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Supplemental ERAS® Application: Guide for Residency Programs

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Contents

Overview	2
Introduction.....	2
Reporting Timeline	2
Appropriate Use	2
Past Experiences	3
What is the Past Experiences section?.....	3
What will be shared with programs?	3
Guidelines for Appropriate Use of Past Experiences Information	3
Geographic Information	4
What is the Geographic Information section?	4
What will be shared with programs?	4
Guidelines for Appropriate Use of Geographic Preference Information	4
Preference Signaling	5
What is Preference Signaling?.....	5
What will be shared with programs?	5
Guidelines for Appropriate Use of Preference Signaling Information	6

Overview

Introduction

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

The supplemental application is separate from the standard MyERAS application and consists of four sections:

- Past Experiences
- Geographic Information
- Preference Signaling
- Work Preferences (research only)

All sections and questions within the supplemental ERAS application are optional. Completing particular questions is not required to submit either the supplemental ERAS application or the main MyERAS application.

Reporting Timeline

Applicants who save or submit an application to one or more dermatology, internal medicine, or general surgery programs will receive an invitation to complete the supplemental ERAS application. **An applicant may only complete the supplemental application one time.** Applicant responses will be shared with programs according to the following schedule.

	Applicant submits the supplemental ERAS application	Applications and signals provided to participating programs
Window 1	Sept. 1-19, 2021, by 11:59 p.m. ET	Sept. 29, 2021, at 9 a.m. ET
Window 2	Sept. 20-30, 2021, by 11:59 p.m. ET	Oct. 6, 2021, at 9 a.m. ET

Data for applicants who complete the supplemental application and apply to a participating program after October 6 will be updated weekly.

The supplemental application is new this year and was released on a short timeline. Applicants may have limited access to advising or other resources to support their preparation. **Do not interpret an applicant's submission timing (within window 1 or window 2) as a reflection of their level of interest in your program.**

Appropriate Use

The supplemental ERAS application is new this year. Questions were reviewed by a sample of program directors, student affairs representatives, and current residents. However, we have not yet studied how applicants might respond to questions or gathered data on whether these questions bring value to programs. As such, we recommend that programs use these data with caution.

In order to stay aligned with the National Resident Matching Program®'s (NRMP) Match Participation Agreement, applicant participation in the supplemental ERAS application must be optional. Applicants have the right to opt out of the supplemental ERAS application or to skip any questions or sections on the application.

To ensure that you and your selection team are utilizing responses on the supplemental application appropriately, we encourage you to do the following:

- **Provide training to reviewers** to ensure a fair review of all applicants and to ensure that comparisons between applicants with different information do not introduce bias.
- **Do not overweight these data or use them to screen out applicants.** Rather, use these data in the context of other application information and consider them as a “plus factor.”
- **Be transparent with your applicants about how the program will use information from the supplemental ERAS application.**

Past Experiences

What is the Past Experiences section?

The past experiences section is designed to showcase the applicant and their journey to residency by highlighting experiences the applicant identifies as particularly meaningful, or impactful experiences they overcame on their journey to residency. Applicant participation in the past experiences section is optional.

- First, applicants may enter **up to five experiences that have been most important** to their development and career goals. It is not required nor expected that they enter five experiences. These experiences could have occurred prior to or during medical school, may reflect a variety of experience types (e.g., work, research, volunteer), and may include clinical experiences.
- Second, applicants are asked a series of questions for each experience that highlight key characteristics of the experience. For **medical/health care, volunteer, and research experiences**, applicants are asked to provide additional details through a series of questions.
- Third, applicants are asked to briefly **describe why each experience was most meaningful** (i.e., how the experience was instrumental on their journey to residency).
- Finally, applicants will have an opportunity to highlight any **other impactful experiences**, if applicable, that affected their journey to residency. These experiences could be related to family background, financial background, community setting, education, or general life. Programs should not expect all applicants to respond to this question.

What will be shared with programs?

Applicants' full responses to these questions will be shared directly with programs via the supplemental ERAS application dashboard.

Guidelines for Appropriate Use of Past Experiences Information

- 1) **Do not assume an applicant's five experiences represent their breadth of experience or a full list of publications and presentations.** Past Experiences questions are intended to help you better understand each applicant and consider the extent to which they align with your program's mission, values, and objectives. Use this information, along with the complete set of experiences in the Program Director's WorkStation (PDWS), to evaluate qualifications and suitability for your program.
- 2) **Do not overinterpret missing responses or use missing responses to screen out applicants.** Some applicants may highlight fewer than five experiences as they were given the opportunity to enter *up to* five experiences. In addition, follow-up questions differ by experience type, so it is unlikely that each applicant will be presented with every follow-up question. For example, an applicant will be asked for the focus area

or population for their experience only if they identified a volunteer experience as one of their Past Experiences.

- 3) **Some applicants will not describe other impactful life experiences.** Programs should not expect all applicants to respond to this question. The question was intended for applicants who have had impactful life experiences or who have overcome challenges – such as family background, financial background, community setting, education, or general life – that affected their journey to residency and who want to share those experiences. It is reasonable that some applicants may not wish to divulge such sensitive information.

Geographic Information

What is the Geographic Information section?

The geographic information section is designed to give applicants who wish to do so the opportunity to describe their interest in particular geographic regions (based on U.S. Census divisions) or urban or rural settings. Applicant participation in the geographic information section is optional.

What will be shared with programs?

Geographic information will be shared with participating programs in dermatology and internal medicine, as described below. Geographic information will NOT be shared with general surgery programs.

For dermatology and internal medicine, the following information will be shared:

For geographic region preference:

Applicant indicates	Program sees
Preference for your program’s region	Preference and short essay shared with your program and other programs in this region only
Preference for another region	“No information”
I do not have a region preference	“No preference” and short essay shared with all programs
I do not wish to communicate a region preference	No information

For urban or rural setting preference:

- If an applicant indicates a preference for setting, their setting preference and any additional information about their preference for setting will be shared with all programs.

Guidelines for Appropriate Use of Geographic Preference Information

- 1) **Consistent with the NRMP® Match Participation Agreement, the following actions are prohibited:**
- Asking an applicant whether they identified any geographic preferences as part of the supplemental application
 - Disclosing the identification of an applicant who indicated a preference for your geographic region

- c. Asking an applicant what other geographic regions they preferred, if any
 - d. Asking an applicant what other programs they applied to within your geographic regions
- 2) **Geographic preference information is designed to be used as one of many data points in deciding whom to invite to interview only.** Applicants' geographic preference, or lack thereof, may change after they submit the supplemental ERAS application in September due to many factors, including changes in life circumstances, experiences on interview day, learning more about the program or area of the country, etc.
 - 3) **Do not overinterpret missing responses or use missing responses to screen out applicants.** Applicants whose geographic preference is missing may have selected "Do Not Wish to Indicate" or they may have signaled another U.S. Census division. Do not assume that these applicants are not genuinely interested in your program. The geographic information section is new to applicants, advisors, and programs this year. Some may have had limited access to advising or other resources to support their preparation and may have been afraid to respond to this question. Screening applicants out based on this response may cause you to miss out on applicants who could be successful in your program.
 - 4) **Some applicants may genuinely have no preference for region.** Applicants consider many factors and program characteristics when deciding where to apply for residency. Some applicants may value other factors over geography, such as research opportunities, a particular specialty, or programs with access to other specific opportunities. In such instances, they are interested in programs in any part of the country that possess those characteristics. If an applicant indicates no preference, this should not be interpreted as them not being genuine.
 - 5) **Geographic preferences should be used as a "plus factor," not a screening tool.** Applicants should be evaluated in the context of their whole application. A preference for a geographic region is one piece, out of many, in the application and thus should not be given undue weight. Programs that put too much weight on any component of the application may miss the opportunity to identify applicants who could be successful in their program.

Note. The geographic information section is new to applicants, advisors, and programs this year. Questions were reviewed by a sample of program directors, student affairs representatives, and current residents. However, we have not yet studied how applicants might respond to questions in this section or gathered data on whether these questions bring value to programs; this will be studied in the evaluation of the supplemental application.

Preference Signaling

What is Preference Signaling?

Preference signaling refers to a process in which applicants express interest in a residency program at the time of application. Applicants may select up to 3 or 5 programs to signal (depending on specialty) for each specialty in which they are planning to apply. Applicant participation in the preference signaling section is optional.

What will be shared with programs?

An applicant's preference signals will be provided to programs that are participating in the supplemental ERAS application and to which the applicant applied. Programs will not see whether an applicant participated in signaling, they will only see whether an applicant signaled their program. A ranking of signals or information about other programs signaled will not be provided to programs.

Guidelines for Appropriate Use of Preference Signaling Information

1) Signaling Code of Conduct for programs:

Consistent with the NRMP Match Participation Agreement, the following actions are prohibited:

- (1) Disclosing the identification of an applicant who has sent your program a signal.
- (2) Asking an applicant whether they are participating in signaling, or to which programs they have sent signals.

To prevent undue pressure on applicants or unhelpful comparisons between programs, the AAMC prohibits the disclosure of the number of signals a program has received.

Programs that violate other aspects of these signaling rules may jeopardize their ability to participate in future signaling programs.

2) Applicants are told NOT to signal the program(s) affiliated with their medical school (i.e., home program) or any program at which they completed an in-person clinical sub-internship or away rotations. Programs should expect that all students will have a strong interest in their home program or places they completed an in-person clinical sub-internship or away rotation.

Applicants have been told they could consider signaling:

- Their previous home program (applicable to those that are reapplying this year in that specialty, but please consult your previous home program)
- a program that they have attended a virtual sub-internship
- a program that they were supposed to (but didn't) attend a sub-internship as a result of COVID
- a program that they did research with ONLY

3) Signals are designed for use in the interview offer phase of the application review only. Applicants' interest in programs may change after they submit their initial signals in September due to many factors, including applicants' experiences on interview day.

4) Signals should be used as a "plus factor," not a screening tool. Applicants should be evaluated in the context of their whole application. A signal is but one piece, out of many, in the application and thus should not be given undue weight. Programs that put too much weight on any component of the application may miss the opportunity to identify applicants who could be successful in their program.