

Guidance Statement from the Association of Program Directors in Vascular Surgery

Regarding the 2026/27 Application Cycle (updated April 2026)

On behalf of the APDVS Executive Committee (Benjamin Pearce, Gabriela Velazquez, Misty Humphries, Chris Abularrage, Jonathan Cardella, and Dawn Coleman)

The vascular surgery community now has prospective evidence to inform the debate over interview formats. The Vascular In-person for Students In the Match Trial (VISIT), published in the *Journal of Vascular Surgery* in 2024, demonstrated that 86% of applicants who completed post-rank-lock site visits changed their rank order list, driven primarily by direct observation of program esprit de corps (86%), faculty and trainee interactions (81%), and physical setting (62%). (*J Vasc Surg.* 2024 Aug;80(2):564-571.) These are exactly the factors that virtual interviews are least able to convey. Separately, 80% of current vascular trainees surveyed during the 2023 VSITE preferred in-person interviews, and 25% felt they would have matched at a different program had they interviewed in person — a number that rose to 43% among those who were dissatisfied with their match. Taken together, these data make a clear case: **in-person exposure to a program is meaningful to applicant decision-making and match satisfaction.**

Based on this evidence, the APDVS recommends that programs return to in-person interviews as the preferred format for the 2026/27 cycle. Programs that use virtual interviews to reduce applicants' financial burden should offer structured post-rank-lock site visits following the VISIT trial protocol. Additionally, beginning with this cycle, vascular surgery programs will participate in ERAS applicant signaling. Guidance on each of these elements is below.

Recommendations

The priorities in offering these recommendations are to promote an equitable and transparent application, interview, and matching process, as well as to safeguard vascular surgical education for medical students. Each program director and the institutional leadership team should review relevant AAMC guidance, including *Interviews in GME and Where Do We Go From Here?* (aamc.org, last updated June 2024). The following table summarizes our guidance by format.

Table 1. APDVS interview format guidance for the 2026/27 cycle.

Interview Format	Rationale	Recommendations / Steps to Success
In-Person (PREFERRED)	<ul style="list-style-type: none"> VISIT trial: 86% of applicants changed ROL after in-person visits. 80% of vascular trainees prefer in-person (2023 VSITE survey). 25–43% felt they would have matched elsewhere with in-person experience. Esprit de corps, faculty/trainee interaction, and program setting are best assessed in person. 	<ul style="list-style-type: none"> Collaborate with regional programs to align interview dates and reduce applicant travel burden. Holistic review standards apply; admissions process should be blind to applicant financial circumstances. Consider avenues to defray financial burden of travel if possible (hotel discounts, avoid high traffic dates, and look for financial aid if possible)
Virtual + Post-Rank-Lock Site Visit	<ul style="list-style-type: none"> Reduces financial and travel burden for applicants. Consistent with AAMC recommendation for virtual format. Post-rank-lock site visits provide meaningful in-person exposure 	<ul style="list-style-type: none"> Programs that opt in should participate in NRMP ROL-LOC and offer post-rank-lock site visits to all interviewed applicants. Coordinate Visits through central GME, programs blinded to who visits.

Interview Format	Rationale	Recommendations / Steps to Success
	without biasing program rank lists (VISIT trial).	<ul style="list-style-type: none"> • Invitations scan be sent by program coordinator to all interviewees; • Rank list locked before visits occur; Financial support for applicants who cannot cover travel.
Hybrid (NOT ENDORSED)	<ul style="list-style-type: none"> • Difficult to standardize equitably; creates risk of bias based on format choice. 	<ul style="list-style-type: none"> • If chosen: selection committee must be blinded to interview format. • Programs must clearly disclose whether the in-person component affects rank list decisions. • All applicants must be offered a virtual option.

Interview Offer Process

- Universal Release Date: all interview offers extended on **October 15, 2026**, with rolling offers thereafter.
- Allow at least **96 hours** after an invitation is sent before extending the offer to another applicant. This prevents overbooking and late cancellations.
- Only offer the number of available interview positions. Communicate expectations about response timelines clearly to applicants at the time of invitation.

NRMP-ROL_LOC

- Sign-up window: May 1 – October 16, 2026 (in R3)
- Ranking opens: February 1, 2027
- Voluntary ROL-LOC deadline: February 8, 2027, at 11:59 PM EST — at least 24 hours before the first post-interview visit
- Standard ROL Certification Deadline: March 3, 2027, at 9:00 PM EST
- Once locked, the ROL cannot be uncertified or edited under any circumstances.

ERAS Applicant Signaling

- Beginning with the 2026/27 cycle, vascular surgery will implement ERAS applicant signaling. Signals allow applicants to designate genuine, prioritized interest in a limited number of programs.
- Programs should treat signals as **one element** of a holistic review when selecting candidates for an interview. Signals should inform, not determine, interview offers.
- Programs must disclose to applicants how signals will be weighted in their selection process.

Holistic Review

- A holistic review of applications is strongly recommended. Considerations:
 - o USMLE Step 1 and COMLEX Level 1 are reported as PASS/FAIL and should not be used as screening criteria.
 - o Programs should clearly disclose how USMLE Step 2 CK and COMLEX Level 2 CE scores will be considered.
 - o ERAS signals should be reviewed alongside the full application, not as a standalone filter.
 - o Review resource guides on conducting a holistic review well from the [AAMC](#), [NRMP](#), and [AMA](#).

Match Violations

- Programs must not ask applicants where they intend to rank the program, directly or indirectly.

- Programs must not make statements implying that ranking decisions are conditioned on the applicant's ranking of the program (e.g., "We will rank you #1 if you rank us #1").
- Programs must not make verbal or written pre-Match commitments or offers of a position outside of the NRMP Match.
- Programs must not require or pressure applicants to reveal where they have applied, where they have interviewed, or how they plan to rank other programs.
- Programs must not threaten or coerce applicants in connection with ranking decisions.
- Programs must not contact applicants after the rank order list certification deadline for ranking-related purposes.
- Programs must not request or require applicants to withdraw from the Match or commit to accepting a position outside the Match.

The situation continues to evolve. The APDVS will monitor match outcomes and may issue additional guidance as the cycle progresses. We are grateful to all program directors for their commitment to a fair and educationally sound recruitment process.