

Recommendations for Away Rotations and Interviews for Graduate Medical Education Fellowship Applicants During the 2020-2021 Academic Year

Background: The Coalition for Physician Accountability's Work Group on Medical Students in the Class of 2021 Moving Across Institutions for Post Graduate Training (Coalition WG), a cross-organizational group, including AACOM, AAMC, ACGME, AOGME, AMA, CMSS (OPDA), ECFMG, and NRMP developed a guidance document to address transition to residency concerns for the 2020-21 cycle using guiding principles that sought to prioritize patient care and the safety of the community, patients, and learners during the ongoing COVID-19 pandemic. The recommendations were made to assist in maintaining an equitable residency selection process for applicants. The final recommendations of the Coalition Work Group were published online by the Coalition and its component groups on May 11, 2020.

In addition to the transition from medical school to residency, there is a similar transition from residency to fellowship during the 2020-2021 academic year. To provide guidance for that transition, the recommendations submitted by the Coalition WG have been adapted as appropriate for the sub-specialty community.

Recommendation #1: For the 2020-21 academic year, away rotations for residents will be discouraged, except under the following circumstances:

- Residents who have a specialty interest and do not have access to a clinical experience with a fellowship program in that subspecialty in the health system in which they are training.
- Residents who plan to incorporate focused knowledge and skills in their future practice but lack access to necessary training opportunities within their health system.

While global health experiences have been a major focus of away rotations for residents in the past, it is anticipated that such rotations will not be able to be safely undertaken over the next academic year. Consider developing alternatives (e.g., research experiences) for this year that do not require international travel.

Recommendation #2: All fellowship programs should commit to online interviews and virtual visits for all applicants, rather than in-person interviews for the entire cycle. The Graduate Medical Education (GME) community should commit to creating a robust digital environment and set of tools to create the best experiences for programs and applicants.

Recommendation #3 – General Communications

Implementation of these recommendations will require transparency and timely communications among all stakeholders. Clear expectations should be set. The GME community should work together to provide consistency and equity for fellowship applicants across the country.

- Specialty and subspecialty organizations should work with individual programs to develop clear, consistent plans and practice regarding virtual interviews and away rotations as soon as possible.
- Residency programs should develop and communicate the appropriate policies that clearly define the ability of program residents to participate in away rotations, and procedures for acceptance of residents from other programs for rotations.
- The policy should be applicable for the entire upcoming fellowship application/selection cycle.
- The policy should include statements on requirements for quarantine, COVID-19 related training, and COVID-19 testing for any away rotations that are allowed.

Respectfully submitted,

Accreditation Council for Graduate Medical Education
American Association of Colleges of Osteopathic Medicine
American Medical Association
Assembly of Osteopathic Graduate Medical Educators
Association of American Medical Colleges
Council of Medical Specialty Societies/Organization of Program Director Associations
Education Commission for Foreign Medical Graduates
National Resident Matching Program