



VIEWPOINT

Education

Assessing the Accessibility and Content of Craniofacial Fellowship Plastic Surgery Training Websites

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Craniofacial surgery is an incredibly innovative field that can truly alter the course of an individual's life. The conditions addressed by craniofacial surgery can arise from either trauma or congenital defects of the bone and soft tissues of the head and neck. Procedures to address these issues seek to both reconstruct and repair the targeted areas. Those who have completed a plastic surgery residency have the opportunity to subspecialize in craniofacial surgery after completion of a one-year fellowship.

The internet is often the first point of contact for applicants to craniofacial fellowships. Our objectives in this article included analyzing the accessibility of the information available on these websites. This information has become particularly relevant during our current SARS-COV-2 pandemic because fellowship interviews have been conducted via virtual format.

Applicants must make selections and judgments based on what they learn through various internet portals. However, the importance of accurate and updated websites has been documented in the literature even before the pandemic.¹ Several studies have documented that there is limited content on these websites despite having an effect on an applicant's rank order list.¹⁻⁴

METHODS

In December 2021, four investigators accessed the websites of 31 craniofacial fellowship websites as linked on the American Society of Craniofacial Surgeons' Fellowship Directory. A set of 11 criteria from prior assessments was selected for evaluation, as listed in Table 1.

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RESULTS

The American Society of Craniofacial Surgeons' Fellowship Directory was used to access websites for the 31 programs in the United States and Canada. The results are listed in Table 1. The number of criteria contained on these websites ranged from 0 to 11, for a mean number of 5.51 criteria listed or 50.0%. Eighteen of the 31 programs (58.0%) contained 50% or more of the aforementioned criteria.

DISCUSSION

The pool of applicants and number of spots for craniofacial fellowships is significantly smaller than other surgical training programs. For example, in 2021, John Hopkins Hospital received three plastic surgery residents, whereas the John Hopkins Craniofacial Fellowship program during a typical fellowship cycle has 12–15 applicants compete for a single spot.⁵

In today's applicant landscape prospective, craniofacial fellows can seek fellowships that provide the most academic value per congenital craniofacial case and have supplemental cases that allow the fellow to develop skills transferrable to treating craniofacial conditions in adults. Our assessment identified that the mean number of criteria is similar when compared with those in other similar studies reported in the literature. 1-4 Our study showed that many craniofacial fellowship programs have not yet modified their online platforms to disclose commonly identified information that should be available on a program website (Table 1). For the programs that have met such milestones, we also suggest additional considerations by programs to include number and types of surgeries, types of evaluation and mentorship, and academic involvement and teaching (Table 2). Largely, these changes should be added for applicants to evaluate the type of cases and scholarly activity.

Table 1. Criteria Selected for Evaluation and Number of Websites That Contained the Information Pertaining to Each Criterion

Criteria	No. Programs (n = 31)
Program description	29 (93.55%)
Applicant process description	25 (80.65%)
Program director contact	19 (61.29%)
Coordinator contact	15 (48.29%)
Current fellows	11 (35.48%)
Research	21 (67.74%)
Rotation schedule	4 (12.90%)
Faculty	18 (58.06%)
Alumni	11 (35.48%)
Salary	12 (38.71%)
Life in the area	6 (19.36%)

Table 2. Recommendations to Fellowship Programs about Additional Information to the Program Websites

Number and type of surgeries	Disclosure of the number and type of surgeries fellows within a program are a part of would assist a prospective fellow in determining their potential exposure to craniofacial surgery as well as surgeries that develop transfer-
	able skills. Disclosure of a previous fellow's participation in addressing cleft lips and palates, neurofibromas, and
	hemangiomas would signal to a prospective fellow that they would be exposed to surgeries that provide these
	transferrable skills.
Types of evaluation	Disclosure of how a fellow is assigned to cases would assist in a prospective fellow's evaluation. Descriptions about
and mentorship	if a program uses a purely rotational, or more single mentorship system would assist the fellow in determining if
•	they are getting their desired balance of diversity of exposure and one-on-one time with mentors.
Academic involvement	Disclosure about a fellow's academic involvement in the program would be helpful. Craniofacial surgeons trained
and teaching	within the last decade are primarily working within academic practices. Information about how a prospective
G	fellow can develop both their own research and teaching experience would assist the prospective fellow in deter-
	mining if the program prepares them for a future job in academics.

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DISCLOSURE

The authors have no financial interest to declare in relation to the content of this article.

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