

Supplemental Digital Appendix 1

Residency Interview Experience Survey, 2006-2007

This survey concerns the interview experiences of medical students applying to residency programs in the United States. Your answers to this survey will help improve the overall interview process for future classes.

All of your responses on this survey will be kept strictly confidential.

Completing the survey should take approximately 1-2 minutes. When you have finished the survey, you must click the submit button (located on the last page of the survey) for us to receive your response.

You may add additional comments or elaborate regarding any of the questions at the end of this survey.

We are interested in learning whether you were asked any of the following types of questions during your residency interviews. PLEASE NOTE. Answer the questions if you did NOT freely share the type of information asked in your applicant file or during the interview prior to the questions being asked.

GENDER, AGE, MARITAL STATUS

1. Were you asked any questions about your GENDER in relation to your specialty choice or training?

Yes

No

2. If yes, at how many PROGRAMS were you asked about your gender in relation to your specialty or training? (Use INTEGERS, please)

3. If yes, how comfortable did you feel about sharing this information?

Very uncomfortable

Somewhat uncomfortable

Neither comfortable or uncomfortable

Somewhat comfortable

Very comfortable

4. If yes, what affect did this type of question have on your decision to rank the program?

much more likely to rank it highly

more likely to rank it highly

no effect

less likely to rank it highly

much less likely to rank it highly

5. Were you asked any questions about your AGE (or age-related questions) in relation to your specialty choice or training?

Yes

No

6. If yes, at how many PROGRAMS were you asked about your age (or age-related questions) in relation to your specialty or training? (Use INTEGERS, please)

7. If yes, how comfortable did you feel about sharing this information?

Very uncomfortable

Somewhat uncomfortable

Neither comfortable or uncomfortable

Somewhat comfortable

Very comfortable

8. If yes, what affect did this type of question have on your decision to rank the program?

much more likely to rank it highly

more likely to rank it highly

no effect

less likely to rank it highly

much less likely to rank it highly

9. Were you asked any questions about your MARITAL STATUS either directly or indirectly in relation to your specialty choice or training?

Yes

No

10. If yes, at how many PROGRAMS were you asked about your marital status either directly or indirectly in relation to your specialty or training? (Use INTEGERS, please)

11. If yes, how comfortable did you feel about sharing this information?

Very uncomfortable

Somewhat uncomfortable

Neither comfortable or uncomfortable

Somewhat comfortable

Very comfortable

12. If yes, what affect did this type of question have on your decision to rank the program?

much more likely to rank it highly

more likely to rank it highly

no effect

less likely to rank it highly

much less likely to rank it highly

CHILDREN AND FAMILY PLANNING

13. Were you asked any questions about whether you currently have CHILDREN or dependents in relation to your specialty choice or training?

Yes

No

14. If yes, at how many PROGRAMS were you asked about whether you currently have children or dependents in relation to your specialty or training? (Use INTEGERS, please)

15. If yes, how comfortable did you feel about sharing this information?

Very uncomfortable

Somewhat uncomfortable

Neither comfortable or uncomfortable

Somewhat comfortable

Very comfortable

16. If yes, what affect did this type of question have on your decision to rank the program?

much more likely to rank it highly

more likely to rank it highly

no effect

less likely to rank it highly

much less likely to rank it highly

17. Were you asked any questions about whether you PLAN TO HAVE CHILDREN in the future in relation to your specialty choice or training?

Yes

No

18. If yes, at how many PROGRAMS were you asked about whether you plan to have children in the future in relation to your specialty or training? (Use INTEGERS, please)

19. If yes, how comfortable did you feel about sharing this information?

Very uncomfortable

Somewhat uncomfortable

Neither comfortable or uncomfortable

Somewhat comfortable

Very comfortable

20. If yes, what affect did this type of question have on your decision to rank the program?

much more likely to rank it highly

more likely to rank it highly

no effect

less likely to rank it highly

much less likely to rank it highly

ETHNICITY, RELIGION, SEXUAL ORIENTATION, COMMITMENT

21. Were you asked any questions about your ETHNICITY or ethnic background in relation to your specialty choice or training?

Yes

No

22. If yes, at how many PROGRAMS were you asked about your ethnicity or ethnic background in relation to your specialty or training? (Use INTEGERS, please)

23. If yes, how comfortable did you feel about sharing this information?

Very uncomfortable

Somewhat uncomfortable

Neither comfortable or uncomfortable

Somewhat comfortable

Very comfortable

24. If yes, what affect did this type of question have on your decision to rank the program?

much more likely to rank it highly

more likely to rank it highly

no effect

less likely to rank it highly

much less likely to rank it highly

25. Were you asked any questions about your RELIGION or religious background in relation to your specialty choice or training?

Yes

No

26. If yes, at how many PROGRAMS were you asked about your religion or religious background in relation to your specialty or training? (Use INTEGERS, please)

27. If yes, how comfortable did you feel about sharing this information?

Very uncomfortable

Somewhat uncomfortable

Neither comfortable or uncomfortable

Somewhat comfortable

Very comfortable

28. If yes, what affect did this type of question have on your decision to rank the program?

much more likely to rank it highly

more likely to rank it highly

no effect

less likely to rank it highly

much less likely to rank it highly

29. Were you asked any questions about your SEXUAL ORIENTATION in relation to your specialty choice or training?

Yes

No

30. If yes, at how many PROGRAMS were you asked about your sexual orientation in relation to your specialty or training? (Use INTEGERS, please)

31. If yes, how comfortable did you feel about sharing this information?

Very uncomfortable

Somewhat uncomfortable

Neither comfortable or uncomfortable

Somewhat comfortable

Very comfortable

32. If yes, what affect did this type of question have on your decision to rank the program?

much more likely to rank it highly

more likely to rank it highly

no effect

less likely to rank it highly

much less likely to rank it highly

DEMOGRAPHICS AND OTHER

33. To which specialty did you predominately apply?

General Surgery

Prelim. Surgery

Internal Medicine

Prelim. Medicine

Emergency Medicine

Obstetrics/Gynecology

Orthopedic Surgery

34. How often do you think you were asked these kinds of questions (e.g., about your marital status, age, sexual orientation, etc.) compared to other applicants?

Significantly more often

Somewhat more often

About the same as others

Somewhat less often

Significantly less often

35. How many residency programs did you apply to? (Use INTEGERS, please)

36. How many residency programs offered you interviews? (Use INTEGERS, please)

37. How many residency programs did you interview at? (Use INTEGERS, please)

38. What is your gender?

Male

Female

39. What is your age? (Use INTEGERS, please)

40. What is your current marital or relationship status?

Married

Partnered

Widowed

Divorced/Separated

Never Married/Partnered

41. Do you currently have substantial responsibility for raising one or more children under the age of 18?

Yes

No

42. If you do not currently have substantial responsibility for raising children, do you plan to do so in the future?

Yes

No

43. How would you describe your race or ethnicity?

White

Black or African American

Mexican American

Hispanic or Latino/a

Asian American or Pacific Islander

American Indian or Alaskan Native

44. How would you describe your religious affiliation, if any?

Protestant

Catholic

Jewish

Islamic

Hindu

Buddhist

Agnostic/Atheist

Other (please specify)

45. How would you describe your sexual orientation?

Heterosexual

Gay/Lesbian

Bisexual

Other (please specify)

46. Please take a moment to share anything else about your experience with the kinds of questions you were asked during your residency interviews.