Frequently Asked Questions (FAQs) for the Obstetrics and Gynecology Residency Standardized Letter of Evaluation

Residency Match Cycle 2024-2025

What is the OBGYN SLOE?
The Standardized Letter of Evaluation (SLOE) is an evaluative instrument that provides a global assessment of an applicant's candidacy for obstetrics and gynecology (OBGYN) residency training. By providing a standard set of questions and prompts, it is meant to provide a more holistic and efficient review focused on the competencies and values important for OBGYN training. It reduces bias by directing answers to specific, standardized questions for all candidates thus limiting the variability of traditional letters of recommendation where the letter writer provides a narrative reflecting what they perceive as important to highlight.

Why is its use being expanded?
The increased use of the OBGYN SLOE this year is part of the “Transforming the UME to GME Transition: Right Resident, Right Program, Ready Day One (RRR)” 5-year grant program. One aspect to improve the transition is to develop additional application review metrics, for which the SLOE aims to provide. The SLOE was piloted as a voluntary option during the 2021-2022 application cycle, and has been updated based on feedback from program directors and those who completed SLOEs. Each applicant is strongly recommended to include one SLOE in their application materials in the 2024-25 application cycle.

Is the SLOE mandatory for all applications now?
The inclusion of one SLOE for each applicant this cycle is strongly recommended. While it is not universally mandatory, many programs may require it to apply to their program. Please read the specific application requirements to the programs that you apply.

How many SLOEs are required?
A single SLOE is being recommended for each applicant. Over time, and with more experience using the SLOE, additional guidelines and recommendations will follow in subsequent cycles.

Who should complete the SLOE?
The SLOE should be completed by the person or persons who best knows the applicant. This can be either an OBGYN faculty member or precepting physician who worked directly with the applicant in the clinical setting or it can be completed by a group of faculty or preceptors who can use multiple sources of feedback and assessment data to create the evaluation. The SLOE form has been created to make it clear if the evaluation is being completed by an individual evaluator or as a group evaluation (aggregate SLOE).
**Should standard letters of recommendation (LORs) still be solicited?**
Yes. Traditional LORs should still be solicited as usual until further experience, guidelines and recommendations about the SLOE are developed. For this cycle, applicants may solicit up to 3 additional LORs (not including the SLOE).

**Can a faculty or a precepting physician fill out both a SLOE and a standard LOR?**
The letter writer should only complete a SLOE, and not provide a traditional LOR. The SLOE should convey enough information about the applicant to programs.

**How will program directors consider or use the SLOE?**
The SLOE provides residency programs with a more efficient, focused and standardized evaluation of the applicants based on the initial feedback received from program directors. It enhances the holistic review process, aids in screening of applicants for interviews, and augments the information used for determining which applicants align with the goals of the programs.

**What has been the experience of other specialties who use the SLOE?**
Several specialties have been using the SLOE for many years. In emergency medicine, the SLO(Recommendation) was first introduced in 1997, and transitioned over the years to a SLOE in 2014. It is now considered a very important component of the application. Other specialties have also adopted the use of a specialty-specific SLOE/R including internal medicine, dermatology, plastic surgery, neurosurgery, orthopedic surgery, radiology and gynecologic oncology.

**How can students and letter writers access the SLOE?**
The SLOE template will be available for review on the APGO website: https://apgo.org/page/rrapplicant. The SLOE should be entered directly into ResidencyCAS, the application platform being used for OB/GYN residency beginning in 2024-2025, so the data can be used in the holistic review score. The SLOE can be uploaded similar to other LORs in ResidencyCAS if needed.

**How will students, advisors, and letter writers know about the SLOE?**
The APGO “Right Resident, Right Program, Ready Day One” grant team in conjunction with APGO and CREOG leadership has developed a communication plan that includes frequent email communications, webinars and updates posted on the APGO website. In addition, presentations and updates are provided at the CREOG Program Directors retreat.

**Guidelines for SLOE writers:**
A guidebook has been created and is available on the APGO website to provide more information to both applicants and those completing the SLOE. Topics in the guidebook include purpose of the SLOE, by whom and when the SLOE should be completed, what information is needed to complete the components of the SLOE, and unique considerations for osteopathic medical students and international medical graduates.