GUIDELINES FOR WRITING LETTERS OF RECOMMENDATION IN PEDIATRICS

AUTHOR/LETTER WRITING COMMITTEE
This section should describe who is writing a letter, whether it is a single author or a committee. In either case, describe the relationship of the letter writer(s) to the applicant, and the data upon which the letter is based (including which rotations were completed to generate performance data; whether the letter writer(s) work directly with the student; sources for composite evaluation)

DESCRIPTION OF KEY STUDENT CHARACTERISTICS
Writing tips:
Examples from directly observed performance add credibility to descriptions of key characteristics → provide supporting evidence wherever possible
Please address as many competencies as possible. However, it is more important to provide detailed examples and supporting information in a few areas than it is to cover all areas.

Although response to feedback is valued by all educators, the phrase "showed improvement" by itself is often perceived to imply below average performance. When the intent is to demonstrate improvement as a strength, describe the outcome, e.g. "his senior resident worked hard with him to polish his oral presentations on rounds, and by the end of the month his presentations were on par with excellent interns on the team".

- Medical knowledge - what they know; ability to identify knowledge gaps and obtain new knowledge
- Patient Care - ability to gather information reliably, interpret data, apply knowledge and date to diagnostic and therapeutic decisions
- Executive functioning - includes skills such as organization of workflow, triaging "to do" list, identifying/mobilizing resources to assist in patient care
- Communication skills
  - Oral patient presentations/written documentation
  - Interprofessional communication with other members of the healthcare team
  - Patient and family communication (including communication across broad range of socioeconomic and cultural backgrounds)
- Professionalism – punctuality; integrity; responsibility; respect; commitment to ethical principles; timeliness in meeting administrative deadlines
- Personal and professional development -intellectual honesty (know what you know, know what you do not know); intellectual curiosity; accurate appraisal of self-confidence; willingness and ability to accept feedback and incorporate suggestions into subsequent performance

SPECIAL ACHIEVEMENTS
Briefly describe any special achievements, activities or attributes which complement the key characteristics above. This might include leadership skills, compassion, commitment to service, or research abilities. This may also include special attributes, such as first-generation student status. This should not be a summary of the student's CV.

OVERALL EVALUATION/RECOMMENDATION
Please summarize the attributes that this student will bring to the residency program.

Holistic consideration of all of a student's attributes (clinical skills, leadership, research, etc.) should be considered. Within this holistic review, explicit consideration should be given to the applicant's readiness for internship:

- excels in each of the key characteristics above; expected to be a very strong intern from day one
- excels in some, but not all, characteristics; expected to be competent intern from day one with potential to become very strong intern with time
- competent in all characteristics; expected to be competent intern
- still developing competency in some characteristics; expected to need additional coaching and/or supervision while becoming competent intern

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APPENDIX – BIAS IN LETTER-WRITING

Everyone has unconscious biases, and several studies have identified biases reflected in letters of recommendation throughout academic medicine (e.g. medical school and residency applications, promotions packets, etc.). One way to minimize bias is to convert unconscious habits into conscious decisions.

Researchers have described several categories of commonly used adjectives:
- Standout Traits: Exceptional, best, outstanding, superb, stellar, excellent, phenomenal
- Ability: Intelligent, bright, talented, brilliant, smart, gifted
- Grindstone Habits (i.e. work ethic): Organized, hard-working, conscientious, diligent
- Compassion: Caring, kind, empathy, compassionate

Another common dichotomy includes "agentic" traits (e.g. independent, assertive, confident, self-reliant) vs. "communal" traits (e.g. cooperative, group oriented, nurturing).

Research shows that men are more likely to be described using standout adjectives, agency or references to awards and scholarship. Women are more likely to be described using adjectives describing grindstone habits or communal traits. Students

from groups underrepresented in medicine are less likely to be described using agentic terms noting leadership ability or achievement.

The following considerations may help to minimize bias in letter writing:

- Whenever possible, provide specific examples of behavior based on direct observation

- Do not mention age, race, ethnicity, marital status, children, or physical characteristics. If you believe that this information is important to fully reflect an applicant's ability or accomplishments, it is best to discuss this with the applicant before including this information in your letter.

- Some published literature suggests avoiding or minimizing adjectives describing grindstone habits or personality traits. However, many of these traits are necessary for outstanding patient care and central to the values of pediatrics. The potential for bias is associated with the use of personality descriptors to the exclusion of accomplishments and abilities (or vice versa), or the association of some adjectives with gender and or race, rather than with observed behaviors

- Gender bias "calculators" are available online:
  https://www.tomforth.co.uk/genderbias/
  http://slowe.github.io/genderbias/

REFERENCES:
https://www.feinberg.northwestern.edu/md-education/learning-environment/letters-of-recommendation.html

Gold JM et al. Words Matter: Examining Gender Differences in the Language Used to Evaluate Pediatrics Residents. Academic Pediatrics 2022;22:698–704

Khan S, et al. Nder Bias in Reference Letters for Residency and Academic Medicine: A Systematic Review. Postgrad Med J 2021;**0**:1–6. doi:10.1136/postgradmedj-2021 140045

Rojek A, et al. Differences in Narrative Language in Evaluations of Medical Students by Gender and Under-represented Minority Status. Journal of General Internal Medicine. 34. 10.1007/s11606-019-04889-9.

Ross D, et al. Differences in Words Used To Describe Racial and Gender Groups in Medical Student Performance Evaluations. PLoS ONE. 12.10.1371/journal.pone.0181659.

TEMPLATE FOR LETTERS OF RECOMMENDATION IN PEDIATRICS

Student name:
AAMC ID:
ERAS Letter ID:

Date:

Dear Program Director:

Statement of letter preparation: Who is writing/contributing to the letter (individual or committee)? If individual, how do they know this student, and for how long? If committee, who are the members of this committee? What are the sources of data on which the letter is based, including rotations performed?

Description of key student characteristics: Medical knowledge /patient care /communication skills / executive functioning/ professionalism /personal and professional development. For each of these skills, provide supporting evidence to support assessment

Special achievements: Briefly describe any special achievements or activities within your department, if applicable, which might provide insight into non-cognitive attributes such as leadership, compassion, commitment to service, or research abilities.

Overall evaluation/recommendation:
Brief highlight/summary of key attributes the student will bring to the program.

Signature of contributing author(s)

Statement acknowledging that student has/has not waived their right to see this letter of recommendation