

## Pulmonology – Program Directors

<b>Table 253. PULMONOLOGY: PROGRAM DIRECTORS: How long have you been a director of a pediatric fellowship program? (N=579)</b>			
	<b>Pulm (N=42)</b>	<b>All Other SS (N=537)</b>	
	<b>% (N)</b>	<b>% (N)</b>	<b>P-value</b>
≤ 5 years	48 (20)	50 (269)	.76
> 5 years	52 (22)	50 (268)	

<b>Table 254. PULMONOLOGY: PROGRAM DIRECTORS: What do you believe is the minimum length of training time for establishing clinical competence in your subspecialty during pediatric fellowship training? (N=579)</b>		
	<b>Pulm (N=42)</b>	<b>All Other SS (N=537)</b>
	<b>Mode (Range)</b>	<b>Mode (Range)</b>
Minimum time in months	12 (12-36)	24 (1-48)

<b>Table 255. PULMONOLOGY: PROGRAM DIRECTORS: Do you believe that the <u>clinical training time</u> should be the same for all fellows <u>in your subspecialty</u>, regardless of career path (i.e., those who pursue primarily a clinical vs. primarily a research career)? (N=586)</b>			
	<b>Pulm (N=42)</b>	<b>All Other SS (N=544)</b>	
	<b>% (N)</b>	<b>% (N)</b>	<b>P-value</b>
Yes	74 (31)	65 (351)	.22
No	26 (11)	35 (193)	
	<b>Mode (Range)</b>	<b>Mode (Range)</b>	
Ideal <i>clinical training time</i> for fellows who will be <i>primarily clinicians</i>	24 (12-24)	24 (2-48)	-
Ideal <i>clinical training time</i> for fellows who will be <i>primarily clinician educators</i>	18 (18-36)	24 (3-48)	-
Ideal <i>clinical training time</i> for fellows who will be <i>primarily researchers</i>	12 (12-48)	12 (3-60)	-

<b>Table 256. PULMONOLOGY: PROGRAM DIRECTORS: The RRC currently expects at least 12 months of clinical experience. Do you believe that there is a need to change the expected amount of <u>clinical training time in your subspecialty</u>? (N=583)</b>			
	<b>Pulm (N=42)</b>	<b>All Other SS (N=541)</b>	

	% (N)	% (N)	P-value
Yes, I believe that the expected amount of clinical training time should be <b>increased</b>	40 (17)	49 (263)	.41
Yes, I believe that the expected amount of clinical training time should be <b>decreased</b>	0 (0)	1 (7)	
No, I believe that the expected amount of clinical training is appropriate	60 (25)	50 (271)	

**Table 257. PULMONOLOGY: PROGRAM DIRECTORS: Why do you believe that the expected amount of clinical training time in your subspecialty should be increased? Please choose all that apply. (N=279)**

	Pulm (N=17)	All Other SS (N=262)	
	% (N)	% (N)	P-value
Increase in types of procedures and/or complexity of patient care	88 (15)	63 (164)	.03
Duty hour restrictions and other changes during residency have reduced fellow's initial clinical competence	47 (8)	50 (131)	.81
Duty hour restrictions during fellowship have reduced fellow's clinical competence	24 (4)	32 (83)	.48
Need for further development of clinical independence	71 (12)	64 (167)	.57
Additional supervisory experience is needed	29 (5)	27 (70)	.81
Additional time is needed for longitudinal case management	24 (4)	29 (77)	.61
Other	12 (2)	5 (13)	.23

**Table 258. PULMONOLOGY: PROGRAM DIRECTORS: Why do you believe that the expected amount of clinical training time in your subspecialty should be decreased? Please choose all that apply. (N=7)**

	Pulm (N=0)	All Other SS (N=7)	
	% (N)	% (N)	P-value
Takes less time than what is currently required to establish clinical competence	0 (0)	29 (2)	-
Fellows should be spending more time in research	0 (0)	100 (7)	-
It would increase applicants to fellowship in my subspecialty	0 (0)	0 (0)	-
Other	0 (0)	0 (0)	-

<b>Table 259. PULMONOLOGY: PROGRAM DIRECTORS: As a program director, I am comfortable assessing the clinical competence of fellows in my program to practice without direct supervision at the end of training. (N=580)</b>					
<i>Please indicate the extent to which you agree or disagree with the following statement related to assessing clinical competence during fellowship training.</i>	<b>Strongly Disagree</b>	<b>Disagree</b>	<b>Agree</b>	<b>Strongly Agree</b>	
	<b>% (N)</b>	<b>% (N)</b>	<b>% (N)</b>	<b>% (N)</b>	<b>P-value</b>
<b>Pulmonology (N=41)</b>	2 (1)	2 (1)	41 (17)	54 (22)	.80
<b>All Other SS (N=539)</b>	3 (19)	6 (30)	42 (227)	49 (263)	

<b>Table 260. PULMONOLOGY: PROGRAM DIRECTORS: Please indicate the extent to which you agree or disagree with the following statement related to assessing clinical competence during fellowship training. (N=586)</b>									
	<b>Strongly Disagree</b>		<b>Disagree</b>		<b>Agree</b>		<b>Strongly Agree</b>		
	<b>Pulm</b>	<b>All Other SS</b>	<b>Pulm</b>	<b>All Other SS</b>	<b>Pulm</b>	<b>All Other SS</b>	<b>Pulm</b>	<b>All Other SS</b>	
	<b>(N=42)</b>	<b>(N=544)</b>	<b>(N=42)</b>	<b>(N=544)</b>	<b>(N=42)</b>	<b>(N=544)</b>	<b>(N=42)</b>	<b>(N=544)</b>	
	<b>% (N)</b>	<b>% (N)</b>	<b>% (N)</b>	<b>% (N)</b>	<b>% (N)</b>	<b>% (N)</b>	<b>% (N)</b>	<b>% (N)</b>	<b>P-value</b>
Training future researchers in my subspecialty is an important component of fellowship training	0 (0)	1 (3)	0 (0)	2 (10)	31 (13)	39 (213)	69 (29)	58 (318)	.49
Training ALL subspecialists to be able to critically appraise new literature is an important component of fellowship training	0 (0)	0 (1)	0 (0)	1 (3)	17 (7)	13 (70)	83 (35)	86 (470)	.85
Training ALL subspecialists to be competent educators/teachers is an important component of fellowship training	0 (0)	0 (2)	5 (2)	5 (25)	40 (17)	43 (231)	55 (23)	52 (285)	.97
Training ALL subspecialists in quality improvement activities is an important component of fellowship training	2 (1)	2 (11)	10 (4)	10 (55)	62 (26)	55 (298)	26 (11)	33 (179)	.82
Scholarly activity during fellowship should be tailored to the career goals and interests of the individual fellows	0 (0)	1 (5)	7 (3)	4 (23)	21 (9)	26 (143)	72 (30)	69 (373)	.67
ALL fellows in my subspecialty should complete a scholarly activity project as part of fellowship training	0 (0)	1 (7)	5 (2)	8 (40)	24 (10)	29 (159)	71 (30)	62 (338)	.61
Scholarly activity requirements should be more broadly defined	5 (2)	3 (16)	41 (17)	31 (166)	33 (14)	40 (217)	21 (9)	26 (143)	.49
Scholarship Oversight Committees gave programs a greater ability to tailor scholarly activity to each fellow's individual needs than in the	2 (1)	5 (25)	24 (10)	25 (133)	54 (22)	50 (269)	20 (8)	20 (110)	.91

past									
Advanced clinical training, such as cardiac electrophysiology and transplant hepatology, should be offered AS PART OF the current three year training program WITH DIMINISHED scholarly activity requirements	27 (11)	20 (104)	49 (20)	53 (266)	22 (9)	22 (110)	2 (1)	5 (24)	.74
The core curriculum as currently required is a valuable part of fellowship training	5 (2)	2 (11)	21 (9)	14 (75)	64 (27)	63 (341)	10 (4)	21 (114)	.14

**Table 261. PULMONOLOGY: PROGRAM DIRECTORS: What do you believe is the minimum length of training time needed in scholarly activity in your subspecialty during pediatric fellowship training? (N=577)**

	Pulm (N=42)	All Other SS (N=535)
	Mode (Range)	Mode (Range)
Minimum time in months	12 (3-36)	12 (0-40)

**Table 262. PULMONOLOGY: PROGRAM DIRECTORS: 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=584)**

	Pulm (N=42)	All Other SS (N=542)	
	% (N)	% (N)	P-value
Yes	55 (23)	41 (223)	.09
No	45 (19)	59 (319)	
	Mode (Range)	Mode (Range)	
Ideal amount of scholarly activity for fellows who will be <i>primarily clinicians</i>	12 (0-18)	12 (0-36)	-
Ideal amount of scholarly activity for fellows who will be <i>primarily clinician educators</i>	18 (6-24)	12 (0-36)	
Ideal amount of scholarly activity for fellows who will be <i>primarily researchers</i>	24 (8-36)	24 (6-48)	

**Table 263. PULMONOLOGY: PROGRAM DIRECTORS: The RRC recommends that programs provide fellows with approximately 12 months for scholarly activity. Do you believe that there is a need to change the recommended amount of scholarly activity time in your subspecialty? (N=582)**

	Pulm (N=42)	All Other SS (N=540)
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	% (N)	% (N)	P-value
Yes, I believe that the expected amount of time in scholarly activity should be <i>increased</i>	45 (19)	29 (156)	.09
Yes, I believe that the expected amount of time in scholarly activity should be <i>decreased, but not eliminated</i>	7 (3)	17 (93)	
Yes, I believe that the expected scholarly activity requirement should be <i>eliminated</i>	3 (1)	1 (7)	
No, I believe that the current expected amount of time in scholarly activity is appropriate	45 (19)	53 (284)	

**Table 264. PULMONOLOGY: PROGRAM DIRECTORS: Why do you believe that the expected amount of time devoted to scholarly activity should be increased? Please choose all that apply. (N=173)**

	Pulm (N=19)	All Other SS (N=154)	
	% (N)	% (N)	P-value
Fellows are not adequately prepared to begin junior faculty research positions under current model	89 (17)	87 (134)	.76
Duty hour restrictions have adversely limited fellow's research time	26 (5)	34 (52)	.51
Other	5 (1)	14 (22)	.27

**Table 265. PULMONOLOGY: PROGRAM DIRECTORS: Why do you believe that the expected amount of time devoted to scholarly activity during fellowship should be decreased or eliminated? Please choose all that apply. (N=104)**

	Pulm (N=4)	All Other SS (N=100)	
	% (N)	% (N)	P-value
Scholarly activity requirements discourage pediatric residents from pursuing fellowship training	50 (2)	29 (29)	.37
Fellows who plan to pursue primarily clinical careers do not need the current amount of scholarly activity during training	100 (4)	87 (87)	.44
It would allow us to shorten fellowship training, making our subspecialty more attractive to potential fellows	100 (4)	40 (40)	.02
It would allow more time to be devoted to additional clinical training	25 (1)	67 (67)	.08
Other	50 (2)	7 (7)	.003

<b>Table 266. PULMONOLOGY: PROGRAM DIRECTORS: Which of the following activities do you believe fall within the scope of what is, or should be, acceptable to meet scholarly activity requirements during fellowship? Please choose all that apply. (N=586)</b>			
	<b>Pulm (N=42)</b>	<b>All Other SS (N=544)</b>	
	<b>% (N)</b>	<b>% (N)</b>	<b>P-value</b>
Bench or clinical research	100 (42)	99 (538)	.49
Health services research	88 (37)	91 (497)	.47
Quality improvement activities or clinical care guideline development	71 (30)	75 (407)	.63
Education-based activities (e.g., Developing an educational module on CD-ROM)	62 (26)	62 (340)	.94
Master of Public Health or Master of Education	74 (31)	83 (454)	.11
Master of Business Administration or other business/financial training	31 (13)	39 (211)	.31
Other	7 (3)	9 (49)	.68

<b>Table 267. PULMONOLOGY: PROGRAM DIRECTORS: Does your fellowship program have a core scholarly activity or research curriculum for fellows? (N=586)</b>			
	<b>Pulm (N=42)</b>	<b>All Other SS (N=544)</b>	
	<b>% (N)</b>	<b>% (N)</b>	<b>P-value</b>
Yes	74 (31)	86 (469)	.03
<i>Average hours fellow spends in core curriculum over the course of training</i>	90	83	-

<b>Table 268. PULMONOLOGY: PROGRAM DIRECTORS: Please indicate which years in training a fellow participates in the core curriculum. Please choose all that apply. (N=494)</b>			
	<b>Pulm (N=30)</b>	<b>All Other SS (N=464)</b>	
	<b>% (N)</b>	<b>% (N)</b>	<b>P-value</b>
Year one	90 (27)	90 (419)	.96
Year two	87 (26)	84 (390)	.70
Year three	80 (24)	76 (354)	.64

<b>Table 269. PULMONOLOGY: PROGRAM DIRECTORS: Is the core curriculum strictly didactic? (N=490)</b>			
	<b>Pulm (N=30)</b>	<b>All Other SS (N=460)</b>	

	% (N)	% (N)	P-value
Yes	53 (16)	47 (216)	.50

**Table 270. PULMONOLOGY: PROGRAM DIRECTORS: Do fellows from all subspecialties in your pediatrics department participate in the same core curriculum together? (N=493)**

	Pulm (N=30)	All Other SS (N=463)	
	% (N)	% (N)	P-value
Yes	67 (20)	68 (314)	.90

**Table 271. PULMONOLOGY: PROGRAM DIRECTORS: Please indicate if any of the following components are an expected part of your fellowship program core curriculum. Please choose all that apply. (N=583)**

	Pulm (N=42)	All Other SS (N=541)	
	% (N)	% (N)	P-value
Biostatistics	93 (39)	95 (512)	.63
Epidemiology	55 (23)	74 (400)	.007
Quality improvement modules	76 (32)	75 (407)	.90
Journal club	86 (36)	80 (435)	.40
Master of Public Health or Master of Education	7 (3)	7 (37)	.94
Master of Business Administration or other business/financial training	2 (1)	1 (4)	.27
Grant or proposal writing course/training	71 (30)	66 (357)	.47
Training in other aspects of research: Institutional Review Board, developing research protocols, etc.	71 (30)	85 (460)	.02
Adult learning, teaching, and curriculum development	50 (21)	49 (265)	.90
Other	7 (3)	11 (61)	.41

**Table 272. PULMONOLOGY: PROGRAM DIRECTORS: Do you believe that there is a need to increase or decrease the required overall length of fellowship training in your subspecialty? (N=583)**

	Pulm (N=42)	All Other SS (N=541)	
	% (N)	% (N)	P-value

No, I believe that the required training duration, regardless of career path, should remain at three years	69 (29)	58 (312)	.49
Yes, I believe that the required training duration, regardless of career path, should be shortened to fewer than three years	2 (1)	2 (9)	
Yes, I believe that there should be two different tracks, a shorter duration track for clinicians or clinician-educators and a longer duration track for fellows who plan to pursue academic research	24 (10)	34 (184)	
Yes, I believe that the required training duration, regardless of career path, should be extended to more than three years	5 (2)	6 (36)	

<b>Table 273. PULMONOLOGY: PROGRAM DIRECTORS: 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=583)</b>			
	<b>Pulm (N=42)</b>	<b>All Other SS (N=541)</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	74 (31)	77 (418)	.61
Yes, I believe that all subspecialty fellowship training should have the same required overall length	26 (11)	23 (123)	