



LETTER TO OUR FAMILY MEDICINE COMMUNITY MAY 29, 2020

RE: COVID-19 IMPACTS TO 2020-2021 RESIDENCY INTERVIEW PROCESS

The global COVID-19 pandemic will provide unique challenges to both applicants and residency programs in the process of residency selection.

The Coalition for Physician Accountability's Work Group on Medical Students in the Class of 2021 Moving Across Institutions for Post Graduate Training (The Coalition) has made [recommendations](#) to assist students and programs in navigating this challenging time.

We (the undersigned) have considered these recommendations for their applicability to the 2020-21 residency interview process and the 2021 match for family medicine. Primary considerations include: the health of patients, communities, learners, and the healthcare workforce; a deliberately equitable approach to providing opportunities for students and consideration of candidates; minimizing uncertainty and confusion; maximizing transparency; and the value of a shared response from the "family" of Family Medicine. We concur with *The Coalition* that "this guidance is intended to add to, but not supersede, the independent judgement of a medical school, sponsoring institution, or residency program."

We agree with *The Coalition's* recommendations with additions applicable to family medicine:

1. Away rotations should be discouraged for the 2020-2021 academic year, except under the following circumstances:
 - a. Learners who have an interest in family medicine and do not have access to a clinical experience with a residency program in family medicine in their school's system.
 - b. Learners for whom an away rotation is required for graduation or accreditation requirements.
 - c. In addition, family medicine residency programs should consider their away rotation policy to accommodate students from institutions or hometowns geographically close to their programs whose medical schools do not offer adequate family medicine clinical experiences to meet student demand.
2. Family medicine departments at medical schools and family medicine residency programs should make deliberate efforts to provide students opportunities for career exploration in family medicine and should consider implementing relevant recommendations captured in [The Coalition's Compendium of Resources](#) for alternate ways to accomplish the benefits of an away rotation in family medicine.
3. Programs should exclusively conduct virtual interviews and virtual visits for all applicants, including local applicants, rather than in-person interviews. Care should be taken toward holistic application review and a consistent interview process for candidates to mitigate unconscious bias. We also encourage programs to work closely with their institutional IT officials to put

systems in place to address the access to and stability of technology to minimize technology challenges for candidates.

4. We encourage residency programs to have flexibility in consideration of candidates whose licensing exams have been delayed and/or whose number of letters of recommendation from family physicians is limited due to rotation restrictions. Programs should avoid rigid screening of applicants on these criteria and should provide opportunities for candidates to express the impact of the pandemic on their application components. Medical schools are encouraged to include explanations of the effects of the COVID-19 pandemic upon the clinical academic schedules in students' MSPEs.
5. We encourage residency programs to update their own websites and their listings in external residency directories to ensure transparency related to the 2020-21 interview process and to highlight their distinguishing program characteristics. Websites and residency directories should be designed to assist candidates in choosing to apply only to programs that are the "right fit" for them.
6. We encourage medical schools and residency programs to explore ways to use technology to provide students with virtual non-rotational family medicine experiences to increase students' understanding of family medicine.

Family medicine has the opportunity to embrace these significant changes and show our adaptability and resilience. We hope that this guidance will help future family physicians and family medicine residency programs have the best possible match outcome in this unprecedented time.



John A. Cullen, MD, FAAFP
Board Chair, American Academy of Family
Physicians



Steven R. Brown, MD, FAAFP
President, Association of Family Medicine
Residency Directors



Robert C. DeLuca, DO, FACOFP dist.
President, American College of Osteopathic
Family Physicians



Deborah S. Clements, MD, FAAFP
Chair, Council of Academic Family Medicine



R. Allen Perkins, MD, MPH
President, Association of Departments of Family
Medicine



Jack Westfall, MD, MPH
President, NAPCRG



Tricia Elliott, MD
President, Society of Teachers of Family Medicine