Background. To mitigate the HIV pandemic and increasing outbreaks of infec-
tious diseases, sub-Saharan African countries need increased healthcare worker cap-
acity. To help achieve this, we describe a successful collaboration between the Ministry of Health (MOH), the University Teaching Hospital (UTH), the University of Zambia (UNZA), and the University of Maryland Baltimore (UMB) to train Zambian physi-
cians in advanced HIV medicine and infectious diseases.

Methods. We examined 2009–2018 data from the National Resident Matching Program (NRMP) to examine the potential impact of hospital medicine on resident career choice.

Results. More residents matched into hospital medicine positions over the last 10 years compared to other specialty options (ergy = 0.001). All subspecialties saw a significant increase (p < 0.001) and was highly correlated with the increase in number of R3s (r = 0.93, P < 0.001). All subspecialties saw a significant increase in matched applicants over time except ID and nephrology, which both saw initial decreases that reversed after converting to an “all-in” match. In 2018, ID had its highest number of matched applicants in the last 10 years.

Conclusion. Despite concerns that the growth in hospital medicine would lead to fewer IM residents pursuing subspecialty fellowship, the number of matched appli-
cants continued to increase over the last 10 years, and has kept pace with the growth in R3s over this time. Initial decreases in the number of matched applicants in ID have now reversed after conversion to the “all-in” match, and the next few years will be critical to determine whether this trend continues.

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