



Exploring the Relationship Between Program Signaling & Interview Invitations Across Specialties

2026 Analysis
Fellowship - December Cycle
Data as of April 01, 2026

THE **FUTURE**
IN **FOCUS**

Program Signal Overview



Program Signals

What is a program signal?

- Program signals *offer applicants the opportunity to express interest* in a fellowship program at the time of application.
- Program signals are *intended to be used by programs as one of many data points* in deciding whom to invite to interview.

Goals of Signal Approaches

Goal

Small # of Signals

- Top programs only.

Large # of Signals

- Distributes signals more evenly.

Two-Tier

- Distributes signals more evenly.
- Greater flexibility for applicants

Examples

From ERAS 2025-2026 Fellowship

- Pediatrics (5)
- Child Neuro and NDD (3)

- Orthopedic Surgery (30)
- Otolaryngology (25)

- Anesthesiology (5 gold, 10 silver)
- Dermatology (3 gold, 25 silver)

Pros & Cons of Signal Approaches

Pros

Small # of Signals

- True top programs.
- Guards against use of program signals as interview invitation criteria.

Large # of Signals

- Distributes signals more evenly.

Two-Tier

- Distributes signals more evenly.
- Gold identifies top programs and silver gives flexibility.

Cons

- May be insufficient for representing all applicant preferences.
- High concentration in a small number of programs.

- Tempting to use as a threshold.
- Value of the signal may be diluted.

- Tempting to use as a threshold.
- Explanation more challenging.

Consider Key Questions & Review Data



Conceptual

- What are we trying to learn from signals?
- What goals are we trying to accomplish with signals?
- How much risk do we want to ask applicants to bear?
- How much change can our community tolerate?
- How much evidence do we need to support a change?



Data

- Did we accomplish our goals? Were there any unintended consequences?
- How did applicants react to small, 2-tiered, and large number signals?
- Did specialties that used a different approaches accomplish goals that we didn't?
- Did specialties use signals similarly regardless of # of signals?

Sample of 2026 ERAS Applicants in the Following Specialties:

- Allergy and Immunology
- Cardiovascular Disease
- Critical Care Medicine
- Endocrinology, Diabetes, and Metabolism
- Gastroenterology
- Hematology and Oncology
- Hospice and Palliative Medicine
- Neonatal-Perinatal Medicine
- Pain Medicine
- Pediatric Critical Care Medicine
- Pediatric Gastroenterology
- Pulmonary Disease and Critical Care Medicine
- Thoracic Surgery
- Urogynecology and Reconstructive Pelvic Surgery (OBGYN)

Analysis

- **Predictors:**
 - Program signal.

- **Outcome:**
 - Scheduled to interview PDWS or Thalamus Interview Scheduler as of April 01, 2026 (Main Fellowship only).

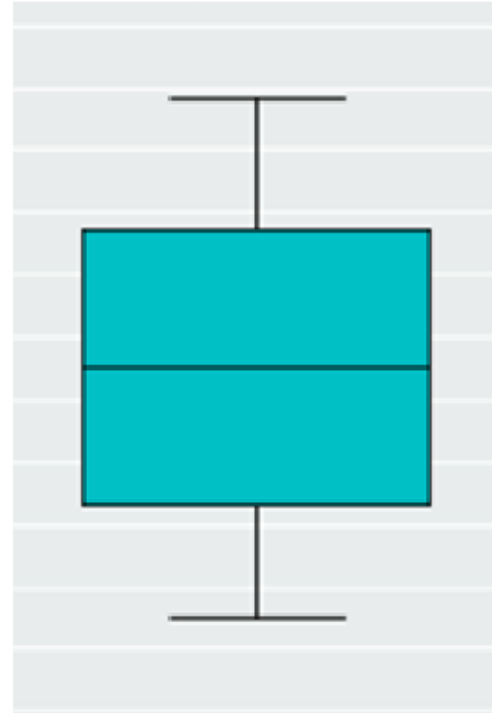
- **Analysis:**
 - Results analyzed separately by program.
 - Computed signal to interview conversation rates by program.
 - Summarized the distribution of conversion rates programs using boxplots.

What information is provided by a boxplot?

Boxplots show the distribution of signal to interview conversion rates for all programs in a specialty.

The colored box shows the signal to interview conversion rates for the bulk of the programs. The bottom of the box is the 25th percentile, the horizontal line is the median or the 50th percentile, and the top of the box is the 75th percentile.

The whiskers represent the 10th and 90th percentile of programs' interview invitation rates.

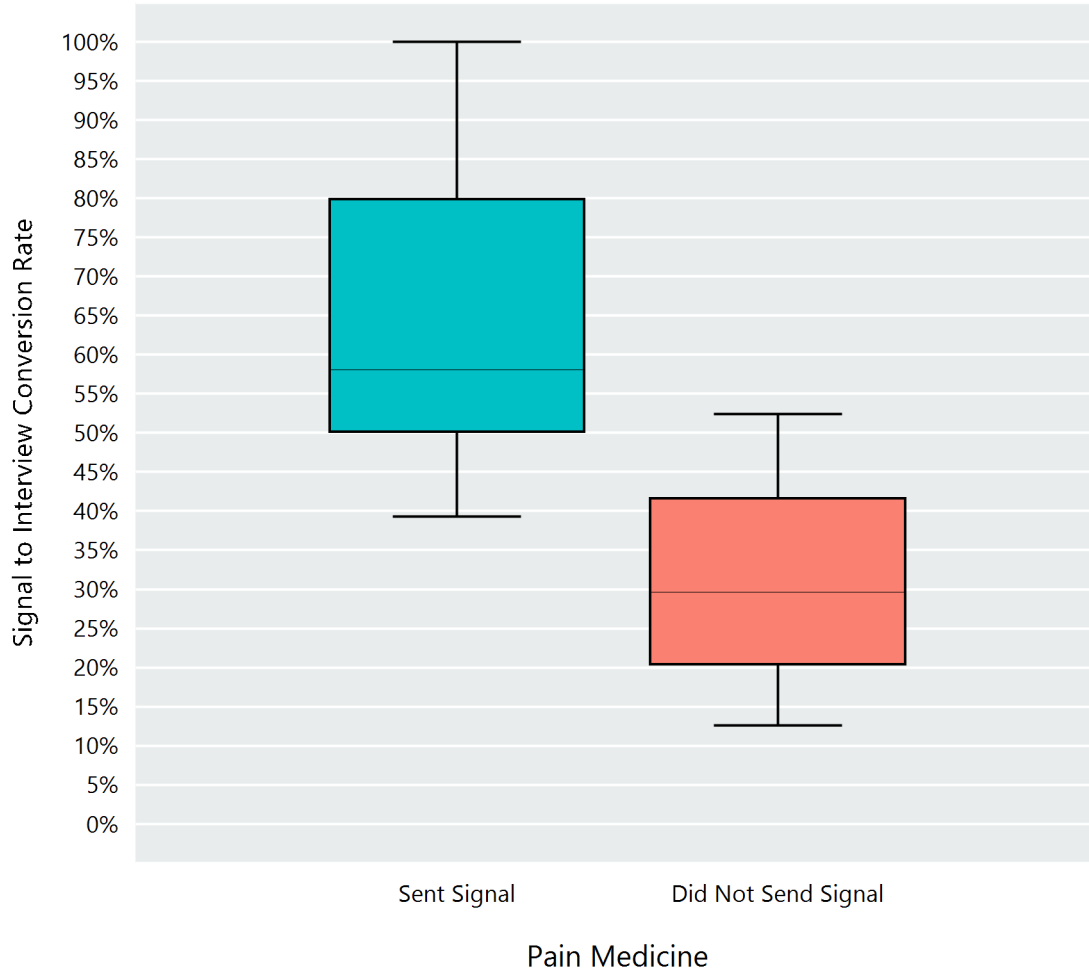


Pain Medicine Program Sample & Inclusion Criteria

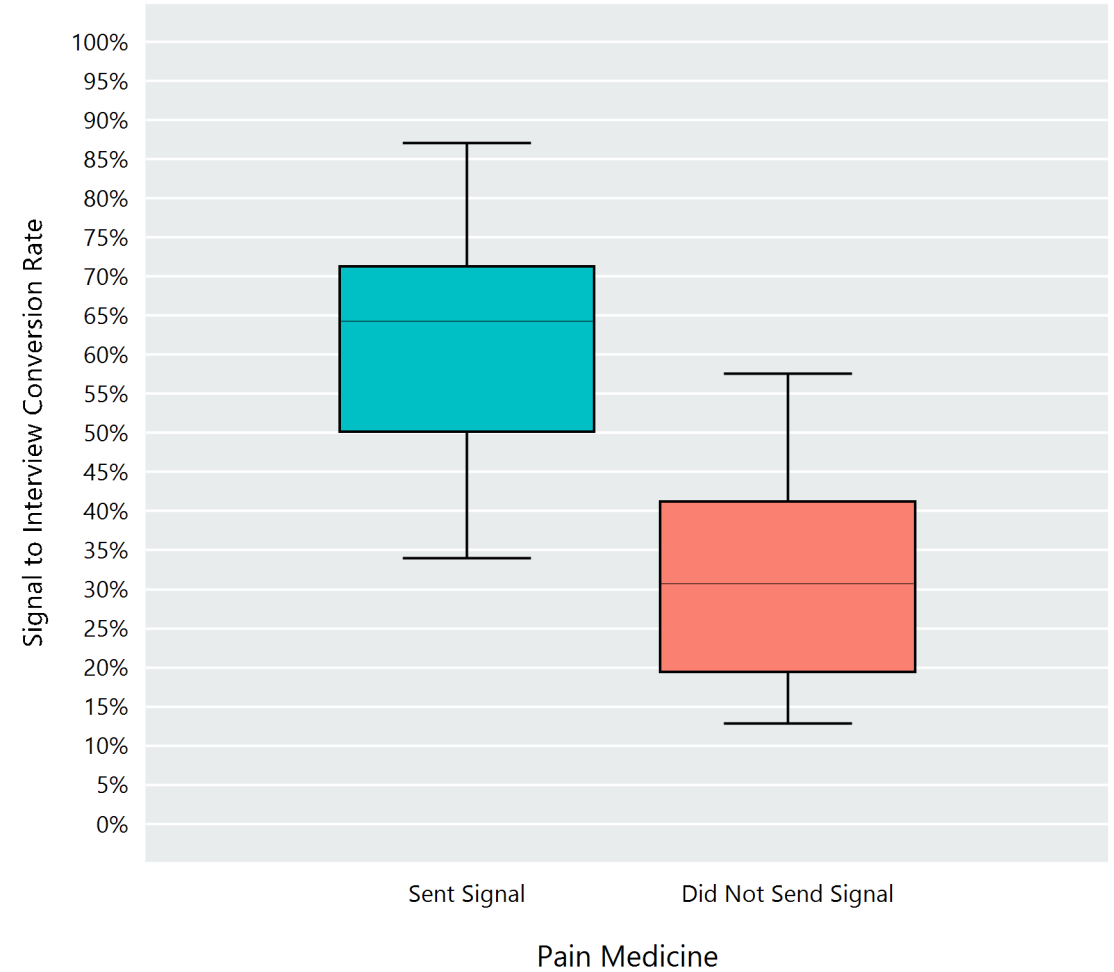
	N of Programs for Program Signals
Total programs participating in ERAS	111
Total programs participating in program signaling	109
Programs included in this analysis have sent at least 10 interview invitations and have submitted interview offer data via Thalamus Core. Applicant types (DO, IMG, MD) with N < 50 unique applicants are not shown.	45
Total analytic sample	45
Total % of programs participating in program signaling	41%
Total % of all Pain Medicine programs in 2026 ERAS cycle	41%

Pain Medicine: Interview Rates by Program Signal Status Year Over Year Comparison

2025 ERAS - Date as of 10/31/2025 - # Programs: 59 - # Signals: 5



2026 ERAS - Date as of 4/1/2026 - # Programs: 45 - # Signals: 5



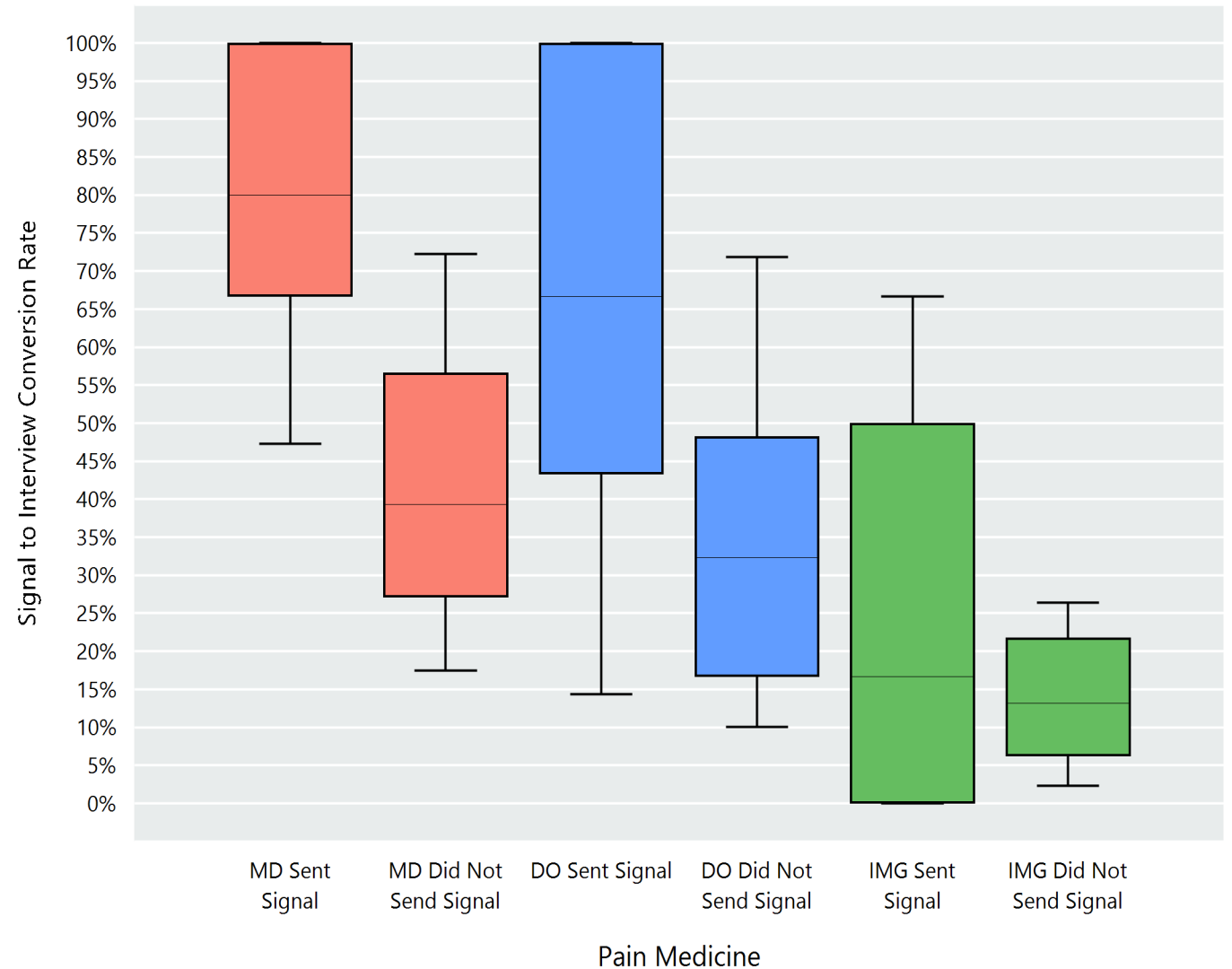
Pain Medicine: Interview Rates by Program Signal Status & Applicant Type

Median Interview Rates

Applicant Type	Signal	No Signal
MD	80%	39%
DO	67%	32%
IMG	17%	13%

CAUTION: Interpret results with caution: (a) small DO and IMG sample sizes at the program level and (b) analyses do not control for all factors considered in the selection process.

2026 ERAS - Date as of 4/1/2026 - N: MD (210), DO (134) IMG (92)

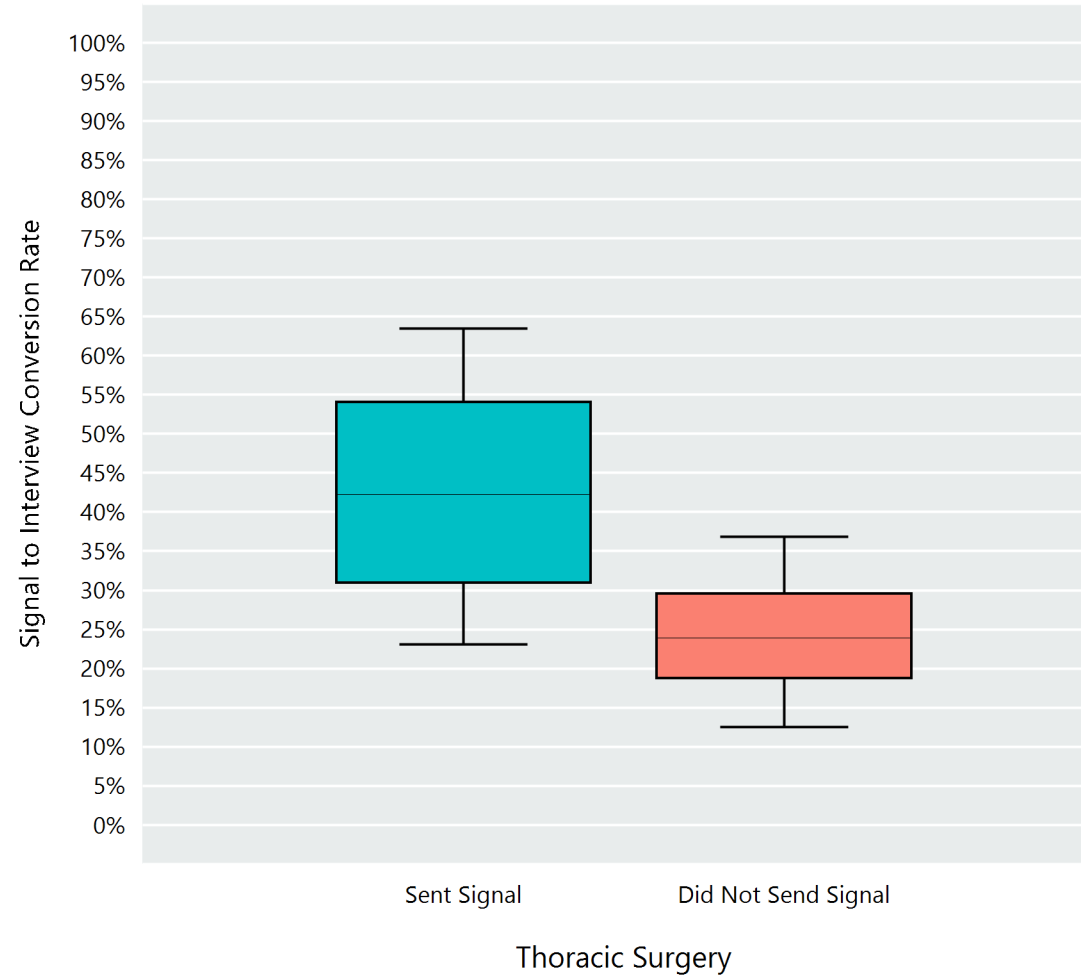


Thoracic Surgery Program Sample & Inclusion Criteria

	N of Programs for Program Signals
Total programs participating in ERAS	71
Total programs participating in program signaling	68
Programs included in this analysis have sent at least 10 interview invitations and have submitted interview offer data via Thalamus Core. Applicant types (DO, IMG, MD) with N < 50 unique applicants are not shown.	34
Total analytic sample	34
Total % of programs participating in program signaling	50%
Total % of all Thoracic Surgery programs in 2026 ERAS cycle	48%

Thoracic Surgery: Interview Rates by Program Signal Status Year Over Year Comparison

2026 ERAS - Date as of 4/1/2026 - # Programs: 34 - # Signals: 6



Thoracic Surgery: Interview Rates by Program Signal Status & Applicant Type

Median Interview Rates

Applicant Type	Signal	No Signal
MD	50%	32%

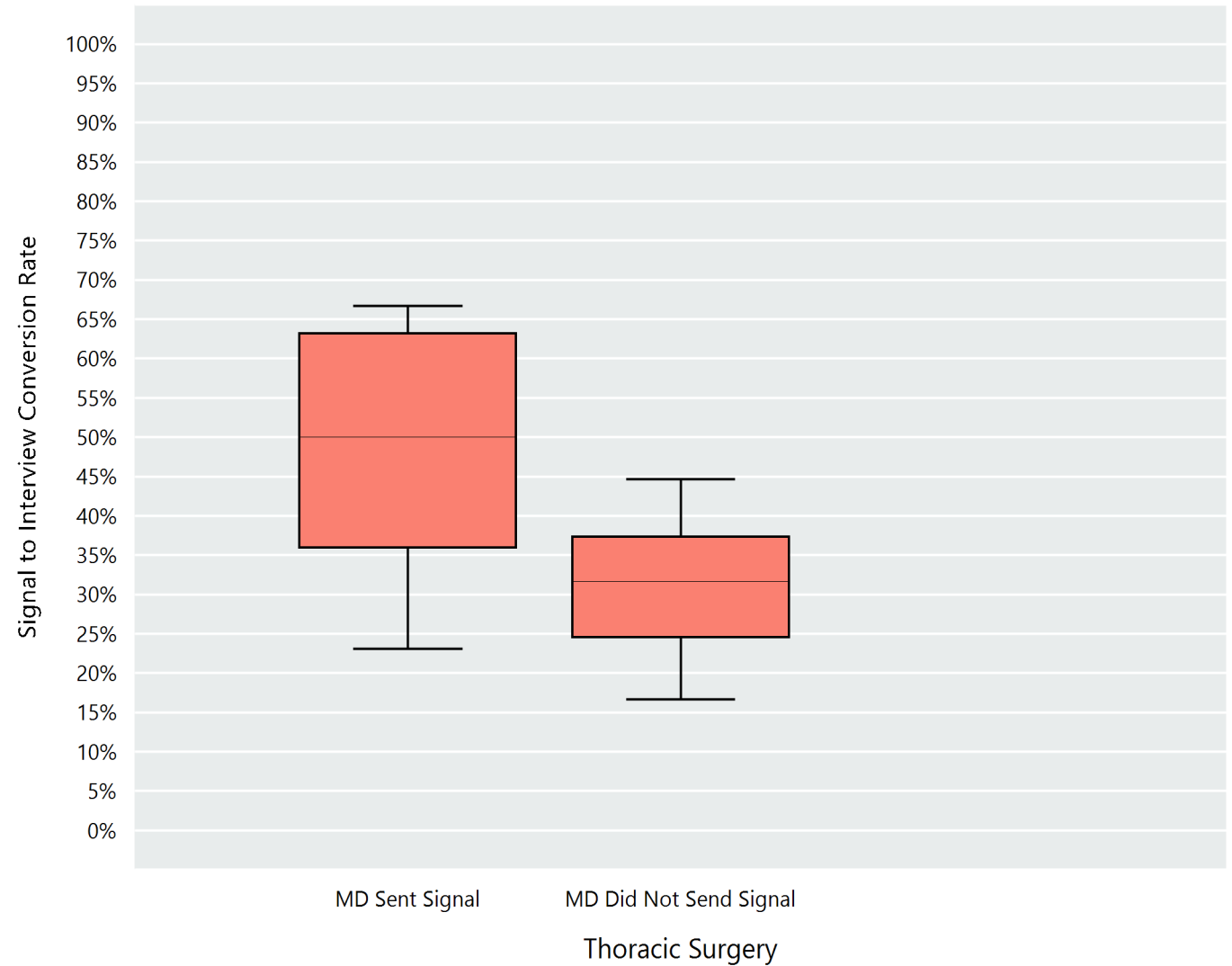
Applicant data were excluded from this analysis due to small sample size:

Program N = 21: DO

Program N = 41: IMG

CAUTION: *Interpret results with caution: (a) small DO and IMG sample sizes at the program level and (b) analyses do not control for all factors considered in the selection process.*

2026 ERAS - Date as of 4/1/2026 - N: MD (108), DO (21) IMG (41)

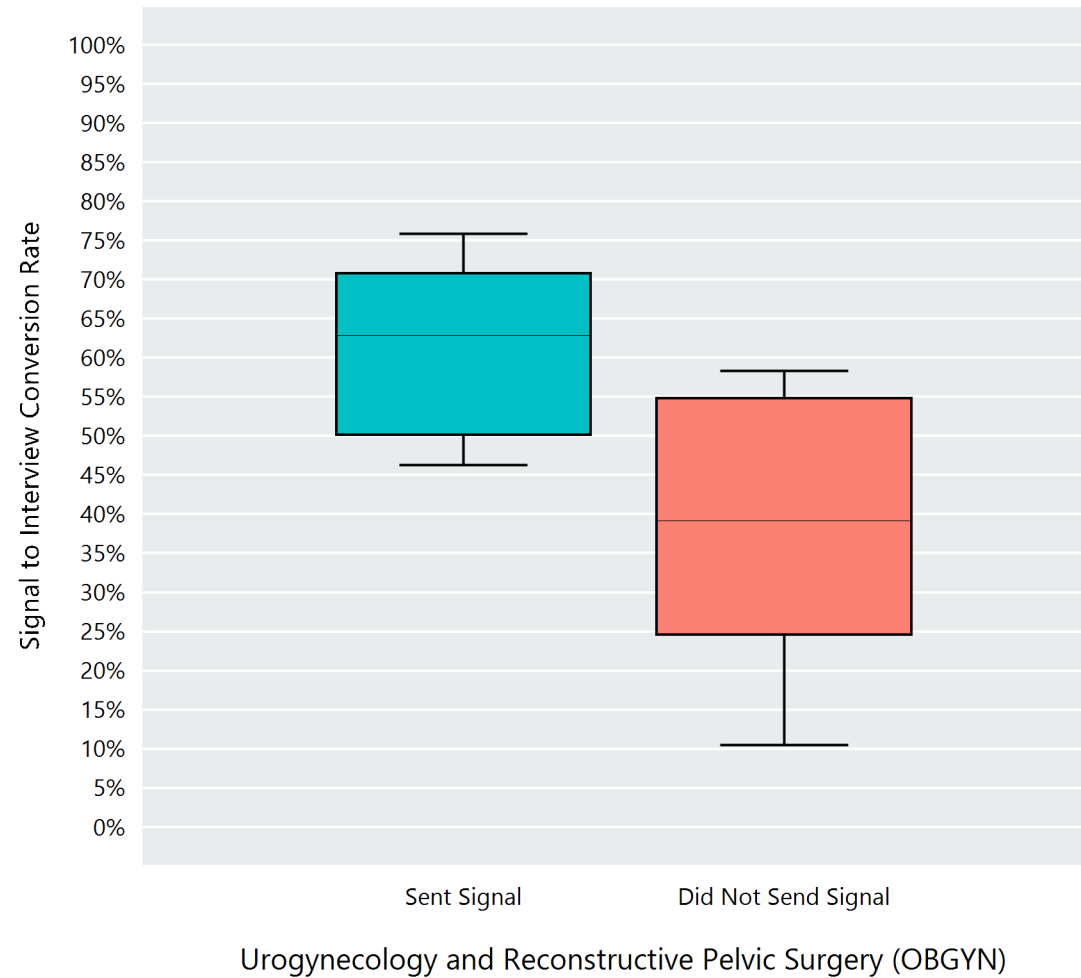


Urogynecology and Reconstructive Pelvic Surgery (OBGYN) Program Sample & Inclusion Criteria

	N of Programs for Program Signals
Total programs participating in ERAS	52
Total programs participating in program signaling	51
Programs included in this analysis have sent at least 10 interview invitations and have submitted interview offer data via Thalamus Core. Applicant types (DO, IMG, MD) with N < 50 unique applicants are not shown.	18
Total analytic sample	18
Total % of programs participating in program signaling	35%
Total % of all Urogynecology and Reconstructive Pelvic Surgery (OBGYN) programs in 2026 ERAS cycle	35%

Urogynecology and Reconstructive Pelvic Surgery (OBGYN): Interview Rates by Program Signal Status Year Over Year Comparison

2026 ERAS - Date as of 4/1/2026 - # Programs: 18 - # Signals: 10



Urogynecology and Reconstructive Pelvic Surgery (OBGYN): Interview Rates by Program Signal Status & Applicant Type

Median Interview Rates

Applicant Type	Signal	No Signal
MD	73%	45%

Applicant data were excluded from this analysis due to small sample size:

Program N = 16: DO

Program N = 7: IMG

CAUTION: *Interpret results with caution: (a) small DO and IMG sample sizes at the program level and (b) analyses do not control for all factors considered in the selection process.*

2026 ERAS - Date as of 4/1/2026 - N: MD (70), DO (16) IMG (7)

