

# Factors Used by Program Directors to Select Hand Surgery Fellows

Matthew S. Nies, BS, Alexander J. Bollinger, MD, Charles Cassidy, MD, Peter J. L. Jebson, MD

**Purpose** To identify factors and attributes hand surgery fellowship program directors consider important in selecting applicants for interview and ranking.

**Methods** A web-based questionnaire was sent to all hand fellowship program directors in the United States. The questionnaire was designed to identify the most important criteria in granting an interview, sources of letters of recommendation, the interview process, and factors used to rank a candidate. Each criterion was ranked in importance on a 1 to 5 Likert scale, with 1 being not important and 5 being critical. All responses were anonymous. The most important criterion for each section of the survey was determined by comparing the average Likert scores.

**Results** Fifty-two of 76 program directors responded (68%). The criteria with the highest mean Likert scores for offering an applicant an interview were, in order, quality letters of recommendation from hand surgeons, completion of an orthopedic surgery residency, comments regarding the applicant's technical competence, applicant having an MD degree (as opposed to a DO degree), and residency program reputation. The letters of recommendation with the highest value were from the division chief of hand surgery and another hand surgeon in the division/department. The most important features of the interview were maturity of applicant, ability of applicant to articulate thoughts, ability to listen well, self-confidence, and relevant questions asked. The most important factors in ranking a candidate were applicant integrity, commitment to hard work, quality of letters of recommendation, quality of the interview, and ability to work well with other members of the hand surgery team.

**Conclusions** There are identifiable factors considered important by hand surgery fellowship directors when selecting and ranking an applicant. This information may be valuable to medical students and residents contemplating careers in hand surgery. (*J Hand Surg Am.* 2014;39(11):2285–2288. Copyright © 2014 by the American Society for Surgery of the Hand. All rights reserved.)

**Key words** Hand, fellowship, selection, criteria.



**O**BTAINING A HAND SURGERY fellowship is becoming more challenging. According to the National Resident Matching Program,<sup>1</sup> from 2008 through 2012, the number of applicants per hand surgery fellowship position increased from

0.9 to 1.3, and the percentage of applicants that matched decreased from 93 to 73 percent. However, the factors used by fellowship directors to evaluate applicants have not been defined. We hypothesized that there are identifiable and consistent factors and

From the College of Human Medicine, Michigan State University; the Department of Orthopaedic Surgery, Grand Rapids Medical Education Partners, Grand Rapids, MI; and the Hand and Upper Extremity Service, Department of Orthopaedic Surgery, Tufts-New England Medical Center, Boston, MA.

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**Corresponding author:** Matthew S. Nies, BS, College of Human Medicine, Michigan State University, 616 Bayberry Pointe Dr. Apt F, Grand Rapids, MI 49534; e-mail: [Matthew.Nies@gmail.com](mailto:Matthew.Nies@gmail.com).

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attributes preferred by hand fellowship program directors in the selection and ranking of applicants. The purpose of this study is to identify those factors. We believe that these data would be of high value to both medical students and residents planning careers in hand surgery.

## MATERIALS AND METHODS

We developed a web-based questionnaire consisting of 65 items in 4 sections (Appendix A, available on the *Journal's* Web site at [www.jhandsurg.org](http://www.jhandsurg.org)). The respondent was asked to rank them to determine the relative importance in offering an interview and in ranking a hand surgery fellowship applicant. The 4 sections were items of importance in obtaining an interview, important sources for letters of recommendation, important factors during the interview, and factors deemed important in highly ranking the applicant. All items were ranked on a 1 to 5 Likert scale with 1 being not important and 5 representing critical.

The survey was conducted via online questionnaire and was sent by e-mail to all 76 directors of the 78 hand fellowship programs in the United States listed on the American Society for Surgery of the Hand (ASSH) Web site in January 2013. E-mail addresses were obtained from the ASSH membership directory. We sent follow-up surveys to nonresponders at 1, 2, 3, and 4 weeks after the initial mailing. The senior author (P.J.) contacted all remaining nonresponders via e-mail to encourage them to participate in the study. Data collection was terminated 6 weeks after the initial e-mail. We determined the most important criteria by calculating the mean Likert score and SD for each item surveyed.

## RESULTS

Two of the 76 programs contacted were not American College of Graduate Medical Education (ACGME) accredited but the remaining were. Overall, 52 of 76 program directors (68%) responded. The number of responses broken down by program type and accreditation are reported in Table 1.

The criteria, in order of importance, with the highest mean Likert scale scores for offering an applicant an interview were quality of the letters of recommendation ( $4.3 \pm 0.8$ ), training at an orthopedic surgery program ( $3.8 \pm 1.2$ ), comments in the letters of recommendation regarding the applicant's technical competence ( $3.8 \pm 0.8$ ), applicant having an MD versus a DO degree ( $3.8 \pm 1.2$ ), and residency program reputation ( $3.5 \pm 0.9$ ). The least important factors in granting an interview were applicant sex

**TABLE 1. Number of Responses Broken Down by Program Type and Accreditation**

Characteristic	Directors	Responded	Percent Response
ACGME accredited	74	51	69
Orthopedic surgery	58	42	72
Plastic surgery	13	7	54
General surgery	1	0	0
Both orthopedics/plastics	2	2	100
Non-ACGME Accredited	2	1	50
Total	76	52	68

( $1.2 \pm 0.5$ ), ethnic background ( $1.2 \pm 0.5$ ), geographical location of residency program ( $1.5 \pm 0.9$ ), and microsurgical experience ( $1.8 \pm 0.8$ ). Appendix B (available on the *Journal's* Web site at [www.jhandsurg.org](http://www.jhandsurg.org)) includes the Likert scores for each of the 56 questions.

The letters of recommendation on which the highest value is placed were division chief of hand surgery ( $4.0 \pm 0.8$ ) and another hand surgeon in the division/department ( $3.6 \pm 0.9$ ). The letters with the least value were clinical faculty member not affiliated with the applicant's residency program ( $2.2 \pm 0.9$ ) and basic science faculty ( $1.8 \pm 0.6$ ). The most important features of the interview were, in order, maturity of applicant ( $4.1 \pm 0.7$ ), ability of applicant to articulate thoughts ( $4.0 \pm 0.7$ ), ability of applicant to listen well ( $3.8 \pm 0.8$ ), degree of applicant self-confidence ( $3.6 \pm 0.7$ ), and relevant questions asked by the applicant ( $3.5 \pm 0.8$ ). The least important features of the interview were the fund of both medical ( $3.2 \pm 0.9$ ) and hand surgery knowledge ( $2.9 \pm 0.9$ ).

The factors deemed most important in highly ranking a candidate were applicant integrity ( $4.7 \pm 0.7$ ), applicant's commitment to hard work ( $4.5 \pm 0.6$ ), quality of letters of recommendation ( $4.3 \pm 0.7$ ), quality of the interview ( $4.3 \pm 0.8$ ), and ability to work well with other members of the hand surgery team ( $4.2 \pm 0.8$ ). The least important factors in ranking candidates were sex ( $1.2 \pm 0.5$ ), ethnic background ( $1.2 \pm 0.5$ ), geographical location of residency program ( $1.6 \pm 0.9$ ), and microsurgical experience ( $1.9 \pm 0.9$ ).

## DISCUSSION

Reports involving other disciplines have defined specialty-specific criterion used to identify and rank fellowship applicants. Successful candidates to pediatric

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