Fellowship FAQs

Subspecialty field:
Clinical Neurophysiology

What accreditation is available for fellowships (ACGME, UCNS, other) in this subspecialty field?
ACGME

Is board certification available in this subspecialty? If so, through which agency (ABPN, UCNS, other)?
Yes, ABPN

Does completion of this fellowship typically expand the scope of the subspecialist’s hospital credentials (added credentials for performing procedures, interpreting studies, etc)?
In most cases, under current guidelines, these fellowships do not expand one’s ability to do procedures in most hospitals. Currently any board certified neurologist may perform these procedures. However, many hospitals are looking for candidates with additional training in these areas. In addition, some neuromuscular medicine specialists acquire added credentials to perform and interpret muscle and nerve biopsies.

Yes, ability to perform and/or interpret clinical neurophysiological studies, including EMG, Nerve conduction studies, Evoked Potentials, EEG, video-EEG, Intraoperative monitoring, and sleep studies

Is completion of a fellowship typically necessary in order to achieve a subspecialty-focused practice in an academic practice or a large neurology group practice?
Whereas non-fellowship trained neurologists with an interest in neuromuscular medicine may see a similar patient population and perform EMG/NCS, it has become customary for neurologists seeking to do so within an academic medical center or sizeable group practice of neurologists to be fellowship trained.
This is also true for neurophysiology in an academic setting.

It’s not necessary for billing, but in academia, it would be unlikely that a non-fellowship trained neurologist would be hired for a sub-specialty practice in clinical neurophysiology

What type of cases do you see?
-EMG- entrapments, mononeuropathies, peripheral neuropathies, radiculopathies, neuromuscular junction disorders, myopathies, EEG- all types of seizure classifications, both adult and pediatric, long-term monitoring, intraoperative monitoring, evoked potentials, Neuromuscular disorders, neuropathy in the setting of complex systemic disorders, motor neuron disorders

What is the typical minimum duration of a fellowship in this field? Can it be completed on a part-time basis? At least 1 year. Opportunities for additional years to be spent performing research are available. It would be difficult to do this on a part time basis.

One year. I don’t know if the ACGME would allow it to be done on a part-time basis.
How are fellowship positions obtained - match or hospital based? How far in advance should inquiries be sent to the program to ensure a candidate’s consideration? Are there prerequisites beyond completion of a Neurology residency?

There is no match for fellowships in neurology. Inquiries should be sent by mid-spring and at the latest early summer (of the PGY3 year) to be considered. A late application is always worth sending because a position may not have been filled. Most programs request a 1-2 page letter explaining your interest in the field and their program in particular, 3 letters of recommendation from clinical faculty in your residency program and a copy of your current CV. Successful completion of a neurology residency are required before beginning the fellowship.

Direct applications go to the program director. Applications begin in the spring about 15 months before the start date, and decisions are made about a year before start date.

What are the principal clinical exposures and clinical responsibilities that would be common to fellowships in this discipline?

Clinical exposure for both fellowships will include participation in outpatient clinics, neurophysiology labs and inpatient consultations (about 2-5/week). Fellows will spend time with each of the physicians in the subspecialty over the 12 month period. There is no call during these fellowships however; there will be times when the fellow may need to see patients on the weekend or after 5 pm during the week.

The fellow has hands on experience in two of the four tracks, and at least didactic training in the other two: EMG/NCSs, EEG, sleep studies, and intraoperative monitoring. Fellows also spend time assessing patients in neuromuscular or epilepsy clinics.

Do faculty from outside Neurology typically participate in training? From which other specialties?

Rehabilitation Medicine, Neuropathology, Bioengineering

Please provide a brief overview of the rotations a typical fellowship involves. Are there rotations required by accrediting bodies?

No distinct rotations are required for accreditation, except for the explicit requirement that elective time be provided to pursue individual interests and that direct patient care must account for at least 6 months of the year long fellowship. A typical arrangement is to have protected blocks of time for elective and vacation, with the remainder of time being spent in the outpatient clinics. As noted above, some programs have subdivided their clinic day schedules into clinics focused on a particular disorder (ALS, etc.). One fellow is typically tasked with covering inpatient consults on a rotating basis.

In your opinion, what are important qualities to look for in selecting a fellowship program in this field?

Every field of medicine has practitioners with diverse perspectives on management strategies and “hot topics” in the field. It is useful to be exposed to multiple viewpoints during your training, so I think it benefits a program to have more than 1 or 2 faculty involved in the fellowship training program. Furthermore, being at a center that has some specialty focus clinic (like a Muscular Dystrophy Association clinic) gives a unique and valuable perspective in the way they draw together diverse functions: medical care, social work, physical and occupational therapy, specialized clinical nurses and access to a disease-specific clinical research network.

The patient base: there should be a variety of patients which should encompass many different disorders; and the experience and expertise of the faculty
What are the most important words of advice you have for a neurology resident considering a fellowship in the subspecialty field?

Consider why you are choosing this fellowship. Is it because the field is intrinsically interesting to you? Because a mentor in this field has inspired you? Because you want to make a contribution to this field for personal reason? Or is it a lifestyle choice? If the answer is one or all of the 1st 3, then this is field that you would be well suited to. If the answer is number 4, rethink your motivations and consider another avenue to pursue. Keep up on literature emerging neuromuscular diseases and the diagnostic measures beyond EMG.

Is there a professional society specific to this subspecialty? Website:
American Association of Neuromuscular and Electro diagnostic Medicine (AANEM) for EMG/NCS/neuromuscular and American Clinical Neurophysiology Society (ACNS) for EEG/EMG. Website: www.aanem.org and www.acns.org

Recommended web based resources for further information and searching for fellowship positions:
www.acgme.org – Information about requirements for accredited programs, search tool for program listing
http://www.acgme.org/acWebsite/downloads/RRC_progReq/183pr205.pdf - Overview and description of neuromuscular medicine program requirements.
www.aanem.org – Professional society website, search tool with fellowship listing