



ASO Author Reflections: The Impact of Virtual Interviews for Complex General Surgical Oncology Fellowship

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PAST

The coronavirus disease 2019 (COVID-19) pandemic and ensuing travel restrictions caused a rapid shift from traditional in-person interviews (IPIs) to virtual interviews (VIs) during the 2020 Complex General Surgical Oncology (CGSO) fellowship interview cycle. While the VI format has been implemented in several fields of medicine with promising results, there are concerns surrounding VIs related to conveying the culture of a program and the surrounding city, and the ability to experience interactions between faculty and fellows.¹ Previously, descriptive virtual format approaches to CGSO Fellowship interviews have been published.^{2,3} We had the unique opportunity to have one IPI prior to and one VI after implementation of the pandemic travel restrictions. The goal of our study was to understand how the VI model compares with the IPI approach within the same interview cycle for the CGSO Fellowship program at our institution.⁴

PRESENT

CGSO Fellowship applicants in both the IPI and VI groups felt the interview experience was positive, gave them a satisfactory understanding of our institution, and the ability to represent themselves accurately. However, there were significant differences between groups regarding

applicants' perceived ability to discern adequate understanding of the culture of the program ($p = 0.02$) and their ability to make a ranking decision based on the interview day ($p = 0.04$). The VI group reported lower scores in both categories. This highlights the need to continue improving the VI model, especially in light of the recent recommendation by the Coalition for Physician Accountability that "All fellowship programs should commit to online interviews and virtual visits for all applicants"⁵ for the upcoming 2020–2021 interview season.

FUTURE

We believe VIs offer potential advantages over IPIs, including cost savings and efficiency, but we need to significantly improve the applicant's ability to gain a feel of the program's culture and, most importantly, make an informed ranking decision. Prior to the next interview season, we plan to incorporate what we have learned from this study to make improvements to our website, add video content from our faculty and fellows, and provide a dedicated virtual tour of the medical and research facilities and the surrounding area. We feel that most of the VI shortcomings that have been identified in this study can be addressed with these purposeful, focused interventions, and that this technology has the potential to become a valuable addition to the application process and potentially replace the IPI format.

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