Commentary: Applying for an integrated cardiothoracic surgery residency: Start early, but keep options open

John S. Ikonomidis, MD, PhD

From the Division of Cardiothoracic Surgery, University of North Carolina at Chapel Hill, Chapel Hill, NC.
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Address for reprints: John S. Ikonomidis, MD, PhD, Division of Cardiothoracic Surgery, University of North Carolina at Chapel Hill, 3034 Burnett Womack Building, 160 Dental Circle, Chapel Hill, NC 27599-7065 (E-mail: john_ikonomidis@med.unc.edu).

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In this issue of the *Journal*, Smood and Colleagues¹ provide a concise yet comprehensive guide to preparing a successful residency application for integrated cardiothoracic surgical residency. This guide was developed based on the experiences of the authors, all current integrated cardiothoracic surgery residents, and also through communication with other residents training under this paradigm. The guide is very well written and is an absolute must-read for any medical student or later trainee interested in cardiothoracic surgical residency. There are some important points mentioned in this manuscript that deserve emphasis.

First, it cannot be understated how important it is to make an early decision to pursue a career in cardiothoracic surgery if one is intending to apply to the integrated cardiothoracic residency program. As stated by the authors, there are only 36 of these positions in 28 programs available at the current time and more than 200 applicants compete for these spots every year, meaning that from a purely mathematical point of view, there is at best an 18% chance of being admitted to one of these programs. Many of those who apply to these programs have worked for some time toward their career goal of cardiothoracic surgery and are highly qualified. The planning process often starts before medical school for these applicants, who have taken a very structured and logical approach to their application, systematically developing clinical and research experience, publications, and solid mentors. In addition, these students tend to have a tremendous amount of academic “horsepower” and high United States Medical Licensing Examination scores. Therefore, if one is considering entering a career in cardiothoracic surgery through the integrated residency, one must have an extremely focused approach, early on.

That said, it is worth emphasizing that only about one third of training programs in the United States are integrated

John S. Ikonomidis, MD, PhD

Central Message

Elite individuals are accepted into integrated cardiothoracic surgery programs; for those who are not successful, other excellent training options are available.

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programs. The remainder are the tried and true, so-called “traditional” programs that require general surgical training before cardiothoracic surgical training. The important thing for prospective applicants is that this training process still remains the goal standard of training in our specialty, a proven avenue for development of the skills necessary to pursue independent practice in cardiothoracic surgery. If one pursues this program over the integrated thoracic program, there is not much of an increase in time commitment required. It is reasonable to state that the integrated program is not for everybody. There are just simply a number of individuals who would do better in a structured general surgery program before cardiothoracic surgery and be given more time to develop clinical maturity, patient care, and technical skills.

In conclusion, careful planning and exceptional skill sets have results in an elite group of individuals who eventually become accepted into integrated cardiothoracic surgery programs. This occurrence has allowed this training paradigm to enjoy considerable success.

Reference

1. Smood B, Nguyen S, Kelly JJ, Han JJ. Young surgeon's note. Integrated cardiothoracic surgery: developing a successful residency application. *J Thorac Cardiovasc Surg*. 2020;160:167-74.