

BACKGROUND

- Letters of recommendation (LOR) add faculty assessment of clinical performance, professionalism, and specialty fit beyond scores and transcripts.¹
- Prior studies have focused on letter language, gender-related differences, and standardized versus narrative formats.²⁻⁵
- Requirements have not always been transparent: a 2021 review of 50 program websites found that 46% stated a desired LOR number and only 4% specified a chair letter.⁶
- Contemporary applicant-level LOR portfolio composition remains incompletely characterized.

OBJECTIVES

To characterize the number, institutional source, writer leadership roles and academic rank, and OPDO standardized LORs submitted by applicants to one otolaryngology residency program.

METHODS

- Study Design:** Retrospective descriptive review of otolaryngology residency applications received by one institution during the 2025 - 2026 application cycle.
 - Cohort: 105 US-based applicants
- Each LOR coded for:**
 - Institutional origin: home or de facto home, external rotation, or other.
 - Writer role: department chair, program director, combined chair/program director, or other.
 - Writer academic rank: professor, associate professor, assistant professor, or other.
 - Use of the OPDO standardized LOR format.
- Measurements:** total LOR count, source counts, presence of ≥2 external sites, ≥1 chair/PD/combined chair-PD LOR, and ≥1 standardized LOR.
- Analysis:** Descriptive counts, percentages, and means at the applicant or letter level, as indicated. No inferential testing was performed.

REFERENCES

1. Association of American Medical Colleges. Letters of recommendation. Accessed September 17, 2026. <https://students-residents.aamc.org/applying-residencies-eras/publication-chapters/letters-recommendation>

2. Messner AH, Shimahara E. Letters of recommendation to an otolaryngology/head and neck surgery residency program: their function and the role of gender. *Laryngoscope*. 2008;118(8):1335-1344. doi:10.1097/MLG.0b013e318175337e

3. Perkins JN, Liang C, McFann K, Abaza MM, Streubel SO, Prager JD. Standardized letter of recommendation for otolaryngology residency selection. *Laryngoscope*. 2013;123(1):123-133. doi:10.1002/lary.23866

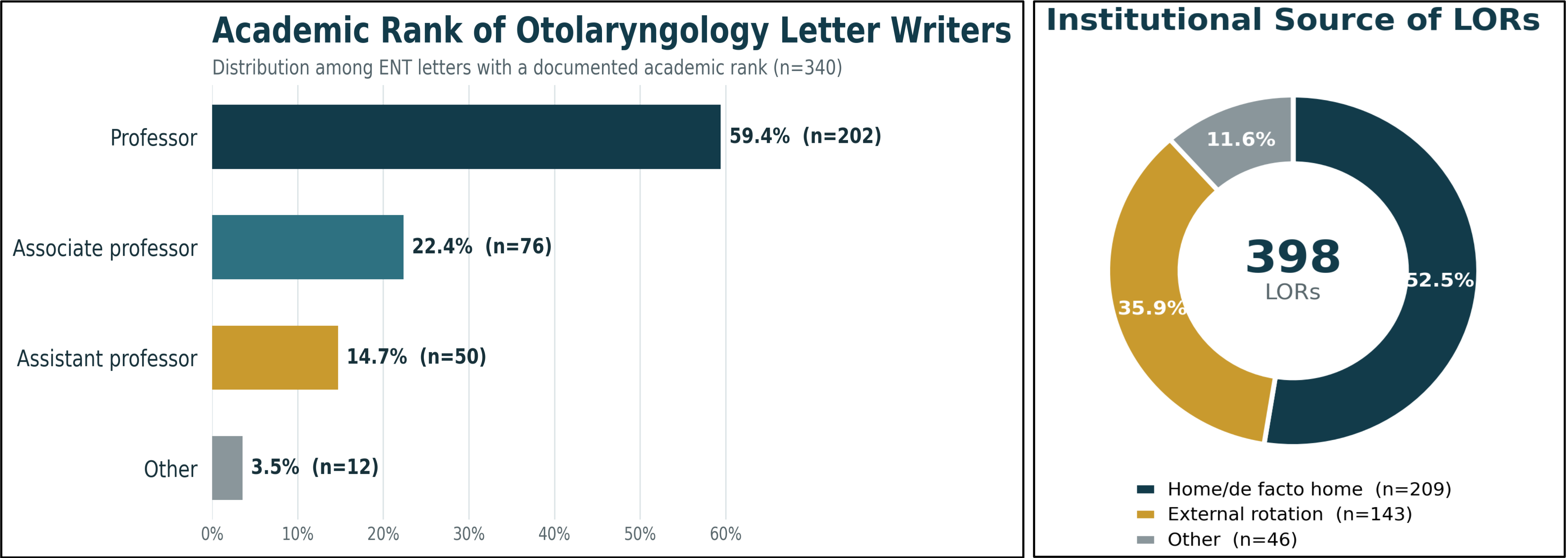
4. Kominsky AH, Bryson PC, Benninger MS, Tierney WS. Variability of ratings in the otolaryngology standardized letter of recommendation. *Otolaryngol Head Neck Surg*. 2016;154(2):287-293. doi:10.1177/0194599815623525

5. Friedman R, Fang CH, Hasbun J, et al. Use of standardized letters of recommendation for otolaryngology head and neck surgery residency and the impact of gender. *Laryngoscope*. 2017;127(12):2738-2745. doi:10.1002/lary.26619

6. Mott NM, Guduguntla BA, Bohm LA. Opportunity for improved transparency on otolaryngology residency websites for prospective applicants. *OTO Open*. 2021;5(4):2473974X211060825. doi:10.1177/2473974X211060825

RESULTS

Variable Measured	Reported Result
# of Included US- based applications	105
# of LOR submitted per applicant	Mean 3.8
# of home or de facto home institution LORs per applicant	Mean 1.99
# of external rotation LOR per applicant	Mean 1.36
Applicants with multiple external site LORs	25.7%
Applicants with at least one department chair LOR	59.0%
Applicants with at least one program director LOR	37.1%
Applicants with combined chair/program director LOR	26.7%
LORs with professor rank	58.8%
Applicants with ≥ 1 OPDO standardized LOR	51.4%



DISCUSSION

Applicants on average use all LOR slots.

- The mean of 3.8 approaches the four-letter ERAS allowance.¹
- This suggests applicants generally seek to maximize the number of LORs available to programs, although this data cannot determine whether submitting more LORs correlated with improved application outcomes.

Home program LORs dominate, with lesser external LOR use.

- Home/de facto home institutions supplied the largest share, while external rotations contributed 1.36 LORs per applicant and 25% of applicants had letters from multiple external sites.
- This suggests away rotations serve as an additional source of advocacy, although applicants prefer to obtain most LORs from home programs

Senior writers are prominent.

- Chair participation and professor authorship were common, consistent with earlier descriptions of senior academic otolaryngologists as frequent LOR writers.²
- This suggests applicants rely on established departmental leadership and senior faculty for support.

Standardized and narrative formats coexist.

- Only about half of applicants included an OPDO standardized LOR, suggesting standardized letters have not replaced traditional narrative evaluation in contemporary applicant portfolios.
- Prior studies reported faster review and higher inter-rater reliability in selected domains, while also identifying compressed ratings and persistent language differences as drawbacks of standardized LORs.³⁻⁵

CONCLUSION

- Applicants submitted nearly complete LOR portfolios that were anchored by home institutions and frequently included senior leadership.
- OPDO standardized LOR use was not universal.
- These findings provide contemporary benchmarks for advising, not evidence of an optimal LOR number, source, writer title, or format.