

# CHARTING OUTCOMES™: DEMOGRAPHIC CHARACTERISTICS OF APPLICANTS IN THE MAIN RESIDENCY MATCH

In January 2021, the NRMP Board of Directors voted to approve the collection of primary source demographic data from applicants commencing with the 2022 Main Residency Match. The decision was based on months-long study, including solicitation of feedback from the undergraduate and graduate medical education communities and leaders of national learner organizations. Key considerations in favor of collecting demographic information from applicants included the ability to better understand and report on the composition of residency applicant populations, inform efforts to address diversity, equity, inclusion, and belonging goals in the transition to residency, and increase the transparency and understanding of the matching process. There is a critical need to understand the roles of applicant demographics and potentially related biases at all points in the UME-GME transition, from application submission and review through interviewing and ranking.

#### Identification of Content Domains and Sourcing of Items

A work group consisting of NRMP Board members was convened to identify appropriate content domains and items within those content domains for querying applicant demographics. The final set of content domains included sex assigned at birth, sexual orientation, current gender identity, race and ethnicity, urbanicity of childhood rearing environment, childhood socioeconomic disadvantage, first-generation graduation from college, first-generation graduation from medical school, disability status, and accommodations requested and received in medical school.

To the extent possible, the work group preferred that the domains include items from existing medical education and national questionnaires and align with the demographic data collection efforts of other medical education organizations. Toward that end, the NRMP conducted examinations of questionnaires administered by entities overseeing medical education (e.g., the Association of American Medical Colleges) and physician licensing (e.g., the Federation of State Medical Boards), as well as existing national health-related surveys of the general population. The work group also directed staff to review relevant literature to locate potentially suitable measures.

When items of interest could not be identified in existing surveys, special-purpose items were crafted by the work group. Those included questions addressing childhood urbanicity and first-generation college and medical graduation. The final selection of items used to query applicant demographics may be found in Appendix A.

#### **Data Collection Procedures**

Demographic data items are administered within the NRMP's Registration, Ranking, and Results (R3) system as part of Match registration. Applicants are introduced to the items with language that makes clear the data are collected for research purposes. They are told they may refuse consent for the use of their data in research and may opt out of answering any or all questions. Further, they are informed that their demographic data will never be incorporated into the matching algorithm, never be identifiable or disaggregated for the public, and never be provided in identifiable form to programs. The NRMP's demographic data collection protocol underwent Institutional Review Board (IRB) review and was determined to be exempt from IRB oversight.

## Structure and Content of this Report

### Data Cell Size Requirements

To preserve applicant confidentiality, a minimum cell size of 25 respondents was required for all data points included in the report. In some cases, that threshold affected which demographic characteristics could be reported (for instance, a specialty may not have the cell sizes to allow race to be reported). It also restricted which response options within a characteristic could be reported (i.e., race could be reported for a specialty but only for specific race groups like Black/African American, Asian, and White). The NRMP will collect data annually; accordingly, the ability to present data with increasing granularity will improve for all specialties over time without compromising applicant confidentiality.

#### Data Presentation

With the first iteration of the report, considerations about how best to present the data were purposely broad and exploratory, the overarching goal being to provide as much specialty-specific data as possible even if it resulted in the creation of different profiles across specialties. This report includes demographic characteristics reported by applicants who participated in the **2022 and 2023 Main Residency Matches**. The viewer can choose to view the data for each year individually, or cumulatively, using the **Match Year dropdown menu**.

A unique component of the report is the ability to examine applicant demographics by **preferred specialty** (i.e., the specialty of the program ranked first on each applicant's rank order list). Because some specialties, particularly those involving combined programs, will not have enough data to populate any of the visualizations for at least the first few years of data collection, individuals viewing the visualizations will have the option to select individual preferred specialties, or superordinate categories into which some of the smaller specialties have been rolled. For example, if viewers are interested in viewing the data for Internal Medicine in addition to its combined specialties, they can select "Internal Medicine & All Combined Specialties" from the **Preferred Combined Specialty Group dropdown menu**. If viewers are interested in viewing Internal Medicine on its own or any of the individual combined specialties, they can select "Internal Medicine" or any other specific specialty from the **Preferred Specialty** dropdown menu.

It is important to reiterate that preferred specialty is based on the first-ranked specialty on each applicant's rank order list and does not necessarily mean that an applicant obtained a position within that preferred specialty. For example, applicants whose preferred specialty is Anesthesiology (first rank position) but who obtain a position in Internal Medicine will appear in the visualizations under Anesthesiology, *not* Internal Medicine.

Within each preferred specialty, two dynamics were considered: 1) the extent to which demographic characteristics could be reported by **positions obtained in either the Main Residency Match or SOAP, as well as outcomes of the Main Residency Match (matched versus unmatched by the algorithm),** and 2) the extent to which these characteristics could be reported by **applicant type** (i.e., U.S. MD senior, U.S. DO senior, U.S. MD graduate, U.S. DO graduate, U.S. IMG, non-U.S. IMG). Exploring the 2022 and 2023 data through this lens led to the following set of possible visualizations for each preferred specialty (in order of appearance):

- Active Main Residency Match by Preferred Specialty: Visualizes the ten demographic characteristics for each preferred specialty, combining over all applicant types.
- **Applicant Positions Obtained, Main Residency Match and SOAP:** Visualizes the ten demographic characteristics by preferred specialty and by positions obtained (i.e., obtaining a position through the Main Residency Match algorithm or during SOAP vs. not obtaining a position through either process).
- Main Residency Match Outcomes: Visualizes the ten demographic characteristics by preferred specialty and by outcome in the Main Residency Match (i.e., matched through the Main Residency Match algorithm vs. unmatched through the Main Residency Match algorithm). The "matched through algorithm" category includes applicants who matched to their preferred specialty as well as those who matched to a non-preferred specialty. This visualization does not include data related to the SOAP process.
- Active Main Residency Match Applicants by Applicant Type: Visualizes the ten demographic characteristics by preferred specialty of interest and by applicant type (i.e., U.S. MD seniors, U.S. DO seniors, U.S. MD graduates, U.S. DO graduates, U.S. IMGs, non-U.S. IMGs). Viewers can choose which of the six applicant types they are interested in viewing within this visualization. This visualization appears on two separate screens, each including five of the ten characteristics.
- Applicants by Positions Obtained and Applicant Type: Visualizes the ten demographic characteristics by preferred specialty, positions obtained (i.e., obtained a position through the Main Match algorithm or during SOAP vs. did not obtain a position), and applicant type (i.e., U.S. MD seniors, U.S. DO seniors, U.S. MD graduates, U.S. DO graduates, U.S. IMGs, non-U.S. IMGs). Viewers can choose which of the six applicant types they are interested in viewing within this visualization. This visualization appears on two separate screens, each including five of the ten characteristics.

The visualizations included at the preferred specialty level have between one and 10 demographic characteristics reported. In cases where only a subset of the available response options are reported (due to small cell sizes), the percentages included in the visualizations are based only on applicants who endorsed the response options with sufficient cell sizes to report. For example, in the Applicant Positions Obtained visualization, some cell sizes for the "did not obtain a position" response option are too small to report, leading to some categories reporting 100 percent of a grouping as having obtained a position. This represents 100 percent of the data included in the visualization after the removal of the prohibitively small cells but does not represent 100 percent of the underlying data.

Consistent with standard practice in analyses of survey data, the response options "I do not know" and "I prefer not to answer" were combined for all demographic characteristics that included these two options. For first-generation college and first-generation medical school graduation, the two "yes" categories (i.e., yes first in my immediate family, yes first in my extended family) were also combined. Please see Appendix A for additional detail about the demographic characteristics queried and associated response options.

### Sample and Consent Rates for the Present Report

#### Sample

The report highlights active applicants (i.e., applicants who certified a rank order list) in the 2022 and 2023 Main Residency Match in 41 specialties or specialty groups. Canadian and Fifth Pathway applicants and those who preferred Osteopathic Neuromusculoskeletal Medicine were excluded because of their small numbers. In addition, applicants who ranked a preliminary program first on their rank order lists, or who matched to a preliminary program (including Transitional Year) irrespective of their preferred specialties, were excluded from this version, yielding a final sample size of 70,922. Exclusion of applicants who preferred or matched to preliminary programs yielded the largest *absolute* decreases in sample sizes for Surgery-General in both 2022 (from 2,315 to 1,918) and 2023 (from 2,377 to 1,994). The largest *percentage* decreases were also seen in Surgery-General in both 2022 (17.2 percent) and 2023 (16.1 percent). Analyses of applicants who preferred or matched to preliminary programs will be made available in the next iteration of the report.

#### **Consent Rates**

Percentages of active applicants who consented to provide demographic data for research, combining over all applicant types, are shown in Table 1. Overall, 86.4 percent of Main Residency Match applicants consented to provide demographic data in both 2022 (N=35,318) and 2023 (N=35,630), but consent rates varied both by specialty and by applicant type. The highest consent rates for 2022 were in Pediatrics/Psychiatry/Child and Adolescent Psychiatry (91.0 percent) and lowest in Radiation Oncology (80.1 percent). The highest consent rates for 2023 were in Medicine/Psychiatry (95.1 percent) and lowest in Vascular Surgery (79.7 percent). Consent to provision of demographic data for research by applicant type, combining over preferred specialties, are shown in Table 2. The highest percentages consenting to use of data in both 2022 and 2023 were observed among U.S. MD seniors (88.9 percent in 2022; 88.5

percent in 2023). Rates were lowest among U.S. DO graduates in 2022 (77.2 percent) and 2023 (74.4 percent).

Preferred Specialty <sup>2</sup>	Number of Active Applicants <sup>1</sup> Preferring the Specialty		Number Consenting to Provide Demographic Data for Research		Consent Rate (%)	
	2022	2023	2022	2023	2022	2023
Anesthesiology	2,439	2,667	2,073	2,321	85.0	87.0
Child Neurology	181	202	162	183	89.5	90.6
Dermatology	723	741	582	607	80.5	81.9
Emergency Medicine	2,811	2,482	2,519	2,183	89.6	88.0
Family Medicine	5,045	4,743	4,293	4,019	85.1	84.7
Internal Medicine	11,523	11,960	9,819	10,291	85.2	86.1
Interventional Radiology (Integrated)	216	218	181	191	83.8	87.6
Medicine/Emergency Medicine	57	45	49	38	86.0	84.4
Medicine/Pediatrics	458	424	406	380	88.7	89.6
Medicine/Psychiatry	43	41	39	39	90.7	95.1
Neurological Surgery	368	347	322	288	87.5	83.0
Neurology	1,238	1,353	1,083	1,159	87.5	85.7
Obstetrics and Gynecology	2,024	1,972	1,836	1,776	90.7	90.1
Orthopaedic Surgery	1,402	1,364	1,223	1,199	87.2	87.9
Otolaryngology	544	467	489	413	89.9	88.4
Pathology-Anatomic and Clinical	827	895	698	762	84.4	85.1
Pediatrics	3,153	3,114	2,830	2,791	89.8	89.6
Pediatrics/Medical Genetics	33	28	28	26	84.9	92.9
Pediatrics/Psychiatry/Child and Adolescent Psychiatry	37	37	34	32	91.0	86.5
Physical Medicine and Rehabilitation	693	694	580	580	83.7	83.6
Plastic Surgery (Integrated)	326	313	279	277	85.6	88.5
Psychiatry	2,554	2,728	2,169	2,303	85.0	84.4
Radiation Oncology	161	171	129	146	80.1	85.4
Radiology-Diagnostic	1,455	1,560	1,242	1,324	85.4	84.9
Surgery-General	2,205	2,293	1,918	1,994	87.0	87.0
Thoracic Surgery	84	102	74	86	88.1	84.3
Vascular Surgery	136	118	120	94	88.2	79.7
Other Specialties	155	143	141	128	91.0	89.5
TOTAL	40,891	41,222	35,318	35,630	86.4	86.4

Table 1. Consent Rates by Preferred Specialty<sup>1</sup>

<sup>1</sup> Active applicants are applicants who certified a rank order list. Excludes Canadian and Fifth Pathway applicants, those who preferred Osteopathic Neuromusculoskeletal Medicine, both exclusions due to small subgroup sizes. Applicants who ranked a preliminary program first on their rank order lists, or who matched to a preliminary program (including Transitional Year) irrespective of their preferred specialties, were also excluded from this version of the report.

<sup>2</sup> Preferred specialties that did not meet the minimum cell size for individual inclusion in this table (< 25 respondents) but are include in the "Other Specialties" row include: Diagnostic Radiology/Nuclear Medicine, Emergency Medicine/Anesthesiology, Emergency Medicine/Family Medicine, Family Medicine/Preventive Medicine, Medicine/Anesthesiology, Medicine/Dermatology, Medicine/Medical Genetics, Medicine/Preventive Medicine, Neurodevelopmental Disabilities, Pediatrics/Anesthesiology, Pediatrics/Emergency Medicine, Pediatrics/Physical Medicine and Rehabilitation, Psychiatry/Family Medicine, Psychiatry/Neurology.</p>

Applicant Type		MP active ants <sup>1</sup> , N		l to provide c data, N (%)
	2022	2022 2023		2023
U.S. MD Seniors	19,186	19,028	88.9	88.5
U.S. DO Seniors	7,096	7,244	88.4	88.5
U.S. MD Graduates	1,642	1,583	77.3	76.7
U.S. DO Graduates	680	641	77.2	74.4
U.S. IMGs	4,802	4,693	80.7	82.4
Non-U.S. IMGs	7,485	8,033	84.5	84.9

Table 2. Consent Rates (%) by Applicant Type

<sup>1</sup> Active applicants are applicants who certified a rank order list. Excludes Canadian and Fifth Pathway applicants, those who preferred Osteopathic Neuromusculoskeletal Medicine, both exclusions due to small subgroup sizes. Applicants who ranked a preliminary program first on their rank order lists, or who matched to a preliminary program (including Transitional Year) irrespective of their preferred specialties, were also excluded from this version of the report.

#### "Do Not Know" and "Prefer Not to Answer" Responses

The percentages of active applicants who consented to provide demographic data for research and indicated that they did not know or preferred not to answer one or more items were nearly identical in 2022 (19.1 percent) and 2023 (19.2 percent). As noted previously, these two response options were combined for the analyses. Among applicants who did not know or preferred not to answer any items, the majority (13.4 percent of the total sample in 2022, 13.5 percent in 2023) gave this response to only one question. As with consent to provide demographic data, do not know/prefer not to answer responses to demographic questions varied by preferred specialty (Table 3). The lowest percentages of applicants who gave any do not know/prefer not to answer responses preferred the specialties of Thoracic Surgery (12.2 percent) in 2022 and Medicine/Psychiatry (12.8 percent) in 2023 while the highest percentages preferred Pediatrics/Psychiatry/Child and Adolescent Psychiatry in both 2022 (26.5 percent) and 2023 (31.3 percent). Do not know/prefer not to answer responses also varied by applicant type (Table 4). The lowest percentage of applicants providing any of these responses was observed among non-U.S. IMGs in both 2022 (28.5 percent) and 2023 (26.0 percent); the highest, among U.S. DO graduates in both 2022 (28.5 percent) and 2023 (26.0 percent).

Preferred Specialty <sup>2</sup>	Number of "Do Not Know/Prefer Not to Answer" Responses, % <sup>3</sup>				,			
Freieneu Specially	(	)		1		2	3 or	more
	2022	2023	2022	2023	2022	2023	2022	2023
Anesthesiology	81.0	78.1	13.3	14.6	2.8	3.4	3.0	3.9
Child Neurology	77.8	76.0	18.5	18.0	1.9	3.8	1.9	2.2
Dermatology	77.0	81.9	13.6	12.4	4.5	2.5	5.0	3.3
Emergency Medicine	80.3	78.2	13.9	15.6	3.8	3.9	2.0	2.3
Family Medicine	78.3	78.7	15.2	15.2	3.2	3.7	3.3	2.4
Internal Medicine	82.8	83.4	12.1	11.8	2.7	2.4	2.4	2.4
Interventional Radiology (Integrated)	82.9	80.1	11.1	13.6	1.7	4.2	4.4	2.1
Medicine/Emergency Medicine	83.7	76.3	14.3	18.4	2.0	5.3	0.0	0.0
Medicine/Pediatrics	83.7	79.0	11.8	15.8	2.7	2.6	1.7	2.6
Medicine/Psychiatry	84.6	87.2	12.8	12.8	2.6	0.0	0.0	0.0
Neurological Surgery	75.8	79.5	17.4	14.2	2.8	2.8	4.0	3.5
Neurology	80.2	79.3	13.8	14.7	3.4	2.9	2.7	3.1
Obstetrics and Gynecology	82.8	81.6	12.5	14.4	2.7	2.8	1.9	1.2
Orthopaedic Surgery	84.3	84.5	11.8	10.5	1.4	2.6	2.5	2.4
Otolaryngology	87.1	85.7	9.2	11.1	1.8	1.5	1.8	1.7
Pathology-Anatomic and Clinical	78.4	81.2	14.0	12.9	3.4	3.7	4.2	2.2
Pediatrics	83.4	83.4	12.2	12.4	2.8	2.9	1.7	1.3
Pediatrics/Medical Genetics	85.7	73.1	7.1	23.1	7.1	3.9	0.0	0.0
Pediatrics/Psychiatry/Child and Adolescent Psychiatry	73.5	68.8	20.6	25.0	5.9	6.3	0.0	0.0
Physical Medicine and Rehabilitation	80.5	79.3	14.0	14.1	2.4	4.3	3.1	2.2
Plastic Surgery (Integrated)	83.5	82.0	11.1	11.2	1.8	3.6	3.6	3.3
Psychiatry	75.1	74.3	16.6	17.0	4.4	4.9	3.9	3.9
Radiation Oncology	79.8	83.6	14.0	12.3	3.1	2.7	3.1	1.4
Radiology-Diagnostic	79.6	81.9	13.3	11.9	3.1	3.3	4.0	3.0
Surgery-General	78.3	80.3	15.8	13.3	2.9	3.1	3.1	3.3
Thoracic Surgery	87.8	79.1	12.2	14.0	0.0	3.5	0.0	3.5
Vascular Surgery	83.3	80.9	12.5	11.7	2.5	2.1	1.7	5.3
Other Specialties	74.4	74.2	16.8	16.4	5.8	1.6	2.9	7.8
TOTAL	80.9	80.9	13.4	13.5	3.0	3.1	2.7	2.6

# Table 3. "Do Not Know/Prefer Not to Answer" Responses to Demographic Questions by Preferred Specialty<sup>1</sup>

<sup>1</sup> Active applicants are applicants who certified a rank order list. Excludes Canadian and Fifth Pathway applicants, those who preferred Osteopathic Neuromusculoskeletal Medicine, both exclusions due to small subgroup sizes. Applicants who ranked a preliminary program first on their rank order lists, or who matched to a preliminary program (including Transitional Year) irrespective of their preferred specialties, were also excluded from this version of the report.

<sup>2</sup> Preferred specialties that did not meet the minimum cell size for individual inclusion in this table (< 25 respondents) but are include in the "Other Specialties" row include: Diagnostic Radiology/Nuclear Medicine, Emergency Medicine/Anesthesiology, Emergency Medicine/Family Medicine, Family Medicine/Preventive Medicine, Medicine/Anesthesiology, Medicine/Dermatology, Medicine/Medical Genetics, Medicine/Preventive Medicine, Neurodevelopmental Disabilities, Pediatrics/Anesthesiology,

Pediatrics/Emergency Medicine, Pediatrics/Physical Medicine and Rehabilitation, Psychiatry/Family Medicine, Psychiatry/Neurology.

<sup>3</sup> Some percentages may not add to 100 because of rounding.

# Table 4. "Do Not Know/Prefer Not to Answer" Responses to Demographic Questions byApplicant Type1

Applicant Type	1	Number of "Do Not Know/Prefer Not to Answer" Responses, %2						
		0		1	2	2	3 or	more
	2022	2023	2022	2023	2022	2023	2022	2023
U.S. MD Seniors	81.5	80.6	13.3	13.9	3.1	3.3	2.2	2.2
U.S. DO Seniors	79.8	79.3	14.3	14.7	3.1	3.4	2.8	2.6
U.S. MD Graduates	74.6	76.5	16.3	15.4	4.0	2.6	5.1	5.4
U.S. DO Graduates	71.5	74.0	17.8	14.3	4.1	5.0	6.6	6.7
U.S. IMGs	75.9	77.3	16.1	15.3	3.9	3.9	4.1	3.6
Non-U.S. IMGs	85.4	86.2	10.4	9.8	1.8	1.9	2.4	2.1

<sup>1</sup> Active applicants are applicants who certified a rank order list. Excludes Canadian and Fifth Pathway applicants, those who preferred Osteopathic Neuromusculoskeletal Medicine, both exclusions due to small subgroup sizes. Applicants who ranked a preliminary program first on their rank order lists, or who matched to a preliminary program (including Transitional Year) irrespective of their preferred specialties, were also excluded from this version of the report.

<sup>2</sup> Some percentages may not add to 100 because of rounding.

# Appendix A

Below is a list of the demographic items that were queried of applicants participating in the 2022 and 2023 Main Residency Matches. Due to small cell sizes, not all demographic items could be presented in the report. In future years, as sample size accrues, additional variables and response options will be reported for more specialties and at greater levels of granularity.

Items	Source(s)
Are you of Hispanic, Latino, or Spanish origin or descent?	Adapted from Substance Abuse
□ Yes	and Mental Health Services Administration National Survey on
□ No	Drug Use and Health
□ Don't know/decline to answer	
(If of Hispanic, Latino, or Spanish origin or descent:)	
Which of these Hispanic, Latino, or Spanish groups best describes you? ( <i>More than one category may be selected</i> .)	
🗆 Mexican, Mexican American, Mexicano, or Chicano	
□ Puerto Rican	
Central or South American	
Cuban or Cuban American	
Dominican (from Dominican Republic)	
□ Spanish (from Spain)	
□ Other (specify)	
□ I do not know □ I prefer not to answer	
Which of these groups describes you? ( <i>More than one category may be selected</i> .) <sup>a</sup>	
□ White	
□ Black or African American	
American Indian or Alaska Native (American Indian includes North American, Central American, and South American Indians)	

□ Native Hawaiian	
Guamanian or Chamorro	
□ Samoan	
□ Other Pacific Islander	
□ Asian (including: Asian Indian, Pakistani, Bangladeshi, Sri Lankan, Chinese, Filipino, Japanese, Korean, and Vietnamese)	
Other (specify)	
□ I do not know □ I prefer not to answer	
(If identified as Asian:)	
Please tell me which of these Asian groups describes you?	
□ Asian Indian	
🗆 Pakistani	
🗆 Bangladeshi	
🗆 Sri Lankan	
Filipino	
£ Japanese	
□ Korean	
□ Vietnamese	
□ Other (specify)	
□ I do not know □ I prefer not to answer	
(If identified as other racial group 2 questions previously)	
Please tell me which other racial group describes you	
□ I do not know □ I prefer not to answer	
How would you characterize the area in which you grew up?	Developed by Work Group

□ Rural	
□ Suburban	
□ Urban	
□ I do not know	
□ I prefer not to answer	
Are you the first member of your family to graduate from college?	Developed by Work Group
□ Yes, immediate family	
□ Yes, extended family	
□ No	
□ I do not know	
□ I prefer not to answer	
Are you the first member of your family to graduate from medical school?	Developed by Work Group
□ Yes, immediate family	
□ Yes, extended family	
□ No	
□ I do not know	
□ I prefer not to answer	

(These two items were only asked of U.S. citizens.)	Adapted from National Institute on Alcohol Abuse and Alcoholism
	National Epidemiologic Survey on
Before you were 18 years old, was there ever a time when your family received money from government assistance programs? Examples include: food stamps or Supplemental Nutrition Assistance Program (SNAP); National School Lunch Program; general assistance; welfare; Aid to Families with Dependent Children; or Temporary Assistance for Needy Families?	Alcohol and Related Conditions- III, 2011
□ Yes	
□ No	
□ I do not know	
$\Box$ I prefer not to answer	
Before you were 18, did you have to work to contribute to your family's income?	
🗆 No	
□ I do not know	
□ I prefer not to answer	
What sex were you assigned at birth?	Association of American Medical
□ Male	Colleges (AAMC) Matriculating Student Questionnaire (MSQ) and
	Year 2 Questionnaire (Y2Q), 2020
$\Box$ I prefer not to answer	
What is your current gender identity? Select all that apply:	AAMC MSQ and Y2Q, 2020
□ Male	
□ Trans male/Trans man	
□ Trans female/Trans woman	
Genderqueer/gender nonconforming	

Different identity (please state)	
$\Box$ I prefer not to answer	
How do you self-identify?	Adapted from AAMC Y2Q and
□ Bisexual	MSQ, 2020
□ Gay or lesbian	
Heterosexual or straight	
□ I do not know	
□ I prefer not to answer	
If one of the above three identities did not best describe you, then with what identity do you feel more comfortable?	
I self-identify as:	
□ I prefer not to answer	
Are you a person with a disability (e.g., ADHD, learning, psychological, chronic health, mobility, hearing, vision, etc.)?	AAMC Y2Q, 2020
□ Yes	
🗆 No	
□ I do not know	
□ I prefer not to answer	

(If responded affirmatively to the above:)	AAMC Y2Q, 2020
Which of the following best describes your disability? If you have more than one type, select all that apply. (Optional: please add a brief description where provided.)	
□ Attention deficit/hyperactivity disorder	
□ Chronic health disability	
$\Box$ Deaf or hard of hearing	
□ Learning disability	
□ Mobility disability	
□ Psychological disability	
□ Visual disability	
□ Other	
□ I do not know	
$\Box$ I prefer not to answer	
(If responded "yes" to disability question:)	AAMC Y2Q, 2020
Did you request accommodations from your medical school?	
□ No	
□ I do not know	
□ I prefer not to answer	
(If responded "yes" to whether requested accommodations:)	AAMC Y2Q, 2020
Has your medical school provided accommodations for your disability?	
□ Yes	
🗆 No	
□ I do not know	
□ I prefer not to answer	

( <i>If accommodation not provided</i> :) Which of the following best describes why your medical school did not or has not provided accommodations?	AAMC Y2Q, 2020
My request for accommodations was denied	
□ My request for accommodations is under review	
□ I do not know	
□ I prefer not to answer	
( <i>If responded "no" to whether requested accommodations</i> :) Which of the following best describes why you did not request accommodations from your medical school?	AAMC Y2Q, 2020
I have not requested accommodations because I feel I do not need accommodations	
□ I have not requested accommodations for other reasons	
(Please specify:)	
□ I do not know	
□ I prefer not to answer	

<sup>a</sup> Applicant-reported race is reported here with each applicant classified in a single category based on a modification of the Census Bureau algorithm as implemented in the 2010 Census. In the future the NRMP Research Team plans to explore other approaches that may have greater utility for classification. Going forward the NRMP Research Team will also examine the subgroup compositions of the race identity categories and develop additional codes for them as needed.

In the categorization used for this report, applicants were assigned to categories using the following order of precedence: Native American/Alaska Native, Pacific Islander, Asian, Black/African American, White, and Other.