

Neonatal-Perinatal – Recent Graduates

Table 784. NEONATAL-PERINATAL: RECENT GRADUATES: Do you currently provide direct or consultative pediatric subspecialty patient care? (N=1932)			
	Neo-Per	All Other SS	
	(N=175)	(N=1757)	
	% (N)	% (N)	P-value
Yes, the primary focus of my clinical practice is <i>subspecialty care</i>	96 (168)	90 (1578)	.05
Yes, my clinical practice is a relatively even mix of <i>primary and subspecialty care</i>	1 (2)	6 (100)	
No, the primary focus of my clinical practice is <i>primary care</i>	2 (3)	2 (39)	
No, I am not currently engaged in direct or consultative patient care	1 (2)	2 (40)	

Table 785. NEONATAL-PERINATAL: RECENT GRADUATES: Which of the following best describes your current clinical role? (N=1931)			
	Neo-Per	All Other SS	
	(N=174)	(N=1757)	
	% (N)	% (N)	P-value
I am working primarily as a clinician	53 (93)	32 (561)	<.0001
I am working primarily as a clinician-educator	32 (55)	50 (885)	
I am working primarily as a researcher with some clinical activity	14 (24)	16 (276)	
I am not clinically active at this time	1 (2)	2 (35)	

Table 786. NEONATAL-PERINATAL: RECENT GRADUATES: Are you currently engaged in medical research of any type? (N=1635)			
	Neo-Per	All Other SS	
	(N=151)	(N=1484)	
	% (N)	% (N)	P-value
Yes	43 (65)	62 (926)	<.0001
No	57 (86)	38 (558)	

Table 787. NEONATAL-PERINATAL: RECENT GRADUATES: Which of the following best describes your field of research? (N=1229)

	Neo-Per (N=85)	All Other SS (N=1144)	
	% (N)	% (N)	P-value
Basic research	23 (20)	14 (164)	.04
Health services research	7 (6)	7 (74)	
Clinical research, primarily industry-sponsored drug trials	4 (3)	8 (96)	
Clinical research, non-industry sponsored	58 (49)	66 (759)	
Educational research	8 (7)	5 (51)	

Table 788. NEONATAL-PERINATAL: RECENT GRADUATES: Which of the following best describes the ownership of your primary practice? (N=1921)

	Neo-Per (N=174)	All Other SS (N=1747)	
	% (N)	% (N)	P-value
Private practice (group or solo)	36 (62)	12 (209)	<.0001
University/Medical school	37 (65)	66 (1145)	
Community or non-university affiliated hospital	17 (29)	11 (195)	
Managed care organization	3 (5)	2 (38)	
Federal, state, or local government	5 (9)	5 (87)	
Other/Not applicable	2 (4)	4 (73)	

Table 789. NEONATAL-PERINATAL: RECENT GRADUATES: Do you currently hold an academic appointment? (N=1930)

	Neo-Per (N=175)	All Other SS (N=1755)	
	% (N)	% (N)	P-value
No	39 (68)	16 (288)	<.0001
Yes; full-time academic faculty	40 (70)	64 (1120)	
Yes; part-time academic faculty	8 (14)	8 (135)	
Yes; adjunct, volunteer, or courtesy faculty	13 (23)	12 (212)	

Table 790. NEONATAL-PERINATAL: RECENT GRADUATES: 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=1937)

	Neo-Per (N=175)	All Other SS (N=1762)	
	% (N)	% (N)	P-value
No, I believe that the amount of clinical training time should be increased	13 (22)	12 (207)	.18
No, I believe that the amount of clinical training time should be decreased	0 (1)	3 (52)	
Yes, I believe that the current amount of clinical training is appropriate	87 (152)	85 (1503)	

Table 791. NEONATAL-PERINATAL: RECENT GRADUATES: Why do you believe that the amount of clinical training time in your subspecialty should be increased? Please choose *all* that apply. (N=225)

	Neo-Per (N=22)	All Other SS (N=203)	
	% (N)	% (N)	P-value
Increase in types of procedures and/or complexity of patient care	59 (13)	53 (108)	.60
Duty hour restrictions and other changes during residency have reduced fellow's initial clinical competence	55 (12)	19 (38)	.0001
Duty hour restrictions during fellowship have reduced clinical training time	59 (13)	18 (36)	<.0001
Need for further development of clinical independence	55 (12)	75 (152)	.04
Additional supervisory experience is needed	23 (5)	22 (45)	.95
Additional time is needed for longitudinal case management	32 (7)	32 (65)	.98
Other	18 (4)	16 (32)	.77

Table 792. NEONATAL-PERINATAL: RECENT GRADUATES: 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=1899)

	Neo-Per (N=173)	All Other SS (N=1726)	
	% (N)	% (N)	P-value
Yes	77 (133)	77 (1326)	

No, I believe that fellows planning to pursue primarily a <i>clinical career</i> should complete additional clinical training	16 (27)	15 (259)	.94
No, I believe that fellows planning to pursue primarily a <i>research career</i> should complete less clinical training	7 (13)	8 (141)	

Table 793. NEONATAL-PERINATAL: RECENT GRADUATES: 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 during pediatric fellowship? (N=1930)

	Neo-Per (N=174)	All Other SS (N=1756)	
	% (N)	% (N)	P-value
Yes, I believe that the amount of time in scholarly activity should be increased	10 (18)	9 (159)	.89
Yes, I believe that the amount of time in scholarly activity should be decreased, but not eliminated	31 (53)	29 (518)	
Yes, I believe that the scholarly activity requirement should be	4 (7)	4 (63)	
No, I believe that the amount of time in scholarly activity is appropriate	55 (96)	58 (1016)	

Table 794. NEONATAL-PERINATAL: RECENT GRADUATES: Why do you believe that the amount of time devoted to scholarly activity should be increased? Please choose all that apply. (N=176)

	Neo-Per (N=18)	All Other SS (N=158)	
	% (N)	% (N)	P-value
Fellows need more training to be prepared for junior faculty research positions	72 (13)	82 (130)	.30
Duty hour restrictions have negatively impacted available time for scholarly activity	44 (8)	27 (43)	.13
Other	6 (1)	17 (27)	.21

Table 795. NEONATAL-PERINATAL: RECENT GRADUATES: Why do you believe that the amount of time devoted to scholarly activity during fellowship should be decreased or eliminated? Please choose all that apply. (N=639)

	Neo-Per (N=60)	All Other SS (N=579)	
	% (N)	% (N)	P-value
Scholarly activity requirements discourage pediatric residents from pursuing fellowship training	25 (15)	31 (177)	.37
Fellows who plan to pursue primarily clinical careers do not need the current amount of scholarly activity during training	78 (47)	77 (445)	.80

It would allow us to shorten fellowship training, making our subspecialty more attractive to potential fellows	30 (18)	43 (250)	.05
More time should be devoted to additional clinical training	48 (29)	44 (254)	.51
Other	13 (8)	9 (53)	.29

Table 796. NEONATAL-PERINATAL: RECENT GRADUATES: Do you believe that the amount of scholarly activity 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=1690)

	Neo-Per (N=149)	All Other SS (N=1541)	
	% (N)	% (N)	P-value
Yes	47 (70)	46 (712)	.94
No, I believe that fellows planning to pursue primarily a <i>research career</i> should have additional training in scholarly activity	29 (43)	28 (436)	
No, I believe that fellows planning to pursue primarily a <i>clinical career</i> should have less training in scholarly activity	24 (36)	26 (393)	

Table 797. NEONATAL-PERINATAL: RECENT GRADUATES: *Thinking about your current career path, please indicate the value of the following scholarly activity experiences.* (N=1925)

	Very valuable		Somewhat valuable		Of little value		Not of value		P-value
	Neo-Peri (N=172) % (N)	All Other SS (N=1753) % (N)							
Completing a scholarly project	54 (93)	60 (1050)	36 (62)	31 (540)	9 (15)	7 (129)	1 (2)	2 (34)	.37
Preparation of a written work product	48 (82)	57 (992)	36 (62)	33 (570)	14 (23)	8 (147)	2 (4)	2 (42)	.06
Core curriculum	65 (112)	58 (1008)	29 (50)	32 (550)	6 (10)	8 (148)	0 (0)	2 (27)	.13
Scholarship Oversight Committee (SOC)	31 (53)	29 (488)	39 (67)	42 (727)	24 (40)	23 (394)	6 (10)	6 (106)	.86
Completing a degree (if applicable)	47 (44)	44 (450)	41 (39)	34 (347)	8 (7)	14 (140)	4 (4)	8 (85)	.12

Table 798. NEONATAL-PERINATAL: RECENT GRADUATES: Did your scholarly activity during fellowship training influence your choice of career path after fellowship? (N=1925)

	Neo-Per (N=175)	All Other SS (N=1750)	

Training future researchers in my subspecialty is an important component of fellowship training	2 (3)	2 (29)	4 (8)	4 (79)	43 (75)	41 (717)	51 (89)	53 (935)	.95
Training ALL subspecialists to be able to critically appraise new literature is an important component of fellowship training	3 (5)	1 (18)	0 (1)	1 (11)	18 (31)	22 (387)	79 (138)	76 (1343)	.11
Training ALL subspecialists to be competent educators/teachers is an important component of fellowship training	3 (6)	1 (20)	11 (19)	6 (104)	38 (67)	39 (678)	48 (83)	54 (954)	.003
Training ALL subspecialists in quality improvement activities is an important component of fellowship training.	3 (5)	2 (38)	4 (7)	12 (217)	44 (78)	53 (933)	49 (85)	33 (570)	<.0001
Scholarly activity during fellowship should be tailored to the career goals and interests of individual fellows	3 (5)	2 (28)	6 (11)	7 (120)	35 (61)	32 (570)	56 (98)	59 (1040)	.55
ALL fellows should complete a scholarly activity project as part of fellowship training	4 (7)	4 (68)	13 (23)	13 (226)	43 (76)	39 (693)	40 (69)	44 (766)	.73

Table 801. NEONATAL-PERINATAL: RECENT GRADUATES: Do you believe that there is a need to increase or decrease the required overall length of fellowship training *in your subspecialty*? (N=1925)

	Neo-Per (N=174)	All Other SS (N=1751)	
	% (N)	% (N)	P-value
No, I believe that the required training duration, regardless of career path, should remain at three years	63 (109)	59 (1029)	.008
Yes, I believe that the required training duration, regardless of career path, should be shortened to fewer than three years	2 (4)	7 (122)	
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>	28 (49)	31 (543)	
Yes, I believe that the required training duration, regardless of career path, should be extended to more than three years	7 (12)	3 (57)	

Table 802. NEONATAL-PERINATAL: RECENT GRADUATES: Do you believe that all pediatric subspecialty trainees (across all pediatric subspecialties) should have the same required overall length of fellowship training (currently 3 years)? (N=1930)

	Neo-Per (N=175)	All Other SS (N=1755)	
	% (N)	% (N)	P-value
No, I believe that it should be the decision of each subspecialty to determine the appropriate amount of overall required length of fellowship training	80 (140)	76 (1341)	.28
Yes, I believe that all subspecialty fellowship training should have the same required overall length	20 (35)	24 (414)	