

Choosing a Fellowship

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There is an increasing trend toward subspecialization in medicine, orthopedics in particular. In 2010, 93% of physicians completing an orthopedic residency went on to a fellowship in 1 of the 9 recognized orthopedic subfields (hand, shoulder and elbow, spine, adult reconstruction, pediatrics, sports medicine, foot and ankle, trauma, and oncology).¹ Orthopedic residents face 2 significant tasks that will affect their future: (1) selecting the appropriate field for further study and (2) choosing the fellowship program that he or she wishes to attend.



Orthopedic residents made many significant selections along the way to choosing their subspecialty. Choices of where to attend college and medical school and where to complete their residency already were made. The selection of a fellowship, however, provides a unique challenge. For college and medical school, there are plenty of resources to turn to. *US News & World Report*, for instance, puts significant resources into its annual review of these programs—giving applicants a concise summary of the strengths and weaknesses of different institutions. Selecting a residency program is certainly more challenging than selecting a college; however, strong programs are generally associated with strong academic institutions.

FELLOWSHIP INS AND OUTS

Fellowships come in a wide variety of shapes and sizes. Fellowships associated with an academic institution might include the ability to work with residents and fellows—which might be appealing to someone pursuing an academic career. This type of fellowship might be less appealing for others, however, as it might result in less one-on-one time with attendings. Some fellowships are true apprenticeship programs, pairing one fellow with a single attending, while others have multiple fellows with multiple staff, which is more in line with a residency program model. Different programs certainly allow for different lev-

els of autonomy, both in the clinic and in the operating room.

The importance of Accreditation Council for Graduate Medical Education (ACGME) credentials varies across orthopedic fellowship subspecialties. In sports medicine, these credentials are critical. As of 2010, attending an ACGME fellowship is a prerequisite for sitting for the Certificate of Added Qualifications (CAQ) examination in sports medicine. Virtually all well-known fellowship programs in this subspecialty are now ACGME accredited. In other subspecialties, however, ACGME accreditation is far less important. For example, the adult reconstruction fellowships at Harvard, Boston, Massachusetts, and Stanford, Stanford, California, are not accredited programs, yet fellows in those programs work with some of the most well known arthroplasty surgeons in the field.

WHERE TO GO FOR THE BEST INFORMATION

“Why do bank robbers rob banks? Because that is where the money is.” Similarly, to get good information about fellowship programs, go to the source: current and recent graduates of the program. Unfortunately, in this case, there is no *US News & World Report* review to turn to—but first-hand knowledge from current and recent fellows are better than a published review. These doctors know their fellowship better than anyone, and can offer a frank perspective since they also have a sense for other fellowships from their recent interview experiences.

I knew virtually nothing about the prestige of various fellowship programs before I began my sports medicine fellowship. After a year immersed in a subspecialty field, you have a sense for who the leaders are. Communication with other fellows also gives you a sense for how your experience compares to that of others. Programs change dramatically

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with the addition or subtraction of just 1 or 2 staff members. So the program that your residency staff might remember as being strong from his or her time in fellowship may be a completely different program today.

Of course, each subspecialty has sub-subspecialties. In sports medicine, there are ultra-specialists in knee, shoulder, hip, and elbow. Different programs, based on their staff, have different strengths in each of these fields. Even within the ultra-specialties there are further divisions. Within the

knee sub-subspecialty, one might be recognized as a leader in ligament reconstruction vs complex cartilage repair. In spine, a program might be well known for complex tumor surgery vs adult scoliosis.

Each fellowship program's Web site is a good place to start for information, but there is no substitute for speaking with a current or recent fellow to get the true inside scoop. It is worth taking a little extra time to make these connections and get real insider information, as the choice of a fellowship is

likely to have a significant affect on your career as an orthopedic surgeon.

AUTHORS' DISCLOSURE STATEMENT

The author reports no actual or potential conflict of interest in relation to this article.

REFERENCE

1. American Academy of Orthopaedic Surgeons. *Postgraduate Orthopaedic Fellowships 2011*. 26th ed. Rosemont, IL: American Academy of Orthopaedic Surgeons; 2011. <http://www3.aaos.org/education/fellow/usebook.cfm>. Accessed September 6, 2011.