

## **Appendix 1**

### **Questionnaire**

**Please select your year in medical school.**

M1

M2

M3

M4

**When did you decide on your career specialty of choice?**

Undecided

High school

College

Graduate school

Medical school years 1-2

Medical school years 3-4

**On a scale of 1-10, with 1 being no influence and 10 being highly influential, please rate the influence of each of the following factors in choosing your career specialty.**

Specialty content/affinity for knowledge of specialty

My experience as a patient in the field

Having a mentor from that particular field

Prior knowledge/exposure to the field

Quality of life/lifestyle/stress level within specialty

Anticipated income following training

Length of training-residency and fellowship

Competitiveness of residency application process

Gender diversity within the field

Racial diversity within the field

Prestige of specialty

Interactions with other medical students

Media coverage of specialty issues

**Please rate on a 1-10 scale, with 1 being unimportant and 10 being very important, your perception of the role that each of these criteria play in the program's decision to rank you highly in the residency of your choice?**

Grades - basic science years

Grades - clinical years

Doing an away rotation in your specialty choice

Step 1 scores

Step 2 scores

AOA membership

Letters of recommendation

Research publications/presentations

Personal statement

Life experience

Interview

**Do you currently have a role model or faculty mentor while in medical school? (If no, then skip the next three questions.)**

Yes

No

**Is this role model/faculty mentor of the same race/ethnicity as you are?**

Yes

No

**Is this role model/faculty mentor of the same sex as you are?**

Yes

No

**On a scale of 1-10, with 1 being no influence and 10 being highly influential, please rate the influence of this role model/faculty mentor in your choosing your career specialty.**

**How interested are you in pursuing a career in the following fields? Please rank your interest level on a scale of 1-10, with 1 being no interest at all, and 10 being maximally interested.**

Nonsurgical field

Surgical field

Orthopaedic surgery

**Where does orthopaedic surgery currently stand in your choice of specialties?**

Top choice

One of my top 3 choices

One of my top 5 choices

I'm not considering orthopaedic surgery as a specialty

**How much exposure have you had to orthopaedic surgery thus far in medical school?**

None

Very little

Moderate

Extensive

**Has exposure to orthopaedic surgery during medical school influenced whether you selected orthopaedic surgery as a career?**

Yes - more likely

Yes - less likely

No

**How much exposure have you had to musculoskeletal medicine (physical medicine and rehabilitation/rheumatology) thus far in medical school?**

None

Very little

Moderate

Extensive

**Has exposure to musculoskeletal medicine (physical medicine and rehabilitation/rheumatology) during medical school influenced whether you selected orthopaedic surgery as a career?**

Yes - more likely

Yes - less likely

No

**What is your age?**

**What is your sex?**

Female

Male

**Which of the following best describes your current relationship status?**

Single

Single, living with a significant other

Married

Widowed

Divorced

Separated

**Which of the following best describes your race/ethnicity?**

White or Caucasian

Black or African American

Hispanic

American Indian or Alaskan Native

Asian

Native Hawaiian or Pacific Islander

From multiple races

Other