supplemental Application

You must submit your supplemental application **by Sept. 16 at 5 p.m. ET** for your responses to be shared with the participating programs to which you apply. To submit your supplemental application, select "Submit Application" on the last page of the supplemental application. *You cannot make changes to your supplemental application after you submit it.*

When you apply to programs in MyERAS, your supplemental ERAS application data will be shared with the participating programs to which you apply as described in the subsequent sections. Your supplemental application will be released to programs at the same time as your MyERAS application.

Preparing for the Supplemental ERAS Application

Your responses to the supplemental application will help programs get to know you, what motivates you, and what you are passionate about. It is to your advantage to be authentic and honest to help ensure that program directors can effectively evaluate whether you will thrive in their programs.

Past Experiences

What is the past experiences section?

The past experiences section is intended to help you communicate what is most important or has most affected you and the specific qualities you will bring to a residency program. It gives program directors a more complete picture of all applicants. See the appendix for a complete list of past experiences questions.

The past experiences section has two parts:

1. **Meaningful experiences.** Identify up to five meaningful experiences. For each experience you will be asked to:
 - Provide descriptive information, including position title, organization name, approximate start and end dates, frequency of participation, and setting.
 - Select an experience type, primary focus area, and key characteristic, as applicable.
 - Write a short essay.
2. **Other impactful experiences.** If applicable, describe any other impactful life experiences.

Past experiences should complement the other parts of your application. Ideally, your meaningful experience essays and other impactful experience essay should not repeat information from your MSPE Noteworthy Characteristics and personal statement. While there may be overlap in the experiences mentioned across the application, consider how to provide additional insight or emphasize how these experiences have shaped who you are and what is important to you.

What will be shared with programs?

Responses to past experiences questions will be shared with the participating programs to which you apply in all participating specialties except **Emergency Medicine** and **Obstetrics and Gynecology**.

Tips for Completing This Section

- ✓ **Draft your complete list of experiences for the MyERAS application.** Your meaningful experiences may be selected from the full list of MyERAS experiences or include experiences that are not in your MyERAS experiences. The supplemental application allows you to highlight and expand upon experiences in the MyERAS application and emphasize important information about them. If you select experiences from your MyERAS experiences, use the same position title, organization name, and approximate start and end dates to help programs connect the information you provide in the MyERAS application and the supplemental application.
- ✓ **Reflect and identify experiences that communicate who you are, what you are passionate about, and what is most important to you.** Programs are not interested in one type of applicant. Most programs are seeking a variety of applicants who have varied experiences, are passionate about different areas, and have complementary characteristics to create a well-rounded team.
- ✓ **Consider your meaningful experiences as a complete set. Use them to paint a picture of yourself.** You may tag an experience type, primary focus area, and key characteristic to each experience. You do not need to tag every experience to a primary focus area and key characteristic. As a set, your meaningful experiences should communicate what is most important or has most impacted you and specific qualities you will bring to a residency program.
- ✓ **Focus your meaningful experience essay on why the experience was meaningful and how it impacted you.** Do not describe *what* you did during the experience. You may describe what you did as part of the experience description in the MyERAS application. Programs are looking for you to show introspection in your meaningful essays. If you tag a characteristic and/or focus area to an experience, your essay should explain why you chose the characteristic and/or focus area.
- ✓ **Share any other impactful experiences, if applicable, that affected your journey to residency.** These experiences could be related to family, financial, or educational background, the community setting in which you grew up, or general life circumstances. This question is not intended for all applicants. Carefully consider whether this question is applicable to you and if you should respond to this question using the examples provided in the appendix. Approximately 30% of applicants did not reply to this question in the 2022 ERAS cycle. *Programs do not expect all applicants to reply to this question.*

CONSIDER THESE DATA FROM THE 2022 ERAS CYCLE:

- Most applicants submitted four or five meaningful experiences.
- Applicants submitted a variety of experience types.
- Applicants submitted some experiences that were clinical and others that were not.
- Applicants submitted experiences that occurred prior to and during medical school.

Geographic Preferences

What is the geographic preferences section?

The geographic preferences section is designed to give applicants the opportunity to communicate their preference or lack of preference for particular geographic divisions and urban or rural settings. See the appendix for a list of geographic preferences questions.

- **Geographic division preference.** You will be asked to select *up to three* geographic divisions you prefer or indicate that you do not have a preference. You will also have an opportunity to explain your selection.
- **Setting preference.** You will be asked to indicate a degree of preference for an urban or rural setting or indicate that you do not have a preference. You will also have an opportunity to explain your preference or lack of preference.

What will be shared with programs?

Responses to the geographic preferences section will be shared with the participating programs to which you apply across all specialties except **Emergency Medicine** and **Obstetrics and Gynecology**.

The following information will be shared with programs that view this section.

For geographic division preference:

- If you indicate a preference for a division, your preference for that division and corresponding essay will be shared *only with programs in that division*. Your preference for that division will *not* be shared with programs outside that division.
- If you indicate “I do not have a division preference,” this selection and corresponding essay will be shared with *all programs*.
- If you do not respond to the question, no division preference information will be shared with any programs.

For setting preference, if you indicate a preference or lack of preference for setting, your preference (or lack of preference) and corresponding essay will be shared with *all programs*.

Tips for Completing This Section

- ✓ The geographic division preferences question uses nine U.S. geographic divisions identified by the U.S. Census Bureau. Please refer to the appendix to ensure that you know which U.S. Census division includes the states you prefer.
- ✓ If you have no preference for the geographic division where you receive residency training, you should select “I do not have a division preference” and explain why you do not have a preference. Programs understand that other factors and program characteristics outweigh a geographic preference for some applicants.
- ✓ If you have no preference for a rural or urban setting, select “no preference” on the rating scale.

CONSIDER THESE APPLICANT DATA FROM THE 2022 ERAS CYCLE:

- Approximately half of applicants indicated a preference for three divisions.
- Approximately one third of applicants indicated no division preference.
- Most applicants (67%) included a short essay to describe their geographic preference.

Program Signals

What are program signals?

Program signals offer applicants the opportunity to express interest in a residency program at the time of application. Program signals are intended to be used by programs as one of many data points in deciding whom to invite to interview.

Applicants will be asked to send signals for *each* participating specialty to which they intend to apply. The number of available signals varies by specialty. Specialties determined the number of signals based on their goals for signaling, the number of programs, and the average number of applications submitted in their specialty. See the appendix for the number of signals available by specialty.

What will be shared with programs?

Participating programs to which you apply will only see your signal if you signal their program. Programs will see no program signal information if you do not signal their program or do not respond to the program signaling question.

Tips for Completing This Section

- ✓ Review the list of participating programs before you enter the supplemental application. The list of participating programs will be available on the supplemental application website in early July.
- ✓ When deciding where to signal, consider the strength of your application, your ultimate career goals, and your personal circumstances with the relative competitiveness, mission, structure, curriculum, and goals of the programs to which you apply. Work with your advisors, faculty, and resident mentors as you decide where to signal.
- ✓ The following resources may be helpful to you as you consider where to signal:
 - [Residency Explorer™ tool](#)
 - [Results of the 2021 NRMP Program Director Survey](#)
 - [Program listings in the MyERAS application](#)
 - [Residency Preference Exercise](#)
- ✓ Do not select the same program more than once within a specialty — programs will only see whether or not you sent them a signal. Selecting the same program twice will not affect the information seen by programs.
- ✓ Specialties have different policies for signaling home programs or programs in which you completed an in person clinical sub-internship or away rotation. Please refer to the appendix for specialty-specific guidance.

CONSIDER THESE DATA FROM THE 2022 ERAS CYCLE:

- A majority of applicants used all of the signals provided for each specialty.
- Applicants considered the following factors when selecting programs to signal:
 - Alignment of program strengths with career interests (67%).
 - Location of program/geographic preference (66%).
 - Strength of the program's clinical training (54%).
 - Program reputation/prestige (45%).
 - Program culture/resident camaraderie (42%).
 - Strength of program's research training (25%).
 - Advice from faculty or resident mentors (21%).

How Programs Use the Supplemental Application

Information from the supplemental application is one of many sources of data that programs may use in their selection processes. The AAMC advises programs to consider these data in the context of the complete application and to use these data as a “plus factor” rather than to screen out applicants, especially as they are learning about the value of the information during the pilot years.

The AAMC surveyed participating programs across the three participating specialties (Dermatology, General Surgery, and Internal Medicine) to learn how they used information from the supplemental application during the 2022 application cycle. A complete summary of the program director survey by specialty is available on the [supplemental ERAS application website](#).

Past Experiences

Here's how programs may use information from the past experiences section:

- For the 2023 application cycle, information from the past experiences section will be reported in the Program Director Work Station (PDWS) along with other MyERAS application information; however, programs will not be able to filter using these data.
- Programs will use information from the past experiences section to understand what you're passionate about, how your experiences and interests align with program goals, and your level of self-reflection. Based on feedback from focus groups from the first year of the pilot, some programs may place a low weight on information from the meaningful experiences section in making selection decisions, while others may find it very helpful.
- Programs are seeking a variety of applicants, not one type of applicant. They are trying to build a well-rounded cohort of residents, which includes applicants who are passionate about different areas and have complementary characteristics.
- Some programs will use the impactful life experience essay to provide additional context to your application.

Geographic Preferences and Program Signals

Here's how programs may use information from the geographic preferences and program signals sections:

- For the 2023 application cycle, geographic preferences and program signals will be reported in the PDWS. Programs will be able to filter using program signals and geographic division preferences but not setting preferences.
- Based on survey responses and focus group feedback from the first year of the pilot, participating programs are likely to use geographic preferences and program signals in their selection processes. Some programs may give priority to applicants with a preference for their division or who signaled them. However, survey results showed that most programs considered geographic preferences and program signals in the context of the full application rather than in isolation.
- In the first year of the pilot, a majority of programs that responded to the survey reported using geographic preferences (over 70%) and program signals (over 80%). Across specialties, these programs reported using signals in the following ways (ranges reflect variation across specialties):

HOW DOES PROGRAM SIGNALING AFFECT INTERVIEW OFFERS?

- During the 2022 cycle, on average, applicants who sent a program signal had a higher probability of being invited to interview by Dermatology, General Surgery, and Internal Medicine (Categorical) programs than those who did not send a signal.
- However, programs used signals differently. At some programs, sending a signal resulted in a higher probability of interview invitation and at others it had little effect.
- As such, sending a program signal generally increased the likelihood of an interview invitation but did not guarantee an interview invitation.

- As part of a holistic process to decide whom to invite to interview (88% to 96%).
- As a tie-breaker in deciding whom to invite to interview (84% to 94%).
- To prepare for interviews or stimulate questions during the interview (44% to 65%).
- More than half of programs shared that geographic preferences information, program signals, or both helped them to identify applicants whom they would have otherwise overlooked.

If you have questions about how a participating program is using these data in the ERAS 2023 cycle, please contact the participating program directly.

Contact ERAS Client and Technical Support Team

SuppERASApp@aamc.org

202-862-6264

Monday-Friday 8 a.m.-6 p.m. ET

Appendix: Supplemental ERAS Application Questions

Past Experiences Questions

Five Meaningful Experiences

| Question Topic | Response Options and Related Descriptions |
|---|---|
| Position Title (up to 100 characters, including spaces) | <p>If you use an experience also listed in your MyERAS application, use the same position title listed there.</p> <p><i>Do not use bullets and use English (United States) characters only.</i></p> |
| Organization Name (up to 100 characters, including spaces) | <p>If you use an experience also listed in your MyERAS application, use the same organization or institution name listed there.</p> <p><i>Do not use bullets and use English (United States) characters only.</i></p> |
| Start Date | <p>Approximate date on which the experience started.</p> |
| End Date, Ongoing | <p>Approximate date on which the experience ended.</p> <p>If you have not yet completed the experience, please leave the End Date blank and select “Yes” in the box under <i>Ongoing</i>.</p> |
| Frequency of Participation | <ul style="list-style-type: none"> • One time (not recurring) • Daily (recurring) — multiple days per week during the time frame noted (e.g., full-time work) • Weekly (recurring) — once or twice per week (e.g., volunteering at a soup kitchen each weekend, leading a weekly tutoring session) • Monthly (recurring) — once or twice per month (e.g., volunteering at a homeless shelter once a month) • Quarterly (recurring) — three or four times per year (e.g., volunteering at a community center during holiday events) • Annually (recurring) — once per year (e.g., an annual half-marathon for charity) |
| Setting | <ul style="list-style-type: none"> • Rural: population of 2,500 or less; sparsely populated • Urban: population of 50,000 or more; continuously built-up and densely populated |

| | |
|----------------------------------|--|
| <p>Experience Type</p> | <ul style="list-style-type: none"> • Education/training (includes clinical training such as clerkships, away rotations, sub-internships, structured observerships, etc.) • Military service • Professional organization (includes societies, associations, etc., at the local, regional, national, or international levels) • Other extracurricular activity, club, hobby (includes sports, music, theater, student government, etc.) • Research • Teaching/mentoring (includes paid teaching positions such as high school teacher as well as teaching assistant, tutor) • Volunteer/service/advocacy (includes unpaid experiences, service, advocacy) • Work (includes paid clinical, nonclinical, business, or entrepreneurial experiences) |
| <p>Primary Focus Area</p> | <p>Choose the <i>one</i> focus area that <i>best</i> describes the experience for you.</p> <p>Programs understand that an experience may relate to more than one focus area. Select the focus area that was <i>most important</i> to you about that experience. If no focus areas apply, please leave it blank.</p> <ul style="list-style-type: none"> • Basic science (e.g., scientific disciplines such as biology, chemistry, physics, and also behavioral and social sciences like psychology, cognitive science, economics, or political science) • Clinical/translational science (e.g., diagnostic and therapeutic interventions, development of drugs) • Community involvement/outreach (e.g., clothing or food drives, fundraising for public education, K-12 outreach, providing tutoring to homeless youth, and social work) • Customer service (e.g., positions in retail, restaurant, sales, hospitality, and technical support) • Health care administration (e.g., hospital administrators, clinical managers, financial managers, and patient advocates) • Improving access to health care (e.g., clinic work in underserved communities, organizing a vaccine or health screening for a community with limited access, providing medical or health care resources to homeless populations) • Medical education (e.g., formal instruction to others, tutoring medical students, developing health-related curriculum, conducting research within admissions, student affairs, or educational interventions) • Music/athletics/art (e.g., long-term commitments in musical instruments or singing, sports, theater/acting, painting, or drawing, and computer graphics) • Promoting wellness (e.g., developing a wellness program, formal coaching, or mentoring others to promote well-being) • Public health (e.g., biostatistics, epidemiology, global health, and nutrition) |

| | |
|----------------------------------|---|
| | <ul style="list-style-type: none"> • Quality improvement (e.g., patient safety like implementing a plan to reduce secondary infections in patients) • Social justice/advocacy (e.g., diversity, equity, and inclusion [DEI] work, worker unions, combating biased beliefs or discriminatory policies, and increasing access to educational opportunities) • Technology (e.g., engineering or software innovations, biomedical devices, electronic health records [EHRs], and mobile or other software applications) |
| <p>Key Characteristic</p> | <p>Choose the <i>most important</i> characteristic that you demonstrated or developed during the experience.</p> <p>Programs understand that more than one key characteristic may apply to your experience. Select the one characteristic that best reflects what you demonstrated or developed during this experience. If no characteristics apply, please leave it blank.</p> <ul style="list-style-type: none"> • Communication • Critical Thinking and Problem Solving • Cultural Humility and Awareness • Empathy and Compassion • Ethical Responsibility • Ingenuity and Innovation • Reliability and Dependability • Resilience and Adaptability • Self-Reflection and Improvement • Teamwork and Leadership |

Meaningful Experiences Description

| Question | Response Options and Related Descriptions |
|--|--|
| <p>Why the Experience Was Meaningful (up to 300 characters, including spaces)</p> | <p>Reflect on the experience and explain:</p> <ul style="list-style-type: none"> - Why the experience was meaningful and how it influenced you. - Weave in the focus area or characteristic you tagged. <p>This description should <i>not</i> describe <i>what</i> you did in the experience or simply list a set of skills that you developed or demonstrated during the experience.</p> <p><i>Do not use bullets and use English (United States) characters only.</i></p> |

Other Impactful Experiences Question

| Question | Response Options and Related Descriptions |
|--|--|
| <p>Other Impactful Experiences (up to 750 characters, including spaces)</p> | <p>Program directors are interested in learning more about other impactful experiences applicants may have encountered or overcome on their journey to residency. This question is designed to give applicants the opportunity to provide additional information about their background or life experiences that is not captured elsewhere in the application (e.g., information written in this question should not be the same as what is included in the personal statement).</p> <p>Please describe any challenges or hardships that influenced your journey to residency. This could include experiences related to family background, financial background, community setting, educational experiences, and/or general life experiences.</p> <p>The experiences described can be from any point in your lifetime; they do not have to be during medical school or related to the field of medicine.</p> <p>Below is a list of some relevant types of impactful experiences that could be discussed, as well as <i>some</i> examples of each:</p> <ul style="list-style-type: none"> ○ Family background (e.g., first generation to graduate college) ○ Financial background (e.g., low-income family, worked to support family growing up, work-study to pay for college) ○ Community setting (e.g., food scarcity, poverty or crime rate, lack of access to medical care) ○ Educational experiences (e.g., limited educational opportunities, limited access to advisors or mentors) ○ Other general life circumstances (e.g., loss of a family member, serving as a caregiver while working or in school) <p>Programs do not expect all applicants to complete this question. This question is intended for applicants who have other impactful experiences like those described above.</p> <p><i>Do not use bullets and use English (United States) characters only.</i></p> |

Geographic Preferences

Division Preferences

| Question Topic | Response Options and Related Descriptions |
|--|--|
| <p>Indicate your preference (or lack of preference) for up to three U.S. Census divisions</p> | <ul style="list-style-type: none"> • Pacific: AK, CA, HI, OR, WA • Mountain: AZ, CO, ID, MT, NM, NV, UT, WY • West North Central: IA, KS, MN, MO, NE, ND, SD • East North Central: IL, IN, MI, OH, WI • West South Central: AR, LA, OK, TX • East South Central: AL, KY, MS, TN • South Atlantic: DC, DE, FL, GA, MD, NC, PR, SC, VA, WV • Middle Atlantic: NJ, NY, PA • New England: CT, ME, MA, NH, RI, VT • I do not have a division preference |
| <p>Please describe your preference for each division you select, if applicable (up to 300 characters, including spaces)</p> | <p>A separate text box will be available for each division you select.</p> <p>Use this space to explain why you prefer that division. This response will be shared only with programs in that division.</p> <p><i>Do not use bullets and use English (United States) characters only.</i></p> |
| <p>Please describe your lack of division preference, if applicable (up to 300 characters, including spaces)</p> | <p>A separate textbox will be available if you select “<i>I do not have a division preference.</i>”</p> <p>Use the space to explain why you have no division preference. This response will be shared with all programs.</p> <p><i>Do not use bullets and use English (United States) characters only.</i></p> |

Setting Preferences

| Question Topic | Response Options and Related Descriptions |
|--|--|
| <p>Indicate your preference (or lack of preference) for urban or rural settings</p> | <ul style="list-style-type: none"> • Strong preference for rural • Slight preference for rural • No preference • Slight preference for urban • Strong preference for urban <p>Definitions of settings:</p> <ul style="list-style-type: none"> • Rural: population of 2,500 or less; sparsely populated area • Urban: population of 50,000 or more; continuously built-up and densely populated area |

| Question Topic | Response Options and Related Descriptions |
|---|---|
| Please describe your setting preference (or lack of preference) (up to 300 characters, including spaces) | <p>Explain your preference (or lack of preference) for urban or rural settings. This response will be shared with all programs.</p> <p><i>Do not use bullets and use English (United States) characters only.</i></p> |

Program Signaling Questions

In the Program Signaling section, you will be asked to:

- Select the specialties to which you intend to apply.
- For each specialty selected, select the participating programs to signal.
 - Programs will be listed in alphabetical order and will start with their ACGME ID.
 - Programs will see if you signaled them or, in **Obstetrics and Gynecology**, whether you selected their program as a Gold signal or a Silver signal.

The following table displays all participating specialties, the number of signals offered by each specialty, and any instructions specific to the specialty.

| Specialty | Max # of Signals | Signal Home Institution? | Signal In-Person Clinical Sub-Internship or Away Rotations? | Specialty Specific Information |
|---|------------------|--|---|---|
| Adult Neurology | 3 | Yes | Yes | |
| Anesthesiology | 5 | Yes | Yes | |
| Dermatology | 3 | No | No | |
| Diagnostic Radiology and Interventional Radiology | 6 | Yes, unless the home program tells you not to. | Yes | These two specialties combined their signals due to the very high overlap in applicants, with the majority of these overlapping applicants applying to both specialties at the same institution. Applicants will be able to signal a total of 6 programs across both specialties. |
| Emergency Medicine | 5 | No | No | For further guidance, visit cordem.org/resources/preference-program-signaling . |

| | | | | |
|---|----|--|-----|---|
| General Surgery | 5 | Yes | Yes | |
| Internal Medicine (Categorical) | 7 | No | No | For further guidance, visit im.org/home . |
| Internal Medicine/ Psychiatry | 2 | Yes | Yes | |
| Neurological Surgery | 8 | Yes | Yes | |
| Obstetrics and Gynecology | 18 | Yes | Yes | 3 Gold signals (highest interest) 15 Silver signals (very high interest) For further guidance, visit apgo.org/page/rrraplicant . |
| Orthopedic Surgery | 30 | Yes | Yes | For further guidance, visit aoassn.org/ume-gme-resources and orin.aoassn.org . |
| Pediatrics | 5 | Yes, unless the home program tells you not to. | Yes | |
| Physical Medicine and Rehabilitation | 4 | Yes | Yes | |
| Psychiatry | 5 | Yes, unless the home program tells you not to. | Yes | |
| Public Health and General Preventive Medicine | 3 | Yes | Yes | |