Resident Selection Criteria for Advanced Education in Prosthodontic Programs: Program Directors' Perspective

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Abstract

Purpose: The purpose of this study was to describe the criteria used by advanced education in prosthodontic program (AEPP) directors to select their residents, to rank them by perceived importance, and further assist prospective candidates with the application process for AEPP.
Materials and Methods: Questionnaires were distributed to all prosthodontic program directors (N = 46). The program directors were requested to respond in five sections: (1) general information, (2) information obtained from applications and letters of recommendation, (3) interview process, (4) decision process, and (5) retrospective view of the selection process. Descriptive statistics were used to analyze the data. Data were collected and compiled into mean, standard deviation, and range. Results were tabulated and ranked.
Results: Thirty-eight responses (82.61%) were returned and analyzed. Most of the programs (75.77%) indicated that a combination of the program director, current residents, prosthodontic faculty, and staff members were involved in conducting the interview process. Factors considered very important when choosing applicants to the prosthodontic program were (1) interview process, (2) dental school class rank, (3) dental school grades (prosthodontics), (4) letters of recommendation, (5) dental school grades (clinical). Letters from the prosthodontic post-doc program director and prosthodontic faculty were considered the most important source of recommendation. Honesty, organization, and energy were ranked as the most positive characteristics of the applicants during the interview. Almost all respondents (97%) were satisfied with the current selection process. When asked about the current applicant pool, most program directors (91.67%) were satisfied.
Conclusions: The most and least important factors in selecting applicants by the program directors were described and ranked. This study was intended to provide the profession with some insight on how advanced Prosthodontic programs select their applicants. It may also serve as a valuable instrument for prospective applicants to AEPPs in the future.

Pursuing an advanced education in prosthodontics is a personal choice. The decision process is often multifactorial, including current and projected income for dental specialists, interest in prosthodontics, demand for prosthodontic services in the public sector, academic opportunity, and society's demand for a higher level of training and credentials.[1,2] Financial rewards for prosthodontists have been reported to be 35% higher than general practitioners, and average net earnings are competitive among all specialty groups.[3] Despite an estimated decline in the age-specific rates of edentulism, the unmet need for complete dentures will continue to increase.[4] It has been projected that the demand for prosthodontic treatment will exceed the supply of manpower by 2020.[5] A recent survey revealed that the applicant pool in prosthodontics has increased by 23%, while enrollment figures remained similar between 2002–2003 and 2006–2007, becoming more competitive for the prospective

applicants.[6] Furthermore, prosthodontic programs have become more attractive to dental students based on financial rewards, complexity, and challenge of treatment procedures.[1,7]

The application process for admission to Advanced Education Programs in Prosthodontics (AEPP) may be complex and extensive from the candidates' perspective. The applicants view clinical education, impression of the program director, and his/her philosophy of training to be important selection factors.[7] Others judge good reputation of the program and abundant clinical materials to be the determinant selection factors.[8] In addition, some consider a good relationship between residents, and between residents and attending faculty as the important factors influencing their program selection.[9] The selection process should be analyzed so applicants and AEPP directors better understand the criteria and logistics applicants use when choosing a program.

Several studies have evaluated the resident selection process by the program directors; however, most of these reports concentrated on the field of medical education.[10-15] Although some residency program directors valued interviews as the most important variable in the resident selection process,[10-13] others considered rotation grades,[14] or ability to work with a team[15] to be the most important characteristics in the final ranking of the candidates. Some specialties judged cognitive function to be very important in resident selection factors.[16,17] Others showed that academic scores, which provide an objective screening process for resident selection, may not seem to correlate with manual dexterity[18] or outcomes of the training program.[19] Furthermore, studies have used certain admission criteria to predict academic performance and clinical competency.[20,21] The results of these studies also may not represent the current opinion of AEPP directors. In addition, the literature on resident selection for admission to advanced prosthodontic programs in the United States is limited;[22,23] however, merely extrapolating the data from other specialty programs and applying them to the prosthodontic specialty for resident selection process may not be justified.

The purpose of this study was to describe the criteria used by AEPP directors to select their residents, to rank them by perceived importance, and further assist prospective candidates with the application process for AEPPs in the future.

Materials and methods

A questionnaire was designed based on the survey by Spina et al,[16] with some modifications. The research protocol received exempt status by the office for the Protection of Research Subjects and Institutional Review Board, University of Illinois at Chicago (protocol # 2008–0871).

The questionnaire contained 23 multiple-choice questions and required the respondents, AEPP directors, to check all answers that pertained to them. The questions assessed the subjective and objective aspects of resident selection in AEP specialty programs. The program directors were requested to respond in five sections: (1) general information, (2) information obtained from applications and letters of recommendation, (3) interview process, (4) decision process, and (5) retrospective view of the selection process. The first part of the questionnaire contained background information of the program. The second part asked the respondents to rate the factors in selecting the applicants, and to rank the importance of the source of the letters of recommendation. The third part requested the respondents to address the characteristics of the applicants during the interview. The fourth and the fifth parts addressed the decision making, and retrospective analysis of the selection process.

The questionnaires were first distributed in 2008 at the American College of Prosthodontists (ACP) annual session in Nashville, TN, during the Advanced Graduate Prosthodontic Program Directors meeting. Each program director received a cover letter describing the purpose of the study and thorough instructions, a survey, and a self-addressed, pre-stamped envelope without any form of labeling or identification. Participation in the study was voluntary, and the respondents were assured the questionnaire would be anonymous. A total of 27 questionnaires were distributed, and 19 were returned at the end of the meeting and later by mail. The list of directors' names and addresses was obtained through the ACP central office. The questionnaire was mailed again to all 46 AEPP program directors in the United States on November 4, 2008. The instructions for the mailing included a paragraph asking the directors to disregard the mailing if they had already completed the questionnaire. Twelve responses were returned after this mailing. To ensure higher participation, a follow-up second mailing was distributed on December 4, 2008, and resulted in seven responses.

Upon receiving the questionnaires, raw data were entered into Microsoft Excel 2003 (Microsoft, Seattle, WA). The results were pooled, because the sample size was too small. Data were analyzed and compiled into mean, mode, standard deviation (SD), and range. Some of the results were tabulated and ranked.

Results

Out of 46 program directors, 38 questionnaires were returned, for a response rate of 82.61%. Because not all respondents answered all items in the survey, the responses to the individual questions did not always represent 38 respondents. The responses from all, except items 11, 12, and 17, are presented in Appendix 1. Not all returned questionnaires were completed. Some respondents missed the second page of the questionnaire entirely.

General information

The majority of the respondents (76.32%) were from university-based programs. One (2.64%) reported being both a hospital- and university-based program. A large percentage of the respondents (55.27%) stated they received 16 to 45 applications during the 2007–2008 academic year. Half the respondents (47.37%) felt that most of the applicants met their basic requirements for admission consideration. They also indicated that some of the accepted applicants were from their own institutions. The average number of applicants accepted into each program was 3.33, while it was anticipated that 2.97 will graduate during the year. The majority of the respondents (89.47%) indicated that most of their graduating students will remain in the United States. Most respondents (78.95%) indicated that

there has not been recent change of program size, while seven programs (18.42%) reported increasing the size, and one program (2.63%) reported decreasing the size. A large percentage of the respondents (84.21%) expressed that they would like to keep the programs the same size.

Interview process

All responding university- and hospital-based programs required an interview, while two military programs did not indicate an interview as part of the resident selection process. The average number of candidates interviewed was 9.04 during the 2007–2008 selection process; most of the interviews (78.13%) lasted less than 8 hours. When asked about the personnel conducting the interview process, most of the respondents indicated that a combination of the program director, current residents, prosthodontic faculty, and staff members were involved.

Decision process

More than half of the respondents (55.56%) participated in the American Dental Education Association (ADEA) Postdoctoral Application Support Service (PASS) program. The decision process for resident selection was frequently (22.2%) completed by the program director alone, followed by a committee, program director with full-time prosthodontic faculty members.

Retrospective view

Almost all the respondents (97%) were satisfied with the current selection process. Nevertheless, only some respondents (38.89%) would select all of their former residents again. When asked about the current applicant pool, most program directors (91.67%) were satisfied and reported that both the credentials and quantity of the applicants have improved over the last 5 years (77.78%).

Information obtained from applications and letters of recommendation

A mean response score and standard deviation were calculated for each of the applicant selection factors for items 11, 12, and 17. The responses were then ranked in descending order of the mean size (Tables 1–3). The results of factors influencing the selection of applicants to the program are shown in Table 1. The top five factors when choosing applicants to the prosthodontic program were (1) interview process, (2) dental school class rank, (3) dental school grades (prosthodontics), (4) letters of recommendation, (5) dental school grades (clinical). The respondents considered the least important factors to be military experience and on-site oral presentation.

The results of importance for the source of recommendations are displayed in Table 2. Letters from the prosthodontic program director and prosthodontic faculty were considered the most important source of recommendation, while letters from a college advisor were judged to be the least important.

Table 3 lists the results of applicant characteristics identified during the interview. *Honesty*, *organization*, *energy*, *confidence*, and *decision making* were ranked to be the most positive characteristics, whereas *aggressive* and *anxious* were rated lowest in the selection process.

Table 1 The importance of the following factors in selecting applicants to the program (1 = not requested, 2 = little importance, 3 = some importance, 4 = very important)

Factors	Mean ± SD	Rank	Number of respondents
Interview process	3.71 ± 0.75	1	35
Dental school class rank	3.66 ± 0.48	2	38
Dental school grades (Prosthodontics)	3.65 ± 0.54	3	37
Letters of recommendation	3.63 ± 0.57	4	34
Dental school grades (Clinical)	3.55 ± 0.55	5	38
Clinical honors	3.37 ± 0.54	6	38
Personal statement	3.29 ± 0.71	7	35
Dental school grades (Basic Science)	3.27 ± 0.51	8	37
Dental school attended	3.26 ± 0.69	9	38
Academic honors	3.26 ± 0.60	10	38
National Board scores-(Part I)	3.11 ± 0.65	11	38
GPR	3.09 ± 0.82	12	35
TOEFL scores	3.06 ± 1.23	13	34
National Board scores-(Part II)	3.03 ± 0.68	14	38
AEGD	2.97 ± 0.95	15	35
Prosthodontics externship	2.94 ± 0.84	16	35
Private practice	2.91 ± 0.62	17	35
Prosthodontic-related knowledge	2.89 ± 0.80	18	35
Publications/Research experience	2.85 ± 0.74	19	35
Extramural activity	2.79 ± 0.74	20	38
Presentation at prosthodontic meetings	2.69 ± 0.76	21	35
Advanced degree, MS	2.66 ± 0.99	22	38
College grades (Basic Sciences)	2.63 ± 0.79	23	38
Advanced Degree, PhD	2.63 ± 1.04	24	38
College grades (Overall)	2.59 ± 0.69	25	37
Dexterity skills (on-site typodont preparation / wax carving)	2.43 ± 1.27	26	35
Military experience	2.23 ± 0.97	27	35
On-site oral presentation	1.89 ± 1.02	28	35

Discussion

The current study demonstrated that AEPP directors value the interview process as the most important variable in the resident selection process. In most programs, a candidate must physically be present for an interview to be considered for selection. This is consistent with reports from previous studies that the

Table 2 The importance of the source of the letters of recommendation in selecting applicants to the program (1 = not requested, 2 = little importance, 3 = some importance, 4 = very important)

Factors	Mean ± SD	Rank	Number of respondents
Prosthodontic post-doc program director	3.62 ± 0.55	1	34
Prosthodontic faculty	3.55 ± 0.56	2	33
Prosthodontic pre-doc program director	3.44 ± 0.61	3	34
Prosthodontic department chair	3.35 ± 0.69	4	34
Prosthodontic private practice	2.84 ± 0.68	5	32
Research advisor	2.79 ± 0.51	6	34
Another dental specialist	2.65 ± 0.65	7	34
Dean of dental school	2.59 ± 0.70	8	34
General dentist	2.44 ± 0.70	9	34
College advisor	1.91 ± 0.59	10	34

interview process was considered to be the most important factor in selecting candidates for residency;[10–13] however, one study has demonstrated faculty interviews do not predict the academic performance and clinical competency of the applicant.[21] All responding university- and hospital-based programs reported that an interview was required as part of the resident selection process.

Interestingly, according to the present data, other than program directors, the most frequent personnel involved in conducting the interview process were the current residents. It appears that program directors have confidence in their own residents to provide candid and valuable information to the applicants, and vice versa. In addition, some reported that the ability to work with a team is one of the most important characteristics assessed during the interview.[15] Furthermore, previous studies have reported that applicants view good relationships between residents, and impression of resident satisfaction to be one of the key selection factors.[7–9] On the other hand, involvement of current residents as part of the decision process was uncertain. This may be attributed to the inadequate design of the question and choices given in item 19 of the present questionnaire. On the questionnaire, "current residents" was not included as one of the possible choices. Although two respondents did mention "current residents" as part of their responses, most reported that the decision process was completed by the program director alone, followed by a committee, then program director with full-time prosthodontic faculty members. It will be interesting to observe in future studies if residents actually participate in the decision making process. In this study, no additional information was gathered to explore whether the program director received any input from others. Further, the make-up of the committee was unknown for resident selection process.

Table 3. The importance of the following characteristics of the applicant considered during the interview (1 = negative factor, 2 = neutral factor, 3 = positive factor)

Factors	Mean ± SD	Rank	Number of respondents
Honesty	2.97 ± 0.17	1	35
Organization	2.89 ± 0.32	2	35
Energy	2.85 ± 0.36	3	34
Confidence	2.85 ± 0.36	4	34
Decision making	2.85 ± 0.36	5	34
Verbal skills	2.83 ± 0.38	6	35
Cooperative	2.80 ± 0.41	7	35
Empathy	2.77 ± 0.49	8	35
Analytical	2.74 ± 0.45	9	34
Appearance	2.71 ± 0.52	10	35
Social skills	2.71 ± 0.46	11	35
Agreeable	2.63 ± 0.55	12	35
Research interest	2.51 ± 0.51	13	35
Aggressive	1.57 ± 0.70	14	35
Anxious	1.46 ± 0.56	15	35

The present study revealed a similar trend in background information in advanced prosthodontic programs to that reported by the Prosthodontic Program Director Survey (PPDS) in July 2006.[23] The current data demonstrated that most program directors have not changed the size of their programs and would like to remain at their current size. It is interesting to note that almost 20% (7 of 38) of the programs have increased their sizes recently. This is comparable to a recent report that the applicant pool in prosthodontics increased by 23% between 2002–2003 and 2006–2007.[6] The potential impact on the prosthodontic specialty not only includes a more competitive application pool from the candidate's perspective and more challenging decision-making from the program director's perspective in resident selection process, but also suggests there is room for significant growth to meet the need for manpower in the prosthodontic specialty.

Comparable results of the number of graduating students remaining in the United States to practice and/or teach were also noted for both PPDS and the present study. In this study, a large percentage of the program directors (68.42%) noted that the majority of their graduating residents (81–100%) would remain in the United States. It has been reported that 37.3% of 2005–2006 graduates were non-US citizens.[6] With the projected increased unmet prosthodontic need,[5] this could provide employment opportunities for those international students to remain in this country to practice prosthodontics. While the issues of U.S. dental degree training and dental license for those international students could be a negative factor for staying in the United States, academic positions could serve as other good possibilities for the international students to stay in the United States.[2]

The interview process was described as lasting 4 to 8 hours for almost half of the responding programs. Only one reported it lasting longer than 16 hours. Since the nature of the interview process was not examined in the current study, it could not be determined whether the interview process was longer for group interviews or shorter for individual applicant interviews. Wide variability in time of interview further substantiates wide variability in what the program directors deem important in resident selection.

The other important factors to program directors when choosing applicants for admission were dental school class rank, dental school grades (prosthodontics), letters of recommendation, and dental school grades (clinical) (Table 1). The rank of these important factors should be carefully interpreted from the table. Because some of the calculated mean values were very close to each other, the list of the ranking order may not indicate the absolute order of the importance, but rather, reflect a trend of significance. The prospective candidate should evaluate the rank list with caution. It has been reported that dental school class rank was considered to be the most important factor for oral and maxillofacial surgery resident selection process.[16,17] While this finding is consistent with the current study, the limitations of dental school class rank should be considered. Not all schools employ numerical grades and ranks for their students' performance. Instead, some use pass/fail or honor systems to classify their students. It is therefore difficult to judge the applicant's cognitive capability based on class rank information. Dental school rank is also a challenge for the program directors, as they have no way to accurately evaluate records from foreign institutions.

Prosthodontics relies heavily on manual dexterity; residents spend a tremendous amount of time gaining physical skills, performing prosthetic work, and delicate treatment procedures. It has been shown that class rank and board scores significantly correlate with gross motor dexterity, but not with fine motor dexterity.[18] One significant finding of the present study is that national board scores (parts I and II) were not ranked particularly high by AEPP directors in selecting applicants (Table 1). Although it is a standard measure between all applicants, some are inclined to place less importance on objective data,[10,13,15] perhaps because national board scores do not reflect the applicant's clinical skills. One study, however, valued national board part II as the best predictor of academic performance and clinical competency.[21] In addition, others have stated that objective assessment does not appear to correlate with outcomes of the training program.[19] Future changes in the national board to a pass/fail examination will further reduce the value of this examination as an objective assessment of cognitive learning.

Another standard exam for internationally trained candidates, Test of English as a Foreign Language (TOEFL) was included on the selection list. It has been observed that many of the enrolled AEP residents are non-US citizens.[6] In 2006–2007, 41% of the enrolled residents were non-US, and non-Canadian citizens. English proficiency could be a challenge for those international candidates from non-English speaking countries; therefore TOEFL is one of the application requirements for international applicants for all AEPPs. However, it was not ranked high in the selection factors (Table 1) by the program directors. Different results were found in the literature. One reported that TOEFL is the most positive predictor of grade point average,[20] but another study demonstrated that TOEFL has no significant value in the prediction of academic performance and clinical competency.[21] How TOEFL performance relates to the development of clinical proficiency in prosthodontic programs could be the focus of future studies.

Dexterity skills (on-site typodont preparation/wax carving) and on-site oral presentation ranked of little importance in selecting applicants to the program (Table 1). A previous study[21] showed that dexterity measures, although often questioned by researchers and faculty, appear to add significant weight to the prediction of clinical success. They can be used to identify weaknesses of the predoctoral and international dental program students.[20,21] Unfortunately, the current questionnaire did not ask the program directors to indicate if dexterity skills and on-site oral presentation were included as part of the interview process. Therefore, it is difficult to draw any definitive conclusion from the current study.

It is interesting to note that program directors placed publications/research experience, advanced degree training (Table 1), and research interest (Table 3) in a relatively low rank. Similar trends have been reported in previous studies.[11-14,16,17] The importance of research training is required by the Commission on Dental Accreditation prosthodontic standards and must be emphasized and encouraged; however, one study observed that while research experience was not ranked high, research potential was judged to be one of the most important factors in granting an interview.[15] Future studies that assess the clinical and research relationship associated with prosthodontic programs should be performed.

Letters of recommendation appear to be the fourth most important factor in selecting applicants to the program (Table 1), and those submitted by prosthodontists from academic institutions were considered highly valuable (Table 2). This is consistent with the observations of previous studies.[15,17] Letters of recommendation from the dean of the dental school typically provide the synopsis of the applicant's achievement. Although some valued it to be useful for making decisions in granting an interview,[10] most did not consider it as valuable as other sources.[11-13] Applicants should seek letters of recommendation from prosthodontists in their perspective institutions in the future.

Overall, most AEPP directors were satisfied with the current selection process and the applicant pool. This may be attributed to a more competitive applicant pool. The program directors identified that most applicants met their basic requirements.

Every program has its own selection process. The ultimate goal of the process is to find a match between both applicant and program so that the subsequent 3 years are enjoyable and productive. This study described the criteria and determined their importance as used by AEPP directors to select their residents. With the information provided in the study, the profession has insight into how their colleagues select applicants. In addition, it may serve as a valuable instrument for prospective applicants to AEPPs.

Conclusions

Within the limitations of this study, the following conclusions were drawn:

1. All responding university- and hospital-based programs required an interview as part of the resident selection process.
2. AEPP directors considered interview process, dental school class rank, dental school grades in prosthodontics, letters of recommendation, and dental school clinical grade

to be important factors in choosing applicants to the program.
3. Letters from the prosthodontic program director and prosthodontic faculty were considered the most important source for letters of recommendation.
4. *Honesty*, *organization*, and *energy* were ranked to be the most positive characteristics of the applicants during the interview.
5. Most AEPP directors were satisfied with the current selection process (97%) and applicant pool (91.67%), and reported that both credentials (77.78%) and quantity (77.78%) of the applicants have improved over the last 5 years.

Acknowledgments

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Appendix 1. Survey of resident selection procedures in Advanced Education in Prosthodontic Programs in the United States

General Information	
1. What best describes your program?	N = 38
☐ Hospital-based	6 (15.79%)
☐ University-based	29 (76.32%)
☐ Military	2 (5.26%)
Both Hospital- and University-based: 1(2.64%)	
2. How many applicants did you have last academic year? (2007–2008)?	N = 38
☐ 1–15	8 (21.05%)
☐ 16–30	10 (26.32%)
☐ 31–45	11 (28.95%)
☐ 46–60	5 (13.16%)
☐ More than 60	4 (10.53%)
3. How many applicants were accepted in your program this academic year (2008–2009)?	N = 37 Mean: 3.33 (range: 1–6)
4. Do you accept applicants directly out of dental school that did not graduate from a Commission on Dental Accreditation	
Accredited institution (Internationally trained)?	N = 38
☐ Yes	17 (44.74%)
☐ No	21 (55.26%)
5. What percent of the applicants met your basic requirements for consideration?	N = 38
☐ 1–20%	7 (18.42%)
☐ 21–40%	4 (10.53%)
☐ 41–60%	9 (23.68%)
☐ 61–80%	11 (28.95%)
☐ 81–100%	7 (18.42%)
6. Of those who were accepted, what percent applicants were from your own institution?	N = 38
☐ 1–20%	21 (55.26%)
☐ 21–40%	2 (5.26%)
☐ 41–60%	3 (7.89%)
☐ 61–80%	3 (7.89%)
☐ 81–100%	1 (2.63%)
☐ N/A	8 (21.05%)
7. How many students will graduate from your program next year?	N = 38 Mean: 2.97 (range: 0–6)
8. What percent of your graduating students will remain in the United States to practice and/or teach?	N = 38
☐ 1–20%	2 (5.26%)
☐ 21–40%	1 (2.63%)
☐ 41–60%	1 (2.63%)
☐ 61–80%	8 (21.05%)
☐ 81–100%	26 (68.42%)
☐ N/A	0 (0%)
9. Has your program recently changed its size?	N = 38
☐ Yes	8 (21.05%)
☐ No	30 (78.95%)
If answered "Yes",	
☐ Increased	7 (87.5%)
☐ Decreased	1 (12.5%)
10. Are you contemplating increasing or decreasing the size of your program?	N = 38
☐ Increasing	6 (15.79%)
☐ Decreasing	0 (0%)
☐ Remain the same	32 (84.21%)
Interview Process	
13. Does your program require an interview as part of the resident selection process?	N = 34
☐ Yes	32 (94.12%)
☐ No	2 (5.88%)
☐ Other	0 (0%)
If answered "No", please stop here, and proceed to Question #18-#23.	
14. How many candidates were invited for an interview for 2007–2008 selection process?	N = 21 Mean: 9.04 (ranges: 4–20)
15. How long did the interview process last?	N = 32
☐ Less than 4 hours	9 (28.13%)
☐ 4 to 8 hours	16 (50%)
☐ 8–16 hours	6 (18.75%)
☐ More than 16 hours	1 (3.13%)
16. The interview process was conducted by (Check all that apply)	N = 33
☐ Program Director (1)	Combination of 1,2,3,4: 12 (36.37%)
☐ Current Residents (2)	Combination of 1,2,3: 6 (18.19%)
☐ Full-Time Prosthodontic Faculty (3)	Combination of 1,2,3,4,5: 4 (12.12%)

☐ Part-Time Prosthodontic Faculty (4)	Combination of 1,2,4: 3 (9.09%)
☐ Staff Members (5)	Combination of 1,2,3,4,5,6: 3 (9.09%)
☐ Other Dental School Faculty (6)	Other combination: 5 (15.15%)
Decision Process	
18. Does your program participate in the ADEA Postdoctoral Application Support Service (PASS) Program?	N = 36
☐ Yes	20 (55.56%)
☐ No	16 (44.44%)
19. Which of the following individual(s) complete(s) the decision process in your program? (Check all that apply)	N = 36
☐ Program Director Alone (1)	1 only : 8 (22.2%)
☐ Department Chairman Alone (2)	6 only: 6 (16.67%)
☐ Full-Time Prosthodontic Faculty (3)	Combination of 1,3: 5 (13.89%)
☐ Part-Time Prosthodontic Faculty (4)	Combination of 1,3,4: 2 (5.56%)
☐ Staff Members (5)	Combination of 1,3,4,6: 2 (5.56%)
☐ Committee (6)	Combination of 3,4,6: 2 (5.56%)
	Combination of 1, resident: 2 (5.56%)
	Other combination: 11 (30.56%)
Retrospective View	
20. How satisfied are you with the current selection process?	N = 33
☐ Not Satisfied	1 (3.03%)
☐ Somewhat Satisfied	9 (27.3%)
☐ Very Satisfied	23 (69.7%)
21. Would you select all of your current and/or former residents from the last 5 years again?	N = 36
☐ Yes	14 (38.89%)
☐ No	22 (61.11%)
If answered "No", what is the percentage of the residents that you would admit again?	
☐ 1–20%	4 (18.18%)
☐ 21–40%	3 (13.64%)
☐ 41–60%	1 (4.54%)
☐ 61–80%	6 (27.27%)
☐ 81–100%	8 (36.36%)
22. How satisfied are you with the current applicant pool to your program?	N = 36
☐ Not Satisfied	3 (8.33%)
☐ Somewhat Satisfied	20 (55.56%)
☐ Very Satisfied	13 (36.11%)
23. Has the applicant pool for your program improved over the last 5 years?	N = 36
Credential	
☐ Yes	28 (77.78%)
☐ No	7 (19.44%)
☐ Same	1 (2.78%)
Quantity	
☐ Yes	28 (77.78%)
☐ No	7 (19.44%)
☐ Same	1 (2.78%)

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