DMS graduates have a Match Day plea: ‘The envelope, please!’

It was just before noon on Thursday, March 16, as anxious DMS seniors began filing into DHMC’s Auditorium E. The occasion was Match Day—when medical students all across the country receive their residency assignments.

Flipping: “I was actually pretty calm until about three hours ago, then my stomach started flipping around in circles,” said Chad Bingham, who’d brought along his wife, Misty, and their two young children. “I’m hoping to match with DHMC in general surgery,” he added.

The tension and anticipation were palpable as the fourth-years buzzed about the room, snapping pictures and guessing what news the white envelopes at the front of the room might hold. “This is destiny in the making!” senior Jean-Paul Dedam exclaimed.

For over 50 years, Match Day has been a pivotal point in the lives of doctors-to-be. This year, 15,008 U.S. medical school seniors participated in the National Resident Matching Program (NRMP). An additional 11,000 or so applicants—including students at non-U.S. schools and osteopathic schools—also take part in the NRMP. U.S. seniors with military scholarships, however, get their residency assignments outside the NRMP.

Using a computer algorithm, the NRMP matches the preferences of applicants with those of residency program directors to fill openings at teaching hospitals throughout the nation. Just before Match Day, applicants learn if (but not where) they matched. At that point, applicants who didn’t match take part in what is called “the scramble,” as they or their advisors contact programs that still have open positions. On Match Day, the destinies of thousands of future doctors are revealed—simultaneously throughout the nation.

“It’s exciting, but I’m not as nervous yet as I think I will be once they start handing out envelopes,” said Kathryn Chatfield, whose cheering section included a proud aunt and uncle who had driven up from Boston for the event and a friend who’d surprised her by showing up.

Quieting the din with some words of encouragement, Dr. Susan Harper, assistant dean for medical education, noted, “This is the first time in the 10 years that I’ve been involved in the DMS Match that every graduating student who participated successfully matched.”

Spectacular: And Dr. Stephen Spielberg, DMS’s dean, added, “I got a quick peek through the list and it’s spectacular—it’s a credit to absolutely each and every one of you.”

Holding high a plastic tumbler filled with sparkling cider, class marshal Matthew Baird offered a toast to his classmates, likening Match Day excitement to being a kid again. “I want to see lots of running and yelling and crying and hugging each other and acting like fools,” he said, drawing whoops and laughter from his classmates. “We de-

---

FACTS & FIGURES

Organ recital
A paean to the history of organ transplantation

Prelude
16th century
An Italian surgeon successfully transplants skin flaps from patients’ own arms to reconstruct their noses

17th century
A Dutch surgeon performs the first successful bone graft, transplanting pieces of a dog’s skull to repair a human cranium

Intermezzo
1905
An Austrian surgeon performs the first successful cornea transplant

1954
A Boston surgeon performs the first successful kidney transplant

1968
Congress passes the U.S. Uniform Anatomical Gift Act

Coda
1992
Dr. Horace Henriques performs Dartmouth-Hitchcock Medical Center’s first successful kidney transplant

3-5 days
Usual hospital stay for a DHMC kidney transplant patient today

82%
Average three-year graft survival for U.S. kidney transplantations

93.5%
Average three-year graft survival for DHMC kidney transplantations

Sources: Univ. of Edinburgh, Scientific Registry of Transplant Recipients, DHMC
serve it. We worked really hard. We pulled each other along, we pushed each other ahead, and we're all here—we didn't leave anybody behind.”

Then Spielberg and Harper got down to business, calling the seniors up in random order. Each name evoked cheers from onlookers. Some students tore into their envelope in public and announced its contents to the sea of classmates. “I’m going to CHoP!” yelled Chatfield upon learning she’d matched at Children’s Hospital of Philadelphia. Others ducked out of sight to read their news in private and came back beaming.

By 12:30, the ceremony was over. The most popular specialty at DMS (and nationally, too) was internal medicine, while Massachusetts was the most popular destination. (See the adjacent box for all the assignments.) Of the 48 DMS students in the NRMP, six will remain at Dartmouth for residency, including Chad Bingham, who was thrilled to get his first choice.

DHMC will also welcome 108 other new residents from all over the country and the world. And the New Hampshire-Dartmouth and Maine-Dartmouth Family Practice Programs will welcome 18 new residents.

**Group hugs:** As the anxious pre-Match chatter gave way to high-fives and group hugs, Dean Spielberg observed that “this is an extraordinary class. . . . I think the results of the Match just validate it. They’re going into great programs, and they’re going to be great docs.”

Ann Patterson
There was an SRO crowd on hand for DMS’s Match Day festivities in March. 1 Gae-tan Habekoss, right, was calm, cool, and collected as he strolled up to get word from Dean Stephen Spielberg that he’ll be training in family medicine at UCLA. 2 Amanda Gann, left, and Brett Chevalier were all smiles about the fact that they’ll both be doing ob-gyn at Harvard’s Beth Israel Deaconess Medical Center. 3 An ex-uberant Michael Pirozzi and Cheryl Shannon were among the students in the Brown-Dartmouth Program who chose to get their Match results at DMS. 4 And it was clearly good news for, from the left, Jodi Leverone, Meredith Sorensen, and Lisa Ernst that they’ll be staying at Dartmouth for the next stage of their medical education.

JUST WHAT THE DR. ORDERED

Dr. Charles Brackett and his colleagues in DHMC’s Section of General Internal Medicine have been using a novel way to get patients to exercise. Rather than offering them gentle reminders, or even insistent suggestions, about the benefits of exercise—advice that all too often falls on deaf ears—Brackett commits his counsel to paper and actually writes prescriptions for regular exercise.

The “take two miles and call me in the morning” approach appears to be working. Brackett observes that his exercise prescriptions are translating into fewer medication prescriptions for conditions such as high blood pressure and cholesterol. “I get excited when I see patients who have lost 20 or 30 pounds and they are able to come off medications,” he says.

COUGH DROPS AT DHMC

Dartmouth-Hitchcock Medical Center is breathing a collective sigh of relief after stanching an outbreak of pertussis, or whooping cough—a highly contagious bacterial infection of the respiratory tract.

The first cases, identified in March, were traced to a new employee in the clinical labs. DHMC’s infection control team gave preventive antibiotics to all staff in the labs, but by mid April—when clusters emerged in other departments—the team stepped up the offensive. Any staff with possible symptoms were screened by Occupational Medicine and barred from pediatric units, since pertussis can be deadly for infants. And in early May, the team began vaccinating all employees. Most infants and children get vaccinated, but immunity usually wears off by late adolescence. In fact, until last fall, no adult vaccine was even available. Ultimately, 135 DHMC employees were diagnosed with pertussis and more than 4,500 were vaccinated. As for patients, the team is still tracking down those who may have been exposed, but the number infected appears to be very low.

The team also launched several studies during the outbreak, including one to assess how quickly the new adult vaccine takes effect. The studies, explains Dr. Kathryn Kirkland, associate director of infection control, are a great example of “how to turn an outbreak into a learning experience.”

J.D.