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Atlanta, Georgia
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Disclosures – no financial disclosures
- Opinions are my own and do not necessarily represent these societies:
  - Association of Program Directors in Vascular Surgery (APDVS) - President
  - Society for Clinical Vascular Surgery (SCVS) – Vice President
  - Southern Association for Vascular Surgery (SAVS) – Secretary/Treasurer
- Experience in Vascular Education and Specialty
  - Faculty with UAB Surgery Residency 1994
  - Faculty at Emory Vascular Fellowship 2016
- Program Director at UAB, Emory
  - Vascular Integrated Residency 2010-2015
- Director Vascular Surgery Board of ABS 2004-2010

Background
- Some unmatched applicants seek to submit a second rank order list (ROL) during the same match cycle to seek another specialty
- Cardiac Surgery – TSDA sought change in dates to accommodate applicants
- Some request (per NRMP) to apply to Thoracic Match after Vascular Match
- NRMP presented alternative dates to allow applicant flexibility
  - If resident did not match in Vascular, creates option to apply to Thoracic

NRMP: Thoracic and Vascular Surgery Combined Match

APDVS was notified 9/13/16 by NRMP that they were combining the Vascular and Thoracic Surgery Matches into a single match, effective with the 2017 Match (2018 appointment year).

Applicant can list both thoracic program and vascular program on a single list (ROL)

APDVS requested more information from NRMP regarding how the decision was made.

What does a combined rank order list (ROL) mean?
- Applicant can list both thoracic program and vascular program on a single list
  - Similar to a 4th year medical student ranking different surgical and non-surgical specialties – e.g. surgery, ENT, pathology, transitional, etc.
  - For example:
    1. Cardiac – NYU
    2. Vascular – NYU
    3. Cardiac – Emory
    4. Cardiac – MGH
    5. Vascular - Stanford
NRMP: Thoracic and Vascular Surgery Combined Match

**NRMP Response #1**

- Combining resources worked for Pediatrics...
- It worked for Pediatrics...

**NRMP: Thoracic and Vascular Surgery Combined Match**

- Very small number of applicants (6-7) requested combined match. Based on 2016 Appointment Year Matches for vascular and thoracic = 2.7% of all applicants.
- Data from the 2013-15 APDVS Annual Training Surveys further supports that there is very little interest from residents in applying to both specialties.
- NRMP indicated that the success of the pediatric subspecialties match implemented last year was a major factor in combining our matches. MAJOR DIFFERENCE: The Council of Pediatric Subspecialties was very supportive of a single match date and had been working on it for several years.

**APDVS’ CONCLUSIONS:**

- NRMP’s primary factor for the decision seems to be based on allocation of staff and IT resources - not the impact on the key stakeholders: programs or even the residents.
- The combined match actually is detrimental to residents – it introduces concern among program directors regarding the applicant’s true interest in their respective paradigms.
- Some suggested that the combined Match may increase our applicant pool (NRMP provided limited data → 2.7% applicants)

**APDVS Requests (October 2016):**

- 1. Change the name to create two separate match identities.
- 2. Change the process so that the applicants do NOT have a mechanism to combine the ROL to include both vascular and thoracic programs.
- OR separate the dates, potentially by enough time so that the applicants who do not match in Vascular have an opportunity to submit a ROL for the Thoracic Match.
- APDVS is also requesting its comments and concerns need to be shared with NRMP Board of Directors for swift action.

<table>
<thead>
<tr>
<th>Specialty</th>
<th>Applicants Ranking</th>
<th>Number Matched</th>
<th>Matched in Another Specialty</th>
<th>Unmatched</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vascular Surgery</td>
<td>129</td>
<td>127</td>
<td>112</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>0.8</td>
<td>12.4</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Thoracic Surgery</td>
<td>126</td>
<td>125</td>
<td>89</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>0.8</td>
<td>28.6</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

- <1% of applicants crossed from one specialty to other
- Not clear how many applicants ranked both specialties
- "Larger applicant pool" seems to be an invalid argument for combined Match

What program directors did:

- Changed bylaws to allow us to use another Match service
  - 2018 match remains with NRMP
  - Options available for future years
    - E.g. Match.com, Eharmony.com, Farmersonly.com
- Elected to await results for 2017 Match and NRMP response
- Re-issued request to adjust website – NRMP.org
  - With help of SVS support team

Conclusions

- NRMP Match highlights lack of attention towards our different specialties
- APDVS needs support of vascular community to maintain voice in training of our residents and fellows
  - Needs SVL, ABS (VSB) support even though these boards and societies technically do not have oversight on the RRC, they have influence
- APDVS prepared to change Match process but will require cooperation of SVS leadership, membership, training institutions