American Academy of Neurology
Statement on 2024–2025 Residency/Fellowship Application Cycle
July 2024

BACKGROUND

The COVID-19 pandemic necessitated a shift to a virtual interview format starting with the 2020–2021 residency/fellowship application cycle. Although a very different way of getting to know our applicants, these past few years of virtual interviews have taught us that the virtual format provides a significant cost savings for applicants, minimizes time away from clinical and research activities, and reduces the impact of interviews on applicants' families.

The data from the virtual interview seasons confirm that across all specialties, Match success rates for candidates in 2024 were comparable to that of years preceding the pandemic.[1]

AAN CONSENSUS STATEMENT REGARDING VIRTUAL INTERVIEWS

Although initially introduced to maintain safety during the pandemic, due to other benefits such as equity and reduction of financial burden, national organizations and medical institutions continue to recommend a virtual recruitment format in the upcoming cycle. Therefore, the American Academy of Neurology advises that all Adult Neurology and Child Neurology residency/fellowship programs should commit to virtual interviews for all applicants in place of in-person interviews for the 2024–2025 application cycle.

This recommendation reflects a consensus after consultation with members of the AAN's Education Committee; Academic Neurology Committee; Diversity, Equity, Inclusion Committee; Graduate Education Subcommittee; Undergraduate Education Subcommittee; Pipeline Subcommittee; Consortium of Neurology Program Directors; Consortium of Neurology Clerkship Directors; and Consortium of Neurology Residents and Fellows.

The goals of these recommendations are to:
1. Align with [Association of American Medical Colleges (AAMC) and institutional recommendations](#) to maintain a virtual format for 2024–2025 residency and fellowship interviews.
2. Promote an equitable interview process for all candidates.
3. Provide specific guidance to programs and applicants leading into the recruitment season.

ADDITIONAL ADVICE FOR PROGRAMS

1. Application Review
    a. Complete/maintain a holistic review of applications recognizing that access to different clinical, research, extracurricular, work, and other experiences vary.
    b. We suggest that all ranking committee members undergo unconscious bias training.
    c. Maintain flexibility with requirement of neurology-specific letters of recommendation for screening, acknowledging that applicants may not have had access to neurology rotations prior to applying.

2. Electronic Residency Application Service (ERAS) Application
    a. For the 2024–2025 application cycle, both Adult and Child Neurology specialty groups opted to use Program Signaling. Subsequently, each individual Adult and Child Neurology Residency Program either "opted in" or "opted out" for program signaling.
    b. Each Adult Neurology candidate is allowed to send eight signals to programs in which they are interested. Each Child Neurology candidate is allowed to send three signals to programs in which they are interested across all available program tracks within Child Neurology & Neurodevelopmental Disabilities—whether Advanced, Categorical, or Reserved. Programs will be made aware that a candidate has sent them a signal. A signal from a candidate should not be used as the exclusive reason to invite them for an interview just as a lack of a signal from a candidate should not necessarily disqualify them from receiving an interview.
    c. Candidates do not have to state a geographic preference if they do not have a preference. If a candidate does not indicate a geographic preference, this should not negatively impact their application.
    d. We recommend that programs communicate to their internal applicants whether a signal needs to be used for the home program. We encourage candidates with a home institution to communicate with their home program to find out if a signal should be used. In the absence of this communication, a signal should be used for the home program. For additional information regarding the MyERAS® application and program signaling, we recommend visiting the AAMC FAQ page.

3. Away Rotations
    a. Away rotations should not be mandatory.
    b. Some institutions are limiting away rotations to students who are not offered similar/comparable experiences at their home institution.

4. Interview Day
    a. Provide a precise schedule to applicants in advance.
    b. Expect technical limitations (e.g. video quality) and do not penalize applicants for those technological limitations.
    c. Provide a welcoming atmosphere for all applicants, regardless of race, sex, sexual orientation, gender identity/expression, disability status, national origin, or medical school.
    d. Consider limiting the interview duration to one day (inclusive of one evening either before or after the interview day to socialize with residents).
    e. Be mindful of time zone differences when scheduling interviews.

5. Second Looks
    a. Although we strongly recommend that the 2024–2025 application season adhere to a virtual interview structure for all programs, we are aware that some programs and applicants feel that a subsequent in-person visit (second look) to the institution and surrounding area is crucial for applicant rank decisions. If a program decides to allow in-person visits, these should be for the benefit of the applicant only and designed in a way as to avoid impacting the programs' ranking of the applicants (with rare exceptions—unprofessional behavior by the applicant, for example).
    b. Be aware that second look visits financially impact applicants and increase the administrative burden to programs. "Programs are encouraged not to require or imply that second visits are used in determining applicant placement on a rank order list."[2]
    c. Programs offering in-person second-look visits should attempt to offer comparable virtual experiences for applicants who wish to participate but who are not able to or prefer not to travel.

6. Post-interview Communication
    a. In agreement with the NRMP Code of Conduct regarding post-interview communication: "Program directors and other recruitment team members must ensure all information related to the program's mission, aims, and eligibility are clearly communicated to applicants. However, applicants may not have adequate time to obtain the information needed to make informed decisions about ranking and may wish to clarify information following interviews. The recruitment team may exchange clarifying information with applicants following the interview but must not solicit or require post-interview communication for the purposes of influencing applicants' ranking preferences. Program directors and all members of the recruitment team should take great care not to promote misleading communication to applicants about ranking intentions and preferences or inappropriately share private information (e.g., letters of recommendation) with outside parties." [2]
    b. Applicants should be made aware during the interview that post-interview communication is not expected from applicants.

7. Additional Recommendations Regarding Recruitment/Interviews
    a. If offering a virtual open house before interviews begin, attendance must be optional and should not be used as an indication of an applicant's interest.
    b. Allow a minimum of 72 hours for an applicant to respond to an interview invitation before releasing the spot to another applicant.
    c. Consider involving current residents/fellows in the interview process for the benefit of the applicants.
    d. Gifts to applicants are not required or necessary. Recognize that gifts to applicants can introduce bias and increase cost and administrative burden to programs.
    e. Do not record interviews.

ADVICE FOR APPLICANTS

1. Number of Applications: The number of programs to which an applicant applies is an important decision. Discussions should be conducted with each student considering reported data in the NRMP Charting Outcomes in the Match,[3, 4, 5] NRMP 2024 Main Residency Match Data[1], and AAMC Apply Smart for Residency[6] to explore the consequences of various applicant characteristics on the likelihood of matching and, therefore, on the individual need for number of programs applied to and ranked. Because each applicant's situation is unique, the number of programs applied to and ranked will vary on a case-by-case basis, with no guarantee of matching.

   Please see Appendix 1 for an analysis of neurology specific match data to assist in deciding on the number of applications to submit. Please note that this data is based on use of 3 program signals for adult neurology and that there may be changes in how applications are screened/selected based on the use of eight signals.

2. Pre-interview Preparation
   a. We recommend reviewing information available online about programs before your interview and attending open house webinars for programs that offer them.
   b. Programs are encouraged to allow at least 72 hours after issuing an interview invitation for an applicant to accept or decline the offer. Please respond to the interview invitation as soon as you are able. This allows another applicant an opportunity for an interview if you decide to decline the invitation.
   c. Review and abide by program-specific policies regarding interview cancelations when canceling an interview. If you decide to cancel an interview, do this with as much lead time as possible so that the spot can be offered to another applicant.
   d. Arrange for a secure internet connection on the day of your interview. For current medical students, your student affairs office may be able to help if needed.
   e. Be mindful of time zone differences when scheduling interviews.

3. The Interview Day
   a. Be present in the virtual space on time for the start of the interview day.
   b. Be yourself and have fun! The interview is an opportunity for program leadership, faculty, and residents to get to know you and vice versa.
   c. Come prepared with a few questions about the program based on your research before the interview.
   d. Do not record interviews.

4. Post-interview Communication and Second Looks
   a. Program directors and other recruitment team members are expected to follow the NRMP Match Code of Communication which states that, "The recruitment team may exchange clarifying information with applicants following the interview but must not solicit or require post-interview communication for the purposes of influencing applicants' ranking preferences. Program directors and all members of the recruitment team should take great care not to promote misleading communication to applicants about ranking intentions and preferences or inappropriately share private information (e.g., letters of recommendation) with outside parties."[2]

b. Applicants are not expected to engage in post-interview communication but may contact programs with specific questions.
c. If programs offer second look opportunities, these should be designed solely for the benefit of the applicant. Whether virtual or in person, applicants are not expected to participate in second look visits. In accordance with the NRMP Code of Conduct, "Programs should respect the burdens (e.g., financial, logistics) applicants experience during recruitment. Programs are encouraged not to require or imply that second visits are used in determining applicant placement on a rank order list."[2]

AUTHORS

Statement created by: Erica A. Schuyler, MD, FAAN, Virtual Recruitment Workgroup Leader; Rebecca E. Matthews, MD, Chair, Consortium of Neurology Program Directors; Stephen A. VanHaerents, MD, FAAN, Chair, Consortium of Neurology Clerkship Directors; Jorge Eduardo Patino Murillas, MD, Chair, Consortium of Neurology, Residents and Fellows; Diego Torres-Russotto, MD, FAAN, Undergraduate Education Subcommittee Member; Anh-Thu Ngo Vu, MD, MS, Pipeline Subcommittee Member; Aaron Lane Nelson, MD, FAAN, Child Neurologist; Divisha Raheja, MD, Graduate Education Subcommittee Member; and Joy Josephs Njiribeako, Student; Lucy Persaud, AAN Associate Director, Trainee Education.

CONTRIBUTORS

The following AAN groups were consulted and have contributed to the development of this consensus statement:

- Education Committee
- Academic Neurology Committee
- Diversity, Equity, Inclusion Committee
- Graduate Education Subcommittee
- Undergraduate Education Subcommittee

- Pipeline Subcommittee
- Consortium of Neurology Program Directors
- Consortium of Neurology Clerkship Directors
- Consortium of Neurology Residents and Fellows

CONTACT

Lucy Persaud, Associate Director, Trainee Education, at lpersaud@aan.com with any questions.

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2. National Resident Matching Program, Match Communication Code of Conduct. https://www.nrmp.org/communication-code-of-conduct/; Match Code of Conduct: Programs https://www.nrmp.org/wp-content/uploads/2023/08/NRMP-Match-Code-of-Conduct_Programs.pdf, Pg. 2
3. NRMP, Charting Outcomes in the Match: Senior Students of U.S. MD Medical Schools Characteristics of U.S. MD Seniors Who Matched to Their Preferred Specialty in the 2022 Main Residency Match.
4. NRMP, Charting Outcomes in the Match: Senior Students of U.S. DO Medical Schools Characteristics of Senior Students of U.S. DO Medical Schools Who Matched to Their Preferred Specialty in the 2022 Main Residency Match.
5. NRMP, Charting Outcomes in the Match: International Medical Graduates Characteristics of International Medical Graduates Who Matched to Their Preferred Specialty in the 2022 Main Residency Match.
6. AAMC Apply Smart for Residency: https://students-residents.aamc.org/apply-smart-residency

Appendix 1: Neurology Match Data

NRMP 2024 Match Data:
Child Neurology: There were 79 programs offering 184 PGY-1 slots, and four programs offering 6 PGY-2 slots. Seven PGY-1 slots went unfilled in the initial Match.

- The average MD senior applying to child neurology ranked 13 programs and had an 89% chance of matching into a PGY-1 slot in child neurology.
- The average DO senior applying to child neurology ranked 10 programs and had a 61% chance of matching into a PGY-1 slot in child neurology.
- All other applicants (including IMG applicants) on average ranked three programs and had a 26% chance of matching into a PGY-1 slot in neurology.

Adult Neurology: There were 148 programs offering 878 PGY-1 slots, and 40 programs offering 225 PGY-two slots. One PGY-1 and 3 PGY-2 slots went unfilled in the initial Match.

- The average MD senior applying to adult neurology ranked 10 programs and had a 70% chance of matching into a PGY-1 slot in Adult Neurology.
- The average DO senior applying to adult neurology ranked eight programs and had a 62% chance of matching into a PGY-1 slot in neurology.
- All other applicants (including IMG applicants) on average ranked four programs, with a 34% chance of matching into a PGY-1 slot in adult neurology.

Of note, those who did not match into these PGY-1 slots could have matched in another specialty, matched into a PGY-2 slot, or gone unmatched.

Charting the Outcomes, 2022:
Match specialty-specific data from the NRMP's document "Charting the Outcomes 2022" suggests:

Child Neurology

Applicant Type	Number of Ranks Needed to Achieve a 90% Chance of Matching	2022 Match Rate for Applicants with a Child Neurology Preference*
MD Senior	5	98%
DO Senior	4	89%
US IMG	4	50%
Non-US IMG	7	67%

*Applicants who ranked a child neurology program first on their ROL

Adult Neurology

Applicant Type	Number of Ranks Needed to Achieve a 90% Chance of Matching	2022 Match Rate for Applicants with an Adult Neurology Preference*
MD Senior	6	98%
DO Senior	7.5	92%
US IMG	9	54%
Non-US IMG	9	50%

*Applicants who ranked an adult neurology program first on their ROL

What are the odds of receiving an interview?
The NRMP Program Director Survey suggests that each Child Neurology Program interviews 37.7% of applicants, and Adult Neurology programs interview 15.2% of applicants. Using the 2022 ERAS FACTS data of the average number of applications submitted per applicant compared with the mean length of ROL for matched applicants from the NRMP Charting the Outcomes 2022 suggests the likelihood of an applied-to program ending up on a rank order list is as follows:

Child Neurology

Applicant Type	Odds of Applied Program on ROL
MD Senior	60%
DO Senior	67%
US IMG	***
Non-US IMG	28%

*** unable to calculate due to skewed data

Adult Neurology

Applicant Type	Odds of Applied Program on ROL
MD Senior	39%
DO Senior	23%
US IMG	22%
Non-US IMG	18%

How many programs should an applicant apply to?
Based on this data for Child Neurology, assuming a 60% chance of an applied-to program ending up on a ROL, to get five ranks to get a 90% chance of matching, an MD Senior could apply to as few as nine programs. Using similar data, a DO senior could apply to as few as six (noting the lower overall match rate, and low numbers of applicants skewing the data).

Using the same data for a non-US IMG results in needing to apply to 32 programs to achieve a 90% chance of match, although this is likely an inaccurate estimate due to the significant confounding factors in the data.

For adult neurology, assuming a 39% chance of an applied-to program ending up on a ROL, to get 6 ranks to get a 90% chance of matching, an MD Senior could apply to as few as 16 programs. Using similar data, a DO senior could apply to as few as 33.

Using the same data for US IMGs results in needing to apply to 41 programs, and non-US IMGs would need to apply to 50 programs, but again, this is likely an inaccurate estimate due to the significant confounding factors in the data.

We recognize the limitations of these data, and these numbers should not be used as definitive recommendations for every applicant.

We recognize that these data do not adequately address the experience of those who apply across multiple specialties, those who are MD/DO graduates, or those applying as couples. This data also incompletely addresses the experience of IMGs as well.

Discussions should be conducted with each student considering reported data in the NRMP Charting Outcomes in the Match, NRMP 2024 Main Residency Match Data, and AAMC Apply Smart for Residency to explore the consequences of various applicant characteristics on the likelihood of matching and, therefore, on the individual need for number of programs applied to and ranked. Because each applicant's situation is unique, the number of programs applied to and ranked will vary on a case-by-case basis, with no guarantee of matching.

Sources:
1. [NRMP, Charting Outcomes in the Match: Senior Students of U.S. MD Medical Schools Characteristics of U.S. MD Seniors Who Matched to Their Preferred Specialty in the 2022 Main Residency Match.](#)
2. [NRMP, Charting Outcomes in the Match: Senior Students of U.S. DO Medical Schools Characteristics of Senior Students of U.S. DO Medical Schools Who Matched to Their Preferred Specialty in the 2022 Main Residency Match.](#)
3. [NRMP, Charting Outcomes in the Match: International Medical Graduates Characteristics of International Medical Graduates Who Matched to Their Preferred Specialty in the 2022 Main Residency Match.](#)
4. [NRMP, Results of the 2022 NRMP Program Director Survey.](#)
5. [AAMC, 2022 FACTS: Electronic Residency Application Service; Table C-3: Residency Applicants to ACGME-Accredited Programs by Specialty and Medical School Type, 2022-2023](#)