FELLOWSHIP TRAINING: CHALLENGES AND OPPORTUNITIES

Stacey Tutt Gray, MD, FACS
Associate Professor
Vice Chair of Education, Department of Otolaryngology – Head and Neck Surgery
Harvard Medical School
PANELISTS

- Robert Chun
- Taha Shipchandler
- Peter Vila
- Mark Wax
- Bevan Yueh
• Total number of fellowships has increased
  – Fewer than 25 fellowships in the 1970s
  – 150 fellowships in 1993
  – 235 fellowships in 2018
• Residents considering fellowship training has increased
  – SRF Survey (2008-2014)
    • 79% of PGY-1
    • 64% of PGY-4 and PGY-5

PEDIATRIC OTOLARYNGOLOGY

- Positions Offered
- Applicants Registered
- Applicants Participating
- Applicants Matched

Comparison over years:
- 2008
- 2019
RHINOLOGY

Positions Offered
Applicants registered
Applicants Participating
Applicants matched

2006
2019
REASONS RESIDENTS ARE PURSUING FELLOWSHIP

• To gain mastery of a subspecialty field
• To increase marketability
• Following in the footsteps of residency mentors
• Concern about practice ability?

Miller RH. Arch Otolaryngol Head Neck Surg 1994
ARE FELLOWS PREPARED?

• Survey of 211 fellowship PDs and faculty involved in training fellows
  – 52% Response rate
  – Pediatrics, Neurotology, Head & Neck, FPRS, Rhinology, Laryngology
  – Competence in professionalism, clinical evaluation, management
  – Only 68% of respondents felt fellows could operate independently on call
  – 100% of respondents felt fellows would be able to practice independently after graduation

Highlan J, Carera-Muffly C. Laryngoscope 2017
ONBOARDING

• How do you ensure that fellows are ready?
• Fellow curriculum?
• Evaluative process?
ONBOARDING RESOURCES

• NATIONAL
  – Fellows Courses
  – Hands on Courses during Chief year
  – Subspecialty Societies
  – SRF

• LOCAL
  – Orientation
  – “Teach the Teacher” Program
FELLOWSHIP START DATE

• AMERICAN BOARD OF SURGERY 2014

• Requested start of academic fellowship year to move to August 1
  – Allows residents to be fully present until the end of training without concerns for moving and starting fellowship
  – Ensures seasoned fellows in July during resident transition time

• Moved Written Board Examination to Mid July
COMPETITION FOR CASES

• CHALLENGES

• Defining “fellow” versus “resident” level cases

• Which specialties/cases are most at risk?

• Loss of Resident Autonomy
COMPETITION FOR CASES

- OPPORTUNITIES
- Institutional Definition of “fellow” versus “resident” cases
- Monitor key indicator cases
- Monitor autonomy
- Evaluate resident experience
APPLICATION PROCESS

• CHALLENGES

• Burden of Interviews
  – Cost
  – Time away from program during critical training time
  – Call and Service coverage while residents are away
APPLICATION PROCESS

• STRATEGIES

• Initial group interviews at national meeting to meet key players
• Initial “Skype” interview
• Follow up interviews for select number
• Weekend interviews
• Afternoon interviews
CONCLUSIONS

• Fellows are a key component of Otolaryngology training
• The year is an opportunity for significant growth in teaching skills
• It takes work to ensure that fellows augment resident training