

AAIM 2024-2025 Residency Application Season Recommendations for Program Signaling

In an effort to address application inflation and improve match success and efficiency, AAIM informed AAMC-ERAS of Internal Medicine's (IM) intent to increase its program signals and implement a tiered structure for the 2024 – 2025 residency application season: 3 “Gold” and 12 “Silver”. The decision was based on data, AAIM town hall meetings, and discussions within the AAIM community. To encourage transparency for the benefit of applicants and share best practices with residency programs as part of their holistic review process, the AAIM Residency Application Process Work Group, a cross-council volunteer group, developed the following recommendations for programs, applicants, couples entering the match, and advisors.

Disclaimer: AAIM and the AAIM Residency Application Process Work Group acknowledges that the process of signaling, the number and nature of signals, and its impact on applicants and programs are dynamic and warrant additional investigation and research.

Tiered Signaling Recommendations for Internal Medicine Residency Programs

- For the 2024-2025 residency application season, all Internal Medicine applicants will be allotted 3 “Gold” and 12 “Silver” program signals.
- We recommend programs use signals as a sign of interest in a program when allocating interview invitations.
- Programs should not use signals for rank list decision-making. Because signals are chosen early in the application process, applicants’ preferences may evolve before ranking.
- All students should signal programs if interested. This includes programs where students may have done visiting rotations or programs affiliated with students’ own medical schools. This promotes equity for those who do not have “home” programs.
- We recommend programs explain their planned use of signals for the application season on their respective website by **July 15, 2024**. Some suggested language are as follows:
 - “Due to a high volume of applications, we [do not]/ [are very unlikely to] extend interview offers to applicants who do not signal our program.”
 - “While we preferentially review applications from those who signal our program, we also consider applicants who do not signal us.”
 - “Our program does not consider signals in our interview offer decision-making process and review applicants equally whether or not they have signaled us.”
- Program signals cannot be sent to specific tracks. Instead, signals are received at the institution level, meaning that all program tracks at an institution for a given specialty will see the same signal information.

References:

1. Catalanotti JS, Abraham R, Choe JH, et al. Rethinking the Internal Medicine Residency Application Process to Prioritize the Public Good: A Consensus Statement of the Alliance for

Academic Internal Medicine. *The American Journal of Medicine*. 2024; 137(3): 284-289. doi:https://doi.org/10.1016/j.amjmed.2023.11.21.)

2. Association of American Medical Colleges. [Program Signals Overview for Residency Applicants](#). May 1, 2024.)

Tiered Signaling Recommendations for Internal Medicine Applicants, Couples Entering the Match, and Advisors

- To note, the information below is intended for program signaling usage in Internal Medicine and does NOT apply to geographic signaling or fields outside of IM.
- For the 2024-2025 residency application season, all Internal Medicine residency applicants will be allotted 3 “Gold” and 12 “Silver” program signals.
- All applicants should use program signals to show interest in receiving an interview invitation from a program.
- Applicants should signal their home institution or institutions at which they have rotated if interested in an interview, just as done for other programs.
- We recommend that applicants applying to Internal Medicine use all their program signals. Some example scenarios:
 - If an applicant plans to apply to eight (8) programs, signal all 8 programs: 3 “Gold” and 5 “Silver”.
 - If an applicant plans to apply to 18 programs, signal 15 out of the 18 programs: 3 “Gold” and 12 “Silver”.
 - To note, this should not be interpreted as an application cap, nor is it intended to imply that applicants must apply to 15 programs. Many successful IM applicants may apply to fewer than 15 programs with guidance from advisors.
- Signaling a program for which an applicant is deemed qualified may increase the likelihood of obtaining an interview offer from the program. Signaling a program for which an applicant is not deemed qualified is unlikely to increase the likelihood of obtaining an interview offer from the program.
- Many programs will not offer interviews to those applicants who do not send them a program signal. Applicants are strongly encouraged to review residency program websites, the AAMC Residency Explorer, other available tools, and consult with their advisors to help develop their list of programs to which they will apply to, learn how signals will be used by various programs, and assess their qualifications for a program.
- Internal Medicine programs have been advised (1) to release information about how they will use program signals by **July 15, 2024**, and (2) that program signals should be used for interview offer decisions but not for rank list decisions.
- We recommend applicants distribute their signals to a range of programs they are interested in, including those perceived as “reach” and “safety” programs. This span of programs may be quite narrow for some applicants and very broad for others, depending on their overall likelihood of matching.
- Program signals cannot be sent to specific tracks. Instead, program signals are received at the institution level, meaning that all program tracks at an institution for a given specialty will see the same signal information.

Reference:

1. Association of American Medical Colleges. [Program Signals Overview for Residency Applicants](#). May 1, 2024.