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# Couples Match In Emergency Medicine

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Abstract—The Match is a daunting process for everyone, but it can be exceedingly more complicated for couples. Accordingly, the Couples Match was introduced by the National Residency Match Program in 1984 and has been witnessing a steady increase in the number of participating couples over the past 30 years. The highest number of couples participating in the match, and the highest match rate among them, was recorded in 2018. In this article, we provide couples considering the Couples Match, with one or both partners planning to apply to emergency medicine, with insights on this process. Although it may initially appear to be complicated, the Couples Match enables partners to obtain postgraduate training in geographic proximity to one another. With good communication between the partners and their advisors, an exciting joint venture can unfold that is fueled by the strength of the couple.

### INTRODUCTION

The Match is a complicated process for everyone, but it can seem significantly more complex for couples. Along with cheerful anticipation of the adventures to come in residency, applicants will also experience trepidation and anxiety when faced with the impending life decisions that will affect not only their training but also their relationships. The key to success is good communication. With careful planning, the strength of a relationship can ease the usual anxiety of the matching process. The rigors of matching into emergency medicine (EM) may place additional stressors on a relationship. Accordingly, applicants should expect anxiety, acknowledge it, and work together to conquer it.

The number of couples participating in the Couples Match has been steadily increasing over the past 30 years to reach its highest on record in 2018, with 2330 applicants (1165 couples) (1,2).

The match rate in 2018 was also the highest ever (95.8%), with around 75% of couples being U.S. seniors (1).

### **DISCUSSION**

Understanding the Couples Match Algorithm

Before applying to the Couples Match, the couple must decide if it is right for them. The Couples Match was introduced by the National Residency Match Program in 1984 to facilitate the matching process for people who needed to coordinate their residency locations (1). Match rates have been excellent since the Couples Match was introduced (>90%) (1). In fact, the match rates for U.S. seniors participating in Couples Match have been comparable, over the years, to those of their classmates (1). The system enables 2 individuals to enter paired choices for residency and gives them some control over the proximity of their training sites. Anyone is eligible to participate in the Couples Match. Married or engaged couples, same-sex partners, siblings, and even close friends may consider participating. It is important to note that Couples Match does not apply if one of the partners is participating in the military match or in early matching (including urology, neurosurgery, and ophthalmology) (3).

However, it is important to realize that linking their list with someone else's can have a profound impact on where applicants match for their postgraduate training. Couples should carefully and honestly examine the strength of their relationship and their feelings about where they wish to train. Many students would consider nothing other than using the Couples Match, while others may consider a period apart during training to be acceptable.

The next important step is to understand how the rank list for the Couples Match works. A couple will together make 1 rank list with 2 columns. They may list the same programs in multiple combinations if they wish. Depending on their specialty choices and living arrangements, they may be looking to match at the same hospital or at different hospitals in the same locale. The Couples Match also allows them to enter programs in entirely different regions of the country if desired. Many couples find it strategic to consider geographic areas, usually large cities, with several programs in each specialty. These include Boston, New York, Chicago, Philadelphia, etc. (4). This is especially important for a competitive specialty like EM. They should try to list all program combinations that they would consider acceptable, and list highly those they desire most, regardless of their perceived chances of matching to those programs. Interestingly, the top combined choice of the couple may not contain each individual's number one program. Once complete, their combined list is electronically compared with the rank list of the programs that you have ranked. The National Residency Match Program computer goes down the list until it finds a pair in which both partners match with the program lists. An example is shown in Appendix 1.

Couples should be aware of multiple issues while creating their rank order lists. First, when it comes to numbers, both individuals should have the exact same number of ranks without exceeding 300 ranks. Second, matching at a pair of ranked programs is required for a couple to successfully match. Third, if they were not successful to match as a couple, partners do not have

the option of matching separately as the algorithm does not process their individual rank order lists (5).

Nonetheless, as a final option, couples may consider including a "No Match" code in one or both of their lists. When one of the partners enters the No Match code at a certain rank, then if the other partner can be matched at that rank, the partner with the No Match code will not match. As a result, s/he would then need to scramble into a vacant residency position that was not filled in the Match (5). This may be a dangerous strategy for EM. As one of the most competitive specialties, there are few positions left unfilled in the national Match. This could result in an applicant having to scramble to a position in another medical specialty or in a distant location. Each couple must come up with a strategy that works for them. Note that in order to increase the chances of matching as a couple, the No Match code should be placed at the bottom of the rank order list (5). In 2018, 67 of 1165 couples that applied to the Couples March had only 1 of the partners successfully match (1).

What if both partners are interested in EM? The couple must consider if they desire to apply to the same program, which can be tricky. It is important to keep in mind that different programs have different experiences and nonidentical levels of excitement for matching EM–EM couples (4). The Council of Residency Directors–EM Student Advising Task Force developed a guide that relays important pieces of information with regards to the process of the Couples Match for couples with 1 or both partners planning to apply to EM (4).

# **Selecting Programs**

When considering where to apply for residency training, many factors come into play. First, the couple must honestly examine the strengths of each partner and how competitive each is within the chosen specialty. An academically weaker candidate should apply to a wider range of programs to increase the chance of matching in a competitive specialty. The partner would, in turn, need to widen the scope of his or her residency search in a complementary fashion. In general, partners in a Couples Match apply to more programs than those in the solo Match because of the added layer of complexity of the Couples Match. Couples are advised to begin with a broad search and then narrow their list as they get a better feel for both their preferences and their competitiveness as they go through the interview process.

Another aspect to examine is the strength of prospective support systems available for couples in the various locations being considered. Residency training, while rewarding, is often physically and mentally demanding. Partners in a physician couple form an intrinsic support system for each other. However, the time constraints and pressures of residency may challenge their relationship, especially if they have children or aging parents who rely on them. A strong support network can provide encouragement and ease the loneliness that can occur when call schedules do not complement each other. Family members, close friends, church or community organizations, and other residents are good sources for a support network.

#### **The Interview Process**

The interview process, while initially intimidating, should be an enjoyable and informative opportunity to explore and evaluate different training options. Residency programs are not able to determine that an applicant is participating in the Couples Match unless s/he chooses to share this information with them by checking the appropriate box on the Electronic Residency Application Service application. Some people feel that it is unnecessary to discuss this during their interviews, while others see it as a benefit. The beneficial effects may be realized most profoundly for the "weaker" member of the couple. Some programs may be quite accommodating in helping the couple co-ordinate their interview dates when it comes to interviews in the same location. In addition, the program that wants to recruit the "stronger" candidate may be able to exert some influence for the institution's program to which the "weaker" candidate applied. It is not advisable to request this service, but the program director may choose to exercise this option.

Unfortunately, many of the EM training sites have relatively restricted dates for interviews because of the volume of applicants they must process. In some cases, they may be unable or unwilling to accommodate coordinated schedule requests. Once possible, however, a couple can benefit from the cost advantages of sharing hotel and travel costs by coordinating interviews. In addition, it can be a fun adventure for a couple to explore the community amenities and housing options together in each region the couple is considering. The partner of the interviewing applicant should not participate in the actual interview day unless he or she is interviewing in the same program. If there are social events planned, such as a dinner with current residents, this may be a good time for the partner to join. If no social events are planned, the partner may be better served exploring the region and housing options during the interview day.

It is important to note that if one of the partners receives an invite to interview at a program that both partners applied to, it would be a good idea for the other individual to email that program to follow up on his/her application status. This will increase the likelihood of both partners receiving an interview at that program around the same time. Similarly, if one of the partners happens to have personal connections to a city or program, the significant other is advised to mention this during the interview or when s/he is in contact with the program to check-in on his/her application status (3,4).

### Formulating the Final Rank List

Generating the Couples Match rank list will likely require multiple revisions. Each person should start by independently creating a list of programs in order from most to least desirable. Then, partners should block out several hours during a day when both are rested and ready to begin the process of negotiating a combined rank list. Couples can try placing each proposed combination on an index card that can be rearranged easily. Partners should be willing to compromise while understanding that neither career is more meaningful than the other. The final list that a couple generates together is likely to be considerably longer than those of most

single applicants. This is often the result of the many possible variations of pairing the couple's residency preferences.

### **CONCLUSION**

Although the Couples Match may initially appear complicated, it facilitates the process of enabling partners to obtain postgraduate training in geographic proximity to one another. The Couples Match can provide an excellent opportunity to re-evaluate the strength and direction of a relationship. With good communication between the partners and their advisors, an exciting joint venture can unfold that is fueled by the strength of the couple.

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### **SUPPLEMENTARY DATA**

Supplementary data related to this article can be found at https://doi.org/10.1016/j.jemermed.2019.07.020.

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