

Template for Successful Anesthesiology Resident Recruitment

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Introduction

Given the current shortfall of anesthesiologists in the United States (1), it is imperative that academic training departments recruit sufficient adequately qualified medical school graduates to meet and to continue to meet demand. We describe our recent success with recruitment of excellent candidates for anesthesiology resident positions.

Discussion

Since the mid 1990's, there has been a five-fold increase in the number of anesthesiology residents recruited by the national resident matching program (2). Given these encouraging national trends, it is surprising that since the late 1990's, the anesthesia department at the University of Texas Health Science Center at Houston has *exceeded* these expectations and has enjoyed unqualified success in recruiting graduating allopathic students from the same institution into anesthesiology. Our department was ranked second in recruiting in the nation in 2001 (13% of the graduating class), fifth in 2002 (8% of the class) and have had 8.6 % of the total graduates from 1999 through 2003 enter an anesthesiology program. This has coincided with a 100% match of available positions in our own department over the last four years. This success reflects a concerted department-wide effort, and some of the techniques that we have utilized are briefly discussed.

1. *Anesthesia Club*. This club was initiated as a voluntary forum to allow first and second year medical students increased anesthesia exposure. The overwhelming response has led to formalization of the club with elected student officers and frequent interaction with department faculty members. Students sign-up to accompany faculty during evening calls to see and participate in the excitement of a Level I trauma center's operating rooms.
2. *Early ASA membership*. Access to and exposure to the organization and specialty at large.
3. *'Blue Book' lectures*. Lunch time lectures on topics such as 'The state-of-anesthesiology' and general introductions to anesthesiology are given by the chairman and residency director to students for extra non-transcript (blue book) credit.
4. *Fourth year MS rotations*. The current third year MS curriculum of one week of anesthesiology during the surgical rotation serves as an appetizer for interested students. Consequently, we have an abundance of 4th year elective applicants, who rotate through general surgery, OB as well as the pain clinic. A critical care rotation through 2 hospital units is also immensely popular. With the increased interest, spots are now being requested by 3rd years for the following year! Hands-on student independence is encouraged, so that students function as interns by the end of the rotation.
5. *Clinical anesthesia research electives*. This elective serves as a basic introduction to clinical research for students with an academic outlook, and also affords contact with department personnel and operating room exposure that applicant's desire. This program's success is obvious in that four of the initial participants are current residents in the department with the remaining student in anesthesia in another department! We have also been successful in including all of the contributing students as co-authors on abstracts in which they had significantly contributed.
6. *Department congeniality*. A real and perceived atmosphere of departmental congeniality where student education is continually encouraged is vital to on-going success in recruitment.

Conclusions

A part of the solution to the anesthesiologist shortfall in the United States is filling of all available spaces with qualified and excellent medical school graduates. We report some of the techniques that our department has utilized to maintain and foster an unprecedented interest in anesthesiology in our medical school and affiliated institutions.

References

1. Schubert A, et al. Mayo Clinic Proceedings 2001; 76: 995-1010
2. Grogono AW. ASA Newsletter 2002; 66: 13-26

Acknowledgement

The department wishes to acknowledge the untiring and outstanding effort of Jonetha Davidson, the department health education co-coordinator.