



Website transparency of dermatology residency programs: a cross-sectional study

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Abstract

With the onset of the COVID-19 pandemic, the dermatology residency application process rapidly transitioned in a number of dimensions. As in-person activities were canceled and USMLE Step 1 has become pass/fail, there have been several proposed changes to enhance the process, including a push for increased transparency. Given that most dermatology applicants use program websites to learn more about potential residency programs, we conducted a cross-sectional study to quantify how transparent dermatology residency program websites were, relative to published guidelines. From February 11, 2022, to February 25, 2022, we examined the available websites of all ACGME-accredited dermatology residencies to determine transparency regarding information dissemination, selection criteria, interview process, program priorities, and program requirements and opportunities. 136 out of 143 dermatology programs (95.1%) were included. Overall, programs were most transparent with program requirements and opportunities (87.25%). This included information on hospital locations, subspecialty clinics, and rotation/call/didactic schedules. Programs were least transparent with sharing their selection and/or exclusion criteria (31.13%) and varied in how much information they shared about the interview process (39.34%), as well as program priorities (64.56%). Opportunities remain for dermatology programs to improve website transparency and aid applicants in this difficult-to-navigate process. These results identify real transparency gaps, with several potential foci for improvement. Our main study limitation is its focus on a single time-period; to ensure that this information remains up to date, ongoing efforts to periodically resurvey content changes is warranted. Our findings provide an overview of programs' successes and remaining opportunities to follow published transparency guidelines; overall, these findings may guide individual program directors aiming to improve the transparency of their dermatology residency programs and ultimately benefit our future workforce.

Keywords Dermatology · Education · Medical · Graduate · Internship and residency

Introduction

The residency application process for dermatology is one of the most competitive, with matched applicants traditionally having some of the highest average USMLE Step 1 scores and number of research experiences [4]. In response to the COVID-19 pandemic, there have been several proposed

changes to the process, including a push for increased transparency; over 40% of dermatology residents state that increased program transparency would have changed their rank list [3]. In November 2020, the Association of Professors of Dermatology (APD) Program Directors Task Force and Residency Program Transparency Work Group published guidelines for increasing transparency [6]. With dermatology applicants most commonly using program websites to learn about residency opportunities [3], particularly in the era of the COVID-19 pandemic, we sought to quantify the current status of dermatology residency program website transparency relative to published guidelines.

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Methods

From February 11, 2022, to February 25, 2022, we examined the available websites of all ACGME-accredited dermatology residencies to determine how well transparency guidelines [6] in the categories of method of information dissemination (i.e., up-to-date website), selection criteria (e.g., USMLE Step 1 score cut-off), interview process (e.g., interview dates), program priorities (e.g., mission statement), and program requirements and opportunities (e.g., rotation/call/didactic schedules) were met. Descriptive statistical analysis was completed using Microsoft Excel. Program compliance by subcategory was calculated by dividing the number of compliant programs by the total number of programs. This project was deemed exempt by the University of Miami Institutional Review Board.

Results

A total of 136 out of 143 dermatology programs (95.1%) were included. Four programs were excluded, because they were tailored to small applicant pools as they were exclusive to either military applicants ($n=3$) or students with at least 120 h of osteopathic manipulative medicine prior to matriculation ($n=1$); two programs were excluded, because they did not have a publicly available website; and one program was excluded, because it was not accepting applications for the 2021–2022 cycle. Of the program compliance categories, programs were, on average, most transparent with program requirements and opportunities (87.25%), which included hospital locations, subspecialty clinics, and rotation/call/didactic schedules; programs were least transparent with sharing their selection and/or exclusion criteria (31.13%), which included letter of recommendation requirements, location of medical school (US or foreign),

USMLE Step 1 scores, prior residencies, doctoral type (allopathic vs osteopathic), and research requirements. Programs also varied in the extent of information sharing about the interview process (39.34%) and program priorities (64.56%) (Table 1).

Discussion

These findings illustrate opportunities that remain for dermatology programs to improve website transparency and aid applicants in a difficult-to-navigate process. Efforts to revamp the dermatology residency application process are well under way [1, 5] and both dermatology program directors and trainees have identified program transparency as an area needing improvement; fewer than 50% of trainees and program directors believe there is adequate transparency about residency selection criteria [3]. Our results help quantify real gaps in transparency and demonstrate several potential foci for improvement. In addition to utilizing the published APD guidelines, one website, that of the Saint Louis University Department of Dermatology Residency Program, was transparent in all of the categories, and may serve as good example for increasing transparency [2]. Changing the quantity and quality of information programs share with prospective trainees may benefit not only residency programs—by encouraging them to reflect on their priorities and ideal characteristics of their trainees—but also applicants, who can use this information to tailor their applications toward programs that are well-aligned with their short- and long-term goals. Limitations of our study include its focus on a single time-period; ongoing efforts to periodically resurvey content changes is warranted. Our findings provide an overview of programs' successes and remaining opportunities to follow published transparency guidelines [6]; overall, these findings may guide individual program directors aiming to improve the transparency of their dermatology residency programs and ultimately benefit our future workforce.

Table 1 Program compliance by category

Category	Program Compliance (total $n = 136$)	Program Compliance (%)
Program requirements and opportunities		87.25
Hospital locations	131	96.32
Subspecialty clinics	126	92.65
Rotation/call/consult/didactic schedules	99	72.79
Program priorities		64.56
Current resident demographics and interests	126	92.65
Current faculty demographics and interests	123	90.44
Mission statement	119	87.5
Research and elective opportunities	100	73.53
Clear independent diversity initiatives	38	27.94
Psychosocial and/or wellness initiatives	33	24.26
Method of information dissemination		55.88
Up-to-date, error-free website	76	55.88
Interview process		39.34
Number of new resident positions	85	62.5
Interview format (in-person, virtual)	64	47.06
Specific Interview dates	48	35.29
Number of interview spots	17	12.5
Selection (exclusion) criteria		31.13
Letter of recommendation requirements	75	55.15
Location of medical school (US or foreign)	58	42.65
USMLE Step 1 scores beyond passing	42	30.88
Prior residencies	35	25.74
Doctorate type (allopathic vs osteopathic)	26	19.12
Research requirements	18	13.24

Categories were adapted from the Association of Professors of Dermatology Program Directors Task Force and Residency Program Transparency Work Group recommendations [6]

Author contributions Wyant and Nambudiri developed the study concept and design. Wyant was responsible for acquisition, analysis, and interpretation of data, as well as drafting of the manuscript. All authors reviewed the manuscript for important intellectual content.

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Declarations

Conflict of interest The authors declare that they have no conflict of interest.

Ethical approval Institutional review board approval was waived by the University of Miami Miller School of Medicine.

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