



Training Program Options in the U.S.

Combined Adult Pulmonary and Critical Care Training Programs

These programs require a total of three years training, with at least 18 months of clinical training.

Pulmonary Medicine

To become board eligible for pulmonary medicine, fellows must complete a two-year fellowship, of which at least 12 months is dedicated to clinical training.

Critical Care Medicine

In addition to completing a combined adult pulmonary and critical care medicine fellowship, there are three alternate options to become board-eligible for critical care medicine:

- After completing a fellowship in an internal medicine subspecialty (i.e., ID or GI), one may complete an additional year of fellowship in critical care;
- Complete a two-year critical care fellowship after residency; or
- Complete a two-year general internal medicine fellowship with at least six months of critical care time.

Sleep Training Programs

Board eligibility for sleep medicine requires completion of a 12-month fellowship entirely comprised of clinical training.

For an up-to-date list of training programs in pulmonary, critical care and sleep medicine in the U.S., please visit

www.thoracic.org/education/career-development/index.php

ATS Trainee Membership

As you consider a career in pulmonary, critical care and sleep medicine, the ATS encourages you to become a trainee member of our Society at NO COST TO YOU for one year. We would like to welcome you to the subspecialty community and offer you a host of resources that will help you as you advance in your career.

As an ATS trainee member, you will receive:

- Electronic journal access to the ATS's three of the scientific journals (the American Journal of Respiratory and Critical Care Medicine, the American Journal of Respiratory Cell and Molecular Biology, and the Annals of the American Thoracic Society);
- Discounts to attend the annual ATS International Conference;
- Access to the ATS Patient Education Series, as well as more than 200 statements and guidelines; and
- Networking and career council with other junior and senior ATS members, who are leaders in these fields.

To take advantage of this opportunity,
please apply online by visiting



or call **212.315.8684**

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For more information, please visit:
<http://www.thoracic.org/professionals/career-development/residents-medical-students/>



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Consider This!

A CAREER IN PULMONARY,
CRITICAL CARE AND SLEEP MEDICINE

For Residents and Medical Students

Why Go Into A Sub-Specialty?

The decision of whether to sub-specialize is individual and complex. However, most residents pondering fellowships have certain common considerations regarding the nature of subsequent practice, employment opportunities and lifestyle. In addition, those considering an academic career may be drawn to specific research topics or questions.

- For more information about the fields of pulmonary, critical care and sleep medicine, please visit www.thoracic.org.
- If you are a resident in these fields, please visit <http://www.thoracic.org/professionals/career-development/residents-medical-students/>.
- For a list of available pulmonary, critical care and sleep medicine fellowship training programs in the United States, please visit <http://www.thoracic.org/professionals/career-development/residents-medical-students/training-programs/index.php>.
- For more details about pulmonary, critical care and sleep medicine fellowship programs, please visit www.abim.org.



Employment Options: Why More Pulmonologists, Critical Care and Sleep Physicians are Needed

The early- and mid-1990s saw a decrease in opportunities for sub-specialists of all kinds, but this trend has reversed over the last decade. There is a need for more pulmonologists that will continue to increase over the next few decades. The accuracy of such studies is largely dependent on the validity of a series of assumptions that go into workforce modeling, but the outlook for both academic and private practice jobs in pulmonary and critical care medicine is currently very positive.

- There is currently a shortage of pulmonary, critical care and sleep physicians.
- Trends in sleep medicine, the hospitalist movement and an increase in ICUs staffed by intensivists will affect the demand for physicians trained in respiratory sub-specialties over the next several decades.
- Nationwide initiatives from organizations such as Leapfrog Group have been prompted by empiric evidence demonstrating improved patient outcomes and reduced hospital costs when ICU patients are cared for by a physician with specialized critical care training. Such initiatives have encouraged hospitals to increase the number of intensivists on staff.
- The high incidence of chronic lung diseases like COPD, along with their attendant morbidity and mortality, have increased the need for pulmonologists.
- Sleep disorders, and particularly sleep-disordered breathing, appear to be under-diagnosed and undertreated, and require more healthcare professionals specializing in sleep. Pulmonologists often are the specialists sought to diagnose and manage sleep disorders.
- In some communities, pulmonologists may also continue to practice general internal medicine.

Lifestyle Options

Physicians practicing pulmonary, critical care and sleep medicine have numerous clinical opportunities:

- Intensive care medicine;
- Out-patient pulmonary clinic;
- In-patient pulmonary consults;
- Out-patient sleep medicine;
- Interventional pulmonology;
- Pulmonary rehabilitation; and
- Clinical and basic science research.

Many physicians' clinical practice involves more than one of these clinical opportunities, resulting in a flexible, varied and evolving career.

Nature of Practice in Pulmonary, Critical Care and Sleep Medicine

Pulmonary

Both adult and pediatric pulmonary medicine offer the opportunity for continuity care of patients with chronic lung diseases, as well as the chance to solve a myriad of diagnostic challenges. Pulmonologists are dedicated to the prevention and treatment of all respiratory diseases affecting both children and adults.

Critical Care

Applicants for fellowship in adult and pediatric critical care have had positive experiences on ICU rotations and feel that intensive care suits their personalities. These physicians are often described by their attending as both thoughtful and decisive. The ICU demands the ability to make decisions in the face of uncertainty, but also requires a sound understanding of physiology and complex reasoning skills.

Sleep

Due to the high prevalence of sleep-disordered breathing, healthcare professionals specializing in sleep have often done their primary training in pulmonary medicine. The disorders of sleep, however, are varied and certification in sleep medicine now requires additional dedicated training. Sleep medicine is truly an interdisciplinary undertaking, and physicians who primarily trained in internal medicine, pediatrics, psychiatry, neurology and otolaryngology may all undertake advanced sleep fellowship training. The practice of sleep medicine is almost entirely outpatient and requires the ability to perform and interpret multiple diagnostic procedures. The field of sleep medicine is evolving rapidly, presenting many opportunities for research.

Choosing a Fellowship Program

There are many types of careers that pulmonary, critical care and sleep physicians can pursue:

- Academic research
- Academic clinician educator
- Private practitioner
- Intensivist/hospitalist

There are over 100 fellowship training programs in pulmonary, critical care and sleep medicine. In choosing a training program, you should consider the following:

- Are you interested in a career in academics or in community practice?
- Do you prefer a large or a small program?
- What type of research interests you?
- Do you have geographic preferences or restrictions?