

American Academy of Neurology Position Statement Fellowship Application Timing February 2020

BACKGROUND INFORMATION

The American Academy of Neurology (AAN) is an association of more than 36,000 neurologists and neuroscience professionals dedicated to providing the best possible care for patients with neurologic conditions including migraine, chronic pain disorders, Alzheimer's disease, Parkinson's disease, stroke, epilepsy, ALS, multiple sclerosis, and traumatic brain injury.

DESCRIPTION OF THE ISSUE

The fellowship application cycle varies significantly among subspecialties, with some beginning their application cycle as early as September of the PGY-3 year. Often, residents are offered a fellowship position well over one year before they complete their residency training.

Obligating residents to apply for fellowship in the first half of the PGY-3 year does not provide adequate time to make informed career decisions. In many neurology programs, residents do not have significant exposure to ambulatory specialties until the PGY-3 and PGY-4 years.

THE AAN POSITION

The AAN encourages all neurology fellowship programs participate in a unified determination date in the early 4th post graduate year (PGY-4) of the training period for Adult Neurology residents and the early PGY-5 year for Child Neurology and Neurodevelopmental Disabilities residents. Fellowship programs would begin the application process no earlier than March 1 of PGY-3 Adult/PGY-4 Child and NDD year, and a first offer date no earlier than August 1 of PGY-4 Adult/ PGY-5 Child and NDD year.

The AAN encourages Program Directors and Department Chairs to support this position and process by enforcing the timeline by prohibiting interview leave and preventing the release of letters of recommendation before the application cycle.

RATIONALE

In the 2017 AAN Graduating Resident Survey, 45.6% residents felt that they did not have enough outpatient exposure to make an informed decision about fellowship. [1] Moving the fellowship application process to a later date would also give residents more time to participate in subspecialty-specific research and develop relationships with faculty who will write letters of recommendation. Postponing the application cycle will likely reduce the risk of residents changing their minds after accepting a fellowship position.

This proposed change has widespread support from residents and residency program directors. Of the surveyed graduating residents, 88% felt that the fellowship application cycle should start no sooner than the second half of PGY-3 year [1]. Data from the 2017 AAN Adult Neurology Program Director Survey demonstrate that 78% of the 106 participating directors believe the fellowship application process starts too early, with many making comments that a start date in the late PGY3 or early PGY4 year would be better. [2]



There is a precedent for standardizing a later application cycle in other medical specialties. In 2011, Internal Medicine fellowships established a standardized timeline, with applications opening in July of the final year of training, and a match occurring in December of the same year. Internal medicine program directors reported that this timeline benefits fellowship applicants, fellowship programs, and residency programs, with fellowship applicants benefiting the most.[3]

This new timeline would also work well for international medical graduate (IMG) trainees on J-1 visas, who need to know if they have a fellowship position by October 1, the deadline to submit a J-1 waiver application. In internal medicine, the December match has led some IMG trainees on J-1 visas to sign a contract for a waiver position when they would have otherwise chosen fellowship training.[4]

Another advantage of this proposed timeline is that most fellowship interviews will be done by the end of PGY-3, freeing up senior residents to participate in teaching and supervision during the transitional summer months. Additionally, having a more uniform application/interview cycle would provide consistency around which program directors and coordinators could structure their clinical rotations. Finally, an application cycle in the Spring and early Summer, would ensure that program faculty and coordinators who are involved in both residency and fellowship recruitment would not have to review applications and conduct interviews with fellows and residents at the same time of year.

Programs that recruit fellows from both neurology/child neurology and other disciplines may need to consider the other specialty's application cycle in determining whether this timeline is feasible.

REFERENCES:

- 1. Mahajan A, Cahill C, Scharf E, et al. Neurology residency training in 2017: a survey of preparation, perspectives and plans. Neurology Epub 2018 Dec 5.
- 2. London ZN, Khan J, Cahill C, Schuyler E, Wold J, Southerland AM. 2017 Program Director Survey: Feedback from your adult neurology residency leadership. Neurology Epub 2018 Sep
- 3. Angus, S., et al., The new internal medicine fellowship match timeline: a change in the right direction. Am J Med, 2014. 127(11): p. 1132-6.
- 4. Goyal, H., et al., Changes in Internal Medicine Fellowship Timeline Are Not Favorable for Applicants on J1 Visa. Am J Med, 2015. 128(11): p. e41-2.

POSITION STATEMENT HISTORY

Drafted by Zachary London, MD, FAAN; Erica Schuyler, MD; Jaffar Khan, MD, FAAN; Abhimanyu Mahajan, MD; Lucy Persaud Samaroo (AAN Staff).

THE FOLLOWING ORGANIZATIONS HAVE SIGNED ON TO THIS POSITION STATEMENT:

- 1. American Headache Society
- 2. American Heart Association/ American Stroke Association
- 3. American Neurological Association
- 4. Association of University Professors of Neurology
- 5. AAN Consortium of Neurology Program Directors
- 6. National Multiple Sclerosis Society
- 7. Neurocritical Care Society
- 8. United Council for Neurologic Subspecialties

CONTACT

Lucy Persaud Samaroo, Senior Manager Graduate Education, at lpersaud@aan.com with any questions or to sign on to this statement.