

A CAREER IN PEDIATRIC ORTHOPAEDIC SURGERY

BOTH CHALLENGING AND REWARDING

During their careers, pediatric orthopaedic surgeons experience great professional and personal satisfaction derived from positively impacting the lives of their patients. As a master craftsman, the pediatric orthopaedic surgeon corrects many different musculoskeletal deformities by a variety of treatment methods. More often than not, the outcome of the pediatric orthopaedic surgeon's interventions affects a lifetime of improvement in the quality of function for the patient. Unlike the care of skeletally mature patients, the growing skeleton affords unique solutions and problems for the pediatric orthopaedic surgeon. Because of the youth of our patients, pediatric orthopaedic care necessitates long-term follow-up and with time mutually satisfying, long-term relationships develop between surgeon and family. Pediatric orthopaedic surgery is satisfying work and pediatric orthopaedic surgeons typically become very committed to their work and patients.

VARIETY/LOGISTICS OF PRACTICE

The broad scope of practice of a pediatric orthopedic surgeon includes treating musculoskeletal deformities/pathologies, secondary to a variety of etiologies, across a wide age range (infants, children and adolescents/young adults). Pediatric orthopaedics provides unique challenges on a daily basis. In the typical practice of a pediatric orthopaedic surgeon, a wide range of treatment options are available, and often utilized, including manipulation, casting, bracing, as well as surgery. Pediatric orthopaedic surgeons provide definitive comprehensive care in skeletally-immature and skeletally-mature patients. It is the only chronologically-based orthopaedic subspecialty and pediatric orthopaedic surgeons are truly renaissance orthopaedic surgeons who operate on many different areas of the body. The variety of patient disorders and the ongoing

evolution of treatment techniques provide an opportunity for potential mastery in dealing with many challenging musculoskeletal pathologies. There has been remarkable evolution/refinement in surgical technique in all areas of pediatric orthopaedic surgery. For many, specialization within pediatric orthopaedic surgery has occurred over the course of their careers. Current possibilities for sub-specialization in pediatric orthopaedic surgery includes spine, upper extremity, lower extremity, foot, neuromuscular, sports, joint preservation and surgical oncology, to name a few.

PRACTICE SETTINGS/OPPORTUNITIES

Both the clinical setting and practice profile of the pediatric orthopaedic surgeon in North America is quite variable. Many practice as part of a group of orthopaedic surgical subspecialists either in private practice or within an Orthopaedic Department of a university. Others practice in groups of pediatric orthopaedic surgeons, possibly in private practice, or as part of an Orthopaedic Department or perhaps as a full-time employee at a system of hospitals (unique to pediatric orthopaedic surgery). Many pediatric orthopaedic surgeons select solo practice in either large or small communities. Regardless of practice type, pediatric orthopaedic surgeons are often closely associated with a children's hospital. The children's hospital professional staff both encourages and enables caregivers to provide not only state of the art, but often new and innovative multi-disciplinary treatments for many of the numerous pediatric musculoskeletal pathologies. Many of the possible practice settings for the pediatric orthopedic surgeon provide an appropriate setting for teaching, clinical and/or basic science research.

There is no subspecialty certification process for pediatric orthopaedic surgery, although most practicing pediatric orthopaedic surgeons have completed at least one year of fellowship training. Accreditation of fellowships is voluntary and, if accredited, is supervised by the Accreditation Council for Graduate Medical Education(ACGME). The pediatric orthopaedic surgical fellowship match process includes an application, interview and match selection process which occurs between September and April of each year. Potential candidates must be in at least their PGY4 year of orthopaedic

training. In the past there have been many more pediatric orthopaedic fellowship positions than applicants to fill them. However, during the match process of 2008 (for applicants starting fellowship in 2010) there were a record number of residents (48) being placed into pediatric orthopaedic fellowships. Beginning in the fall of 2009 (for the 2011 fellowship positions) there will be a formal match process operated by the San Francisco Match Program (SFMP). On September 1st orthopaedic surgery residents may access the SFMP website and download the universal pediatric orthopaedic surgery fellowship application. Ideally, the application should be returned to SFMP by October 1st to permit optimal scheduling of interviews, though applications can be turned in up to December 31st. Interviews will be held between January 10th and March 31st. The match lists from applicants and fellowships are due to the SFMP by April 15th. On the match day (April 22nd) the SFMP notifies the fellowship programs who has matched at their program and it is the program's responsibility to contact their newly-assigned fellow. Applicants will not be contacted by the SFMP on or after match day. Any applicant not matching may contact the main office at POSNA to obtain a list of fellowship programs which have unfilled positions. Both applicants and fellowship programs are committed to the rules and outcomes of the match process. Violations of the match process (such as accepting a position outside of the match from a program inside the match) will be heard by a grievance committee and sanctions may be levied against the fellowship program and/or the applicant.

During the interview process for fellowships in pediatric orthopaedic surgery and upon completing your fellowship, you will find that orthopaedic surgeons are in great demand throughout North America. Many practice opportunities will be available to you in all of the above described practice settings.

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