

APDEM All In Match Policy for Endocrinology

Introduction: After extensive deliberation (winter 2015 to spring 2017), and guided by a formal survey of endocrinology Program Directors (spring 2017), APDEM Council unanimously voted to adopt an All In Match Policy (start date July 1, 2018). APDEM Council judged that an All In Match Policy represents the best way to (a) maximize applicant autonomy and maximize each applicant's ability to evaluate programs without undue pressure; (b) maximize the overall success of the Match (with more applicants achieving better Match outcomes vis-à-vis their individual preferences); (c) safeguard the integrity of the overall system of endocrinology fellowship position allocation; and (d) maximize procedural fairness among Programs competing for a common pool of applicants. Although the essence of the original 2018 policy remains unchanged, this policy description has since undergone minor revisions, primarily to enhance clarity.

APDEM All In Match Policy: All endocrinology positions must be allocated through the NRMP Match (unless an exception is granted by APDEM and the NRMP). This policy applies to all endocrinology programs and all endocrinology positions.

- Each year, APDEM will execute an All In Match agreement with the NRMP: (1) any program registering for the Match must attempt to fill all positions through the Match; (2) programs planning to participate in the Match cannot offer positions outside the Match prior to program director registration and program activation; and (3) once a position has been offered outside the Match, the program no longer is eligible to enroll in the Match unless an exception has been granted by APDEM and the NRMP.
- All exceptions requests should be submitted to APDEM (apdem@endocrine.org) with NRMP carbon copied (policy@nrmp.org) at least 3 weeks before a decision is required.
- All exception requests will be assessed by APDEM's All In Match Oversight Task Force, but final decisions will rest with APDEM Council.
- Exception request letters should include details about the position to be offered, the applicant to whom the position will be offered, and any additional circumstances relevant to the request. The letter must be signed and submitted by the Program Director.
- APDEM intends to grant the following exceptions to its All In Match Policy:
 1. Military appointees to civilian programs.
 2. Demonstrable candidate participation in the ABIM Research Pathway, when entry into the main residency match included *a priori* plans to pursue endocrinology fellowship at the same institution upon completion of 2 years of clinical training in the Internal Medicine residency program.¹
 3. Candidates for formally-combined training programs designed to provide board eligibility for two different specialties with different NRMP codes (e.g., adult and pediatric endocrinology).²
 4. Replacement of a fellow that resigns or is dismissed or replacement of a matched fellow that does not start training.³
 5. A program that receives new accreditation from ACGME or receives approval for a permanent complement increase from ACGME and intends to recruit fellowship applicants at any point from Match Day until and including June 30 of the same academic year.⁴

¹ Such exception requests must include the Program Director's confirmation that the candidate's entry into the Internal Medicine (IM) residency program included *a priori* plans to pursue fellowship at the same institution upon completion of 2 years of IM training.

² Such exception requests must: a) be submitted by all program directors overseeing the combined training program; b) include evidence that the combined program is a formal and established one (e.g., a website link); and c) confirm that the fellow will be dually board-eligible upon successful graduation from the combined program.

³ Such exception requests must be co-submitted by the program and the program's Designated Institutional Official (DIO). In addition, APDEM primarily intends to grant this exception only for the replacement of fellows who did not achieve 75% of required clinical training. Replacement of a trainee and initiation of training prior to October 1 does not require APDEM approval.

⁴ Such exception requests will require the signature of both the Program Director as well as the Sponsoring Institution's Designated Institutional Official (DIO), and should also include either the letter from the ACGME confirming the date that the program received its accreditation or confirming the date that the program was granted a complement increase.

- Although APDEM intends to grant the aforementioned exceptions, all Match exceptions (including the foregoing) must be formally requested by the program and specifically granted by APDEM.
- APDEM will permit programs to request exceptions for situations not listed above (items 1-5); these will be considered on a case-by-case basis. However, only highly compelling exception requests will be eligible for approval through this mechanism, and such exception requests would need to be co-submitted by the program and the program's DIO. APDEM does not intend to grant exceptions that can be reasonably addressed via the NRMP Match (or by other means).
- This All In Match policy does not prohibit out-of-Match arrangements when a program fails to match to its full NRMP quota (i.e., "does not fill"). In such cases, the program may fill the unfilled position outside of the NRMP Match (e.g., via a "scramble"). As long as candidates are available to begin training by October 1 of the corresponding academic year and as long as the arrangement is made between Match Day and September 30, neither NRMP nor APDEM will penalize such out-of-Match arrangements, and programs do not need to obtain APDEM's or NRMP's approval for such arrangements. However, it is expected that programs will make every effort to recruit such candidates and have them begin training by July 1 of the corresponding academic year (i.e., before the next recruitment season begins). If such arrangements are made on or after October 1, or if the candidate is not available to begin training by October 1, a formal exception request must be submitted to APDEM.
- Each year, only those Programs that execute a Memorandum of Understanding regarding APDEM's All In Match Policy will (a) be listed in ERAS, (b) be available in ERAS for candidates to select, and (c) be able to receive candidates' ERAS applications using the Program Director Work Station.
- Policy adherence assessments
 - a. Early each academic year, APDEM's All In Match Oversight Task Force will conduct an NRMP-mandated survey of all endocrinology fellowship programs regarding the number of first-year fellows beginning the training program that appointment year. (Since the NRMP requires APDEM to perform this survey, failure to respond to this survey will represent a violation of APDEM's All In Match Policy.) APDEM's All In Match Oversight Task Force and the NRMP will then compare (a) the number of positions with fellows in training for that appointment year (self-reported by the program) with (b) the program's relevant NRMP quota.
 - b. APDEM's All In Match Oversight Task Force will subsequently assess policy adherence by comparing (a) the combined Match quotas for the previous two Matches with (b) the number of ACGME-approved positions that are filled in the current academic year.
 - c. When a possible All In Match Policy violation is identified, the NRMP and/or the All In Match Oversight Task Force (as appropriate) will engage the Program in an adjudication process. Programs found to be in violation of APDEM's All In Match Policy will be subject to (a) possible NRMP sanctions (as appropriate) and (b) withdrawal of ERAS access for up to two subsequent application cycles.
- APDEM's All In Match Policy pertains specifically to initial position allocation. Although APDEM's policy does not pertain to current endocrinology fellows who have complied with their NRMP Match Participation Agreements and are now seeking to transfer from one program to another, APDEM requests notification of such transfers to prevent confounding during surveillance procedures.

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