



The Personal Statement: Not Just a Question of if It Is Valued, but Should It Be Valued?

Kathryn H. Melamed, M.D., and Tisha Wang, M.D.

Division of Pulmonary and Critical Care Medicine, Department of Medicine, David Geffen School of Medicine at UCLA, Los Angeles, California

ORCID IDs: 0000-0003-0837-3488 (K.H.M.); 0000-0002-4452-2148 (T.W.)

In this issue of *ATS Scholar*, Hinkle and colleagues provide insight into the role of the personal statement (PS) in the Pulmonary and Critical Care Medicine (PCCM) fellowship application process across the United States (1). The PS, a long-standing required component of postgraduate training applications, is the most open-ended part of the application, lending itself to variable and individual responses among applicants and heterogeneous interpretation among reviewers. It is also, as the authors point out, a common source of stress and anxiety among applicants.

The authors designed a survey to capture PCCM program leadership's perception of the value of the PS as part of a resident's application to fellowship. Although there has been prior investigation into other postgraduate medical training programs (2–6), no such study has been performed specifically targeting PCCM programs. The authors provide two useful pieces of information: the degree to which the PS is valued and the qualitative features of the essay that can be both helpful and harmful to an application. Results from this study found that 57% of programs valued the PS in the decision to offer an interview, although only 41% of programs felt that it affected the rank order list. In other words,

the PS still appears to be inconsistently used in major decisions that affect an individual applicant's chance of matching with their desired program.

The second part of the survey consisted of open-ended questions, which were systematically reviewed with good interrater reliability. The methodology for analyzing the responses was sound, particularly given the expected variability of the free text responses. The authors provide information regarding the valuable features of a PS, as well as characteristics to be avoided, organized into a succinct list of tips arranged in a figure format. This schematic can be easily referenced by future PCCM applicants for targeted advice that goes beyond the limited published material largely geared toward medical students applying into residency (7).

Notably, this study does have some limitations. The most obvious one is the poor survey response rate of 33%. Although just over half of respondents found the PS at least moderately useful, this finding may overrepresent the true proportion of program leadership who value the PS, as those who value the PS may have been more likely to complete the survey. Next, the majority of respondents who completed the study had been in their

ATS Scholar Vol 1, Iss 1, pp 5–7, 2020
Copyright © 2020 by the American Thoracic Society
Originally Published as DOI: 10.34197/ats-scholar.2019-0027ED

leadership position for less than 5 years and would be unlikely to have the longitudinal view necessary to correlate the quality of a PS to an individual applicant's ultimate performance in fellowship.

The authors' current study shows only if the PS is valued. However, answering these questions is paramount to understanding whether or not the PS should be valued.

A key point that this study does not address is whether the PS, when valued by a program, positively affects the recruitment process and the resulting matriculating class. This is increasingly important with the recent emphasis on holistic application review that is advocated for by both the Association of American Medical Colleges and Accreditation Council for Graduate Medical Education (8, 9).

The cornerstone of holistic review is understanding "the importance of giving individualized consideration to every applicant," which includes an applicant's experience, attributes, and academic metrics (8). The PS has the potential to provide significant insight into the trainee's personal characteristics and attributes more than any other part of the application.

As such, many questions remain: Do programs that value the PS make a larger attempt to exercise holistic review? Has the move toward holistic review changed programs' viewpoints on the PS? Do programs that value the PS increase the diversity, strength, and overall fit with the program of their admitted class? Or does the PS introduce implicit bias into the selection process? The authors' current study shows only if the PS is valued. However, answering these questions is paramount to understanding whether or not the PS *should* be valued.

Data from other literature have touched on the value added, and the possible pitfalls, of the PS in residency training programs. Although some studies show that the PS may contribute significantly to interview invitation or rank order list (2, 4), others are less supportive of its use. Data suggest that among internal medicine and surgery residency applications, there are gender differences in the PS that could introduce bias into the applicant selection process (3, 6). Furthermore, assessment of the PS can have significant variability among readers (5, 10). As such, some advocate for a more standardized approach to interviews and open-ended questions, to allow for an unbiased and systematic approach to learning about applicants' experiences and attributes, ensuring the questions asked align with the specific program's ideals (10).

In summary, the authors report the variable value placed on the PS among a group of PCCM program directors and importantly describe what to include and avoid while writing the PS. Prospective PCCM fellows can refer to this article when they draft their PS, which encourages a focus on individual's career goals and impactful experiences. Indeed the most prominent advice in the word cloud was to just be *personal*. Equally as important, applicants should avoid poorly proofread or lengthy statements and those that contain cliché so-called hero stories or quotations. This study is a very nice start to needed analysis of the postgraduate application process, which is undergoing more scrutiny nowadays. Future work should be directed at establishing a better understanding of how the PS can best be used to the advantage of the program and the applicant.

Author disclosures are available with the text of this article at www.atsjournals.org.

REFERENCES

1. Hinkle L, Carlos WG, Burkart KM, McCallister J, Bosslet G. What do program directors value in personal statements? A qualitative analysis. *ATS Scholar* 2020;1:44–54.
2. Max BA, Gelfand B, Brooks MR, Beckerly R, Segar S. Have personal statements become impersonal? An evaluation of personal statements in anesthesiology residency applications. *J Clin Anesth* 2010;22:346–351.
3. Osman NY, Schonhardt-Bailey C, Walling JL, Katz JT, Alexander EK. Textual analysis of internal medicine residency personal statements: themes and gender differences. *Med Educ* 2015;49:93–102.
4. Legato JM, Fuller DA, Kirbos C, et al. Matching into an orthopedic residency: which application components correlate with final rank list order? *J Surg Educ* 2019;76:585–590.
5. White BA, Sadoski M, Thomas S, Shabahang M. Is the evaluation of the personal statement a reliable component of the general surgery residency application? *J Surg Educ* 2012;69:340–343.
6. Ostapenko L, Schonhardt-Bailey C, Sublette JW, Smink DS, Osman NY. Textual analysis of general surgery residency personal statements: themes and gender differences. *J Surg Educ* 2018;75:573–581.
7. Arbelaez C, Ganguli I. The personal statement for residency application: review and guidance. *J Natl Med Assoc* 2011;103:439–442.
8. Association of American Medical Colleges. Holistic review [accessed 2019 Dec 13]. Available from: <https://www.aamc.org/services/member-capacity-building/holistic-review>.
9. Conrad SS, Addams AN, Young GH. Holistic review if medical school admissions and selection: a strategic, mission-driven response to shifting societal needs. *Acad Med* 2016;91:1472–1474.
10. King A, Mayer C, Starnes A, Barringer K, Beier L, Sule H. Using the Association of American Medical Colleges standardized video interview in a holistic residency application review. *Cureus* 2017;9:e1913.