



UNIVERSITY OF THE  
INCARNATE WORD  
SCHOOL of OSTEOPATHIC  
MEDICINE



# Video Interviews for Residency Programs

AOGME Webinar

May 27, 2020

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San Antonio, Texas



# Agenda

- Pre-Pandemic Video Interviewing
  - The TIGMER Experience
  - Video Interviews in a pandemic
  - Coalition for Physician Accountability Recommendations
  - Holistic Interviews online
  - Pros and Cons of Video Interviews
  - Tips for Interviewees and Interviewers
  - Questions
- 
- NOTE: No conflicts of interest noted by the authors

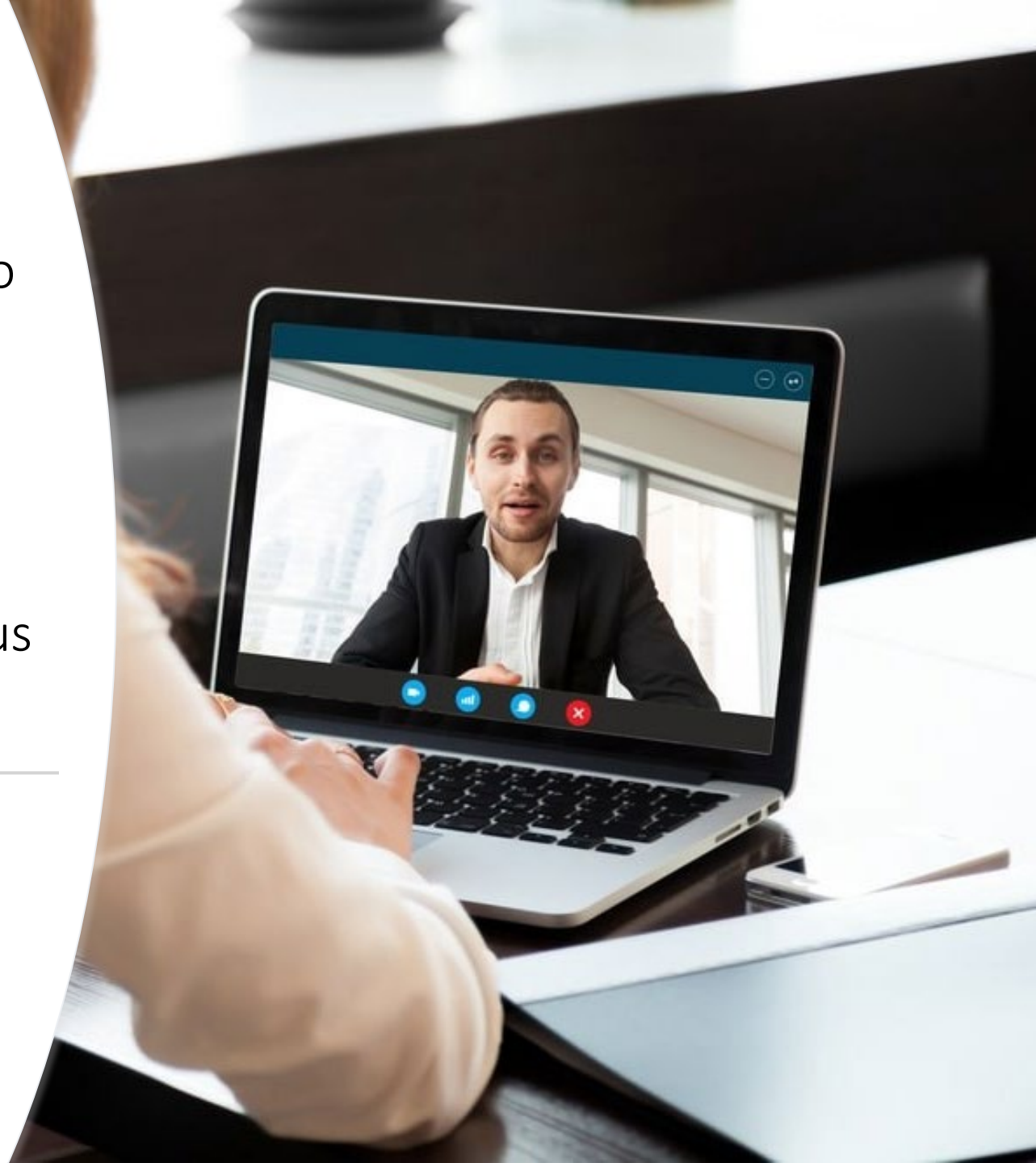


## Pre-Pandemic Video Interviews

### Basic Types:

Introductory  
Asynchronous  
Live

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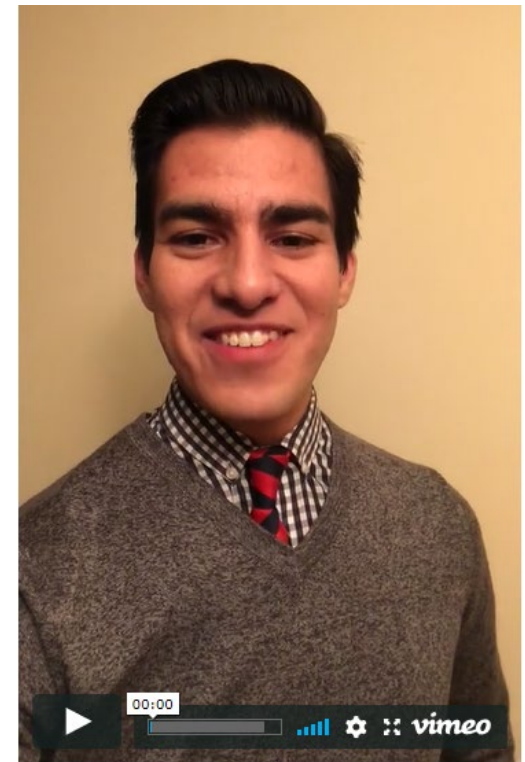


# Cost of Residency Interviews

- For the Medical Student
  - Average \$3,900 (Range from \$1000-\$7500)
  - Time away from rotations and family
  - 25 or more applications per student
- For the Programs
  - Faculty time and effort – difficulty scheduling
  - Cost of food and accommodations
  - Time away from patient care and teaching duties
  - 10 or more applicants for every open position

# Introductory Videos

- Imbedded into programs such as 3<sup>rd</sup> Friday
- 30 seconds for applicant to introduce themselves



Dashboard

Applicants

Interviewers

Calendar

Email Templates

Overview

Photos

APRIL 2019						
Sun	Mon	Tue	Wed	Thu	Fri	Sat
31	01	02	03	04	05	06
07	08	09	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	01	02	03	04
05	06	07	08	09	10	11

● Full   ● Partial   ○ Open   ● Blocked   ● Locked

Fri Apr 5, 2019

Configure Slots 0 →

0	0	0
TIER I	TIER II	TIER III
SAVE SLOTS		

Slots Status →

	Tier I	Tier II	Tier III
Confirmed	0	0	0
Open	0	0	0
<b>Total</b>	<b>0</b>	<b>0</b>	<b>0</b>

# Asynchronous Videos

Choosing a Medical Career

Applying to Medical School

Attending Medical School



Applying to Residency

Training in a Residency or Fellowship

Home > Applying to Residency > Applying to Residencies with ERAS®

Share |    

## AAMC Standardized Video Interview

*The Standardized Video Interview (SVI), developed and administered by the AAMC, is a unidirectional video interview designed to help program directors assess your knowledge of interpersonal and communication and professional behavior.*

- Required for applicants to EM Residencies
  - Piloted for 3 years
- No cost to the applicant
- Average 2-3 hours for preparation
- Screening tool to reduce on-site interviews

### Prepare for the SVI

Get ready for the SVI with official interview preparation resources written by the interview developers at the AAMC.

Learn More >>

### AAMC SVI Update to the Emergency Medicine Community, May 2018

During the 2018 spring meetings, AAMC provided an update at CORD and SAEM on the SVI operational pilot, including information about the 2017 SVI pilot, research partnerships underway, the process for using SVI data in research, and plans for the 2018 SVI administration.

Download >>

### Are you planning research on the SVI?

The AAMC welcomes your partnership in conducting SVI research. Learn more about the research request process. Any research using SVI data must be reviewed by the AAMC prior to submission for conference presentations, publication in a journal, and/or other outlet.

Learn More >>

### SVI Essentials for the ERAS® 2020



# AAMC Standardized Video Interview

AAMC concluded that the SVI is a reliable, valid assessment of behavioral competencies that does not disadvantage individuals or groups

The decision not to offer the SVI for the ERAS 2021 application cycle is based on lack of interest among the emergency medicine community in continuing to use and research the SVI, as well as an assessment of operational factors necessary for successful expansion of the program.

Texas Institute for  
Graduate Medical Education  
And Research



# The TIGMER Experience

- New GME programs launched in 2017, 2018, and 2019
- Funding decisions made too late for on-site interviews
- Used Zoom platform already owned by university



# The TIGMER Interview

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- Automatic on-line scheduling software utilized
- Zoom log-on information sent to applicant
- Appointment added to Outlook for one interviewer
- We created a 10 minute online video
  - Explained the program and discussed FAQs
  - Applicants sent link to video to watch BEFORE the interview
  - Noted that interviews would be recorded



# The TIGMER Interview

- Set of 7 questions created and used for all interviews
- Applicants again notified of recording
- One interviewer would ask the questions and answer any additional questions from applicant
- Interviews would last from 30-45 minutes.
- Recordings saved to a Google Drive account
- Other faculty could watch when convenient

Questions for LMC Video Residency Interviews \_\_\_\_\_IM \_\_\_\_\_FM

Interviewer: **Mohr** **Sellner** Date: \_\_\_\_\_ Applicant: \_\_\_\_\_

Remind Applicant that this is being recorded and make sure recording is activated.  
Did they watch the video Yes No

- 1) Why are you interested in family medicine/internal medicine and what interests you about our program in Laredo?
- 2) What kind of practice do you envision yourself in following residency training?
- 3) Residency training requires a great deal of teamwork even though much of what we do as physicians is often seen as solitary work. How have you demonstrated teamwork in the past and how do you see yourself working in a team as a resident and later as an attending physician?
- 4) As a resident physician, what would you consider to be your greatest strengths and what would be your greatest weakness?
- 5) This is a new residency program. Every new residency program requires flexibility and leadership to help shape the future of the program. How do you see yourself in this role and how do you feel about entering a new residency program?
- 6) Do you speak any languages?
- 7) What else should the interview committee know about you that sets you apart from the other applicants to our residency program?

Scores: Level 1 \_\_\_\_\_ Level 2CE \_\_\_\_\_ Level 2PE \_\_\_\_\_

Final Assessment: High Rank Middle Rank Low Rank No Rank



# The TIGMER Interview Outcomes

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## Technical difficulties in less than 5% of interviews

Slow connections, dropped connections

Inadequate equipment (no microphone or webcam)



## Applicant Responses

Appreciative of time and cost saving

Some would have liked to see the facilities



## Faculty Responses

Very appreciative of time saving and scheduling flexibility

Felt they received similar information as in-person interview

# Pros and Cons of Video Interviews

## Pros

- Cheaper for applicants
- Time saving for faculty
- Fewer scheduling conflicts
- Can automate schedule

## Cons

- May not get full picture of an applicant
- Lacks the ability to 'sell' program to applicants.
- Some applicants not really interested in your program and waste your time because it's cheap and easy.





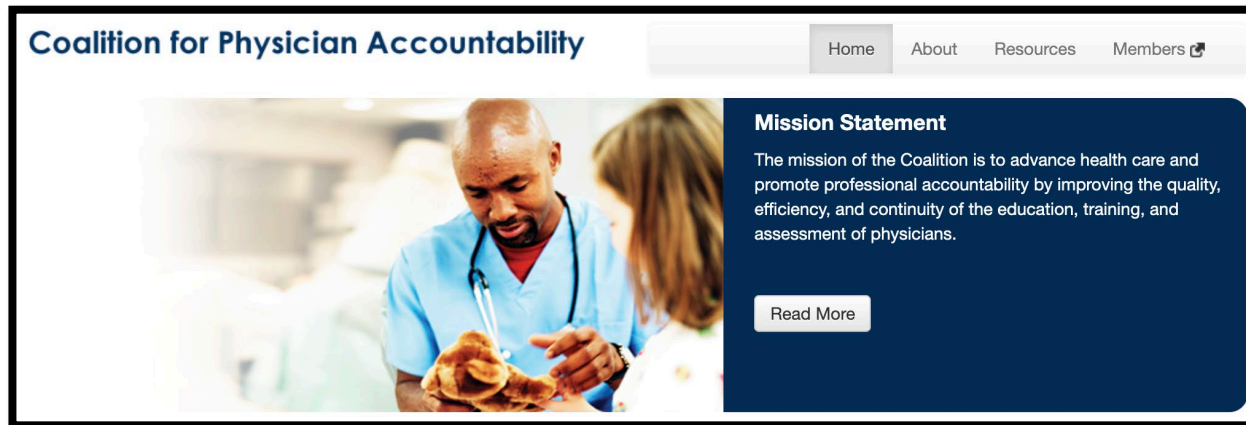
# Post-Pandemic Era Video Interviews



# Coalition for Physician Accountability

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

- all programs commit to online interviews and virtual visits for all applicants, including local students, rather than in-person interviews for the entire cycle
- commit to creating a robust digital environment and set of tools that will yield the best experiences for programs and applicants



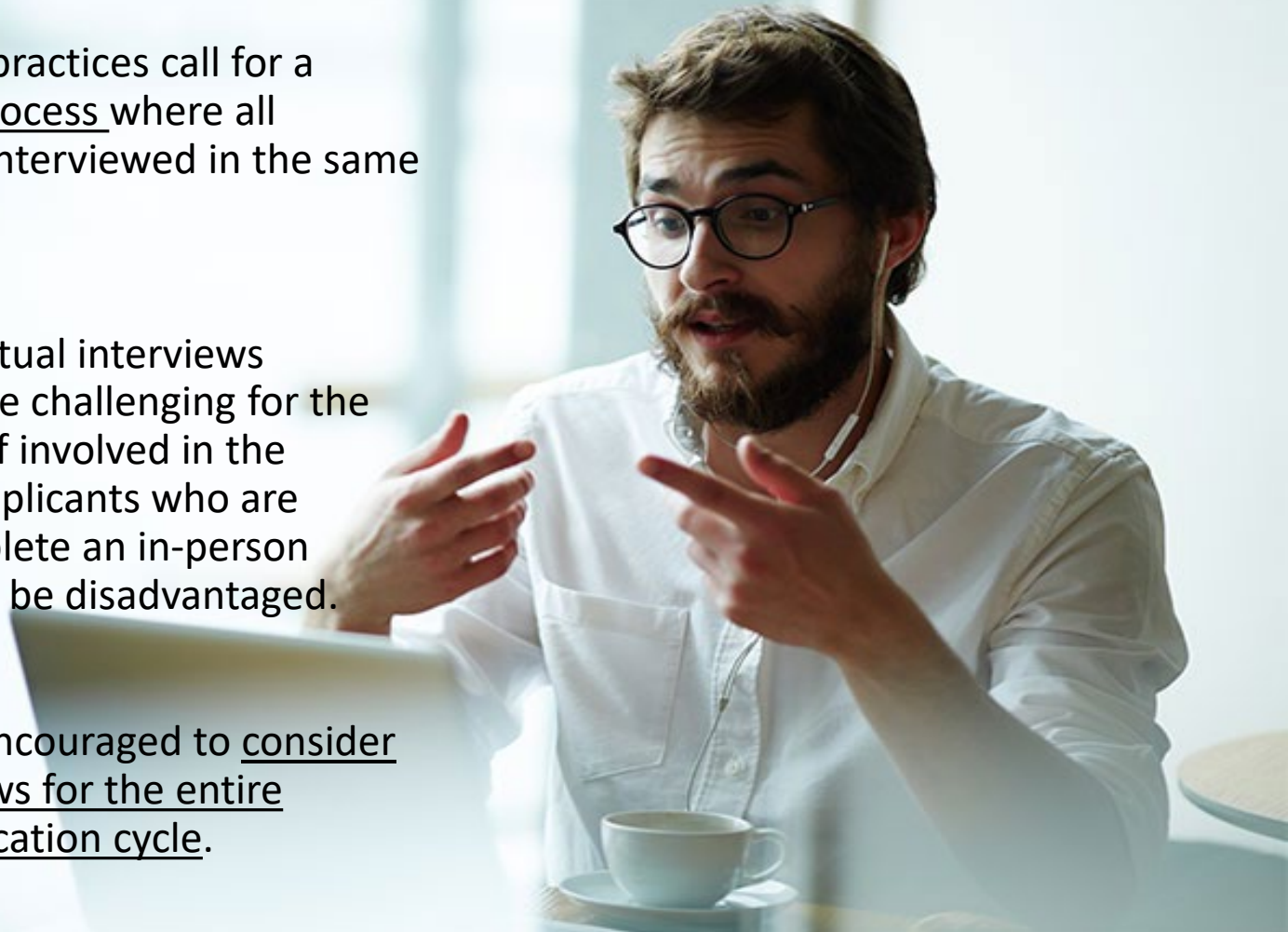


## Are the CPA Recommendations a Mandate?

No – it is uncertain at  
this time how many  
programs will comply

# Switching Between Virtual and Live Interviews if COVID Resurges

- Interview best practices call for a standardized process where all applicants are interviewed in the same manner.
- Switching to virtual interviews midcycle may be challenging for the faculty and staff involved in the process, and applicants who are unable to complete an in-person interview could be disadvantaged.
- Programs are encouraged to consider virtual interviews for the entire residency application cycle.







## What are the technical Issues for Virtual Interviews?

Every program may use different platforms.

With different capabilities.

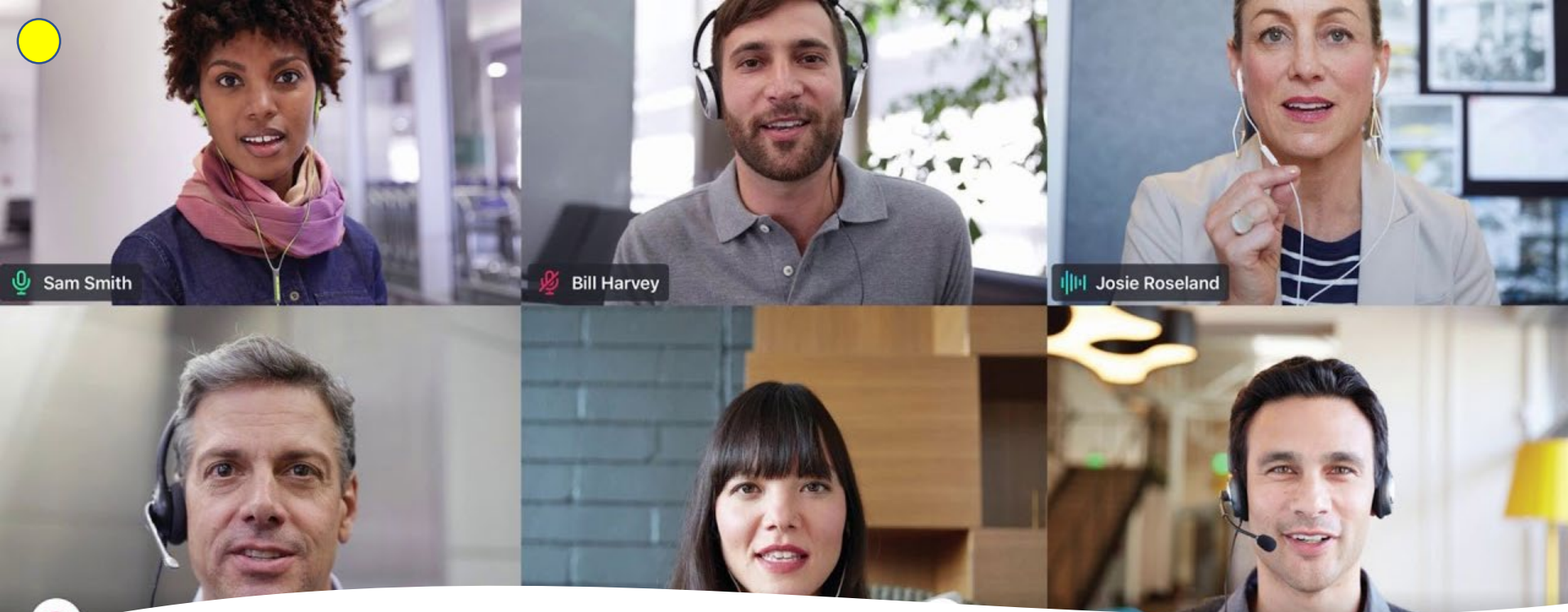
# What Platform to Use?



From the ERAS PDWS  
User Group

Microsoft Teams

<https://connect.aamc.org/communities/community-home/digestviewer/viewthread?MessageKey=fbe311f6-ee92-4972-b2d1-1d3c818f6a69&CommunityKey=460b96ac-30c0-440c-908b-d7adb0d0d25b&tab=digestviewer>



## Breakout Rooms

### Split a virtual meeting into smaller groups

- WebEx
  - <https://help.webex.com/en-us/8cckd2/Manage-Breakout-Sessions-in-Cisco-Webex-Training>
- Zoom
  - <https://support.zoom.us/hc/en-us/articles/206476313-Managing-breakout-rooms>
- Microsoft Teams (not so easy)
  - <https://www.youtube.com/watch?v=hUUbA53ouSo>
- GoToMeeting (??)
- Skype (??)

# Breakout Rooms

## Example

- Start meeting with all applicants together
  - Introductions and overview of interview process
  - Description of the residency program
- Split into breakout rooms for interviews
  - Applicant and interviewers
  - Residents
  - Program Director
  - Virtual Tour
- Return to main meeting for Q&As and closing
- Resident Mixer/Social





What will interviews look like virtually?

For Programs: Adapt what you usually do to the platform

For applicants: Focus on the interaction and not the platform

# Interview Day



## Programs Decide Your Own Format

- Single interview
- Live or recorded
- Multiple interviews
  - Concurrent or not
- Group sessions with faculty
- Group sessions with residents
- Social time with residents
- Virtual tour of hospital
- Live or recorded introductions from PD, DIO, hospital CEO, etc.

Each program will adapt your own interview day to the digital format

# Interview Template

Adapt the template  
you would normally  
use from a live  
interview. No need  
to re-invent the  
wheel!

Questions for LMC Video Residency Interviews \_\_\_\_\_ IM \_\_\_\_\_ FM

Interviewer: Mohr Sellner Date: \_\_\_\_\_ Applicant: \_\_\_\_\_

Remind Applicant that this is being recorded and make sure recording is activated.

Did they watch the video Yes No

- 1) Why are you interested in family medicine/internal medicine and what interests you about our program in Laredo?
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Scores: Level 1 \_\_\_\_\_ Level 2CE \_\_\_\_\_ Level 2PE \_\_\_\_\_

Final Assessment: High Rank Middle Rank Low Rank No Rank



How do you handle technical difficulties?

They will happen!



# Technical Difficulties

- **What if something goes wrong that could jeopardize my chances with the applicant/program?**
  - Applicants, faculty, and staff have adapted to these new innovations
  - Flexibility and patience are required
  - Don't get frazzled or frustrated.
  - Move on or reschedule
  - Decide in advance if audio-only is OK
  - Don't assume applicant or program is bad because the tech fails
  - We expect that the medical education community will continue to innovate and share best practices



How can a residency program  
'sell' our program to  
applicants virtually?

How do you showcase the  
strengths of a program?

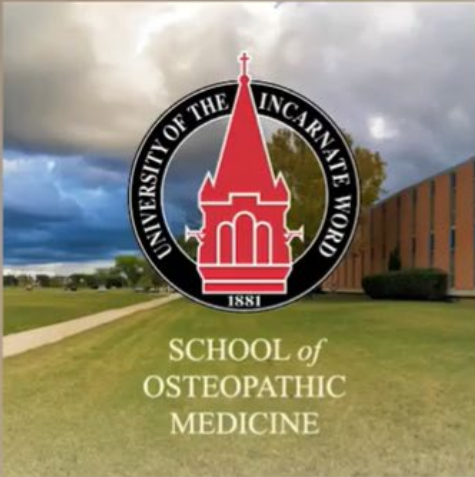
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# Promotional Videos



- Think creatively about what is most important about the program and why applicants would consider making it their home.
  - Applicants are seeking thoughtful, trustworthy content to aid their decision-making about where they will spend the next few years training.
  - How that information is delivered is far less important than the transparency and authenticity of what is delivered.
  - Showcase specific unique qualities of the individual program.
  - While not all benefits of in-person interviews can be replicated in a virtual environment, a thoughtful and dedicated approach can maximize the value of remote interactions.



Thomas Mohr, MS, DO, FACOI FAODME

## Promotional Video

- You don't need fancy equipment and lighting
- Focus on content – promote your program
- Include people, video, and pictures where possible
- Can post privately on You Tube, Vimeo, or similar platform





## Virtual Tours

- Can be still pictures or video
- Some hospitals already have a tour that can be used
- Ask the hospital PR department to assist
- Best if tailored to GME but doesn't have to be
- Your applicants will likely see many hospitals
  - Facilities often look the same
  - Highlight spaces that are unique or stand out

What is lost in a virtual interview?

How do we capture the interpersonal aspects of an interview?

What about opportunities for social gatherings or informal meetings?

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# Personalizing video interviews

- Virtual tour
- Informal private meet-ups with residents
  - Mutual introductions with residents and applicants
  - Ask residents to share 5 things they most appreciate about the program
- Programs can host opportunities for faculty and interviewees to discuss research and scholarly activities
- Set aside five to 10 minutes during the interview for the program director to greet each interviewee, share an overview of the program/institution/community, and answer questions.

## NBOME | IMPORTANT UPDATE

In light of ongoing health concerns, we are **postponing the start of the COMLEX-USA 2-PE exam cycle and keeping our National Centers for Clinical Skills Testing (NCCSTs) in Chicago and Philadelphia closed for testing at this time.** Governors in states (PA and IL) have mandates in place that have made it impossible to deliver these exams in June.

**Exams up through June 30, 2020 have been cancelled and we anticipate resuming testing on July 1, 2020.** At this time, score release dates for July onward remain on target. We will continue to evaluate the exam schedule on a regular basis. The NBOME remains committed to a valid, reliable, defensible and fair assessment of the fundamental clinical skills required for licensure as an osteopathic physician and by residency program directors.

### Announcements



#### USMLE Suspending Step 2 Clinical Skills Examination

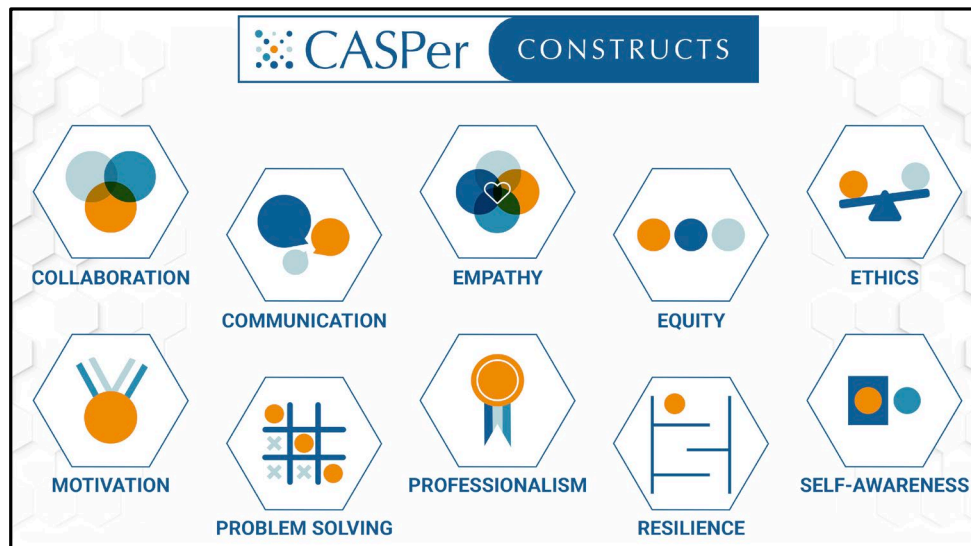
Posted: May 26, 2020

Over the course of the last three months, the USMLE program has considered several options for resuming Step 2 Clinical Skills (CS) testing. This exploration was informed by years of ongoing work charting the future of clinical skills assessment for licensure, including considerations of telehealth (as announced on May 8th). Since the outbreak of the novel Coronavirus pandemic, we have accelerated these efforts. Due to the complexity of technical and psychometric work required, we have determined we will not be able to meet timelines for the immediate release of a revised exam. In making this determination to suspend, we also considered the examinees and stakeholder concerns about the challenges created by rapid deployment of a new test platform. After careful consideration of all factors, we have decided to suspend Step 2 CS test administrations for the next 12-18 months.

“Holistic Review”

- No COMLEX Level 2PE or USMLE Step 2PE
- Questionable MSPEs with online rotations noted
- No in-person interviews

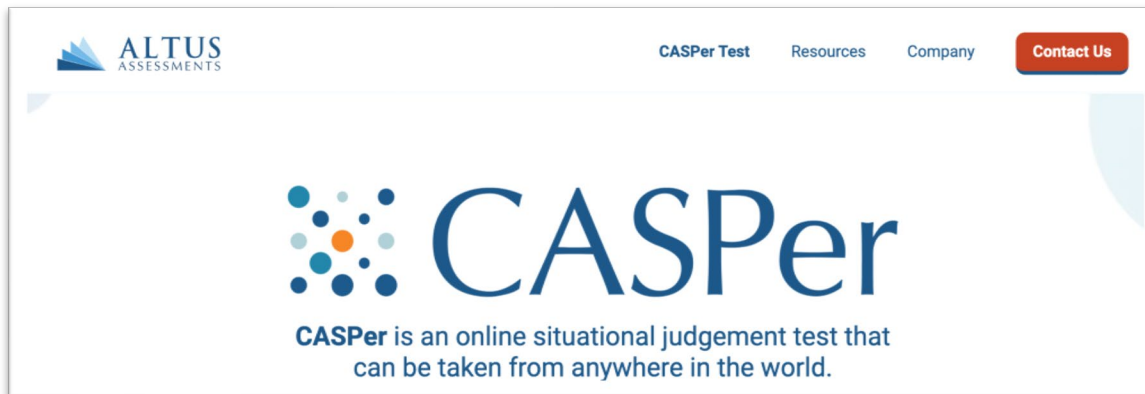




- Assessment of non-cognitive attributes
  - Communications, ethics, empathy, judgment, motivation, professionalism, collaboration
- Primarily used for medical school admissions
  - 90 minute online assessment
  - 12 sections with video-based scenarios
  - Open-ended responses with 5 minute time limit
  - Scored by different trained raters
  - Created by developers of the MMI at McMaster's
- Paid for by applicant
  - \$12 for the test and \$12 for each distribution

# CASPer for GME

- Undergoing Pilot testing now
  - CASPer Test (online Situational Judgement Test)
  - CASPer Fit (Measures alignment to your GME program)
  - CASPer Snapshot (Recorded 2-3 question mini-interview)
  - Programs may sign up to participate
    - Will get access to the results (but not yet validated)
    - There is a cost to the program to participate (not the applicant)
    - E-mail: [gme@altus.as](mailto:gme@altus.as)
    - [www.altus.as/gme](http://www.altus.as/gme)



May 11: The AAMC has new information about upcoming meetings. Learn more. ▶

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## AAMC Situational Judgment Test

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The AAMC Situational Judgment Test (SJT) was developed to enhance the admissions process by helping medical schools assess pre-professional competencies which have been demonstrated to impact an individual's long-term performance as a medical professional.

If incorporated into pre-interview screening, the AAMC SJT could:

**SJT at your school**

Is your medical school interested in learning more about the SJT program? Would you like to discuss how the SJT could add value to your admissions process? Contact [SJT@AAMC.ORG](mailto:SJT@AAMC.ORG)

- Help to facilitate holistic review earlier in the application screening process.
- Offer a balance to academic metrics.
- Identify applicants with particularly weak or strong pre-professional competence who may require further review.
- Broaden the experiential, skills, and demographic diversity of the applicant pool considered for interviews.

- Pilot test underway for UME
- Assessment of non-academic competencies
- No mention of GME yet



# Assessing Hand Skills

## Theoretical for now



### ORIGINAL ARTICLE

## The Impact of Video Games on Training Surgeons in the 21st Century

James C. Rosser, Jr, MD; Paul J. Lynch, MD; Laurie Cuddihy, MD; Douglas A. Gentile, PhD; Jonathan Klonsky, MD; Ronald Merrell, MD

**Background:** Video games have become extensively integrated into popular culture. Anecdotal observations of young surgeons suggest that video game play contributes to performance excellence in laparoscopic surgery. Training benefits for surgeons who play video games should be quantifiable.

**Hypothesis:** There is a potential link between video game play and laparoscopic surgical skill and suturing.

**Design:** Cross-sectional analysis of the performance of surgical residents and attending physicians participating in the Rosser Top Gun Laparoscopic Skills and Suturing Program (Top Gun). Three different video game exercises were performed, and surveys were completed to assess past experience with video games and current level of play, and each subject's level of surgical training, number of laparoscopic cases performed, and number of years in medical practice.

**Setting:** Academic medical center and surgical training program.

**Participants:** Thirty-three residents and attending physicians participating in Top Gun from May 10 to August 24, 2002.

**Main Outcome Measures:** The primary outcome mea-

asures were compared between participants' laparoscopic skills and suturing capability, video game scores, and video game experience.

**Results:** Past video game play in excess of 3 h/wk correlated with 37% fewer errors ( $P < .02$ ) and 27% faster completion ( $P < .03$ ). Overall Top Gun score (time and errors) was 33% better ( $P < .005$ ) for video game players and 42% better ( $P < .01$ ) if they played more than 3 h/wk. Current video game players made 32% fewer errors ( $P = .04$ ), performed 24% faster ( $P < .04$ ), and scored 26% better overall (time and errors) ( $P < .005$ ) than their non-playing colleagues. When comparing demonstrated video gaming skills, those in the top tertile made 47% fewer errors, performed 39% faster, and scored 41% better ( $P < .001$  for all) on the overall Top Gun score. Regression analysis also indicated that video game skill and past video game experience are significant predictors of demonstrated laparoscopic skills.

**Conclusions:** Video game skill correlates with laparoscopic surgical skills. Training curricula that include video games may help thin the technical interface between surgeons and screen-mediated applications, such as laparoscopic surgery. Video games may be a practical teaching tool to help train surgeons.

Arch Surg. 2007;142:181-186

## Video games are changing medical education

JAN 28, 2016

Staff News Writer  
American Medical Association

Video games are creating new ways to teach physicians in training. One physician educator recently explained how gaming can transform competency-based education and shared three video games that are already helping students master clinical skills.

### Transforming student learning

"If any of you have teenagers or know millennials, they're playing these games where they are in the isolation of their environment, but they're communicating with others playing the same game all over the world," Suraiya Rahman, MD, assistant professor at Keck School of Medicine at University of Southern California, told a group of educators during a presentation at the AMA's CHANGEMEDED conference in October. "They are coordinating, getting together and building plans. They're able to adapt different characters, build environments and move in [them]."


Dr. Rahman said students can reap the same benefits of massive multiplayer online role playing games by collaborating with their peers and educators in clinical learning environments.



# Advice for Program Directors

- Pros & Cons of live vs asynchronous interviews
- Preparing applicants and interviewers

If your in-person interview day includes:	Consider this instead:
Multi-hour interview days for interviewers	Limit the time an interviewer can spend conducting consecutive virtual interviews to less than four hours.
Panel interviews	Use recorded virtual interviews rather than live virtual interviews to reduce the burden of coordinating multiple people.
Group activities	Include questions about teamwork.
Role-play activity	Include questions that assess competencies normally assessed during the role-play (e.g., empathy, communication skills) or situational questions that ask the applicant to take on a specific role.
Lunch with current medical students	Set up a virtual meetup with existing students.
Tour of the medical school	Create a short video tour of your school, with interviews of key staff, faculty, and some students

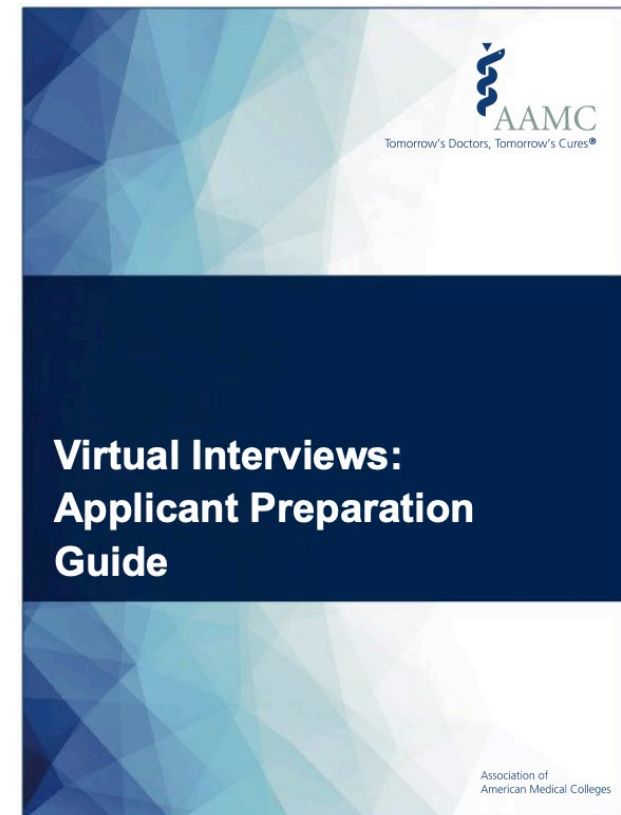
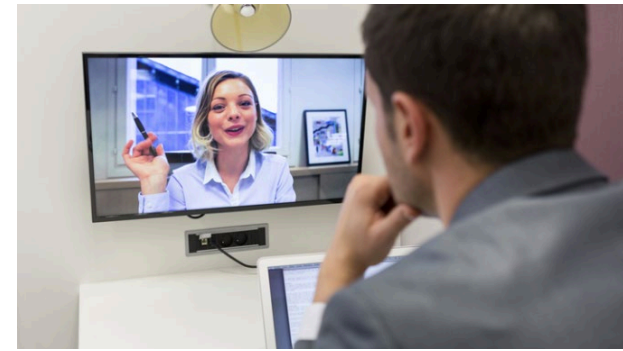


## Virtual Interviews: Tips for Program Directors

Association of  
American Medical Colleges

# Advice for Interviewees

- Treat like a real interview!
  - Don't waste the interviewers time
  - Act & dress professionally
- Test your equipment beforehand
  - Be flexible with technology disruptions
- Consider placement of camera
  - Eye level if possible
  - Take care with surroundings
- Maintain eye contact with the camera
- Minimize Distractions
  - Noise, pets, background, pop-ups



[https://www.aamc.org/system/files/2020-05/Virtual Interview Tips for Applicants 05072020 1.pdf](https://www.aamc.org/system/files/2020-05/Virtual%20Interview%20Tips%20for%20Applicants%2005072020%201.pdf)

<https://thalamusgme.com/top-5-video-interviewing-tips-for-residency-and-fellowship-programs/>

<https://www.ama-assn.org/residents-students/residency/6-tips-ace-video-interviews-residency>

# Interview Prep

The screenshot shows the Big Interview website home page. At the top, there is a navigation bar with 'Learn', 'Practice', 'My Tools', 'My Videos', and 'Assignments'. A purple banner says 'Welcome back, Michelle. Continue learning!' with a 'Start Here' button. Below this are two main sections: 'Video Curriculum' (24 VIDEO LESSONS) and 'Written Curriculum' (24 LESSONS), each with a 'Start now' button. A 'We're here to help!' section mentions the Help Center. At the bottom, there are four boxes: 'Helpful Get Started Videos', 'System Requirements', 'PRACTICE Section - Mock Interviews', and 'LEARN Section - Interview Training'.

This screenshot displays the 'All Categories - Residency Specialties' section. It features three main categories: 'General Residency' (Covers 80% of the interview questions you might get.), 'Residency Specialties' (Start practicing mock interviews in different specialties.), and 'By Competency' (Practice interview questions sorted by competency & skillset.). Below these is a grid of 24 specialty categories, each with an icon and name: Anesthesiology, Dermatology, Emergency Medicine, Family Medicine, General Surgery, Internal Medicine, Neurological Surgery, Neurology, OB/GYN, Ophthalmology, Orthopedic Surgery, Otolaryngology, Pathology, Pediatrics, Physical Medicine & Rehab, Plastic Surgery, Psychiatry, Radiation - Oncology, Radiology, Thoracic Surgery, and Urology. Vascular Surgery is listed at the bottom.

The screenshot shows a video question interface. On the left is a list of 12 questions, with the first one selected: '1. Describe a difficult problem you had on one of your clinical rotations and how you handled it.' The main area features a video player with a woman speaking. Below the video is a 'Tips' button. To the right of the video is a black box with the text 'Record your answer for this question' and a 'Start recording' button. At the bottom are 'Back' and 'Next question' buttons.

- \$79/month
- Interview curriculum
- Coaching
- Practice tool

<https://biginterview.com>

# Virtual Residency Fair

Join the AACOM/AOGME Virtual Residency Fair



**Friday, August 14, 2020**

**1:00PM – 9PM ET**

Join us for the first AACOM/AOGME Virtual Residency Fair to give potential candidates and programs an extra opportunity to connect with each other during the 2020-2021 residency application process. This year is unlike any other for the residency application and review process, with less information and fewer opportunities for connections between programs and medical students. Join the residency fair to showcase and share information about your program, your selection criteria and connect and learn about potential candidates.



Questions?

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