

MEDCHI, THE MARYLAND STATE MEDICAL SOCIETY  
HOUSE OF DELEGATES

Resolution 33-17

INTRODUCED BY: IMG Section

SUBJECT: Unmatched Medical Graduates

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1 Whereas, the number of applicants to the Main Residency Match has outnumbered the amount of  
2 residency slots available; and  
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4 Whereas, despite increases in the number of residency slots this year, the number of unmatched applicants  
5 remains significant; and  
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7 Whereas, in the 2017 Main Residency Match (AAMC Report: 2017 Main Residency Match) this year  
8 was an all-time low in terms of the percentage of matched applicants who matched into their first choice  
9 of residency; and  
10  
11 Whereas, these applicants are often in a position to lose health insurance and livelihood while bearing  
12 often enormous student debt in the cases of unmatched residents who nonetheless have a valid MD, DO  
13 or equivalent degree, and  
14 Whereas, these parties have skills, advocacy and legislative needs, support and resources needs, and  
15 specialized knowledge particular to their position and plight in a career in medicine and of special  
16 importance in informing MedChi of the concerns and solutions for issues for young and new physicians;  
17 and  
18  
19 Whereas, MedChi severely limits the opportunities for these parties to participate in all except a very  
20 limited capacity in MedChi (due to the lack of a valid Maryland license); and  
21  
22 Whereas, physician burnout is well-documented and concerning to Maryland and MedChi; and  
23  
24 Whereas, young physicians and new physicians have different pressures, values, and interests (much  
25 larger student debt, have been trained to multi-task, be more technology-based and less facile with the  
26 type of personal interaction that has been deemed essential and typified the traditional doctor-patient  
27 relationship, may prioritize non-career interests equally to career interests) and these may well result in  
28 increased quickness to burnout, medical careers that do not center on patient care, and  
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30 Whereas, the number of new physicians matching to their specialty of choice in 2017 is only 48%, and  
31 this may result in less job satisfaction and increased likelihood of burnout; and  
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33 Whereas, burnout among physicians as well as other health concerns may lead to a hiatus in practice for  
34 physicians during intervention, in treatment, or in programs administered or monitored by the MPRP or  
35 MPHP; and  
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37 Whereas, these physicians are growing in number and can still contribute to participation in health care  
38 and organized medicine (policy, advising, advocacy, professional writing, correspondence or  
39 communication, etc.) despite a hiatus from clinical practice or some specific restrictions or suspensions of  
40 licenses; and  
41

42 Whereas, in light of increasing difficulty in Matching to a residency and career of choice and of  
43 difficulties in personal lives posed by longer residencies, changes in residency, or changes in career plans  
44 that result, physicians are in multiple cases in a situation where they may be in between licences (for  
45 example leaving one residency to pursue another and being without a training license in the interim); and  
46

47 Whereas, in many life situations hiatus from medical training may be necessary, (e.g. severe illness in a  
48 family member, difficult pregnancy, special needs family members, aging family members who may need  
49 care or transition to a new care or living arrangement, accident, divorce, etc.); and  
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51 Whereas, current medical education and training models do not allow any program for specialized leave  
52 and reintroduction into the training force; and  
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54 Whereas, this lack of planning leads to physicians who are for some period of time out of training and  
55 therefore without a current license; and  
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57 Whereas, MedChi severely limits the opportunities for these parties to participate in all except a very  
58 limited capacity in MedChi (due to the lack of a valid Maryland license); therefore be it  
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60 Resolved, that MedChi revisit and alter its policies and regulations to expand the participation options for  
61 unmatched medical graduates who are available and willing to participate and provide valuable sources of  
62 energy and knowledge; and be it further  
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64 Resolved, that MedChi offer a new category of participation for unlicensed physicians who have earned a  
65 medical degree and would like to participate in organized medicine and fall into this specialized category;  
66 and be it further  
67

68 Resolved, that MedChi investigate the possibilities for physicians in all categories without a license  
69 restriction to participate in care of patients in a lesser license capacity under the Maryland Board of  
70 Physicians and develop propositions to help this increasing group of physicians; and be it further  
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72 Resolved, that MedChi and the Center for a Health Maryland begin to study the facets of burnout facing  
73 younger physicians and solutions for this growing problem in light of poorly matched and unmatched  
74 young physicians and the differing practice expectations, preferences, and willingness to accommodate  
75 traditional practice concerns and currently proposed solutions.  
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78 Fiscal Note: Could provide positive revenue stream for MedChi in the form of increased membership;  
79 would cost the Center for a Healthy Maryland approximately \$25,000-\$50,000 to conduct proper  
80 research.  
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82 At its meeting on September 23, 2017, the House of Delegates referred Resolution 33-17 to the  
83 Board of Trustees.