Title

Generalizability of Consensus Regarding SLOE Competitiveness: A Validity Study in a National Sample of Emergency Medicine Faculty

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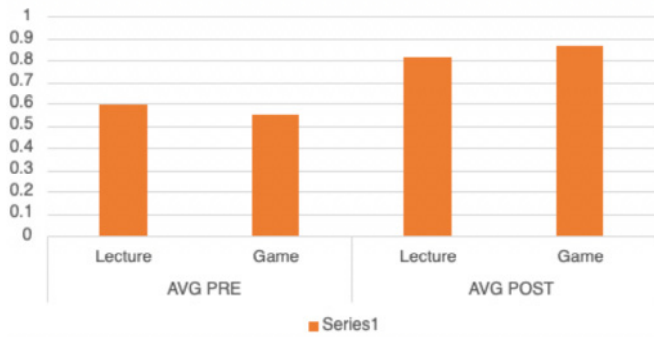**Publication Date**

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Figure 2. Average pre- and post- test scores.

significantly lower total compensation nationally than men, despite no significant gender difference in FTE support or stipend for the CD role itself.

Table 1. 157 EM CDs (44% survey response).

Region	#	Percent	Cumulative Percent
	1	.6	.6
#N/A	3	1.9	2.5
East North Central	29	18.5	21.0
East South Central	6	3.8	24.8
Middle Atlantic	35	22.3	47.1
Mountain	8	5.1	52.2
New England	6	3.8	56.1
Pacific	23	14.6	70.7
South Atlantic	25	15.9	86.6
West North Central	8	5.1	91.7
West South Central	13	8.3	100.0
Total	157	100.0	

- ERAS Geographic regions from Geographic Preferences

Table 2. CD-role specific and total compensation.
- 98 receive FTE reduction (62%)
  - Mean 21.4% (+/- 17.4 1 SD)
  - Median 18% (IQR 20)
  - Range 91%
- 44 receive stipend (28%)
  - Mean $31,959 (+/- $29,076 1 SD)
  - Median $25,000 (IQR 32,500)
- Total $ compensation
  - Mean $257,689 +/- 123,650 SD
  - Median $300,000 (IQR $90,000)

6 Emergency Medicine Clerkship Director Compensation: A National Survey

Jorge Fernandez, Daniel Suto, Doug Franzen, Nicole Dubosh, David Manthey, Emily Pott, Brenna Hogue, Jaime Jordan

Background: There is a lack of current high quality compensation data for Emergency Medicine (EM) Clerkship Directors (CDs) across the United States (US), despite an expansion of medical schools, EM residency programs and economic inflation.

Objectives: To report US EM CD compensation during the academic year 2022-23.
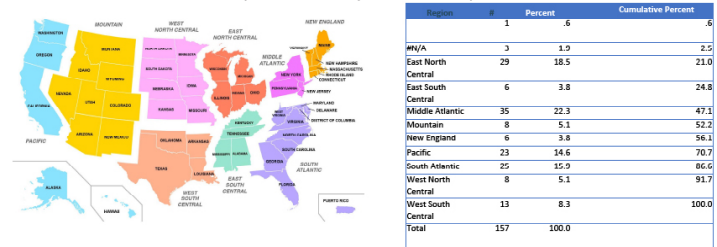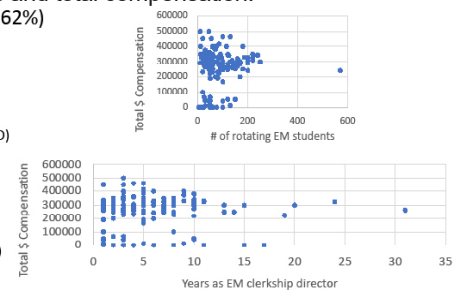
Methods: We performed a cross-sectional study of EM CDs. We identified 355 EM CDs using publicly available data from medical school, residency program, and AAMC websites and invited them to complete a confidential electronic survey, consisting of multiple choice and completion items, after piloting prior to use. Descriptive statistics were reported, and we compared categorical variables with χ-squared tests and continuous variables with t-tests.

Results: 157 CDs (44%), including those from university, county, community, and rural sites, responded from all US regions. For the CD role, 62% receive full time equivalent (FTE) support (mean 21% +/- 17% FTE, 1 SD) and 28% receive a stipend (mean $31,959 +/- $29,076). A wide range of total compensation was reported (mean $257,689 +/- $123,650). There was no correlation between FTE support, stipend, or total compensation and the number of rotating students, training, experience, site, or region. Total compensation was significantly higher in men (mean $278,964) than women (mean $222,140) (p=0.009), despite no significant gender difference in CD FTE reduction or stipend.

Conclusions: FTE reduction, stipends and total compensation vary highly amongst EM CDs, without correlation to the number of rotating students, training/ experience, type of site (university vs. county vs. community) or US region. Female EM CDs report

7 Generalizability of Consensus Regarding SLOE Competitiveness: A Validity Study in a National Sample of Emergency Medicine Faculty

Morgan Sehdev, Alexis Pelletier-Bui, Al'ai Alvarez, Benjamin Schnapp, Nicole Dubosh, Caitlin Schrepel, Sharon Bord, Yoon Soo Park, Eric Shappell

Background: Work reported at CORD 2023 showed strong consensus regarding competitiveness of mock standard letters of evaluation (SLOEs) and evidence that algorithms could closely predict consensus ratings. However, this group was small (n=7) and mostly from academic centers. The generalizability of these findings with real SLOEs and in a larger sample more representative of the national population is unknown.

Objective: Measure consensus regarding the competitiveness of SLOEs in a diverse national cohort and the ability of algorithms to predict consensus ratings.

Methods: 50 SLOEs from the 2023 application cycle were selected to match a blueprint of national ratings. SLOE competitiveness was ranked by 25 faculty with self-identified characteristics including: 56% female, 16% URM, 28% clerkship leaders, 78% residency leaders, AAMC regions: 20% central, 32% northeastern, 24% southern, 24% western, and institutions described as academic (56%), community

(32%), county (8%) and military (4%). Consensus was evaluated using levels established in a prior study (Table 1). Two models were tested to determine their ability to predict consensus rankings: a point-based system derived by an author and a linear regression model. Data were compared to a prior study with a cutoff of ±10% as the threshold for a meaningful difference in agreement/prediction.

Results: Faculty consensus in this larger and more diverse cohort was slightly below the level measured previously. However, no differences were above the 10% threshold (Table 1). Predictive models were similarly stable with only Tight agreement exceeding the 10% threshold (Table 1) and strong correlation between predicted and consensus rankings (Figure 1).

Conclusion: Consensus regarding SLOE competitiveness and the ability of algorithms to predict rankings remained strong in a larger and more diverse sample than previously studied. This suggests a common understanding among EM faculty regarding SLOE competitiveness.

Table 1A-C. Correlation between consensus rankings and (A) individual faculty rankings, (B) rankings predicted by the point system, and (C) rankings predicted by the regression model.
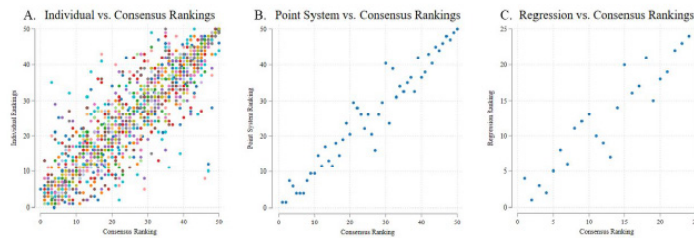

Table 1. SLOE Competitiveness Consensus and Prediction Agreement: Results from a National Cohort and Comparison to Previously Presented Pilot Study Results.

	Current Study: National Sample of Faculty Raters			Previous Study: Author Group Raters			Difference		
	Consensus: Faculty Ratings	Prediction: Point System	Prediction: Regression	Consensus: Faculty Ratings	Prediction: Point System	Prediction: Regression	Consensus: Faculty Ratings	Prediction: Point System	Prediction: Regression
Exact	12%	8%	18%	21%	12%	20%	-9%	-4%	-2%
Tight	71%	80%	76%	67%	62%	64%	+4%	+18%	+12%
Close	81%	88%	88%	83%	82%	92%	-2%	+6%	-4%
Loose	88%	94%	92%	93%	90%	96%	-5%	+4%	-4%
Correlation with consensus	N/A	0.97	0.94	N/A	0.97	0.98	N/A	0	-0.04

Exact: Percent of rankings where individual/predicted rank is exactly the same as the consensus rank
Tight: Percent of rankings where individual/predicted rank is within ± 4% of consensus rank
Close: Percent of rankings where individual/predicted rank is within ± 8% of consensus rank
Loose: Percent of rankings where individual/predicted rank is within ± 12% of consensus rank

8 Distribution of grades and rank lists among Emergency Medicine programs during the 2022-2023 academic year

Morgan Sweere, Thomas Alcorn, Thomas Beardsley, Michael Gottlieb, Alexandra Mannix

Background: The Standardized Letter of Evaluation (SLOE) is a key component for medical students applying to Emergency Medicine (EM) residencies. Elements of the SLOE include grades, rank list, and comments. There have been concerns about the distribution of grades and rank lists. In order to better interpret individual grades and ranks, it is important to understand these in the broader distribution across SLOEs.

Objective: The primary objective was to determine the distribution of grading schemes, grade, and predicted rank list positions across EM programs using the SLOE.

Methods: We performed a cross-sectional study of grade and rank distributions among EM rotations as reported on SLOEs during the 2022-23 application cycle. We obtained SLOEs for all applicants to two geographically distant EM residency programs. All SLOEs with grade or predicted rank data from ACGME-accredited EM residencies were eligible for inclusion. Trained abstractors independently reviewed and extracted data on total number of students on rotation, grading format, grade distribution, and rank distribution reported by the program for the preceding year.

Results: We included 264 residency programs in our analysis with an 87.5% dual extraction rate. The majority of programs (72.2%) used a Honors/High Pass/Pass/Fail grading scheme with 17.5% using Pass/Fail. The mean percent for each grade was: Honors/A 27.6%, High Pass/B 31.1%, Pass/C 40.8%, Low Pass/D 0.2%, and Fail/F 0.3%. The mean percent of all students for each rank list position was: Top 10%: 17.6%, Top Third: 36.5%, Mid Third: 34.1%, and Low Third: 11.8%.

Conclusions: Most programs used a Honors/High Pass/ Pass/Fail grading scheme, with most students receiving Honors and High Pass. Over half of applicants received the rank list position of Top 10% or Top Third. Both grades and rank list demonstrated evidence of skewed distribution and score inflation. This study is limited by self-reported data over a single year of applications.