President’s Report

• Residency Fair

• Fellowship Start Date

• NRMP change
At the 2015 and 2016 APDVS Spring Meeting/Annual Business Meetings the membership voted to *not endorse* the change in the start date to August 1.

Individual programs may choose to start on July 1, if they or their GME offices are interested.

APDVS will revisit this topic at the upcoming 2017 Spring Meeting.
APDVS requested more information from NRMP regarding how the decision was made.

This letter was the first and only notification of the decision. No discussion occurred with APDVS (or TSDA) prior to implementation of changes.

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.)
NRMP Response #1

Sept 27, 2016

Combining resources

It worked for Pediatrics . . .

Although combining the Matches was based primarily on what we believe works best for applicants and programs, consolidation—whenever possible—has become an imperative for NRMP in order to effectively allocate our staff and information technology resources. We now manage 26 fellowship Matches for more than 60 subspecialties and have a
NRMP: Thoracic and Vascular Surgery Combined Match

Subsequent emails and calls revealed:

- 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 paradigm.
• NRMP’s decision and the way it was implemented has only increased uncertainty among the specialties.
October 26, 2016

Mona M. Signer
President and Chief Executive Officer
National Resident Matching Program
2121 K Street NW, Suite 1000
Washington, D.C. 20037

Dear Ms. Signer,

Thank you for your letter dated September 27, 2016 notifying us of the changes your Office initiated and implemented in the 2017 Match process. After thoroughly reviewing the letter, we are corresponding to convey several concerns regarding the process and the manner in which the decision to combine the Vascular and Thoracic Surgery Matches was made and implemented. As a general statement we are very appreciative and supportive of the work of the NRMP and open to suggestions and innovations on how to best serve applicants. We believe many of the concerns expressed below could have been mitigated had there been an opportunity to participate in meaningful dialogue in advance of decisions being made.
APDVS (with the support of SVS and VSB) sent a follow-up letter to NRMP with the following recommendations:

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.
3. APDVS is also requesting its comments and concerns need to be shared with NRMP Board of Directors for swift action.
Applicants wanted to be able to rank more than one Pediatric subspecialty, and NRMP was able to achieve more efficient use of its information technology resources.

Thank you for your November 7 letter conveying the concerns of the Association of Program Directors in Vascular Surgery (APDVS) about the NRMP's decision to combine the Thoracic Surgery and Vascular Surgery Matches. During its October 31 meeting, the NRMP Board of Directors discussed many of the issues raised in your letter.

Director Beth Winer informed NRMP that TSDA wanted applicants to be able to apply separately to both Thoracic Surgery and Vascular Surgery programs and to be able to rank programs in both subspecialties in any combination on a single rank order list. When NRMP staff asked Ms. Winer for clarification, she replied that the TSDA Executive Committee wished to combine the two Matches using the Vascular Surgery schedule of decision about whether to rank an applicant should be based on the "goodness of fit" between the applicant and program and not on whether the applicant might have considered another program or specialty. Vascular Surgery program directors are free to ask questions about an applicant's commitment to the specialty as long as they do not violate the Match Participating Agreement by inquiring about other programs to which the applicant may have applied. Our overriding principle is that a Match should maximize applicants' opportunity to obtain the position of their choice, and we believe a combined Match best serves that purpose.

As indicated in Ms. Singer's September 27 letter, NRMP has created other combined Matches, including the Pediatric subspecialties. Contrary to the statement in your November 7 response, however, the combined Thoracic Surgery and Vascular Surgery Match is one of several options for applicants with special interest in these fields.

Although we understand and appreciate the concerns expressed by APDVS, the NRMP Board of Directors believes that combining the two Matches remains in the best interest of applicants and, in addition, will benefit participating programs by providing a larger overall applicant pool. For its part, NRMP will do all it can to
Original Date Change of NRMP for Thoracic

First proposed date change for Thoracic July 25, 2016

From: Jeanette L. Calli
Sent: Monday, July 25, 2016 3:33 PM
To: tsda@tsda.org, tsda@tsda.org
Subject: 2017 Thoracic Surgery Match Dates

Dear Beth,

Each year, the NRMP receives multiple requests from applicants who want to participate in Matches for both Vascular Surgery and Thoracic Surgery. We have been unable to accommodate those requests because the Match Day for Vascular Surgery falls after the ranking deadline for Thoracic Surgery. We would like to propose a solution that would allow interested applicants to participate in both Matches while limiting the impact on Thoracic Surgery.

In reviewing the 2017 Thoracic Surgery Match schedule for the 2018 appointment year, NRMP is proposing the following schedule of dates:

Match Open: March 22, 2017
Rank Order List Opens: April 26, 2017
Quota Change Deadline: May 17, 2017
Rank Order List Deadline: May 31, 2017
Match Day: June 14, 2017

This schedule would move the Match Day for Thoracic Surgery by three weeks and allow applicants who are cross-applying and may not match into Vascular Surgery to rank and attempt to match into Thoracic Surgery.

Please let me know if you have any questions or concerns and whether this schedule of dates is acceptable to your group.

Best Regards,
NRMP – next steps

• Do nothing – wait 2-5 years to assess results of this change
  • Seems to be suggestion of SVS
  • SVS not prepared to fund any initiative for change

• Leave the NRMP
  • Would require a bylaw change first – 30 day process

• **EC voted to submit bylaw change to membership**

• Seek alternative Match programs – to be determined later