

## Neonatal-Perinatal – Midcareer

<b>Table 1050. NEONATAL-PERINATAL: MIDCAREER: Do you currently provide direct or consultative <u>pediatric subspecialty patient care</u>? (N=1692)</b>			
	<b>Neo-Per</b>	<b>All Other SS</b>	
	<b>(N=177)</b>	<b>(N=1515)</b>	
	<b>% (N)</b>	<b>% (N)</b>	<b>P-value</b>
Yes, the primary focus of my clinical practice is <i>subspecialty care</i>	92 (163)	79 (1202)	.0007
Yes, my clinical practice is a relatively even mix of <i>primary and subspecialty care</i>	2 (3)	6 (96)	
No, the primary focus of my clinical practice is <i>primary care</i>	3 (5)	8 (117)	
No, I am not currently engaged in direct or consultative patient care	3 (6)	7 (100)	

<b>Table 1051. NEONATAL-PERINATAL: MIDCAREER: Which of the following best describes your current clinical role? (N=1684)</b>			
	<b>Neo-Per</b>	<b>All Other SS</b>	
	<b>(N=175)</b>	<b>(N=1509)</b>	
	<b>% (N)</b>	<b>% (N)</b>	<b>P-value</b>
I am working primarily as a clinician	60 (104)	37 (552)	<.0001
I am working primarily as a clinician-educator	35 (61)	49 (736)	
I am working primarily as a researcher with some clinical activity	2 (4)	9 (138)	
I am not clinically active at this time	3 (6)	5 (83)	

<b>Table 1052. NEONATAL-PERINATAL: MIDCAREER: Are you currently engaged in medical research of any type? (N=1549)</b>			
	<b>Neo-Per</b>	<b>All Other SS</b>	
	<b>(N=173)</b>	<b>(N=1376)</b>	
	<b>% (N)</b>	<b>% (N)</b>	<b>P-value</b>
Yes	36 (63)	53 (728)	<.0001
No	64 (110)	47 (648)	

<b>Table 1053. NEONATAL-PERINATAL: MIDCAREER: Which of the following best describes your field of research? (N=883)</b>			
	<b>Neo-Per</b>	<b>All Other SS</b>	
	<b>(N=63)</b>	<b>(N=820)</b>	
	<b>% (N)</b>	<b>% (N)</b>	<b>P-value</b>
Basic research	9 (6)	10 (84)	.27
Health services research	9 (6)	6 (53)	
Clinical research, primarily industry-sponsored drug trials	8 (5)	19 (152)	
Clinical research, non-industry sponsored	67 (42)	59 (481)	
Educational research	6 (4)	6 (50)	

<b>Table 1054. NEONATAL-PERINATAL: MIDCAREER: Which of the following best describes the ownership of your primary practice? (N=1686)</b>			
	<b>Neo-Per</b>	<b>All Other SS</b>	
	<b>(N=176)</b>	<b>(N=1510)</b>	
	<b>% (N)</b>	<b>% (N)</b>	<b>P-value</b>
Private practice (group or solo)	43 (75)	21 (321)	<.0001
University/Medical school	26 (46)	50 (760)	
Community or non-university affiliated hospital	18 (31)	14 (216)	
Managed care organization	4 (8)	2 (25)	
Federal, state, or local government	3 (6)	4 (61)	
Other/Not applicable	6 (10)	9 (127)	

<b>Table 1055. NEONATAL-PERINATAL: MIDCAREER: Do you currently hold an academic appointment? (N=1694)</b>			
	<b>Neo-Per</b>	<b>All Other SS</b>	
	<b>(N=177)</b>	<b>(N=1517)</b>	
	<b>% (N)</b>	<b>% (N)</b>	<b>P-value</b>
No	48 (85)	21 (322)	<.0001
Yes; full-time academic faculty	28 (50)	50 (756)	
Yes; part-time academic faculty	4 (6)	10 (148)	
Yes; adjunct, volunteer, or courtesy faculty	20 (36)	19 (291)	

**Table 1056. NEONATAL-PERINATAL: MIDCAREER: Based on your experience in fellowship training, do you believe that you received the appropriate amount of clinical training for your first job following fellowship completion? (N=1695)**

	Neo-Per (N=177)	All Other SS (N=1518)	
	% (N)	% (N)	P-value
No, I believe that the amount of clinical training time should be <i>increased</i>	7 (13)	10 (154)	.44
No, I believe that the amount of clinical training time should be <i>decreased</i>	1 (2)	2 (24)	
Yes, I believe that the amount of clinical training was appropriate	92 (162)	88 (1340)	

**Table 1057. NEONATAL-PERINATAL: MIDCAREER: Why do you believe that the amount of clinical training time in your subspecialty should be increased? Please choose *all that apply*. (N=166)**

	Neo-Per (N=13)	All Other SS (N=153)	
	% (N)	% (N)	P-value
Increase in types of procedures and/or complexity of patient care	54 (7)	62 (95)	.56
Duty hour restrictions and other changes <u>during residency</u> have reduced initial clinical competence upon entrance to fellowship	38 (5)	29 (45)	.49
Duty hour restrictions <u>during fellowship</u> have reduced clinical training time	15 (2)	22 (34)	.57
Need for further development of clinical independence	38 (5)	56 (86)	.22
Additional supervisory experience is needed	23 (3)	17 (26)	.58
Additional time is needed for longitudinal case management	31 (4)	27 (42)	.80
Other	0 (0)	7 (11)	.32

**Table 1058. NEONATAL-PERINATAL: MIDCAREER: Why do you believe that the amount of clinical training time in your subspecialty should be decreased? Please choose *all that apply*. (N=25)**

	Neo-Per (N=2)	All Other SS (N=23)	
	% (N)	% (N)	P-value
Takes less time to establish clinical competence	100 (2)	70 (16)	.36
Fellows should be spending more time in research	0 (0)	13 (3)	.59
Other	0 (0)	39 (9)	.27

**Table 1059. NEONATAL-PERINATAL: MIDCAREER: Do you believe that the clinical training time should be the same for all fellows in your subspecialty, regardless of career path (i.e., those who pursue primarily a clinical vs. primarily a research career)? (N=1656)**

	Neo-Per (N=176)	All Other SS (N=1480)	
	% (N)	% (N)	P-value
Yes	77 (135)	75 (1109)	.87
No, I believe that fellows planning to pursue primarily a <i>clinical career</i> should complete additional clinical training	15 (27)	17 (246)	
No, I believe that fellows planning to pursue primarily a <i>research career</i> should complete less clinical training	8 (14)	8 (125)	

**Table 1060. NEONATAL-PERINATAL: MIDCAREER: Based on your experience in fellowship training, do you believe that there is a need in your subspecialty to change the amount of time in scholarly activity/research during pediatric fellowship? (N=1693)**

	Neo-Per (N=176)	All Other SS (N=1517)	
	% (N)	% (N)	P-value
Yes, I believe that the amount of time in scholarly activity/research should be <b>increased</b>	10 (17)	13 (191)	.12
Yes, I believe that the amount of time in scholarly activity/research should be <b>decreased, but not eliminated</b>	31 (55)	24 (363)	
Yes, I believe that the scholarly activity/research requirement should be <b>eliminated</b>	3 (5)	2 (37)	
No, I believe that the current amount of time in scholarly activity/research is appropriate	52 (92)	54 (813)	
Unsure	4 (7)	7 (113)	

**Table 1061. NEONATAL-PERINATAL: MIDCAREER: Why do you believe that the amount of time devoted to scholarly activity/research should be **increased**? Please choose all that apply. (N=206)**

	Neo-Per (N=17)	All Other SS (N=189)	
	% (N)	% (N)	P-value
Fellows need more training to be prepared for junior faculty research positions	53 (9)	79 (149)	.02
Duty hour restrictions have negatively impacted available time for scholarly activity/research	65 (11)	36 (68)	.02
Other	6 (1)	13 (24)	.41

**Table 1062. NEONATAL-PERINATAL: MIDCAREER: Why do you believe that the amount of time devoted to scholarly activity/research during fellowship should be decreased or eliminated? Please choose all that apply. (N=458)**

	<b>Neo-Per (N=60)</b>	<b>All Other SS (N=398)</b>	
	<b>% (N)</b>	<b>% (N)</b>	<b>P-value</b>
Scholarly activity/research requirements discourage pediatric residents from pursuing fellowship training	20 (12)	28 (113)	.17
Fellows who plan to pursue primarily clinical careers do not need the current amount of scholarly activity/research during training	78 (47)	79 (316)	.85
It would allow us to shorten fellowship training, making our subspecialty more attractive to potential fellows	23 (14)	38 (151)	.03
More time should be devoted to additional clinical training	48 (29)	47 (186)	.82
Other	5 (3)	10 (39)	.23

**Table 1063. NEONATAL-PERINATAL: MIDCAREER: Do you believe that the amount of time devoted to scholarly activity/research should be the same for all fellows in your subspecialty, regardless of career path (i.e., those who pursue primarily a clinical vs. primarily a research career)? (N=1622)**

	<b>Neo-Per (N=168)</b>	<b>All Other SS (N=1454)</b>	
	<b>% (N)</b>	<b>% (N)</b>	<b>P-value</b>
Yes	46 (78)	43 (626)	.61
No, I believe that fellows planning to pursue primarily a <i>research career</i> should complete additional training in scholarly activity/research	29 (49)	29 (428)	
No, I believe that fellows planning to pursue primarily a <i>clinical career</i> should complete less training in scholarly activity/research	19 (31)	23 (328)	
Unsure	6 (10)	5 (72)	



Training future researchers <i>in my subspecialty</i> is an important component of fellowship training	1 (2)	1 (10)	4 (8)	5 (84)	40 (70)	42 (628)	55 (97)	52 (787)	.76
Training ALL subspecialists to be able to critically appraise new literature is an important component of fellowship training	1 (1)	0 (6)	0 (0)	1 (13)	25 (45)	24 (360)	74 (131)	75 (1137)	.61
Training ALL subspecialists to be competent educators/teachers is an important component of fellowship training	2 (4)	1 (13)	15 (26)	10 (145)	47 (84)	45 (688)	36 (63)	44 (669)	.02
Training ALL subspecialists in quality improvement activities is an important component of fellowship training	2 (4)	1 (18)	1 (2)	13 (188)	44 (77)	53 (808)	53 (92)	33 (499)	<.0001
Scholarly activity/research during fellowship should be tailored to the career goals and interests of individual fellows	3 (5)	1 (21)	13 (23)	10 (153)	37 (65)	37 (560)	47 (83)	52 (782)	.25
ALL fellows should complete a scholarly activity/research project as part of fellowship training	6 (11)	3 (52)	16 (29)	15 (219)	39 (69)	37 (564)	39 (68)	45 (676)	.16

<b>Table 1067. NEONATAL-PERINATAL: MIDCAREER: Do you believe that there is a need to increase or decrease the required <u>overall length</u> of fellowship training in <u>your subspecialty</u>? (N=1686)</b>			
	<b>Neo-Per</b>	<b>All Other SS</b>	
	<b>(N=174)</b>	<b>(N=1512)</b>	
	<b>% (N)</b>	<b>% (N)</b>	<b>P-value</b>
No, I believe that the required training duration, regardless of career path, should remain at three years	64 (111)	60 (918)	.62
Yes, I believe that the required training duration, regardless of career path, should be shortened to fewer than three years	6 (10)	6 (87)	
Yes, I believe that there should be two different tracks, a shorter duration track for <i>clinicians or clinician-educators</i> and a longer duration track for fellows who plan to pursue <i>academic research</i>	22 (39)	27 (405)	
Yes, I believe that the required training duration, regardless of career path, should be extended to more than three years	8 (14)	7 (102)	

<b>Table 1068. NEONATAL-PERINATAL: MIDCAREER: Do you believe that all pediatric subspecialty trainees (across all pediatric subspecialties) should have the same required <u>overall length</u> of fellowship training (currently 3 years)? (N=1687)</b>			
	<b>Neo-Per</b>	<b>All Other SS</b>	
	<b>(N=176)</b>	<b>(N=1511)</b>	

	<b>% (N)</b>	<b>% (N)</b>	<b>P-value</b>
No, I believe that it should be the decision of each subspecialty to determine the appropriate amount of overall required length of fellowship training	73 (129)	72 (1092)	.77
Yes, I believe that all subspecialty fellowship training should have the same required overall length	27 (47)	28 (419)	