

The Hand Surgery Fellowship Application Process: Expectations, Logistics, and Costs

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Purpose To investigate expectations, logistics, and costs relevant to the hand surgery fellowship application process. We sought to discover (1) what both applicants and program directors are seeking, (2) what both parties have to offer, (3) how both parties collect information about each other, and (4) the costs incurred in arranging each match.

Methods We conducted on-line surveys of hand surgery fellowship applicants for appointment in 2015 and of current fellowship program directors.

Results Sixty-two applicants and 41 program directors completed the survey. Results revealed applicants' demographic characteristics, qualifications, method of ranking hand fellowship programs, costs incurred (both monetary and opportunity) during the application process, ultimate match status, and suggestions for change. Results also revealed program directors' program demographics, rationale for offering interviews and favorably ranking applicants, application-related logistical details, costs incurred (both monetary and opportunity) during the application process, and suggestions for change.

Conclusions Applicants for hand surgery fellowship training are primarily interested in a potential program's academic reputation, emphasis on orthopedic surgery, and location. The typical, successfully matched applicant was a 30-year-old male orthopedic resident with 3 publications to his credit. Applicants rely on peers and Web sites for information about fellowships. Fellowship directors are primarily seeking applicants recommended by other experienced surgeons and with positive personality traits. The typical fellowship director offers a single year of orthopedic-based fellowship training to 2 fellows per year and relies on a common application and in-person interviews to collect information about applicants. Applicants appear to be more concerned than directors about the current state of the match process. Applicants and directors alike incur heavy costs, in both dollars and opportunity, to arrange each match. A nuanced understanding of the match process suggests specific changes and may help reduce these costs. (*J Hand Surg Am.* 2015;40(4): 783–789. Copyright © 2015 by the American Society for Surgery of the Hand. All rights reserved.)

Type of study/level of evidence Economic and decision analysis V.

Key words Application, fellowship, hand, match, surgery.



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THE HAND SURGERY FELLOWSHIP match may be understood as an economic market in which applicants offer skill, experience, enthusiasm, and other factors in exchange for advanced training. The National Residency Matching Program (NRMP) facilitates matches and publishes basic information related to each year's application process. However, precisely what applicants and directors want, what both parties have to offer, and how both parties collect information remain obscure. Two types of costs, monetary and opportunity, are, anecdotally, a source of frustration for applicants and program directors; however, these costs are poorly understood. The monetary costs of the match have not been enumerated. Opportunity cost is the cost of forgoing a next-best option (eg, the cost of putting off clinic) to interview applicants.^{1,2} These costs are less concrete but no less important and no less obscure. Monetary and opportunity costs might be reduced if applicants and program directors knew how their energies were best directed. If applicants knew how their credentials compared with those of their peers, they might self-select (ie, chose programs more likely to accept them) early in the application process. If directors knew the interviewing behavior of other programs, they might optimize the number of interviews they offer and/or coordinate interviews with other sites. Data to inform such decision making are lacking.

We therefore sought to collect information related to match expectations, logistics, and costs through surveys of applicants for hand fellowship appointment in 2015 as well as current hand surgery fellowship directors.

MATERIALS AND METHODS

We conducted on-line surveys of both hand surgery fellowship applicants for appointment in 2015 and current hand surgery fellowship directors. The full surveys are presented in [Appendix A](#) (available on the *Journal's* Web site at www.jhandsurg.org).

The applicant survey consisted of 37 questions designed to reveal each respondent's demographics, qualifications, method of ranking hand fellowship programs, expenses and opportunity costs incurred traveling to interviews, ultimate match status, and suggestions for change. The fellowship director survey consisted of 15 questions designed to reveal each respondent's program demographics; rationale for offering interviews and favorably ranking applicants; application-related logistic details; costs incurred, both monetary and opportunity, during the application process; and suggestions for change.

Between January and May 2014, via in-person and e-mailed inquiries, we collected the e-mail addresses of 118 applicants for 2015 appointment. We invited them to take an on-line survey in June, sent 2 reminder invitations at weekly intervals, and closed the survey after a month. To incentivize participation, we informed potential respondents that their participation in the survey would be acknowledged but that their individual responses would remain anonymous.

We identified 84 program directors and codirectors, corresponding to the 81 Accreditation Council for Graduate Medical Education accredited hand surgery fellowships. We invited them to take the on-line survey in August 2014, sent 2 reminder invitations at weekly intervals, and closed the survey after a month. We informed program director respondents that their participation in the survey would be anonymous unless they asked to be acknowledged.

Both surveys were facilitated by a commercial Web site (www.surveymonkey.com; SurveyMonkey Inc., Palo Alto, CA).

Data analysis involved traditional statistical methods and was aided by the same commercial Web site that facilitated the surveys.

RESULTS

Applicant survey

Of the 118 applicants for 2015 appointment we contacted, 61 (52%) completed the survey, and 3 partially completed the survey.

Eighty-one percent of respondents were men. The median age among respondents was 30 years. All respondents were MDs, and 14% had other advanced degrees including 1 PhD. Thirty-five percent of respondents were members of the Alpha Omega Alpha medical honor society, 51% were not, and 14% indicated that their medical schools did not have Alpha Omega Alpha medical honor society chapters. Seventy-eight percent had career or research experience other than publications, presentations, awards, or grants. Eighty percent were enrolled in or had completed orthopedic surgery residency training, and 20% were enrolled in or had completed plastic surgery residency training. One respondent had already completed another fellowship (microsurgery and pediatric plastic surgery). Five percent of respondents had previously applied for hand surgery fellowship training. Respondents' median number of publications was 3 and their median number of national podium or poster presentations was 2.

All but 2 respondents had completed a dedicated hand surgery residency rotation before applying for

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