

To prepare for our 2014 Pediatric Hospital Medicine Fellowship Directors' meeting in July, we would like to know more about your curriculum and what topics interest you. This will help us design an agenda for our discussions that addresses your needs. It will also provide the foundation for a discussion on future board certification for PHM. Please take 10 minutes to complete this survey. It would be helpful to have a copy of your fellowship curriculum in-hand when you complete this survey.

Sincerely,

Jennifer Maniscalco (CHLA), Carrie Rassbach (Stanford), Helen Rhim (Montefiore), Neha Shah (CNMC), and Karen Wilson (U Colorado)  
2014 PHM Fellowship Directors' Meeting Organizers

## Needs Assessment

1. Please rate your interest in discussing the following topics at the July PHM Fellowship Directors' Meeting:

	Uninterested-1	2	3	4	Extremely interested-5
Milestones	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Entrustable Professional Activities (EPAs)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Fellowship Funding	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Research	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Social Media/PHM Website	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Application Process/NRMP	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Standardizing Curricula	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Fellowship Metrics	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

## Description of Program Structure and Curriculum

### Structure of your program:

\* 2. Name of your program:

\* 3. Fellowship director name:

4. Associate fellowship director name (if applicable):

\* 5. Year your fellowship began with its first fellow:

## Description of Curriculum:

\* 6. Duration of fellowship:

- 1 year
- 2 years
- 3 years
- Flexible duration

If flexible, please explain

\* 7. Does your fellowship curriculum include the following rotations?

	Required	Optional	Not part of the curriculum
Sedation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Transport	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Hospital medicine rotation at a community site	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
PICU	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
ED	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Pain service	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Palliative Care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Newborn nursery	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Complex care service	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

## Curriculum during fellows' first year

### During the fellows' FIRST year:

\* 8. How much clinical time do fellows have on the hospital medicine service (in weeks of service)?

\* 9. How many hospital medicine night shifts do your fellows work during this year?

\* 10. Do hospital medicine fellows bill/generate clinical revenue during this year?

Yes

No

If other (please specify)

\* 11. How much clinical time do fellows have on non-hospitalist services (in weeks of service)?

\* 12. What clinical rotations are required this year aside from hospital medicine rotations?

\* 13. How many research weeks do fellows have this year?

## Curriculum during fellows' second year

### During the fellows' **SECOND** year (if applicable):

14. How much clinical time do fellows have on the hospital medicine service (in weeks of service)?

15. How many hospital medicine night shifts do your fellows work during this year?

16. Do hospital medicine fellows bill/generate clinical revenue during this year?

- Yes
- No
- If other (please specify)

17. How much clinical time do fellows have on non-hospitalist services (in weeks of service)?

18. What clinical rotations are required this year aside from hospital medicine rotations?

19. How many research weeks do fellows have this year?

## Curriculum during fellows' third year

### During the fellows' THIRD year (if applicable):

20. How much clinical time do fellows have on the hospital medicine service (in weeks of service)?

21. How many hospital medicine night shifts do your fellows work during this year?

22. Do hospital medicine fellows bill/generate clinical revenue during this year?

- Yes
- No
- If other (please specify)

23. How much clinical time do fellows have on non-hospitalist services (in weeks of service)?

24. What clinical rotations are required this year aside from hospital medicine rotations?

25. How many research weeks do fellows have this year?

## Research

\* 26. Do you provide a Scholarship Oversight Committee for your fellows?

- Yes
- No
- Other (please specify)

\* 27. For each category of research, please list which category your current fellows are PRIMARILY working on:

Number of fellows  
primarily conducting  
CLINICAL RESEARCH:

Number of fellows  
primarily conducting  
BASIC SCIENCE  
RESEARCH:

Number of fellows  
primarily conducting  
HEALTH SERVICES  
RESEARCH:

Number of fellows  
primarily conducting  
QUALITY  
IMPROVEMENT  
RESEARCH:

Number of fellows  
primarily conducting  
MEDICAL EDUCATION  
RESEARCH:

Other topics that your  
fellows are primarily doing  
research in:



\* 28. Do you offer any additional coursework or degrees in research for your fellows? Check all that apply:

- Non-credit courses or workshops
- Courses for credit
- Certificate programs (public health, etc)
- Master's in Public Health
- Master's in Clinical Science
- Master's in Epidemiology
- Master's in Education
- None of the above
- Other Master's or research coursework (please describe):

29. How is the coursework paid for? (check all that apply)

- The fellow's personal funds
- Tuition reimbursement
- Departmental support
- Training grant
- Other (please specify)

30. Any other comments or suggestions?

**Thank you for taking the time to complete the survey. We look forward to sharing the results with you in Orlando July 23-24, 2014!**