

Student Perspectives on Pass/Fail Step 1

Please complete the survey below.

Thank you!

Changing the USMLE Step 1 to pass / fail:

	Disagree	Neutral	Agree
Is a good idea	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Will decrease socioeconomic disparities in the residency application process	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Will improve medical student well-being	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Will decrease medical student anxiety around residency applications	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

As a result of the scoring change, the following groups of medical students will be disadvantaged:

	Disagree	Neutral	Agree
U.S. MD	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
U.S. DO	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Caribbean IMG	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Non-Caribbean IMG	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

If my USMLE Step 1 were Pass/Fail:

	Disagree	Neutral	Agree
I would reconsider what specialty I apply into	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I would be less able to distinguish myself on the basis of merit	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I would be at a disadvantage when applying for residency	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My medical school's reputation would be more important when applying to residency	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I would want NBME 'shelf' scores (or international equivalent) to be reported on residency applications	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I would be more likely to take a year off after medical school to strengthen my application	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

I would need to spend less money on Step 1 preparation materials

I believe:

	Pass/Fail	3-digit Numeric	Quartiles
USMLE Step 1 scores should be reported as	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
USMLE Step 2 CK scores should be reported as	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Demographic Information

Age _____

Gender

Male
 Female
 Non-binary
 Prefer not to answer

Medical School Type

U.S. MD
 U.S. DO
 Caribbean
 International (non-Caribbean)

Ethnicity

Hispanic or Latino
 Not Hispanic or Latino

Race

White
 Black or African American
 American Indian or Alaska Native
 Asian
 Native Hawaiian or Other Pacific Islander

Curriculum Type

1-year pre-clinical
 1.5-year pre-clinical
 2-year preclinical

U.S. Citizen

Yes
 No

Year

Pre-clinical
 Clinical
 Senior (MS4)
 Graduate school (including PhD)
 Research year
 Other

What specialty are you considering?

- Unsure
- Allergy and Immunology
- Anesthesiology
- Child Neurology
- Dermatology
- Emergency Medicine
- ENT
- Family Medicine
- Medical Genetics and Genomics
- Internal Medicine
- Internal Medicine / Pediatrics
- Interventional Radiology
- Neurology
- Neurosurgery
- Nuclear Medicine
- OB/GYN
- Ophthalmology
- Orthopedic Surgery
- Osteopathic Neuromusculoskeletal Medicine
- Pathology
- Pediatrics
- Physical Medicine and Rehabilitation
- Plastic Surgery
- Preventive Medicine
- Psychiatry
- Radiation Oncology
- Radiology
- General Surgery
- Thoracic Surgery
- Transitional Year
- Urology
- Vascular Surgery

What additional reforms, if any, do you support to improve the residency application process?

Trainee Perspectives on Pass/Fail Step 1

Please complete the survey below.

Thank you!

Changing the USMLE Step 1 to pass / fail:

	Disagree	Neutral	Agree
Is a good idea	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Will increase Step 2 CK importance in residency applications	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Will improve medical student well-being	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Will increase training program diversity	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Will decrease socioeconomic disparities in the residency application process	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

As a result of the scoring change, the following groups of medical students will be disadvantaged:

	Disagree	Neutral	Agree
U.S. MD	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
U.S. DO	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Caribbean IMG	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Non-Caribbean IMG	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Overall, I believe:

	Pass/Fail	3-digit Numeric	Quartiles
USMLE Step 1 scores should be reported as	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
USMLE Step 2 CK scores should be reported as	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Demographic Information

Age

Gender

- Male
 Female
 Non-binary
 Prefer not to answer

Race

- White
- Black or African American
- American Indians and Alaska Native
- Asian American
- Native Hawaiian and Other Pacific Islander
- Other

Medical School

- U.S. MD
- U.S. DO
- Caribbean
- International (non-Caribbean)

U.S. Citizen

- Yes
- No

Post-Graduate Year

- PGY-1
- PGY-2
- PGY-3
- PGY-4
- PGY-5
- PGY-6
- PGY-7
- PGY-8
- PGY-9
- PGY-10+

My Specialty Is:

- Abdominal Radiology
- Addiction Medicine
- Addiction Psychiatry
- Adolescent Medicine
- Adult Cardiothoracic
- Adult Congenital Heart Disease
- Adult Reconstructive Orthopaedic Surgery
- Advanced Heart Failure and Transplant Cardiology
- Allergy and Immunology
- Anesthesiology
- Anesthesiology Critical Care Medicine
- Blood Banking/Transfusion Medicine
- Brain Injury Medicine
- Cardiovascular Disease
- Chemical Pathology
- Child Abuse Pediatrics
- Child and Adolescent Psychiatry
- Child Neurology
- Clinical Cardiac Electrophysiology
- Clinical Informatics
- Clinical Neurophysiology
- Colon and Rectal Surgery
- Complex General Surgical Oncology
- Congenital Cardiac Surgery
- Consultation-Liaison Psychiatry
- Craniofacial Surgery
- Critical Care Medicine
- Cytopathology
- Dermatology
- Dermatopathology
- Developmental-Behavioral Pediatrics
- Diagnostic Radiology
- Emergency Medical Services
- Emergency Medicine
- Diabetes, and Metabolism
- Endovascular Surgical Neuroradiology
- Epilepsy
- Family Medicine
- Female Pelvic Medicine and Reconstructive Surgery
- Foot and Ankle Orthopaedic Surgery
- Forensic Pathology
- Forensic Psychiatry
- Gastroenterology
- General Surgery
- Geriatric Medicine
- Geriatric Psychiatry
- Gynecologic Oncology
- Hand Surgery
- Hematology
- Hematology and Medical Oncology
- Hematopathology
- Hospice and Palliative Medicine
- Infectious Disease
- Internal Medicine
- Internal Medicine-Pediatrics
- Interventional Cardiology
- Interventional Radiology
- Interventional Radiology-Integrated
- Maternal-Fetal Medicine
- Medical Genetics and Genomics
- Medical Microbiology
- Medical Oncology
- Medical Toxicology
- Micrographic Surgery and Dermatologic Oncology
- Molecular Genetic Pathology
- Musculoskeletal Oncology
- Musculoskeletal Radiology
- Neonatal-Perinatal Medicine
- Nephrology

- Neurodevelopmental Disabilities
- Neurological Surgery
- Neurology
- Neuromuscular Medicine
- Neuropathology
- Neuroradiology
- Neurotology
- Nuclear Medicine
- Nuclear Radiology
- Obstetric Anesthesiology
- Obstetrics and Gynecology
- Ophthalmic Plastic and Reconstructive Surgery
- Ophthalmology
- Orthopaedic Sports Medicine
- Orthopaedic Surgery
- Orthopaedic Surgery of the Spine
- Orthopaedic Trauma
- Osteopathic Neuromusculoskeletal Medicine
- Otolaryngology - Head and Neck Surgery
- Pain Medicine
- Pathology
- Pediatric Anesthesiology
- Pediatric Cardiology
- Pediatric Critical Care Medicine
- Pediatric Emergency Medicine
- Pediatric Endocrinology
- Pediatric Gastroenterology
- Pediatric Hematology Oncology
- Pediatric Hospital Medicine
- Pediatric Infectious Diseases
- Pediatric Nephrology
- Pediatric Orthopaedic Surgery
- Pediatric Otolaryngology
- Pediatric Pathology
- Pediatric Pulmonology
- Pediatric Radiology
- Pediatric Rehabilitation Medicine
- Pediatric Rheumatology
- Pediatric Surgery
- Pediatric Transplant Hepatology
- Pediatric Urology
- Pediatrics
- Physical Medicine and Rehabilitation
- Plastic Surgery
- Preventive Medicine
- Psychiatry
- Pulmonary Critical Care
- Pulmonary Disease
- Radiation Oncology
- Regional Anesthesiology and Acute Pain Medicine
- Reproductive Endocrinology and Infertility
- Rheumatology
- Selective Pathology
- Sleep Medicine
- Spinal Cord Injury Medicine
- Sports Medicine
- Surgical Critical Care
- Thoracic Surgery
- Transitional Year
- Transplant Hepatology
- Undersea and Hyperbaric Medicine
- Urology
- Vascular and Interventional Radiology
- Vascular Neurology
- Vascular Surgery

What additional reforms, if any, would you support to improve the residency application process?

Supplementary Data
Survey Responses from the Total Cohort of Trainees

	Changing Step 1 to Pass/Fail:						Step 2 CK Should be Reported As:		
	Is a Good Idea			Will Decrease Socio-economic Disparities in the Residency Application Process			Pass/Fail	3-Digit Numeric	Quartiles
	Agree	Neutral	Disagree	Agree	Neutral	Disagree			
Total Cohort (n – 11,633)	35.7% (4,146/11,609)	20.1% (2,328/11,609)	44.2% (5,135/11,609)	27% (3,133/11,589)	27.6% (3,198/11,589)	45.4% (5,258/11,589)	24.6% (2,834/11,542)	53.9% (6,225/11,542)	21.5% (2,483/11,542)
URM (n – 989)	50% (493/986)	19.5% (192/986)	30.5% (301/986)	44% (433/983)	20.2% (199/983)	35.7% (351/983)	37.3% (366/980)	41.7% (409/980)	20.9% (205/980)
Non-URM (n – 10,644)	34.4% (3,653/10,623)	20.1% (2,136/10,623)	45.5% (4,834/10,623)	25.5% (2,700/10,606)	28.3% (2,999/10,606)	46.3% (4,907/10,606)	23.4% (2,468/10,562)	55.1% (5,816/10,562)	21.6% (2,278/10,562)
US MD (n – 7,130)	39.4% (2,806/7,120)	20.9% (1,485/7,120)	39.7% (2,829/7,120)	29.9% (2,125/7,111)	28.8% (2,051/7,111)	41.3% (2,935/7,111)	25.8% (1,828/7,086)	50.3% (3,562/7,086)	23.9% (1,696/7,086)
US DO (n – 2,173)	33% (748/2,269)	23.9% (543/2,269)	43.1% (978/2,269)	23.7% (513/2,167)	26.1% (566/2,167)	55% (1,009/1,835)	27.6% (596/2,157)	69.7% (1,275/1,829)	13.9% (254/1,829)
IMG (n – 1,845)	24% (442/1,843)	17% (313/1,843)	59% (1,088/1,843)	20.8% (382/1,835)	24.2% (444/1,835)		16.4% (300/1,829)		

The first row reports the responses of the total cohort with standard percentages over the total respondents for each question. The total cohort was further broken down to URM, Non-URM, US MD, US DO and IMG subgroups and responses were reported in each of the corresponding rows. URM – under represented in medicine; IMG – international medical graduate.