

OBSTETRICS & GYNECOLOGY

The following highlights information specifically relevant to applying to **OB&GYN** programs. Students should refer to the [OSA Residency Application Manual](#) for general application information and guidance.

Advising Team

OSA Advisor

Kerri A. Thom, MD, MS* (Required)

Office of Student Affairs, HSF-1, Suite 150

kthom@som.umaryland.edu

**Your OSA Advisor will also be the person who compiles your MSPE. Students may seek advice from any OSA Dean at any time; to request an alternative for the MSPE you can make a request with any OSA Dean.*

Specialty Advisor(s)

Kiranpreet Chawla, MD (Required)

Primary OB&GYN Specialty Advisor

kchawla@som.umaryland.edu

Irina Burd, MD, PhD (Required)

Chair, Obstetrics, Gynecology, and Reproductive Services

iburd@som.umaryland.edu

May Blanchard, MD

OB&GYN Residency Program Director

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Specialty Guidelines for Applicants

[APGO Right Resident, Right Program, Ready Day One: Applicant Resources](#)

[APGO 2025-2026 OB-GYN Application Cycle Guidelines](#)

Program Type – Preliminary/Transitional Year Requirements

OB&GYN programs are Categorical Programs (PGY1); Preliminary/Transitional year is NOT required.

Scheduling Considerations

Students should review scheduling resources available in the OSA Academic Handbook and the OSA Residency Application Manual.

Most students will do one of the two available sub-internships in Obstetrics, Gynecology, and Reproductive Sciences at SOM, along with one or two additional electives in OB&GYN.

Other popular rotations to consider include a surgical sub-internship or the sub-internship in Maternity and Newborn Care. Other electives may include (but are not limited to): Addiction Psychiatry, Anesthesiology, Eating Disorders, Endocrinology and Diabetes, Hypertension, and Point of care ultrasound.

Extramural “Away” rotations are not a required component of an OB&GYN application. Doing away rotations may have potential benefits and drawbacks, each of which should be weighed carefully when deciding whether to do an away rotation. Additionally, there are few away opportunities for students compared to the number of

OBSTETRICS & GYNECOLOGY

applicants, so it may be difficult to secure an away rotation even for very competitive applicants. An inability to secure an away rotation should not be seen as a reflection of your competitiveness as an applicant. Away rotations may be particularly useful for students with a strong geographic preference in certain regions (e.g., West Coast, Texas, Boston, NYC). Students are encouraged to discuss possible away rotations with OSA and Specialty Advisors.

Application Platform

Applicants will apply to OB&GYN Programs using the ResidencyCAS application platform.

[ResidencyCAS](#)

[ResidencyCAS Applicant Help Center](#)

[ResidencyCAS Applicant Worksheet](#)

Match Platform

OB&GYN Programs will participate in the Main NRMP Match.

[NRMP](#)

[Main Residency Match Applicants Calendar](#)

Application and Match Timeline - *Tentative/Dates subject to change*

Date	Activity
Jun (early)	Residency CAS season begins (Anticipated date)
Sep (early)	Residency applicants may begin submitting applications to programs
Sep (4 th Wed)	Residency Application Deadline - Residency programs may begin reviewing applications and MSPEs
Oct 29, 2024/TBD	OBGYN Interview Release Date
Nov 27, 2024/TBD	OGBYN – Notification of Final Interview Status
End of January	Register for NRMP Match and SOAP
Feb (early)	Ranking Opens in NRMP
Mar (early)	Rank Lists Certified
3 rd week of March	SOAP and MATCH

OBSTETRICS & GYNECOLOGY

Application Highlights

Geographic Preferences – the ResidencyCAS application will NOT include geographic preferences.

Experiences and Hobbies – The ResidencyCAS application allows applicants to enter up to 12 experiences and can indicate three of these as most meaningful. Hobbies are listed separately, and applicants can include up to three hobbies.

Letters of Recommendation (LoR) – “Evaluations” in for a ResidencyCAS applicant can be submitted electronically by evaluators using the ResidencyCAS Liaison Letters Recommendation Portal. Most programs require three to four LoRs, and a maximum of four can be submitted. All students should review individual program requirements when compiling and assigning LoRs. Most programs will require an OB&GYN Standardized Letter of Evaluation (SLOE) from an OB&GYN faculty member/rotation. Most programs will also require a letter from the department chair.

Dr. Kiran Chawla and Dr. Irina Burd will co-write the UMSoM SLOE/Chair Letter for all OB&GYN Applicants. Students should discuss this letter with Dr. Chawla during your advisory meetings. Additional letters may be solicited from your OB&GYN Sub-internship, other OB&GYN Faculty, or rotations in General Surgery (preferred), Family Medicine, or Internal Medicine.

An ideal make-up of letters would be:

1. UMSoM SLOE/Chair
2. OB&GYN Faculty from a home Sub-internship
3. Faculty from another Department (Surgery, FM, Internal Medicine)

External Resources:

[OB-GYN SLOE FAQs and Guidelines](#)

Letter Templates and Student Email Request Templates can be found on [APGO Right Resident, Right Program, Ready Day One: Applicant Resources](#)

Acuity Insights Assessment (Altus/Casper) – Some (few) programs require this assessment. You should check your program’s participation at this website <https://acuityinsights.app/faq/>

Specialty Competitiveness

OBSTETRICS & GYNECOLOGY

**Data shared here is from external sources; it is important to know that during our meetings we will review data from MedScope where you can compare your situation with that of other UMSOM grads.*

OBGYN has remained a competitive field even with changes to the field; 84% of US Seniors matched in 2024 and there were only 3 unfilled positions in SOAP.

From NRMP Main Residency Match Data, 2024

<https://www.nrmp.org/wp-content/uploads/2024/03/Advance-Data-Tables-2024.pdf>

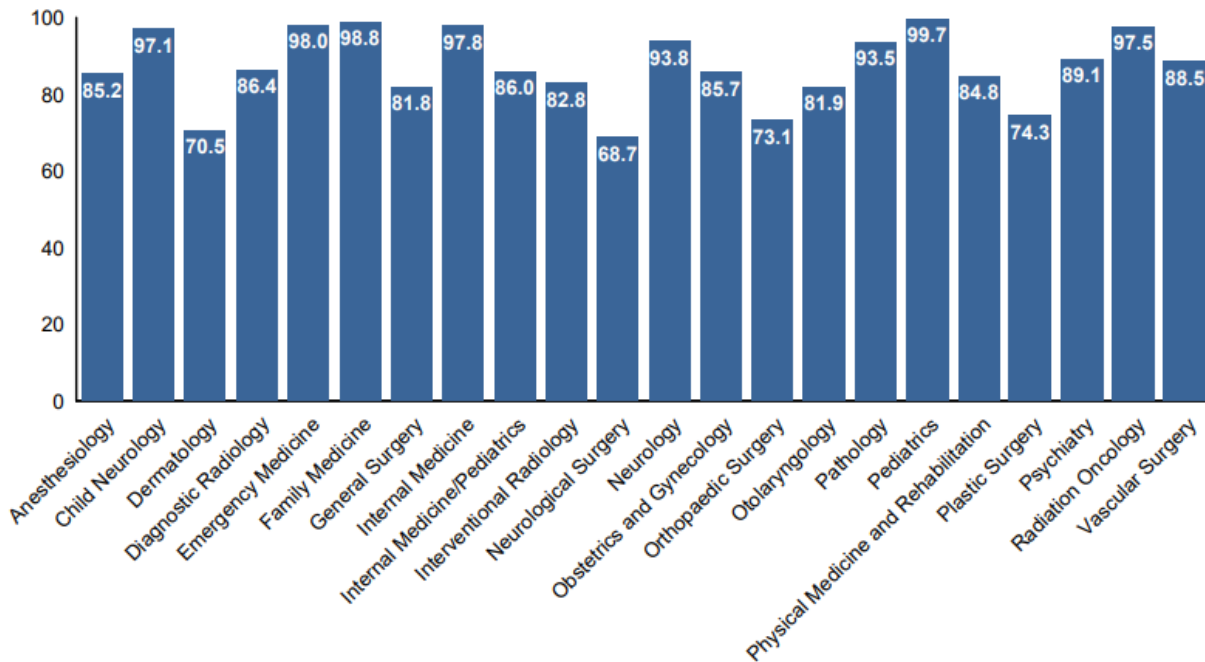
Table 1A Match Summary for MD Seniors, 2024

Specialty	No. of Programs	Positions Offered	Unfilled Programs	No. of Applicants*		No. of Matches*		% Filled		Ranked Positions	
				MD Seniors	Total	MD Seniors	Total	MD Seniors	Total	MD Seniors	Total
Obstetrics-Gynecology	291	1,539	3	1,309	2,143	1,103	1,533	71.7	99.6	15,054	20,260

NRMP Charting outcomes for the Match, 2024

[Charting_Outcomes_MD_Seniors_2024-2.pdf](#)

Chart 3 Match Rates of U.S. MD Seniors
Percent Matched by Preferred Specialty



The Competitive Applicant

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Most applicants can be competitive for an Anesthesiology application with an informed application strategy. We will utilize national and internal data to make a recommendation for the number and make-up of programs to apply.

NRMP Charting outcomes for the Match, 2024

[Charting_Outcomes_MD_Seniors_2024-2.pdf](#)

Table OB-1 Summary Statistics on U.S. MD Seniors
Obstetrics and Gynecology

Measure	Matched (n=925)	Unmatched (n=149)
1. Mean number of contiguous ranks	12.3	7.2
2. Mean number of distinct specialties ranked	1.1	1.3
3. Mean USMLE Step 1 score*	227	220
4. Mean USMLE Step 2 score	252	244
5. Mean number of research experiences	3.8	3.3
6. Mean number of abstracts, presentations, and publications	9.0	6.8
7. Mean number of work experiences	2.0	2.1
8. Mean number of volunteer experiences	5.0	5.0
9. Percentage who are AOA members	22.1	9.4
10. Percentage who graduated from one of the 40 U.S. medical schools with the highest NIH funding	28.5	22.8
11. Percentage who have Ph.D. degree	1.4	4.3
12. Percentage who have another graduate degree	22.2	24.6

Note: Only U.S. MD seniors who gave consent to use their information in research are included.

*Only applicants who indicated completion of the USMLE Step 1 exam prior to the transition to pass/fail (i.e., prior to January 26, 2022) had the option to self-report their Step 1 numeric score. In 2024, only 2,143 U.S. MD seniors self-reported Step 1 numeric scores.

Sources: NRMP Data Warehouse; Top 40 U.S. medical schools with the highest NIH funding in measure 10 is from the NIH website (<http://report.nih.gov/award/index.cfm>).

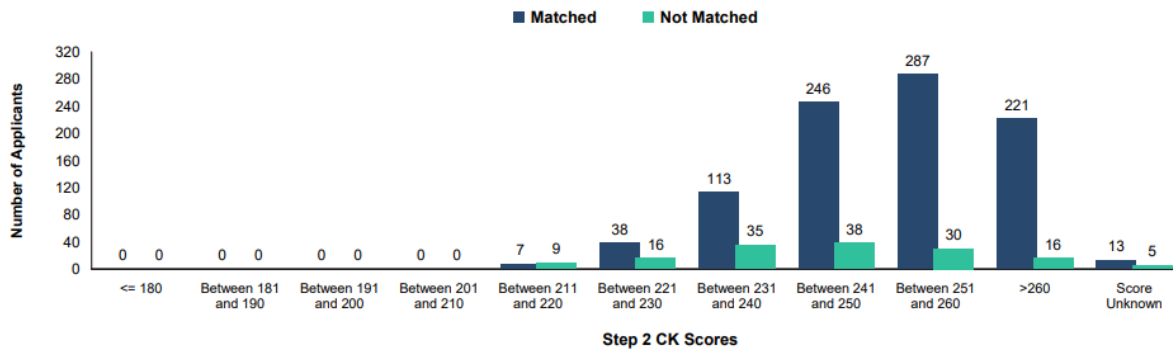
Step 2 – A reasonable goal for an OB&GYN applicant is the Mean Step 2 score (252) noted above. It is important to remember that applicants are successful in the OB&GYN match at a range of scores below and above the mean. Students with a Step 2 score < 230, should consider a strong Contingency plan.

NRMP Charting outcomes for the Match, 2024

[Charting_Outcomes_MD_Seniors_2024-2.pdf](#)

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Chart OB-4 USMLE Step 2 CK Scores of U.S. MD Seniors
Obstetrics and Gynecology



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142

Charting Outcomes in the Match:
U.S. MD Seniors, 2024

Data from 2021-2025

	No. Students	Avg. No. Interviews	% Match
OBGYN			
All	47	12.7	89% (42/47)
AOA	8	17.5	100% (8/8)
Non-AOA	39	11.7	87% (34/39)
Step 2 >= 252	19	14.2	89% (17/19)
Step 2 < 252	28	11.7	89% (25/28)
Step 2 >= 258	8	15.8	100% (8/8)
Step 2 < 258	39	12.1	87% (34/39)

GHHS	9	17.1	100% (9/9)
Non-GHHS	38	11.7	87% (34/38)

Exceptional	10	16.6	100% (10/10)
Outstanding	8	12.9	100% (8/8)
Excellent	13	12.4	92% (12/13)
Very Well	16	10.4	75% (12/16)

Identifying Programs

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A good start to identifying programs is to explore programs in your geographic areas of interest via national databases such as [FRIEDA](#).

The [Alignment Check Index for OBGYN Specialty](#) is designed to align values and characteristics of applicants and programs, giving you information about where you might be a good fit.

NOTE: There is NO DATA to support the use of this tool.

The [AAMC Residency Explorer Tool](#) is another useful resource in helping you gauge your competitiveness for a particular program. The data available in MedScope (which we can review together in our 1:1 meeting) will complement this data.

Applicants applying to OBGYN should also consider career goals and how they align with the political landscape of the state and program opportunities (e.g. [Ryan Program Locations](#) or [Abortion Accessibility by State](#)).

How Many Programs to Apply To

The Number of Programs you apply to will depend on the location and make up of programs you are interested in and your competitiveness as an applicant. To make an informed decision, you will need to have a Step 2 score and your final class standing (available after all clerkship grades are posted).

In 2025, UMSOM students who applied to OB&GYN residency programs applied to an average of 69 programs; *Note, this includes students with a range of class standing and step scores.*

On average, students received interview offers from approximately 21% of the programs they applied to; with the highest application to interview conversion rate coming from programs to which they submitted a signal.

National and local (MedScope) data shows us that the probability of matching is greatest for a student with 12-14 programs on their rank list, which means your goal is to secure 12-14 interview offers.

The final number of programs you apply to will be specific to you; however, in general we recommend the following based upon national and internal data.

Class Standing	Step 2 Score	No. Programs	Make Up of Programs
Exceptional	> 250 Step	55-60	Academic
Outstanding	> 250 Step	65-70	Academic
Exceptional/Outstanding	< 250 Step	75-80	Academic, some community
Excellent	> 250 Step	75-80	Academic, some community
Excellent	< 250 Step	85-90	Academic, some community
Very Well	Any Step	85-95	up to half community
Academic Concerns	Any Step	100+	Most Community

National Supporting Data

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NRMP Charting outcomes for the Match, 2024

Charting_Outcomes_MD_Seniors_2024-2.pdf

Chart 4 Median Number of Contiguous Ranks of U.S. MD Seniors by Preferred Specialty and Match Status

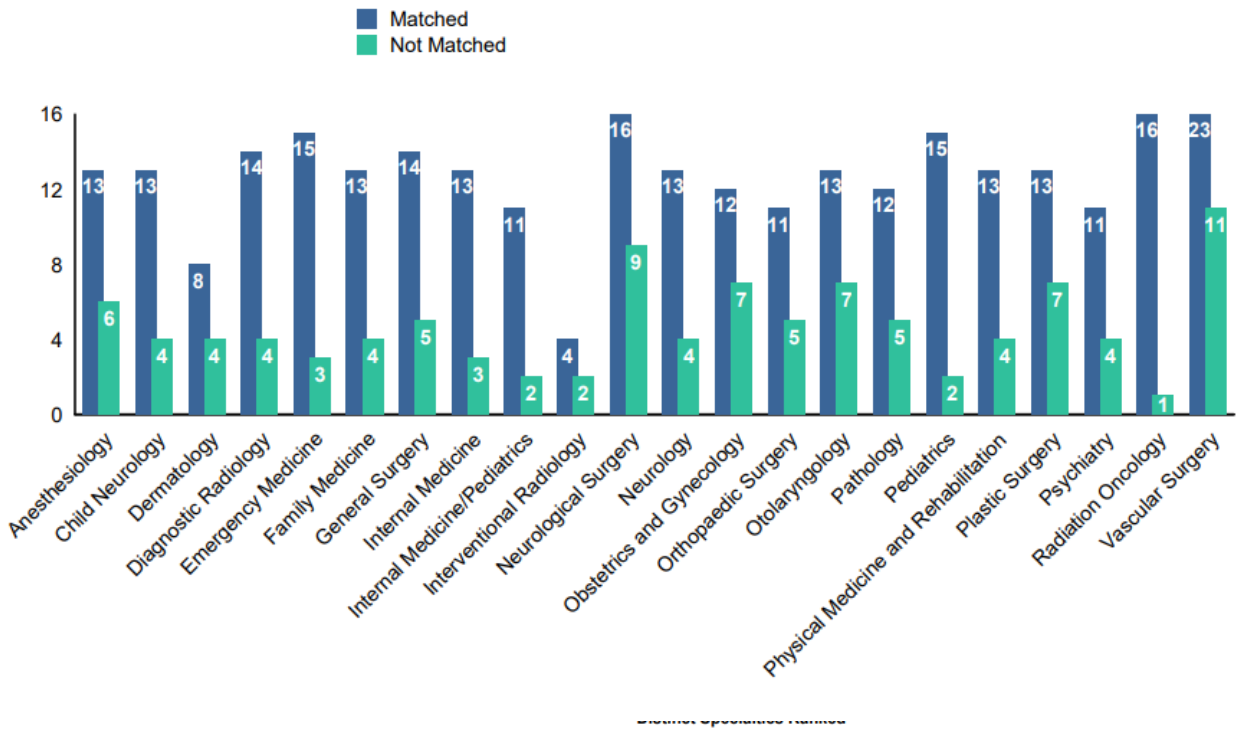
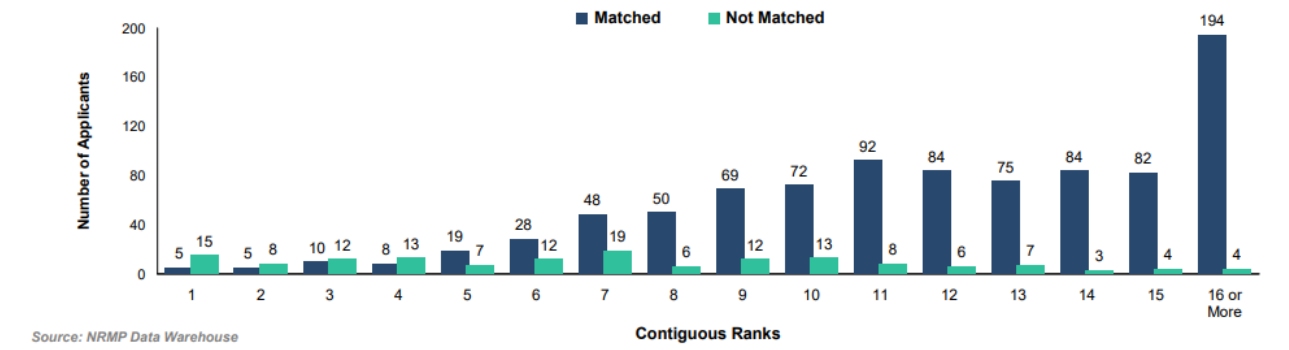


Chart OB-2 Number of Contiguous Ranks of U.S. MD Seniors **Obstetrics and Gynecology**

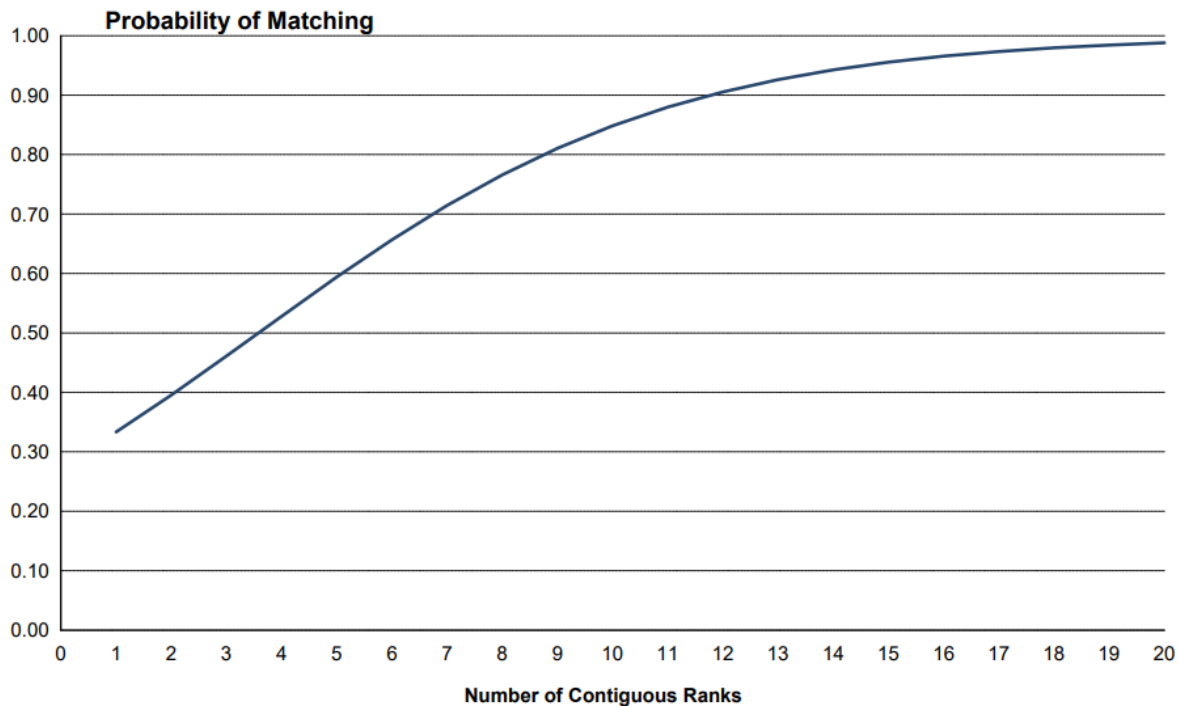


Source: NRMP Data Warehouse

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**Graph
OB-1**

Probability of U.S. MD Seniors Matching to Preferred Specialty by Number of Contiguous Ranks
Obstetrics and Gynecology



Source: NRMP Data Warehouse. Note: Probabilities calculated based on 2022-2024 applicants

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141

Charting Outcomes in the Match:
U.S. MD Seniors, 2024

MedScope Supporting Data

OBGYN	2023	2024	2025
Avg Applications	73	93	69
Avg Interview Offers	12.1	14.2	14.6
% Invites/Applications	16%	15%	21%
Percent of Interview Offers from Signaled Programs	69%	65%	75%
Percent of Interview Offers from Non-Signaled Programs	31%	35%	25%
No. Additional Interview Offers from Non-Signaled Programs	1 to 8	1 to 11	0 to 8
No. Signals	18	18	18
Signal Hit Rate (#Interviews/18)	46%	52%	63%
No. Gold Signals	3	3	3
Gold Signal Hit Rate (#Interviews/3)	72%	59%	67%
No. Silver Signals	15	15	15
Silver Signal Hit Rate (#Interviews/15)	46%	50%	62%

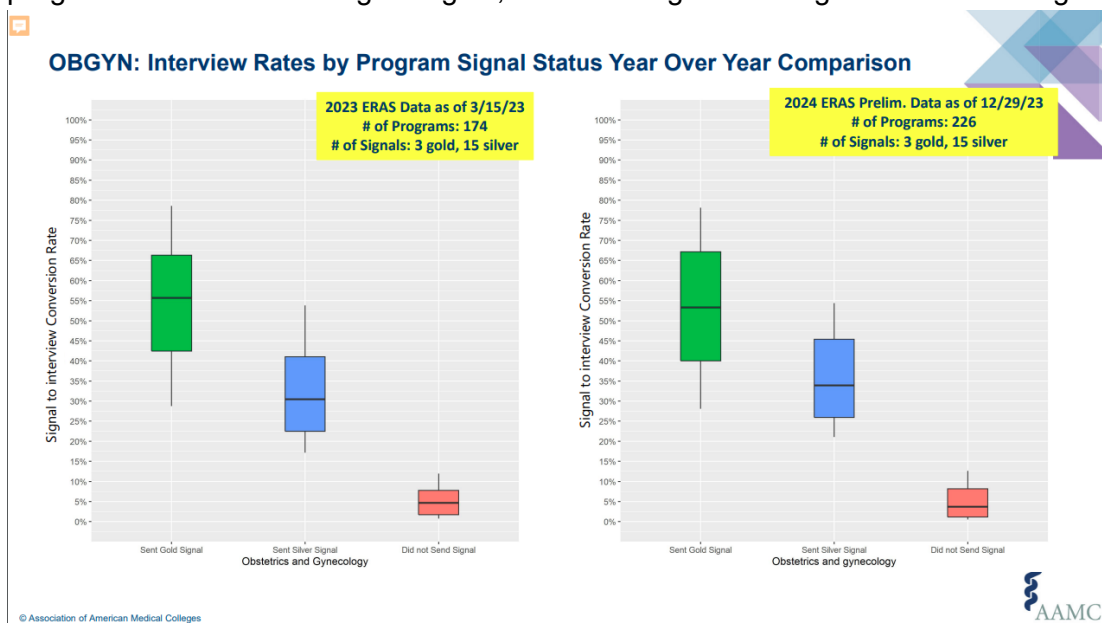
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Program Signaling

OB&GYN Applicants can apply a total of 18 signals (3 Gold, 15 Silver) at the time of application. Program signals are an opportunity for applicants to indicate programs of interest. Programs in turn will use signaling data when considering whom to extend an interview offer. Students are strongly encouraged to use all available signals and to include a mix of programs for which they are competitive on their signal list. A smart signaling strategy may reduce the overall number of applications.

[AAMC: Exploring the Relationship Between Program Signaling & Interview Invitations](#)

2024 Data from AAMC/ERAS, showed that the application to interview conversion rate was highest for programs that were sent a gold signal; and silver signal was higher than for no-signal.



[APGO RRR Residency Program Signaling Applicant Guide](#)

SOM – MedScope Data shows comparable findings – see above.

Contingency Planning

All applicants should consider a contingency plan as part of their residency application; see the OSA Residency Application Manual for more information. Students should discuss their contingency plans with their OSA and Specialty Advisors. Generally speaking, for OB&GYN, a good contingency plan includes an informed application strategy and applying to a range of programs in terms of competitiveness. Students looking for an alternative contingency plan may consider a dual application (e.g., OB&GYN plus Family Medicine or General Surgery) or applying to preliminary programs in general surgery or internal medicine.

