
News & Notes

Factors Most Weighed by Applicants when Picking Residency Programs

What factors do medical students consider most (and least) when choosing residency programs? Data recently released by the National Resident Matching Program (NRMP) sheds some light on that question.

Among the data, reports, and research produced by the NRMP is a survey that weighs the factors to which applicants give strongest consideration when applying to and ranking residency programs. The 2025 version of the survey featured responses from about 14,000 applicants, representing roughly 25% of the applicant pool in the most recent residency-selection cycle.

NRMP asked survey respondents to list the factors that influenced both application and ranking choices and the relative importance of each of those factors on a scale of one to five.

Among active US allopathic senior medical students ranking residency programs across all specialties, these were the top five considerations:

- Overall goodness of fit—91%
- Desired geographic location—89%
- Interview day experience—89%
- Reputation of program—84%
- Quality of residents in program—83%

The top five factors listed by applicants who were active US osteopathic senior medical students ranking programs on their final Match rank-order list were:

- Overall goodness of fit—90%
- Desired geographic location—87%
- Interview day experience—87%
- Quality of residents in program—81%
- Work-life balance—77%

For both MD and DO applicants, the top five factors listed in selecting which programs to rank were the same in 2025 as they were the previous year.

Further information is available at <https://www.ama-assn.org/medical-students/preparing-residency/which-factors-do-applicants-weigh-most-when-picking-residency>

New Learning Assessment Tool Launched

NBME has announced the availability of its Communication Learning Assessment (CLA), which is designed to help medical students practice and develop patient-centered communication skills early in their training. CLA furthers formative assessment (also known as assessment for learning) in medical education by providing a series of realistic and diverse case vignettes with which students interact by listening and responding to patients' concerns.

An NBME efficacy study discovered that students who used CLA with full feedback and reflection capabilities had 43% higher odds of demonstrating patient-centered communication behaviors over time. Additionally, 90% of students reported that they felt more confident in their ability to communicate effectively with patients after completing the assessment.

Further information is available at <https://www.nbme.org/news/nbme-launched-new-learning-assessment-tool-help-medical-students-strengthen-patient-centered>

New FSMB Webinar is Available Online

The newest FSMB webinar, Advancing Nutrition Education in Medicine, is now available online. The webinar, which was held live on March 2, 2026, featured Stephen Devries, MD, a preventive cardiologist and executive director of the Gaples Institute, as the speaker.

Drawing on his extensive experience developing nutrition curricula, Dr. Devries explained how enhanced physician competency in nutrition can directly improve patient health outcomes. He also highlighted major national efforts and collaborative initiatives that are successfully advancing nutrition education in medicine, demonstrating scalable models for institutional change.

The webinar is available at <https://www.pathlms.com/fsmb/courses/124003>

States Ranked by Hospital Concentration

The newly launched Health Care Affordability Lab within New Haven, CT based Yale University's Tobin Center for Economic Policy released a tool on March 9, 2026, that allows users to explore hospital mergers, closures, ownership changes and market concentration across all 50 states.

Using the dataset behind the lab's new Hospital Markets data visualization tool, researchers analyzed the share of hospitals in each state operating in a highly concentrated or monopoly market as measured by the Herfindahl-Hirschman Index, a standard antitrust measure of market concentration.

The dataset includes general, short-term acute-care hospitals and excludes specialty hospitals, long-term care facilities and VA or military hospitals.

In the tool, a hospital's "market" is defined using a 30-minute travel radius around each facility. Hospital markets can be highly concentrated in both rural and urban areas, but rural areas face particular challenges maintaining competitive markets.

The Herfindahl-Hirschman Index ranges from zero, denoting many small competitors, to 10,000, denoting a monopoly. Markets with HHIs between 5,000 and less than 10,000 are considered highly concentrated, while markets with HHIs above 10,000 are considered monopolies.

Researchers totaled the number of hospitals in highly concentrated and monopoly markets in each state and divided that by the state's total number of hospitals to determine the percentage of hospitals operating in highly concentrated or monopoly markets.

Further information is available at <https://www.beckershospitalreview.com/hospital-transactions-and-valuation/50-states-ranked-by-hospital-concentration/>