Author's response to reviews

**Title:** Resident Interest and Factors Involved in Entering a Pediatric Pulmonary Fellowship

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Response to Reviewers
Re: Resident Interest and Factors Involved in Entering a Pediatric Pulmonary Fellowship
Manuscript # 2152785443063909
Author: William M. Gershan, MD

Reviewer #1
General: The author agrees that this study is limited in that it involves only 1 center and the absolute number of residents involved in the study is not large. These points are addressed in the Discussion, page 11.

The study was repeated in 2002 as suggested by the reviewer. This was clarified in the manuscript.

The second resident from 1992 was in the +PF group and was included in the survey. However, this resident did not anticipate becoming a pulmonologist at the time of the survey.

The author did address why 11-19% of the residents considered doing a pulmonary fellowship fellowship but so few actually did (see Discussion, page 9, paragraph 1). All 1992 residents were accounted for to determine actual career decisions except the one that was mentioned on p. 8 of Results. Many of the 2002 responders are still in their residency and consequently it is not yet possible to determine their career decisions. The only resident who immediately entered a pulmonary fellowship after residency training completed that fellowship at another institution. The other resident who began a critical care fellowship at another institution completed a pulmonary fellowship at this institution in 1997. All graduating residents have the opportunity to go elsewhere for further training. These points were clarified in the manuscript.

Since the study was done anonymously (see Methods, page 4), I do not believe that residents indicated an interest in a pulmonary fellowship simply because the pulmonary fellowship director conducted the survey or because they were given a free meal ticket. Again, there was no pulmonary fellowship at this institution in 1992, when the survey was initially distributed.

The possibility of other confounding variables is certainly valid and is discussed in Discussion, page 11.

Reviewer #2
Discretionary revisions: The author suspects that the early "generic interest" in pursing a fellowship may be related to the interest of interns to stay in academic medicine, though this is somewhat speculative. The correlation suggested by the reviewer could not be done because -PF residents were not specifically asked to rank their interest to remain in academic pediatrics. I am not aware of any experiences within the institution or residency program that would actively discourage residents from considering a pulmonary fellowship during their 2nd or 3rd years of training.
The author agrees that certain choices in the survey questionnaire may be limiting. This potential bias is discussed in Discussion, page 11, paragraph 1.

Reviewer #3
Major revisions:
1) The Methods section was revised as suggested and as outlined below:
   a) The survey was distributed twice (one month apart) during each period.
   b) The survey was placed in the hospital mailbox of each resident.
   c) Human Subjects approval was not obtained. Although consent was not specifically obtained either, all residents were consenting adults and were not coerced in any way to complete the anonymous survey.
   d) All data was collected anonymously.
   e) The Student's t-test was used to compare categorical variables in 2 independent samples while the Fisher's exact test was used to compare 2 nominal variables. This was clarified in the manuscript.
   f) Definitions of +PF and -PF were included in the Methods section.

2) The author chose to include the number of all residents in 1992 who completed fellowship training because that information was obtainable and gave the reader more insight into what this group did after residency training. This was not possible with the 2002 group because many of these residents are still in residency training. I did include the numbers from those 2002 residents who are now graduating and starting a fellowship program in 2004.

3) Post-hoc calculations were done as suggested and the study is underpowered to detect a significant difference in the residents' initial interest in a pulmonary fellowship. This discussion was included in the limitations section of the Discussion (see page 11).

4) Consultation with a biostatistician was done. Although factor analysis might be interesting, we believe that it would not significantly add to the interpretation of the data. In addition, we believed that many of the factors analyzed were individual associations and would not easily lend themselves to factor analysis.

Minor revisions:
1) I do not have a reference for this statement, which was, therefore, altered to reflect a personal observation rather than a fact.

2) The reviewer's comments were incorporated into the manuscript and the Cull reference was added.

Discretionary revisions:
PPV and NPV can not be calculated because the surveys were done anonymously.

Reviewer #4
This discussion point regarding role models and mentorship relating to a resident's interest in a fellowship was added to the manuscript in the Discussion section, page 11.

Other Comments
As noted above, Human Subjects approval was not obtained. Although consent was not specifically obtained either, all residents were consenting adults and were not coerced in any way to complete the anonymous survey. In addition, the residency program keeps information on file that lists the current employment for each resident. This information was collated for each survey time period for the author, and consequently, individual confidentiality was maintained.