In This Issue

From the Editors

In her editorial, the *JMGE* Editor-in-Chief offers advice on how to write up medical education research for publication, suggesting that much of this can be accomplished concurrently with study planning and execution (page 133).

A second editorial uses an actual case to examine ethical considerations in authorship and recognizing residents' (and others') contributions to published scholarly works (page 138).

Review

A narrative review by Anderson affirms feedback as critical to learner development, recommending added education of faculty about its importance and effective ways to provide it (page 154).

Research and Innovation

Several articles address issues related to the resident "Match." Nagler and colleagues find that resident Match decisions are influenced by perceptions of the satisfaction and collegiality of current trainees and that group's relationship with faculty (page 159). A study of communications with applicants following the Match interview finds that National Resident Matching Program rules appear to be violated more often for highly desired candidates (Curran et al, page 165). In a companion commentary, Carek clarifies the rules for postinterview communications (page 263).

A perspective by Nagarkar and Janis explores Match "gaming," concluding that honesty (and willingness to live with some uncertainty) is the optimal strategy (page 142). Adams et al surveyed internal medicine program directors' views of a 2011 policy requiring programs to place all positions in the Match and the effect of an "all-in" policy on applicants and programs (page 148).

A brief rotation with intensive didactics gives residents greater confidence in their procedural skills (Mourad et al, page 170).

Guerrero et al discuss the value of various learning opportunities in the acquisition of the competencies and find residents perceive patient care interactions and observation of attending physicians and peers most helpful (page 176).

Analysis of global health opportunities for fellows by Nelson and colleagues identifies 80 programs nationally (page 184). A commentary considers the value of global health programs and describes optional and suboptimal outcomes (Crump and Sugarman, page 261).

Blanchard and colleagues survey obstetrics-gynecology residents and find that liability-related issues significantly influence decisions about practice after graduation (page 190).

Publication in medical school and residency is associated with higher publication success for non-PhD physician-scientists, and that association persists later into careers (Riggs et al, page 196).

Pulliam et al finds a percentage of residents had poor sleep quality, and some had moderate insomnia. They recommend that identifying and educating those residents may contribute to better performance and enhanced patient and resident safety (page 202).

Airan-Javia and colleagues demonstrate that a brief, readily implementable education session on the handoff improves interns' verbal handoff skills (page 209).

An electronic evaluation template can guide program leaders through practice-based learning and improvement and facilitate evaluation of improvement projects (McClain et al, page 215).

Keister et al present the "radar graph" as a useful tool to give residents feedback on their acquisition of the competencies (page 220).

Feldman et al show that use of a computer-based, diagnostic decision-support tool improves the differential diagnosis in a sizable percentage of interns (page 227).

Colbert and colleagues describe a resident-led council and discuss its value in promoting systems thinking, increasing ownership of continuity clinic, and empowering residents to implement system changes (page 232).

Implementation of a multifaceted quality improvement curriculum in an obstetrics-gynecology residency produces sustained improvement in surrogate health measures and systems outcomes (Sepulveda et al, page 237).

A pediatrics ethics test efficiently identifies residents who benefit from additional training and may serve as a model for the development of instruments for other specialties or competency domains (Kesselheim et al, page 242).

Brief Reports

Short descriptions of novel approaches in resident education include a field trip to a baby goods retailer to improve residents' preparedness to answer common questions in ambulatory pediatrics (Friedland et al, page 246); an integrated, anatomy-based orthopedic curriculum (Klena et al, page 250); and a comparison of residents' self-reported duty hours with parking ramp time-stamp data (Chadaga et al, pp 254).

RIP-OUT

JGME's practical guidance for program directors discusses resident case logs, improving reporting, and the importance of regular review and follow-up to ensure the adequacy of residents' procedural experience (page 257).

To the Editor

This section includes a comment on the Roberts and Williams article, "The hidden costs of failing to fail residents" (Lazerson et al, page 265), "Intern Olympics" as a means to assess and reinforce procedural skills (Osband et al, page 266), and a discussion of the hidden costs of graduate medical education (Kelly et al, page 267).

On Teaching

Batalden and Gaufberg discuss professional promise-making as the subject of a discussion with incoming interns (page 269).

ACGME News and Views

Tagore and colleagues describe changes in obstetrics and gynecology residency training in Singapore under ACGME-International accreditation (page 272).

Philibert and Nasca discuss likely stakeholder questions about the Next Accreditation System and extend an invitation for dialogue with the educational community (page 276).