The challenge to meaningful research in medical education is the need for large sample sizes, so that innovative approaches can be adequately assessed.

Trainees also need to be evaluated in different educational settings to understand what functions well in which environment and why or why not.

Data obtained from studies of resident education may not be applicable to fellows since faculty have more longitudinal experiences with fellows.

There is a need to develop a medical education research network to improve the education and assessment of pediatric subspecialty trainees.

The objective was to create a pediatric subspecialty medical education research network that could be used to establish best practices in the education and assessment of pediatric fellows.

Methods

• The Subspecialty Pediatrics Investigator Network (SPIN) was conceived as a collaborative effort of CoPS, APPD LEARN, the ABP and the APPD Fellowship Committee.

• Goal was to take advantage of the expertise of each group.

• Each subspecialty identified up to two representatives—each individual, along with the organizational leaders, comprised the SPIN Steering Committee.

Table 1. Summary of Participation in the EPA Study

<table>
<thead>
<tr>
<th>Subspecialty Participation</th>
<th>Fall 2014</th>
<th>Spring 2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adolescent Medicine</td>
<td>10 (36%)</td>
<td>11 (39%)</td>
</tr>
<tr>
<td>Cardiology</td>
<td>14 (25%)</td>
<td>12 (21%)</td>
</tr>
<tr>
<td>Child Abuse</td>
<td>10 (40%)</td>
<td>10 (40%)</td>
</tr>
<tr>
<td>Critical Care</td>
<td>24 (38%)</td>
<td>21 (33%)</td>
</tr>
<tr>
<td>Developmental &amp; Behavioral</td>
<td>17 (46%)</td>
<td>18 (49%)</td>
</tr>
<tr>
<td>Emergency Medicine</td>
<td>19 (26%)</td>
<td>19 (26%)</td>
</tr>
<tr>
<td>Endocrinology</td>
<td>12 (18%)</td>
<td>14 (21%)</td>
</tr>
<tr>
<td>Gastroenterology</td>
<td>11 (19%)</td>
<td>10 (18%)</td>
</tr>
<tr>
<td>Hematology-Oncology</td>
<td>14 (20%)</td>
<td>13 (19%)</td>
</tr>
<tr>
<td>Infectious Diseases</td>
<td>14 (23%)</td>
<td>16 (26%)</td>
</tr>
<tr>
<td>Neonatology</td>
<td>33 (34%)</td>
<td>35 (36%)</td>
</tr>
<tr>
<td>Nephrology</td>
<td>7 (16%)</td>
<td>6 (13%)</td>
</tr>
<tr>
<td>Pulmonary</td>
<td>12 (23%)</td>
<td>13 (25%)</td>
</tr>
<tr>
<td>Rheumatology</td>
<td>11 (32%)</td>
<td>11 (32%)</td>
</tr>
</tbody>
</table>

*all 14 pediatric subspecialties with ABP certification contributed data

Materials & Methods

Specific roles were defined for each group:

CoPS

- Supervise recruitment of programs via subspecialties
- Maintain list of participating programs
- Coordinate IRB application (especially to identify programs from same institution)
- Point of contact for subspecialties
- Prepare data for presentations
- Organize calls and meetings

APPD LEARN

- Assist with IRB application
- Assist with creation of learner identifiers
- Develop web-based data collection tools
- Manage and “cleanup” data
- Perform data analysis

Subspecialty Representatives

- Recruit programs within their subspecialty
- Provide instruction to programs about study and data entry
- Assist with IRB submission
- Assist with program compliance with data collection

Results

- Neonatology and Critical Care had the highest number of programs participating (table 2)

Developmental-Behavioral Pediatrics and Child Abuse enrolled the greatest percentage of programs (table 2)

Overall, 27% of all ACGME accredited pediatric subspecialty programs participated

Based upon data from the EPA study, 7 abstracts have been accepted to 3 different meetings (ACGME, APPD & PAS)

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