Gambling on Greatness: Practices in General Surgery Resident Selection

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Background

- Given the time that both programs and trainees invest, resident selection is high stakes.
- Organizational psychology provides recommended practices for evidence-based application review and interviewing.
- However, utilization of evidence-based selection practices by general surgery programs remains unknown.

Methods

- Conducted semi-structured interviews and focus groups with faculty and residents from 15 general surgery programs in 2019-2020.
- Transcripts were coded deductively based on organizational psychology evidence-based practices:
  - For application review:
    - Pre-specified screening criteria
    - Diversification of definitions of excellence
  - For interview practices:
    - Structured questions
    - Interviewer training
    - Clear assessment criteria
  - Additional themes were developed through inductive coding.

Results

- Interviews highlighted both methods incorporated by early adopters of evidence-based practices and barriers faced by late/non-adopters.

  Green = Early Adopters
  Grey = Late Adopters/Non-Adopters

Assessments of Value Alignment: “I have created...an evaluation sheet that asks them to review each application looking for certain things...that have nothing to do with scores...like...their leadership capacity...research, altruism, and teamwork...It’s been successful in that we probably have interviewed more women than we have in the last 5 years. Same for underrepresented in medicine candidates.” – PD

Numeric Criteria are the Only Recognized Filter: “Our only filter is a step score of 220, which we lowered from a much higher score. And that usually gets us from like 1500 to 700 [applicants]....We all recognize that [the] board score doesn’t correlate with performance at all, but it’s literally the only filter that’s in there.” – PD

Structured Questions: During interviews, some programs used scripted, behavior-based questions, as espoused by organizational psychologists, while others preferred independent interviewer input on questions.

Questions Probing Life Experience: “I asked...what was the greatest adversity you’ve ever faced in your life and how you dealt with it...That’s a fairly standard interview question, but I was flabbergasted at the...answers I got from that...like...the worst thing that’s ever happened to you is your cat died...you have not been tested.” – Faculty

Free-Form Interviews with Individual Interviewer Preferences: “They’re allowed to also ask their own questions. People pick up on their own things. That’s why they ask the same things year after year...I think one person always asks someone...current events question like, ‘Who would you want to have dinner with and why?’...People have their own ways of judging people, I think. There’s room for that in the way that we do the interview.” – PD

Results Cont.

- Interviewer Training: Ranged from nothing, due to limited resources, to mandatory implicit bias trainings.

  Implicit Bias Training: “I have done some coaching on making sure...interviewers...are aware of certain established, unconscious biases, like the parenthood bias where female parents are often seen as too busy or distracted and male parents are seen as good multitaskers...It’s an unfair bias in favor of men that way...So we don’t talk about parenthood status.” – APD

  Lack of Time and/or Skills: “We don’t train our faculty in how to do it...No one has time or...the skills to do it. You can probably bring someone in to do the training, but we don’t train them.” – Faculty

Assessment Criteria: Similarly varied from explicit objectives to subjective interview impressions ("gestalt").

Shared Vision of Success: “We were explicit in our recruitment efforts that we were not interested in training general surgeons...We intentionally recruit people who wanted to have academic preparation as part of their training experience.” – Faculty

Subjective Sense of “Fit”: “I think it’s all personality...There’s people that you meet, and you’re like, ‘I don’t care what you look [like] on paper - you just bug me.’” – Faculty

Conclusion

- There are wide variations in practices of resident selection among general surgery programs.
- Adaptation of evidence-based practices to surgery may provide programs with resources to reduce bias and decrease attrition.

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