

CHARTING OUTCOMES™: DEMOGRAPHIC CHARACTERISTICS OF APPLICANTS IN THE MAIN RESIDENCY MATCH® AND SOAP®, 2025

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Introduction

Data Collection Procedures

Demographic data items are administered within the National Resident Matching Program® (NRMP) 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 and reporting. Applicants are explicitly instructed that they may refuse consent for the use of their data and may opt out of answering any or all questions. Questions also provide the response options, "I prefer not to answer" and "I do not know". Applicants are further informed 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. For more information on how the final set of demographic items were sourced, along with the final set of items used to query applicant demographics for the 2025 Main Residency Match (MRM), see Appendix A.

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

This report expands upon last year's report, which included data for the 2022, 2023, and 2024 Main Residency Matches, with the inclusion of demographic characteristics reported by applicants who participated in the **2025 Main Residency Match**. 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 but who obtain a position in Internal Medicine will appear in the visualizations under Anesthesiology, <u>not</u> Internal Medicine. This is to better understand the patterns of applicants and their ranked specialty, not necessarily their outcome.

While most visualizations offer the ability to examine the demographic information by preferred specialty, there are also visualizations that allow the viewer to examine the information by matched specialty (i.e., the specialty an applicant matched to through the match algorithm regardless of whether that specialty was preferred) and accepted specialty (i.e., the specialty in which an applicant who participated in SOAP accepted an offer in). The Matched Combined Specialty Group, Matched Specialty Group, Accepted Combined Specialty Group, and Accepted Specialty Group dropdown menus function in the same way as the Preferred Combined Specialty Group and Preferred Specialty Group dropdown menus described above.

In addition to the ability to examine the demographic information by specialty, three other dynamics were considered: 1) the extent to which demographic characteristics could be reported by positions obtained in either the MRM or SOAP, as well as outcomes of the MRM (matched versus unmatched by the algorithm), 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), and 3) the extent to which demographic characteristics could be reported by program type (i.e., Categorical, Primary, Preliminary/Transitional, Advanced, Reserved (also known as "Physician Positions")). Many visualizations include an Applicant Type dropdown menu, which allows the viewer to view the information by each of the six applicant types. Many also include a Program Type dropdown menu, which allows the viewer to view the demographic characteristics by program position type.

For a full list of visualizations and other components of this report, viewers can visit the Table of Contents screen within the interactive version of the report. Visualizations are broken into two main categories, 1) Main Residency Match and SOAP, and 2) Main Residency Match (Active Applicants Only). Below is a list of visualization types within each category, as well as a description of each.

Main Residency Match and SOAP

- Registered Applicants by Applicant Type: Main Residency Match and SOAP—All applicants who <u>registered</u> to participate in the Match by applicant type.
- Active Applicant Positions Obtained: Main Residency Match and SOAP—Positions
 obtained by active applicants (certified a rank order list) during the Match and/or SOAP
 by preferred specialty.
- Active Applicants by Positions Obtained and Applicant Type: Main Residency
 Match and SOAP—Positions obtained by active applicants in the Match and/or SOAP
 by preferred specialty and applicant type.

- SOAP Positions Accepted by Specialty All Applicants: Main Residency Match and SOAP—SOAP positions accepted by applicant type.
- SOAP Eligible Applicants with No Position: Main Residency Match and SOAP—SOAP-eligible applicants who did not obtain a position through the Match or SOAP.

Main Residency Match (Active Applicants Only)

- Active Applicants by Preferred Specialty: Main Residency Match—Demographic characteristics by preferred specialty—all applicant types.
- Active Applicants by Applicant Type: Main Residency Match—Demographic characteristics by preferred specialty and applicant type.
- Active Applicants by Match Outcomes: Main Residency Match—Demographic characteristics by preferred specialty and Match outcomes.
- Active Applicants by Matched Specialty: Main Residency Match—Demographic characteristics by matched specialty—all applicant types.
- Active Unmatched Applicants by Preferred Specialty: Main Residency Match— Demographic characteristics of unmatched applicants by preferred specialty.

The visualizations included at the specialty level have between one and 10 demographic characteristics reported. In cases where only a subset of the available response options is 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

This section of the report highlights active applicants in the 2025 Main Residency Match, which included 45 specialties or specialty groups. Canadian and Fifth Pathway applicants were excluded because of their small numbers, yielding a final sample size of 47,202 active applicants.

Consent Rates

Percentages of active applicants who consented to provide demographic data for research, combining over all applicant types, are shown in Table 3 by preferred specialty, and shown in Table 4 by matched specialty. Overall, 85.3 percent of Main Residency Match applicants consented to provide demographic data in 2025 (N=40,266). Consent rates also varied both by specialty and by applicant type. Among specialties with at least 25 consenting active applicants, the highest consent rates for 2025 were in Psychiatry/Family Medicine by *preferred* specialty (96.6 percent) and Internal Medicine/Pediatrics by *matched* specialty (92.2 percent). The lowest consent rates were in Occupational & Environmental Medicine by *preferred* specialty (64.4 percent) and Public Health and Preventive Medicine by *matched* specialty (73.3 percent). Consent to provision of demographic data for research by applicant type, combining over preferred specialties, are shown in Table 1. The highest percentage consenting to use of data in 2025 was observed among U.S. DO Seniors (87.9 percent) while the lowest rate was observed among U.S. MD Graduates (72.2 percent).

"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 was 20.0 percent by *preferred* specialty and 20.1 percent by *matched* specialty. 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 gave this response to only one question, accounting for 13.9 percent of the total sample by preferred specialty and 14.0 percent of the overall sample by matched specialty. As with consent to provide demographic data, do not know/prefer not to answer responses to demographic questions varied by preferred specialty (Table 5) and matched specialty (Table 6). Among specialties with at least 25 consenting active applicants, the lowest percentages of applicants who gave any do not know/prefer not to answer responses were in Thoracic Surgery by both preferred specialty (15.6 percent) and matched specialty (13.3 percent). The highest rates of applicants endorsing these responses were in Occupational and Environmental Medicine by preferred specialty (41.4 percent) and Internal Medicine/Emergency Medicine by *matched* specialty (44.8 percent). Do not know/prefer not to answer responses also varied by applicant type (Table 2). The lowest percentage of applicants providing any of these responses was observed among non-U.S. IMGs (13.9 percent) while the highest was observed among U.S. MD Graduates (27.7 percent).

Table 1. Consent Rates (%) by Applicant Type—MRM 2025

Applicant Type	Total NRMP active applicants ¹ , N	Consented to provide demographic data, N (%)
U.S. MD Seniors	20,374	17,760 (87.2)
U.S. DO Seniors	8,395	7,383 (87.9)
U.S. MD Graduates	1,750	1,263 (72.2)
U.S. DO Graduates	630	478 (75.9)
U.S. IMGs	4,587	3,736 (81.4)
Non-U.S. IMGs	11,466	9,646 (84.1)

Active applicants are applicants who certified a rank order list. Excludes Canadian and Fifth Pathway applicants due to small subgroup sizes.

Table 2. "Do Not Know/Prefer Not to Answer" Responses to Demographic Questions by Applicant Type—MRM 2025

Applicant Type	Number ¹ of "Do Not Know/Prefer Not to Answer" Responses among Active Applicants ² , % ³			
	0	1	2	3 or more
U.S. MD Seniors	78.7	14.8	3.6	2.9
U.S. DO Seniors	79.0	14.7	3.3	3.0
U.S. MD Graduates	72.3	17.0	4.5	6.2
U.S. DO Graduates	73.6	17.4	3.8	5.2
U.S. IMGs	75.2	16.2	4.4	4.1
Non-U.S. IMGs	86.1	10.1	2.0	1.8

Two questions pertaining to childhood socioeconomic disadvantage were only asked of applicants who were U.S. citizens. Therefore, the total possible number of "Do Not Know/Prefer Not to Answer" responses was 9 for non-U.S. citizen applicants while 11 for U.S. citizen applicants.

Table 3. Consent Rates by Preferred Specialty—MRM 2025

Preferred Specialty ¹	Number of Active Applicants ²	Number Consenting to Provide Demographic Data for Research	Consent Rate (%)
Anesthesiology	2,924	2,499	85.5
Child Neurology	222	199	89.6
Dermatology	982	771	78.5
Emergency Medicine	3,201	2,784	87.0
Family Medicine	4,627	3,938	85.1
Internal Medicine	14,815	12,507	84.4
Internal Medicine/Emergency Medicine	52	44	84.6
Internal Medicine/Pediatrics	456	418	91.7

² Active applicants are applicants who certified a rank order list. Excludes Canadian and Fifth Pathway applicants due to small subgroup sizes.

³ Some percentages may not add to 100 because of rounding.

Preferred Specialty ¹	Number of Active Applicants ²	Number Consenting to Provide Demographic Data for Research	Consent Rate (%)
Internal Medicine/Psychiatry	36	32	88.9
Interventional Radiology (Integrated)	278	232	83.5
Neurological Surgery	462	391	84.6
Neurology	1,547	1,309	84.6
Obstetrics and Gynecology	2,038	1,847	90.6
Occupational & Environmental Med	45	29	64.4
Orthopaedic Surgery	1,540	1,299	84.4
Otolaryngology	539	463	85.9
Pathology-Anatomic and Clinical	935	797	85.2
Pediatrics	3,083	2,733	88.6
Pediatrics/Medical Genetics	33	28	84.8
Pediatrics/Psychiatry/Child and Adolescent Psychiatry	46	37	80.4
Physical Medicine and Rehabilitation	781	663	84.9
Plastic Surgery (Integrated)	383	329	85.9
Psychiatry	2,983	2,539	85.1
Psychiatry/Family Medicine	29	28	96.6
Public Health and Preventive Medicine	58	42	72.4
Radiation Oncology	214	180	84.1
Radiology-Diagnostic	1,437	1,170	81.4
Surgery-General	2,900	2,498	86.1
Thoracic Surgery (Integrated)	107	90	84.1
Transitional Year	184	145	78.8
Vascular Surgery (Integrated)	142	122	85.9
Other Specialties	123	103	83.7
TOTAL	47,202	40,266	85.3

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

² Active applicants are applicants who certified a rank order list. Excludes Canadian and Fifth Pathway applicants due to small subgroup sizes.

Table 4. Consent Rates by Matched Specialty—MRM 2025

Matched Specialty ¹	Number of Active Applicants ²	Number Consenting to Provide Demographic Data for Research	Consent Rate (%)
Anesthesiology	2,260	1,955	86.5
Child Neurology (Neurology)	202	183	90.6
Dermatology	573	463	80.8
Emergency Medicine	3,001	2,639	87.9
Family Medicine	4,552	3,913	86.0
Internal Medicine	11,420	9,707	85.0
Internal Medicine/Emergency Medicine	34	29	85.3
Internal Medicine/Pediatrics	395	364	92.2
Interventional Radiology (Integrated)	207	173	83.6
Neurological Surgery	265	235	88.7
Neurology	1,177	1,006	85.5
Obstetrics and Gynecology	1,593	1,455	91.3
Orthopaedic Surgery	929	800	86.1
Otolaryngology	393	339	86.3
Pathology-Anatomic and Clinical	619	537	86.8
Pediatrics	3,046	2,718	89.2
Physical Medicine and Rehabilitation	582	507	87.1
Plastic Surgery (Integrated)	221	194	87.8
Psychiatry	2,380	2,061	86.6
Public Health and Preventive Medicine	45	33	73.3
Radiation Oncology	192	164	85.4
Radiology-Diagnostic	1,216	1,017	83.6
Surgery-General	2,317	2,036	87.9
Thoracic Surgery (Integrated)	54	45	83.3
Transitional Year	351	278	79.2
Vascular Surgery (Integrated)	101	89	88.1
Other Specialties	198	164	82.8
TOTAL	38,323	33,104	86.4

¹ Matched specialties that did not meet the minimum cell size for individual inclusion in this table (< 25 active, consenting respondents) but are included in the "Other Specialties" row include: Diagnostic Radiology/Nuclear Medicine, Emergency Medicine/Anesthesiology, Emergency Medicine/Family Medicine, Family Medicine/Preventive Medicine, Internal Medicine/Dermatology, Internal Medicine/Medical Genetics, Internal Medicine/Preventive Medicine, Internal Medicine/Psychiatry, Neurodevelopmental Disabilities, Nuclear Medicine, Occupational & Environmental Med, Osteopathic Neuromusculoskeletal Medicine, Pediatrics/Anesthesiology, Pediatrics/Emergency Medicine, Pediatrics/Medical Genetics, Pediatrics/Physical Medicine and Rehabilitation, Pediatrics/Psychiatry/Child and Adolescent Psychiatry, Psychiatry/Family Medicine, and Psychiatry/Neurology.

² Active applicants are applicants who certified a rank order list. Excludes Canadian and Fifth Pathway applicants due to small subgroup sizes.

Table 5. "Do Not Know/Prefer Not to Answer" Responses to Demographic Questions by Preferred Specialty—MRM 2025

Preferred Specialty ¹		of "Do Not Kno onses among A		
·	0	1	2	3 or more
Anesthesiology	79.2	13.7	3.7	3.4
Child Neurology (Neurology)	78.4	16.1	2.0	3.5
Dermatology	76.1	15.4	5.2	3.2
Emergency Medicine	77.5	15.8	3.3	3.4
Family Medicine	79.0	14.9	3.4	2.7
Internal Medicine	83.4	11.8	2.5	2.3
Internal Medicine/Emergency Medicine	65.9	27.3	4.5	2.3
Internal Medicine/Pediatrics	77.8	16.3	4.5	1.4
Internal Medicine/Psychiatry	65.6	25.0	3.1	6.3
Interventional Radiology (Integrated)	76.3	15.1	3.4	5.2
Neurological Surgery	78.5	14.6	2.8	4.1
Neurology	78.7	14.1	3.7	3.5
Obstetrics and Gynecology	81.1	14.5	2.5	1.9
Occupational & Environmental Med	58.6	13.8	17.2	10.3
Orthopaedic Surgery	81.5	11.4	2.9	4.2
Otolaryngology	81.4	12.1	3.9	2.6
Pathology-Anatomic and Clinical	76.2	16.2	3.9	3.8
Pediatrics	81.7	14.0	2.9	1.4
Pediatrics/Medical Genetics	78.6	14.3	3.6	3.6
Pediatrics/Psychiatry/Child and Adolescent Psychiatry	64.9	29.7	2.7	2.7
Physical Medicine and Rehabilitation	78.7	12.8	4.1	4.4
Plastic Surgery (Integrated)	79.3	14.0	3.6	3.0
Psychiatry	73.3	18.6	4.5	3.7
Psychiatry/Family Medicine	78.6	14.3	7.1	0.0
Public Health and Preventive Medicine	73.8	21.4	0.0	4.8
Radiation Oncology	83.3	8.3	3.9	4.4
Radiology-Diagnostic	77.5	13.8	5.0	3.7
Surgery-General	78.1	14.7	3.4	3.8
Thoracic Surgery (Integrated)	84.4	11.1	1.1	3.3
Transitional Year	68.3	20.0	4.1	7.6
Vascular Surgery (Integrated)	81.1	13.1	3.3	2.5
Other Specialties	71.8	19.4	4.9	3.9
TOTAL	80.0	13.9	3.3	2.9

¹ Preferred specialties that did not meet the minimum cell size for individual inclusion in this table (< 25 active, consenting respondents) but are included in the "Other Specialties" row include: Diagnostic Radiology/Nuclear Medicine, Emergency Medicine/Anesthesiology, Emergency Medicine/Family Medicine, Family Medicine/Preventive Medicine, Internal Medicine/Dermatology, Internal Medicine/Medical Genetics, Internal Medicine/Preventive Medicine, Neurodevelopmental Disabilities, Nuclear Medicine, Osteopathic Neuromusculoskeletal Medicine, Pediatrics/Anesthesiology, Pediatrics/Emergency Medicine, Pediatrics/Physical Medicine and Rehabilitation, and Psychiatry/Neurology.

² Two questions pertaining to childhood socioeconomic disadvantage were only asked of applicants who were U.S. CHARTING OUTCOMES™: DEMOGRAPHIC CHARACTERISTICS OF APPLICANTS IN THE MAIN RESIDENCY MATCH® AND SOAP®, 2025 VERSION 1.1

citizens. Therefore, the total possible number of "Do Not Know/Prefer Not to Answer" responses was 9 for non-U.S. citizen applicants while 11 for U.S. citizen applicants.

Table 6. "Do Not Know/Prefer Not to Answer" Responses to Demographic Questions by Matched Specialty—MRM 2025

Matched Specialty ¹	Number ² of "Do Not Know/Prefer Not to Answer" Responses among Active Applicants ³ , % ⁴			
. ,	0	1	2	3 or more
Anesthesiology	79.9	13.2	3.5	3.4
Child Neurology (Neurology)	78.1	16.9	2.2	2.7
Dermatology	78.4	14.5	4.5	2.6
Emergency Medicine	77.8	15.8	3.2	3.1
Family Medicine	78.7	15.2	3.7	2.5
Internal Medicine	82.6	12.3	2.6	2.5
Internal Medicine/Emergency Medicine	55.2	34.5	6.9	3.4
Internal Medicine/Pediatrics	78.0	15.9	4.4	1.6
Interventional Radiology (Integrated)	72.3	17.3	4.0	6.4
Neurological Surgery	82.1	13.2	2.6	2.1
Neurology	78.8	13.7	3.8	3.7
Obstetrics and Gynecology	82.1	13.9	2.4	1.6
Orthopaedic Surgery	82.5	11.1	2.4	4.0
Otolaryngology	81.7	12.4	3.8	2.1
Pathology-Anatomic and Clinical	76.2	15.8	4.3	3.7
Pediatrics	81.9	13.8	2.8	1.5
Physical Medicine and Rehabilitation	78.7	12.6	4.1	4.5
Plastic Surgery (Integrated)	82.5	10.3	2.6	4.6
Psychiatry	73.5	18.8	4.3	3.4
Public Health and Preventive Medicine	75.8	15.2	0.0	9.1
Radiation Oncology	82.9	9.1	4.9	3.0
Radiology-Diagnostic	77.7	14.4	4.1	3.8
Surgery-General	78.8	14.4	3.5	3.3
Thoracic Surgery (integrated)	86.7	8.9	2.2	2.2
Transitional Year	75.2	17.6	4.0	3.2
Vascular Surgery (Integrated)	82.0	12.4	2.2	3.4
Other Specialties	72.0	17.7	6.7	3.7
TOTAL	79.9	14.0	3.2	2.8

¹ Matched specialties that did not meet the minimum cell size for individual inclusion in this table (< 25 active, consenting respondents) but are included in the "Other Specialties" row include: Diagnostic Radiology/Nuclear Medicine, Emergency Medicine/Anesthesiology, Emergency Medicine/Family Medicine, Family Medicine/Preventive Medicine, Internal Medicine/Dermatology, Internal Medicine/Medical Genetics, Internal Medicine/Preventive Medicine, Internal Medicine/Psychiatry, Neurodevelopmental Disabilities, Nuclear Medicine, Occupational & Environmental Med, Osteopathic Neuromusculoskeletal Medicine, Pediatrics/Anesthesiology, Pediatrics/Emergency Medicine, Pediatrics/Medical Genetics, Pediatrics/Physical Medicine and Rehabilitation, Pediatrics/Psychiatry/Child and Adolescent Psychiatry, Psychiatry/Family Medicine, and Psychiatry/Neurology.

³ Active applicants are applicants who certified a rank order list. Excludes Canadian and Fifth Pathway applicants due to small subgroup sizes.

⁴ Some percentages may not add to 100 because of rounding.

² Two questions pertaining to childhood socioeconomic disadvantage were only asked of applicants who were U.S. citizens. Therefore, the total possible number of "Do Not Know/Prefer Not to Answer" responses was 9 for non-U.S. citizen applicants while 11 for U.S. citizen applicants.

³ Active applicants are applicants who certified a rank order list. Excludes Canadian and Fifth Pathway applicants due to small subgroup sizes.

⁴ Some percentages may not add to 100 because of rounding.

Appendix A

In January 2021, the NRMP Board of Directors voted to approve the collection of primary source, self-reported demographic data from applicants commencing with the 2022 Main Residency Match (MRM). 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 the breadth of applicant attributes seeking residency training, and to increase the transparency and understanding of the decisions made by applicants during the matching process. There is a critical need to understand the roles of applicant attributes and potential 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 working 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. Since the inception of NRMP's demographic assessment items, several items have been added to this assessment.

The next few pages list of the demographic items that were queried of applicants participating in the 2025 Main Residency Match. 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 and Mental Health Services
□ Yes	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? (More than one category may be selected.) ^a	
□ 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, Indonesian, Japanese, Korean, Cambodian, Laotian, Taiwanese, and Vietnamese)	
☐ Other (specify)	
☐ I do not know ☐ I prefer not to answer	
(If identified as Black or African American:) Which of these groups best describes you? (More than one category may be selected.)	
□ African	
☐ African American	
☐ Afro-Caribbean	
☐ Other (please 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	
□ Chinese	
□ Filipino	
□ Indonesian	
□ Japanese	
□ Korean	
□ Cambodian	
□ Laotian	

□ Taiwanese	
□ 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
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?	National Epidemiologic Survey on Alcohol and Related Conditions- III, 2011
□ Yes	
□ No	
☐ I do not know	
☐ I prefer not to answer	
Before you were 18, did you have to work to contribute to your family's income?	
□ Yes	
□ 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
□ Female	Year 2 Questionnaire (Y2Q), 2020
☐ I prefer not to answer	
What is your current gender identity? Select all that apply:	AAMC MSQ and Y2Q, 2020
□ Male	
□ Female	
☐ Trans male/Trans man	
☐ Trans female/Trans woman	
☐ Genderqueer/gender nonconforming	

☐ Different identity (please state)	
☐ I prefer not to answer	
How do you calf identify?	Adopted from AAMO VOO and
How do you self-identify?	Adapted from AAMC Y2Q and MSQ, 2020
☐ Bisexual	
☐ 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	
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.)? ☐ Yes ☐ No ☐ I do not know	AAMC Y2Q, 2020

(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	
☐ Deaf or hard of hearing	
☐ Learning disability	
☐ Mobility disability	
☐ Psychological disability	
☐ Visual disability	
□ Other	
☐ I do not know	
☐ I prefer not to answer	
(If responded "yes" to disability question:)	AAMC Y2Q, 2020
Did you request accommodations from your medical school?	
□ Yes	
□ 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	

(If accommodation not provided:) 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	
(If responded "no" to whether requested accommodations:) 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	

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.

^a 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.