

Reading between the lines: exploring the unwritten rules of letters of recommendation in the Canadian resident selection process

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Abstract

Background: Efforts to better understand and improve letters of recommendation (LORs) in the resident selection process have identified unwritten rules and hidden practices that may limit their effectiveness. The objective of our study is to explore these unwritten rules and hidden practices more fully in one Canadian academic medical community.

Methods: We conducted semi-structured, discourse-based interviews with 18 faculty members from the departments of Internal Medicine and Psychiatry at the University of Manitoba, Canada. Interviews were guided by sample LORs and were focused on experiences with either writing or reading LORs. We analyzed interviews using key concepts from genre theory and Aristotle's appeals to ethos, logos, and pathos.

Results: Participants described how the practices surrounding LORs are guided by unwritten rules. These practices contributed to writers' use of visible strategies and textual silence to establish credibility, build a strong case, and appeal to readers. Readers rely on similar strategies, but not always as intended by the writers.

Conclusions: The unwritten rules of one academic community can impede a nationally-facilitated resident selection process. Our findings highlight how critiques and potential improvements to LORs could benefit from considering the use of visible and invisible rhetorical strategies in specific contexts.

Résumé

Résumé français à venir.

Introduction

Resident selection is a high stakes process that has received considerable attention in recent years,¹ including discussion of the fairness and effectiveness of the methods used to make decisions.^{2,3} Letters of recommendation (LORs) are commonly used in the resident selection process, but they have come under increasing criticism for the variability in how they are written and assessed;⁴⁻⁷ the presence of gender and other biases;^{8,9} and their inability to discriminate well between applicants.^{10,11} Some scholars have also noted that reading LORs are akin to “reading between the lines” or deciphering a code.^{5,6,10} Additionally, faculty members are not often taught how to write LORs nor do people receive feedback to help improve the effectiveness of their LORs.^{5,12,13} Such findings suggest that a key factor limiting the effectiveness of LORs are the unwritten rules and hidden practices surrounding how they are written and read.

Despite the foregoing challenges, several studies have highlighted the value of LORs in the resident selection process, particularly for their ability to provide insights into applicants’ strengths and weaknesses^{14,15} and their potential to predict future performance in a training program.^{4,16} Accordingly, efforts have been made to reduce LORs’ variability by implementing standardized LORs,¹⁷⁻²¹ and create faculty development tools focused on writing LORs.^{13,22} Researchers in medical education and other fields have also made efforts to better understand the language and content of LORs and the practices surrounding their assessment.^{5,6,23-26} These studies have identified the substantial impact of unwritten rules on LORs such as nuances in language^{5,6,25} and features beyond the letters such as their writers^{5,6,23} or how their content interacts with other application materials.^{24,26} While other scholars have identified some of these unwritten rules as a subset of larger research findings, we have not found any studies that have focused specifically on exploring the unwritten rules for writing and assessing LORs despite the impact of these rules on the effectiveness of LORs. Our study sought to gain insight into the unwritten rules by exploring the practices surrounding LORs including how they are written and interpreted. By exploring these unwritten rules more fully, we begin to make tacit knowledge and practices more visible and facilitate more fulsome critiques of LORs. These insights can contribute to improving the effectiveness and fairness of LORs in the resident selection process.

Theoretical framework

To explore the unwritten rules of LORs, we drew on theories of genre,²⁷⁻²⁹ and Aristotle’s rhetorical appeals in persuasive communication.³⁰ Genre refers to patterns in language that shape and are shaped by regularities in social practices.²⁷ According to Swales,^{28,29} genres are the mechanism by which communities achieve their collective goals through language. Genres are often guided by unwritten rules about what can and cannot be said, and the social practices surrounding genres can sometimes be hidden or only accessible to specific audiences, such as genres that are used in confidential, high-stakes decisions and processes like LORs for resident selection.^{31,32} Genre theory has been used in previous medical education studies to demonstrate how unwritten rules and inaccessible practices can present challenges for new or peripheral members of a community to learn and effectively engage in these genres.^{33,34} Given the connection between language and practices, research that draws on genre theory focuses on analysing language and practices within their specific contexts of use.³⁵ Therefore, our research will focus on the unwritten rules and language practices of LORs in one Canadian academic medical community.

To add clarity to emerging patterns in the data, we supplemented genre theory with Aristotle’s rhetorical triangle, which depicts three rhetorical appeals in persuasive communication: ethos, logos, and pathos.³⁰ Ethos refers to appeals to the credibility and trustworthiness of the communicator, in the case of our study, the LOR writer. Logos refers to appeals to logic and reason, in the case of our study, how writers establish a clear and logical argument or case for an applicant. Pathos refers to appeals to the audience’s emotions, or the ability for the communicator to relate to the needs and values of the audience³⁶ who, in the case of our study, are the faculty who evaluate LORs as part of a selection committee. These appeals typically refer to the communicator’s persuasive strategies, but the uptake or recognition of such strategies is a key element of effective communication.^{37,38} As such, for our study, we focused on the strategies that writers’ use to appeal to ethos, logos, and pathos and the strategies that readers identify or respond to as ethos, logos, and pathos.

Methods

We took a rhetorical perspective on our analysis of LORs, that is, our study design and analysis focused on how goals are achieved through language.³⁹ We conducted a qualitative study that included gathering information about the social practices surrounding LORs and the rhetorical choices that faculty members make when writing or reading LORs.⁴⁰

We received approval from the University of Manitoba Health Research Ethics Board to conduct this study (File # HS23568 - H2020:016).

Setting and participants

The setting for our study is in a regional academic medicine community in Manitoba where the resident selection process is coordinated nationally and facilitated by a third-party organization through which programs can request that applicants provide LORs.⁴¹ A disproportionate amount of research on LORs focuses on surgical specialties, therefore, to provide additional perspectives, we chose to focus on two different specialties, Internal Medicine and Psychiatry, which are two of the largest non-surgical speciality programs in Manitoba. These two programs both require applicants to submit three LORs with their application. We sent a recruitment e-mail to all faculty members in the departments of Internal Medicine (IM) and Psychiatry (P) at the University of Manitoba. Participants were given the choice to participate as a LOR writer or as a LOR reader. In total, 18 faculty members consented to participate. The breakdown of department, interview type, and level of experience is outlined in Table 1. In addition, during the interviews, 11 participants provided perspectives on their experiences with both reading and writing. The interviewer did not explicitly query these participants on both activities, but when these perspectives were offered, they were included in the analysis for the appropriate activity.

Table 1. Participant # by department and type of interview and level of experience

	Internal Medicine	Psychiatry
Writing LORs		
Experienced ^a	5	3
Novice ^b	2	1
Reading LORs		
Experienced ^a	3	2
Novice ^b	2	0

^aExperienced refers to experience of writing 20 or more LORs or sitting on a selection committee 5 or more times. ^bNovice refers to experience of writing less than 10 LORs and sitting on a selection committee 0-3 times.

Data collection

We conducted semi-structured, discourse-based interviews between June and December 2020. Discourse-based interviews involve guiding and observing participants as they engage with a text to elicit information about their tacit rhetorical and genre knowledge.⁴² For interviews focused on writing LORs, participants provided a de-identified sample of a LOR they had previously written for resident selection. For interviews focused on reading LORs, CR and NP fabricated a sample LOR, which CR provided participants (see Appendix A). These sample LORs guided discussion about writers' choices and readers' attention with regards to content, language, and formatting. In addition, CR asked all participants about the practices surrounding LORs (see Appendix B). Interviews were 25-50 minutes in length and were audio-recorded and transcribed verbatim.

Data analysis

We conducted iterative data analysis facilitated by NVivo 12 software. First, CR conducted descriptive coding⁴³ of the IM interviews to develop a preliminary coding framework that was guided by key concepts from genre analysis that BC then applied to a sample of 4 interviews. The two coders discussed any similarities and differences in their coding to refine the coding framework. CR then applied the coding framework to all the interviews, revising it as new information arose. To gain clarity on salient patterns we identified in the data, we categorized descriptive codes using Aristotle's concepts of ethos, logos, and pathos. The four authors discussed analyses at key intervals to check shared understanding of data and provide perspectives from our diverse experience. Following analysis, we invited participants to provide feedback on a summary of findings.

Reflexivity

Our diverse expertise and experiences affected how we collected, analyzed, and interpreted our data. CR and BC are PhD-trained researchers who brought experience conducting qualitative research in medical education to data collection and analysis. Additionally, the theoretical and methodological approach to the study was informed by CR's expertise in applied linguistics and discourse analysis and BC's expertise in anthropology. NP and WF are educational leaders and clinicians who provided perspectives from their experience as LOR writers, resident selection committee members, program directors, and educational scholars in their respective disciplines of Internal Medicine and Psychiatry.

Results

Through analysis of the interviews, we identified several ways in which participants drew on tacit knowledge and unwritten rules to engage in the social practices surrounding LORs and for constructing or responding to the ethos, logos, and pathos in LORs. These patterns were consistent across the two disciplines and so we have not distinguished between them in the descriptions of our results.

Social practices surrounding LORs

Participants described how the practices of writing and reading LORs are largely guided by unwritten rules and individual practices. For example, some participants describe writing LORs as “one of the tasks that you often have to perform that no one trains you for” (IM3). While some limited explicit guidance exists, writers often rely on experience from sitting on a selection committee or advice from colleagues and often develop their own templates over time. Similarly, readers described a variety of practices across programs for assessing LORs but indicated that they tend to provide gestalt assessments of LORs rather than use formal rubrics, for example, “We think about is it an average letter or a strong letter...but we don't necessarily provide specific criteria of what a strong letter would be” (IM10).

Additionally, participants highlighted how LORs are one tool that is considered in relation to the whole application and selection process. For example, some participants described how LORs help to verify the information that is provided in other application documents, that is, an applicant's “story should meld” (IM12). Other participants described how LORs provide information that does not exist in the other application documents. This includes information that “can't always be captured within performance scores” (IM2) or “experiential feedback” that “supplements all the other information that's part of the application package” (P2).

One of the most common purposes for the LOR, however, was as a “screening tool” (P2) for identifying potential concerns with applicants by “[looking] for the rare person that you probably don't want in your program” (IM6). However, participants also describe how writers generally only write LORs for applicants that they support and have had sufficient time observing and, in general, decline to write LORs otherwise.

Rhetorical appeals in LORs

Ethos. Interviews revealed that the credibility and trustworthiness of the writer plays an important role in writers' choices and how readers interpret and assess LORs. Participants described some of the strategies for determining credibility and trustworthiness that are explicitly outlined in LOR guidelines, such as indicating the length and nature of an interaction with an applicant to demonstrate that a writer has sufficient knowledge of an applicant. However, writers and readers appear to depend largely on tacit strategies for appealing to ethos (Table 2).

One unwritten rule, according to participants, is that a LOR's credibility and trustworthiness is often dependent on a writer's experience, reputation, and specialty. Interview participants who focused on writing LORs and are relatively new or unknown members of the academic medicine community noted that it is important to demonstrate their ability to make a reliable evaluation of an applicant, such as providing information about their experience with supervising students because, “it tells them I've seen a lot of medical students in the past. If I've seen a lot of medical students, maybe then I'll have a pretty good idea of where they're at” (IM6). Similarly, when reading LORs, participants explained that they first identify who the writer is and whether they know the person and where the person is located. Readers explained that they tend to trust LORs more if they know the writer or the writer is from the same discipline: “For better or for worse, it means more to me that it's coming from... somebody within our specialty. If I know, and maybe think highly of the referee, that helps” (IM1). Even when readers do not know the writer, they can be influenced by patterns they see across one writer's LORs: “When you read enough letters, you start to see some patterns and you realize that [this person] always writes that in all of his letters, and so I can't believe what [he] writes anymore” (IM1). Some readers also note that the writer's cultural or institutional context influences their trust in the letter, for example, when “all of the letters from this center or from this department are so, so strong that it's hard to know if that's just how they write letters... versus if it is indeed a class of very exceptional applicants.” (IM10).

A writer's credibility is also established through the quality of the LOR. Quality was discussed in terms of spelling and grammar and being well-structured and formatted, but also in terms of its originality and authenticity. One participant explained:

When I read a really badly written letter of reference, sometimes I focus more on how badly written it is than its content. There are certainly times when you read a letter and you go, 'This person didn't care at all. They couldn't care less to sell the attributes of the person they're writing a reference for,' and it's hard to value that kind of a reference letter. (IM3)

However, the quality of the LOR appears to be an especially important consideration for writers who perceive themselves as “not somebody who’s got a nationally known name out there” (IM4) and so, as this participant described, “I need to make sure that my letters sound good and grammatically correct...if they don’t know me and I write a sloppy letter, I don’t think it’s going to carry much meaning to them” (IM4). Another participant explained that some physicians’ reputations may take precedent over the quality of their LORs, for example:

There are physicians who write letters for people here and even though it's a pretty generic letter you'd still consider it a nod from that person. However, if that person's applying elsewhere, you may not know that this attending probably thought strongly just because their letters may not [be] overly descriptive or flowy. That can put people at a disadvantage going elsewhere. (IM10)

Logos. Writers and readers described different perspectives on the goals of a clear and logical argument in LORs (Table 2). Writers tend to focus on highlighting how exceptional an applicant is and are hesitant to include comments about applicants’ weaknesses, “not only because people don’t like writing bad things, but also...if you have something bad to say, you’re opening yourself up to problems without any protection.” (P5). If writers do include information about an applicant’s weaknesses, they “try to put a constructive slant on it” (IM8).

Conversely, readers tend to focus on identifying red flags or other potential concerns in LORs and describe how the value of a LOR depends largely on its content. Specifically, they explained that while most LORs are generic and of little value, their value increases if they either contain red flags or successfully demonstrate how an applicant is exceptional. For example, if the LOR contained “negative information” then “it would be given a lot of weight, but depending upon how much is provided, it may be of some value or medium value or a lot of value” (IM5).

However, explicit red flags are very rare, and so readers often look for implicit red flags like lukewarm letters, or an

applicant’s choice of referees. Readers described how most LORs are positive and so they begin to read between the lines, or as one participant explained, “What is important is what’s not said. Because people do not like to write derogatory things on letters” (IM8). Instead, identifying red flags was described as a process of looking for what is not said or for subtle language cues that imply concerns, or “a little nudge and a wink that maybe things aren’t exactly the way I’m describing” (IM3). One participant gave the example of small phrases such as “with enough time he has matured” (IM2). Subtleties can include the tone of the letter. Tone can include overly accoladed letters in which “everything is just so outstanding, so outstanding, so outstanding. It begs the question, well then why don't you take him?” (IM2). Tone can also refer to lack of accolades because readers are “not ever going to get a terrible letter. So, lukewarm ones are really very bad” (P5). Choice of referees can also be considered a red flag, for example, if for “all three reference letters, people have known them for less than a week” (IM6).

Despite differing focuses on either strengths or weaknesses, both writers and readers described how a strong case for the strength of an applicant is supported with evidence, such as providing concrete examples, and through language choices, such as the use of strong supporting adverbs and adjectives like “highly” or “excellent.” However, they also described the tacit ways in which these strategies are employed to make a case for or distinguish the quality of an applicant. For example, participants indicated that strong adjectives and adverbs were important to include in LORs, these words tend to be more meaningful when they are omitted, for example, one participant explained that “even though it’s almost expected...to not be there would be an unexpected, adverse mark against the individual” (IM5). In addition, while participants explained that comparative and sometimes percentile rankings of applicants can be helpful for distinguishing the quality of an applicant, these types of statements can also be used strategically. One participant explained, for example, that “if someone isn’t in the top 20%, that’s still pretty good, but...it’s almost a code for being average” (IM10).

Pathos. Writers primarily appeal to needs and values of readers by highlighting the skills and characteristics that are important to a particular specialty and by trying to write a LOR that “helps [the applicant] stand out from the crowd” (IM4) (Table 2). While readers explained that they respond favourably to these strategies, they are primarily interested in “what it was like to work with [the applicant]

as a colleague" (P1). Readers acknowledged that applicants tend to be intelligent and accomplished and so "at our end, we're also looking at how personality structure is going to fit in with our section and our personality structures" (IM2). Some participants also noted that it is important to know

how applicants function as learners because "a learner who doesn't pay attention to feedback or who is defensive about feedback is going to have a harder time improving their skills and is just not as nice to work with" (P1).

Table 2. Writers' and readers' tacit strategies for appealing to or identifying ethos, logos, and pathos

Ethos (appeals to credibility and trustworthiness of writer)	
<i>For writers</i>	
Demonstrating own experience and expertise	"I have a standard introduction that I would use for everyone, that outlines my job. I think it tells them I've seen a lot of medical students in the past. If I've seen a lot of medical students, maybe then I'll have a pretty good idea of where they're at." (IM6)
Demonstrating knowledge of applicant	"So for example, explaining who I am, that I was a primary supervisor and that it was a core six week rotation, might carry more weight than if it was a two-week elective rotation, which is shorter" (P2)
Providing well-written letter	"Being not somebody who's got a nationally known name out there, I need to make sure that my letters sound good and grammatically correct, well phrased, because I think that's one of the few ways I can transmit who I am. If they don't know me and I write kind of a sloppy letter, I don't think it's going to carry much meaning to them as much as something that seems to be well-written." (IM4)
<i>For readers</i>	
Identifying writer's social location	"For better or for worse, it means more to me that it's coming from . . . somebody within our specialty. If I know, and maybe think highly of the referee, that helps." (IM1)
Assessing personal knowledge of writer	"Even within your own colleagues, there's a spectrum of how you would rank or interpret someone's letter when you know the person writing it, never mind if it's someone that you've never met before in a program that you haven't met before." (IM10)
Assessing quality of writing	"When I read a really badly written letter of reference, sometimes I focus more on how badly written it is than its content. There are certainly times when you read a letter and you go, 'This person didn't care at all. They couldn't care less to sell the attributes of the person they're writing a reference for,' and it's hard to value that kind of a reference letter." (IM3)
Logos (appeals to reason and rationality)	
<i>For writers</i>	
Declining to write letters	"I don't provide a reference to you if I don't feel like an advocate for you." (IM2)
Omitting applicants' weaknesses	"What you're saying, what you're not saying. So, the experiences this resident did not have, or what you think is lacking. You wouldn't put it on paper, but you would just leave it out." (P4)
Omitting strong adjectives and adverbs	"If I were to just say [asset], it means that there wouldn't be a liability, so they wouldn't have problems adjusting or completing that role. Whereas an 'excellent' would mean, well they really are going to add something special." (IM8)
<i>For readers</i>	
Assessing value of information	"I think they probably add a little bit, and probably the thing they add the most is if there's something that stands out. If you read 50 letters and they're all pretty good, and then there's one that's either excellent or poor, that one stands out." (P3)
Identifying implicit red flags	"We're not ever going to get a terrible letter. So, lukewarm ones are really very bad." (P5)
Noticing lack of strong adjectives and adverbs	"...even though it's almost expected, ... to not be there would be an unexpected, adverse mark against the individual." (IM5)
Assessing ranking of applicants	"if someone isn't in the top 20%, that's still pretty good, but . . . it's almost a code for being average." (IM10).
Pathos (appeals to emotions and values)	
<i>For writers</i>	
Identifying the values and priorities of program	"So in psychiatry, interviewing patients is hugely important. In other disciplines, other things might be more important, yeah, so I might try to tailor my comments there." (P1)
Emphasizing unique or exceptional qualities	"I think when you find people who have managed to achieve a lot under very difficult circumstances, I always like to point that out because to me that speaks volumes." (IM3)
<i>For readers</i>	
Identifying qualities that match program culture	"at our end, we're also looking at how personality structure is going to fit in with our section and our personality structures." (IM2)
Assessing applicant as a learner	"a learner who doesn't pay attention to feedback or who is defensive about feedback is going to have a harder time improving their skills and is just not as nice to work with." (P1)

Discussion

The findings suggest that the unwritten rules of academic medicine communities shape the visible and invisible rhetorical choices of LOR writers and readers. We found that writers' appeals and readers' uptake of ethos, logos, and pathos in LORs relied on textual strategies and textual silences. Textual silences refer to meaningful omissions of relevant information,⁴⁴ which includes the content and language that is expected to appear in LORs. Writers use textual strategies and textual silence to appeal to ethos, logos, and pathos and readers also look for and respond to textual strategies and textual silences, but not always as intended by the writers. Additionally, information outside of a single LOR often persuaded readers of a LOR's credibility more than the LOR itself.

Our findings are similar to research outside the field of medical education that has demonstrated the powerful influence of tacit strategies on how LORs are written and interpreted. For example, Albakry demonstrated how typically positive information can seem negative when found in the context of LORs that so often describe applicants in exceptional terms and how the absence of some words is more meaningful than their presence.²⁵ Additionally, Vidali showed how seemingly innocuous information in a LOR can add to a composite applicant portrayal with unintended consequences when the LOR is read alongside the whole application package.²⁴ While some studies on LORs for resident selection have identified tacit strategies like considering the writer when assessing LORs,^{5,6,23} we have identified additional unwritten rules that can create challenges for faculty members who are new, peripheral or outside of a given context. Specifically, novice writers or referees outside of or on the periphery of an academic medicine community may unknowingly include or omit information that compromises their credibility and unintentionally raises concerns about an applicant. Similarly, without clear rubrics, some faculty members may interpret textual silences as meaningful when they are not and rely on information outside of LORs to determine the credibility of a LOR, such as their knowledge of the writer.

Our study adds to the growing literature on LORs in multiple ways. While some scholars have examined the language of LORs and identified biases,^{5,6,8,9} our findings demonstrate the value of considering the silences alongside the language to enable more extensive critiques and potential improvements to the practices surrounding

LORs. By making unwritten rules more visible, academic medicine communities can bring greater transparency to the use of LORs by developing faculty development initiatives to support new faculty members with writing LORs that include the implications for what is said and not said in a LOR and developing standardized and transparent processes for how LORs are assessed. Our findings may also lend additional support for the use of standardized LORs¹⁷⁻²¹ or incentive to explore alternative methods to be used in the resident selection process. More broadly, our study demonstrates how genre analysis can provide valuable insights into how context gives rise to patterns in both visible and invisible rhetorical strategies. Such insights can be used not only to refine resident selection processes in Canada and elsewhere, but also for other educational activities that are facilitated by specific genres.

Limitations

There are several limitations to our study. First, we recruited participants from only two departments at a single institution. Future work could compare our findings to a broader range of disciplines, institutions, and regions to gain further insight into the unwritten rules of different contexts including visible and invisible rhetorical choices in LORs. Also, interviews were guided by a single LOR sample that may have directed the interviewer's and participants' attention towards certain LOR features while omitting others.

Conclusion

Despite LORs being a key component of many resident selection processes, the unwritten rules of academic communities can impede a nationally facilitated resident selection process by creating challenges for newcomer and peripheral members of a community, or for those outside of that community. Our findings highlight how critiques of LORs, and any potential improvements, should consider writers and readers visible and invisible rhetorical strategies and the role of LORs as a tool that interacts with other parts of the application and selection process.

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Appendix A

Fabricated sample LOR to guide Interviews focused on reading LORs

Dear Program Director and Selection Committee Members,

Re: CaRMS Application Ref: Ms. Jane Doe

It is my pleasure to provide a reference for Jane Doe for the core internal medicine residency program at the University of Manitoba. She has not seen this letter, nor will she receive a copy of it. I had the pleasure of supervising Jane Doe on a six-week internal medicine clerkship at the Health Sciences Centre in August 2018. Our department sees a diversity of patients across the age spectrum, as well as a large indigenous and immigrant population. I have been general internal medicine staff for 18 years, and have supervised approximately 8 clerks per year. Jane worked 4 shifts with me. Jane stood out as somebody who has a clear interest in Internal Medicine. She is able to establish effective rapport with a diversity of patients. Many patients spontaneously commented on her positive behaviour, good attitude, and strong ability to communicate effectively. Upon completion of her assessments, Jane's summaries and plans demonstrate a sound knowledge base in Internal Medicine and diagnostic reasoning at the level of a good CIM PGY1. One area that I noted that may require attention is ECG interpretation and, which she acknowledged and spent extra time focusing on. Jane demonstrated a strong sense of professionalism and commitment to her patients. She was punctual, friendly, and demonstrated appropriate humility as she became accustomed to the environment. She was quick to acknowledge when she wasn't sure about something or wanted extra help or supervision. Her baseline knowledge in general medicine, capacity to problem solve, and ability to manage patients exceeded all expectations. She is socially aware and active, and seemed quite interested in a diversity of opinions. I am convinced Jane has a sincere and deep interest in internal medicine but we did not get the chance to talk in depth about specific academic interests. I know she has done research in the area of oncology, but has a breadth of interests within internal medicine at the moment. Overall, Ms. Doe demonstrated empathy, compassion and thoughtfulness as a clerk who can integrate well and quickly into new environments. I think she will make an excellent internal medicine physician and I would rank her in the top 5% of applicants that I have worked with at her level.

Sincerely, Dr. John Smith

Appendix B

Sample interview guide focused on writing LORs

1. Can you describe the purpose of letters of recommendations in the residency matching process?

Prompts:

- a. What information do LORs add to the other information that is included in an application?
- b. Who reads the LORs? What do you think the readers are looking for when they read an LOR?
- c. How much weight do you think LORs have in decisions about resident selection?

2. Can you describe your experience with writing letters of recommendation for the residency matching process?

Prompts:

- a. Approximately how many letters of recommendation do you think you have written? How many do you write per year?
- b. How many years have you been writing letters? When did you start writing letters for applicants?
- c. Who do you usually write letters for? How do you choose who you write a letter for?
- d. Do you also have experience reading letters as a selection committee member?

3. Can you describe how you approach writing a letter of recommendation for an applicant?

Prompts:

- a. Do you start with a blank page each time or do you have a template you work with? If you have a template, can you describe the template?
- b. What kind of information do you consider about a learner when writing? (e.g., academic performance, character, achievements, leadership)
- c. How much time do you spend writing one letter?

The next set of questions focus on the writing sample(s) you provided me with. *[examples of question types]*

4. Before I dive into more detailed questions about the letter, to the best of your ability, can you recall which parts of the letter were easy to write? Which were difficult to write? Why do you think is so?
 - a. Were there any word choices that you agonized over?
 - b. Was there some content that you were not sure whether you should include it or not?
5. The second paragraph of your letter focuses mostly on a description of your interactions with the applicant including the setting and duration of these interactions. Why do you include this information?
 - a. What is the importance of providing this information in a letter of recommendation?
6. In your letter, you provide specific examples for claims you make about an applicant's abilities. For example, in paragraph 3 *[example removed to protect confidentiality]*. Why do you include the examples?
 - a. If you removed the examples, how would the meaning or value of the letter change?
7. Starting on the third paragraph, you first discuss the applicant's clinical skills, followed by a paragraph about professionalism and collegiality. Could the order of these paragraphs have been switched? Why or why not?
8. In the paragraphs about the applicant's clinical skills, does the order in which you wrote the skills matter?
 - a. How do you choose which skills to discuss first?
 - b. For example, could you have easily mentioned clinical data gathering skills prior to communication skills in this particular letter?

9. Throughout your letter, you use strong adverbs and adjectives like “very strong”, “highly recommend”, and “very strong endorsement”. If we removed the adverbs and adjectives, how would the meaning change?
 - c. For example, what if you wrote “recommend” instead of “highly recommend”?
 - d. Are there cases (other letters) when this matters/doesn't matter?
10. When you are providing an assessment of the applicants' skills and abilities, you often provide an assessment in relation to level of training. What information does this provide the selection committee with?
 - a. Are there cases (other letters) when this matters/doesn't matter?

Interview guide focused on reading LORs

1. Can you describe the purpose of letters of recommendations in the residency matching process?

Prompts:

- a. What information do LORs add to the other information that is included in an application?
 - b. Who usually writes the letters? (e.g., applicants' teachers, preceptors, mentors)
 - c. What messages do you think writers are trying to convey in their letters?
 - d. How much weight do you think LORs have in decisions about resident selection?
2. Can you describe your experience with reading and assessing letters of recommendation for the residency matching process?

Prompts:

- a. How many times have you sat on a selection committee for the residency matching process?
 - b. How many applications are typically submitted for your program each year? How many do you specifically have to read?
 - c. Do you also have experience writing letters?
3. Can you describe how you approach reading and assessing a letter of recommendation for an applicant?

Prompts:

- a. Do you have a rubric you use for assessing the LOR or do you provide a more global, subjective assessment?
- b. What kind of information do you consider when reading an LOR? (e.g., academic performance, character, achievements, leadership)
- c. How much time do you spend reading one letter?

For this next section, I am going to ask you to read a sample letter. After you finish reading the letter, I will ask you a set of questions that will focus on the sample.

4. Based on this letter, how would you describe this applicant?
 - a. Based on the letter, what are this applicant's strengths? What are their weaknesses? Can you explain how you arrived at this perspective?
 - b. Are there any red flags in the letter?
5. What content in the letter stood out to you? Why did it stand out to you?
 - a. Did anything in the letter surprise you? Why?
 - b. What do you think this content tells you about the applicant?
 - c. Why do you think the writer included this information?

6. Is there anything about the format or structure of the letter that stood out to you?
 - a. For example, would you interpret the letter differently if the writer had mentioned the applicant's clinical skills before their patient communication skills?
7. What words and phrases stood out to you in this letter? Why did they stand out to you?
 - a. How did these words and phrases influence your assessment of this applicant?
 - b. (for each word or phrase pointed out) What does that word/phrase indicate to you about the applicant? Why do you think the writer used that word or phrase?
 - c. (for each word or phrase pointed out) If the writer had used a synonym for that word or phrase, such as [give example], would you have the same interpretation?

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