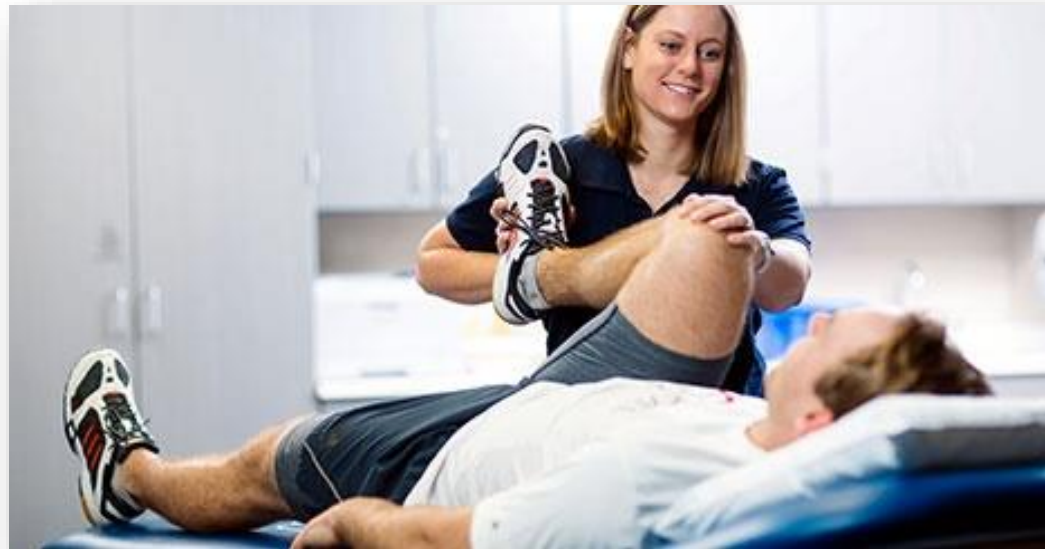


# Physical Therapy Residencies & Fellowships Overview



# 1

## WHAT IS A RESIDENCY OR FELLOWSHIP?

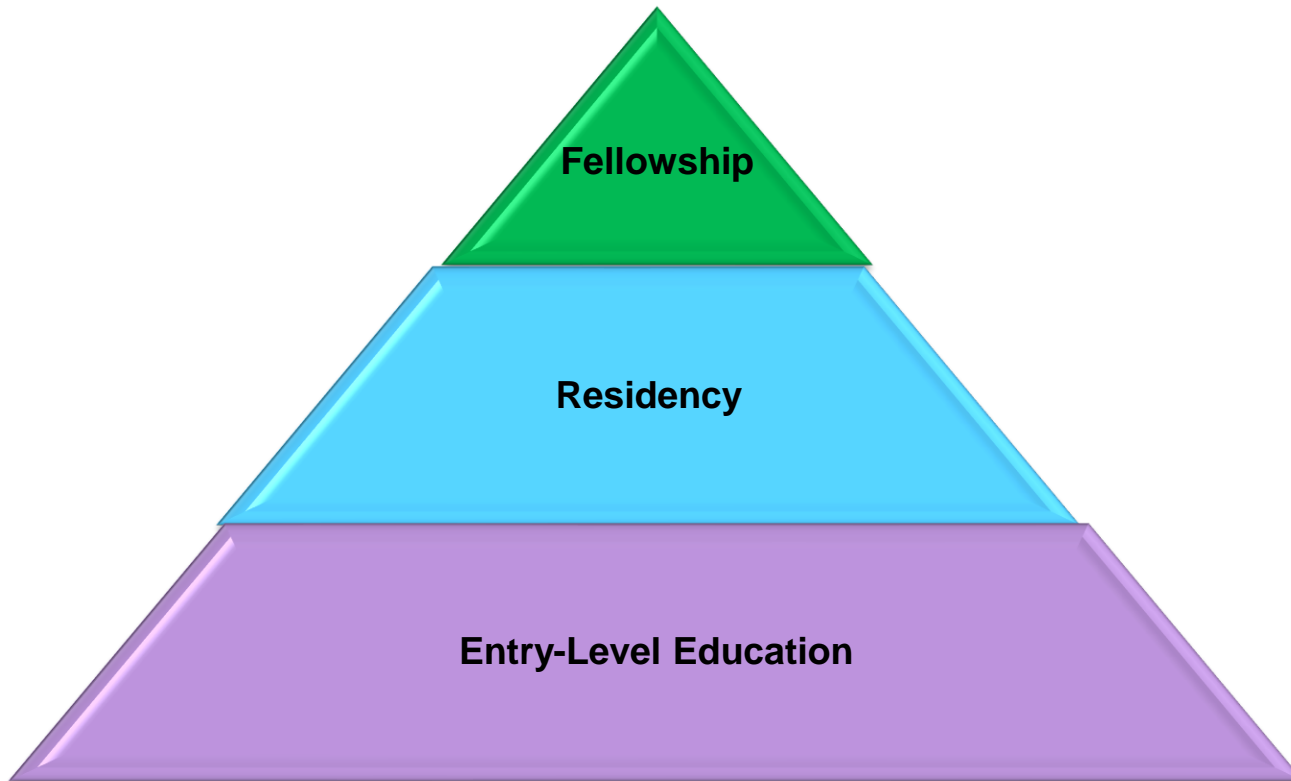


# WHAT IS A RESIDENCY?

A clinical residency program is a structured educational experience (both didactic and clinical) for physical therapists following entry-level education and licensure that is designed to significantly advance the physical therapist's knowledge, skills, and responsibilities in a specific area of clinical practice.



# HOW IS A **RESIDENCY** DIFFERENT FROM ENTRY-LEVEL EDUCATION OR A **FELLOWSHIP** PROGRAM?



# RESIDENCY VS FELLOWSHIP

## Residency:

Entry Level → Specialty Practice

- Accelerates PT's expertise in a recognized specialty area
- Prepares PT for specialist certification exam
- 1800 hours
  - Educational hours 300
  - 1:1 mentoring hours 150
  - Patient care hours 1500
- 10-60 months

## Fellowship:

Specialty Practice → Sub-specialty Practice

- Focused curriculum with advanced clinical/didactic instruction.
- Subspecialty preparation for advanced clinical skill-building
- 1000 hours
  - Educational hours 150
  - 1:1 mentoring hours 150
- 10-60 months

# 2

## WHY COMPLETE A RESIDENCY OR FELLOWSHIP?

[Why choose residency training  
video: voices from residents](#)



# RESIDENCIES AND FELLOWSHIPS

## BENEFITS TO THE INDIVIDUAL

- Positive financial return on investment
- Mentoring experiences vs. trial and error
- Faster skill development
- Clinical reasoning growth
- Open doors to career opportunities
- Sit for the ABPTS Clinical Specialist Exam
- Opportunities for teaching & other experiences
- Higher job & career satisfaction



## Motivations to Pursue Physical Therapy Residency Training: A Q-Methodology Study of Stakeholder Perspectives

Raine Osborne, Chris Janson, Lisa Black, Gail M. Jensen

**Background.** Residency training is recognized as a valuable form of professional development and pathway to specialization. Currently residency is voluntary for physical therapists, with less than 12% of DPT students choosing to apply upon graduation. Motivations that drive the decision to pursue residency are currently unknown as is the extent of similarity and difference in perspective among various stakeholders.

**Objective.** The purpose of this study was to identify the dominant perspectives on motivations to pursue residency held by various stakeholders.

**Design.** This study was conducted using Q Methodology, which incorporates aspects of quantitative and qualitative techniques into the examination of human subjectivity.

**Methods.** Program directors, faculty, and current residents from all accredited physical therapy residency programs were invited to complete a forced-choice sorting activity where potential motivations for residency were sorted by perceived level of importance. Principal component analysis was used to identify dominant perspectives, which were interpreted based on emergent themes in the cluster of motivations identified as most important.

**Results.** Four dominant perspectives were identified: (1) desire to provide better patient care, (2) preparation for specialty practice, (3) fast track to expert practice, and (4) career advancement. These perspectives provided context and utility to 2 broad meta-motivations: improved clinical reasoning and receiving mentoring. Both within- and between-group differences among stakeholders were identified. However, subsets from each role-group population were found to share similar perspectives.

**Limitations.** Results from this study may not apply to potential residents in all specialty areas, and the implications of having a particular perspective are unknown.

**Conclusions.** Identification of the dominant perspective on motivations for pursuing residency may aid in promoting participation, program development, matching residents to programs and mentors, and future research.

R. Osborne, PT, DPT, EdD, Brooks Rehabilitation Institute of Higher Learning, 3901 University Boulevard South, Suite 103, Jacksonville, FL 32216 (USA); and Doctor of Physical Therapy Program, Brooks College of Health, University of North Florida, Jacksonville, Florida. Address all correspondence to Dr Osborne at: [ralne.osborne@brooksrehab.org](mailto:ralne.osborne@brooksrehab.org).

C. Janson, PhD, College of Education and Human Services, University of North Florida.

L. Black, PT, DPT, Department of Physical Therapy, Creighton University, Omaha, Nebraska.

G.M. Jensen, PT, PhD, Department of Physical Therapy, School of Pharmacy and Health Professions, Creighton University.

[Osborne R, Janson C, Black L, Jensen GM. Motivations to pursue physical therapy residency training: a Q-Methodology study of stakeholder perspectives. *Phys Ther*. 2020;100:57-72.]

© 2019 American Physical Therapy Association

Published Ahead of Print:

October 9, 2019

Accepted: June 21, 2019

Submitted: September 15, 2018



Post a comment for this article at: <https://academic.oup.com/ptj>

# 4 Primary Reasons for Pursuing Residency Training

- Desire to provide better patient care
- Fast track to expert practice
- Preparation for specialty practice
- Career advancement

(Osborne, PTJ, 2020)



# Residency & Fellowship Trained PTs Make More Money

- Early-career board certified PTs make \$5,940 (\$2.97 more/hour) than non-board-certified PTs. ([2021 APTA Profile of Wages](#))
- Resident graduates have 16.4 greater odds of becoming board certified.
- 20-30% of employers indicate a promotion or increased compensation for residency & fellowship training. (Briggs 2019)



# Board Certification Examination Passing Rates

| Examination Year | Non-residency graduates (direct patient care hours, "Option A") | Residency Graduate ("Option B") |
|------------------|---|---------------------------------|
| 2006             | 71%   | 75%                             |
| 2007             | 71%   | 84%                             |
| 2008             | 66%   | 82%                             |
| 2009             | 66%   | 85%                             |
| 2010             | 62%   | 78%                             |
| 2011             | 67%   | 88%                             |
| 2012             | 73%   | 91%                             |
| 2013             | 72%   | 84%                             |
| 2014             | 74%   | 91%                             |
| 2015             | 74%   | 94%                             |
| 2016             | 74%   | 86%                             |
| 2017             | 77%   | 90%                             |
| 2018             | 80%   | 91%                             |
| 2019             | 81%   | 89%                             |
| 2020             | 76%   | 92%                             |
| 2021             | 77%   | 94%                             |
| 2022             | 75%   | 87%                             |
| 2023             | 85%   | 93%                             |

**Residents are  
More Likely to  
Pass the ABPTS  
Board Specialty  
Exam**

# Residents & Fellows Develop Strong Leadership & Communication Skills



- involvement with APTA
- increased professionalism & maturity
- inspiring & challenging others
- raising the bar for staff
- excellent communication skills with patients & other health care providers
- ability to communicate their intention and explain interventions to patients

(Briggs, JOPTe, 2019; Osborne, PTJ, 2020)

# Residents & Fellows Provide Quality Patient Care & Clinical Competence



- use of evidence & self-reflection
- improved technical skills
- improved diagnostic accuracy
- ability to treat complex patients
- providing high quality of care
- more efficient clinical reasoning
- higher work productivity
- less difficulty prioritizing/organizing

(Briggs, JOPTe, 2023; Briggs, JOPTe, 2019; Souter, JOPTe, 2019; Whitman, J Man Manip Ther, 2020; Winslow, JOPTe, 2019)

# Residents & Fellows Have More Career Engagement



- more teaching, mentorship, research
- higher % of APTA membership & ABPTS specialization
- greater odds of invited national speaking, residency involvement, elected to professional committees
- more publications, abstracts, posters, platforms

(Briggs, JOPTe, 2023; Briggs, JOPTe, 2022; Whitman, J Man Manip Ther, 2020)

# Residents & Fellows Have More Career Satisfaction



- 3-9% higher job & career satisfaction
- job is challenging in a positive sense
- work is interesting
- satisfaction with achieving career goals
- learning & improving in work

(Briggs, JOPTe, 2022; Osborne 2023)

# RESIDENCIES AND FELLOWSHIPS

## BENEFITS TO PROFESSION & TO CONSUMERS



- Confidence in receiving quality care
- Improved access to specialized care
- Increased availability of experts
- Delivery of evidence-based practice

(Briggs, JOPTe, 2023; Briggs, JOPTe, 2019; Whitman, J Man Manip Ther, 2020; Winslow, 2019)

# RESIDENCIES AND FELLOWSHIPS

## BENEFITS TO FACILITY



- Recruitment
- Retention
- High clinical practice standards
- Best practice collaboration
- Increased productivity & referrals
- Culture of mentoring & education

(Briggs, JOPTE, 2023; Briggs, JOPTE, 2019; Whitman, J Man Manip Ther, 2020; Winslow, 2019)



# 3

## WHY CHOOSE AN ACCREDITED PROGRAM?



# WHY CHOOSE AN ACCREDITED PROGRAM?



**ABPTRFE**  
ACCREDITED PROGRAM

[abptrfe.org](http://abptrfe.org)

- Quality
- Consistency
- Resources
- Mentoring
- Qualification for ABPTS examination

# **ABPTRFE QUALITY STANDARDS**

**QUALITY STANDARD 1: MISSION, GOALS, AND OUTCOMES**

**QUALITY STANDARD 2: CURRICULUM DESIGN AND INSTRUCTION**

**QUALITY STANDARD 3: PROGRAM DELIVERY, DIRECTOR, AND FACULTY**

**QUALITY STANDARD 4: PROGRAM COMMITMENT AND RESOURCES**

**QUALITY STANDARD 5: ASSESSMENT, ACHIEVEMENT, SATISFACTION,  
AND EFFECTIVENESS**

<https://abptrfe.apta.org/globalassets/abptrfe/for-programs/abptrfe-part-iii-clinical-quality-standards.pdf>

# 11 ABPTRFE Accredited Clinical Residencies



- Acute Care (17)
- Cardiovascular & Pulmonary (13)
- Clinical Electrophysiology (2)
- Geriatrics (23)
- Neurology (79)
- Oncology (8)
- Orthopedics (164)
- Pediatrics (32)
- Sports (84)
- Women's Health (22)
- Wound Management (2)

\*As of October 2024 ([abptrfe.org](https://abptrfe.org))

# 8 ABPTRFE Accredited Clinical Fellowships



- Critical Care (0)
- Hand Therapy (0)
- Neonatology (4)
- Neurologic Movement Disorders (1)
- Orthopaedic Manual Therapy (19)
- Performing Arts (3)
- Spine (4)
- Sports Division 1 (7)
- Upper Extremity Athlete (5)

\*As of October 2024 ([abptrfe.org](https://www.abptrfe.org))

# CHOICES, CHOICES, CHOICES

## Program Models

- Academic Model
- Clinical Model
- Collaborative Model
- Distance Learning

## Financial considerations

- Salary and Benefit package or Costs
- Deferred loans while in residency
- Post-professional APTA membership

## Outcomes

- Specialist Certification Exam
- Employment
- Additional opportunities (research, faculty, etc.)



# CHOOSING THE RIGHT FIT

- Matches candidate's long-term interests
- Mission, Goals, & Outcomes
- Policies & Curriculum
- Mentoring Approach
- Location
- Clinical Rotation Schedule
- Patient Experiences
- Financial Considerations

\*ABPTRFE Financial Fact Sheet posted on each program's web page)



# 4

## HOW TO APPLY





# RFPTCAS APPLICATIONS

- RF-PTCAS is a single web-based application to apply to multiple residency and fellowship programs.

<https://rfptcas.liaisoncas.com/applicant-ux/#/login>

- ABPTRFE directory of accredited, candidate, and developing programs: <https://accreditation.abptrfe.org/#/directory>

[Academy of Education Residency & Fellowship SIG Resources RFESIG](#)

# 8 WAYS TO NOT GET INTO A PT RESIDENCY

- Don't apply
- Don't contact the program ahead of time to introduce yourself
- Don't research the residency program ahead of time to see if it matches your goals
- Don't have a simple, organized, clean-looking resume
- Don't belong to the APTA or Academy/Section and don't join a SIG
- Don't complete experiences that show you have a strong specialty interest
- Don't spell check your essays
- Do show some arrogance and difficulty to work with during the interview

# REFERENCES

- A Physical Therapy Profile: Wages for the Profession, 2021-22 report (2023 APTA). <https://www.apta.org/apta-and-you/news-publications/reports/2023/physical-therapy-profile-wages-profession-2021-22>
- Briggs, Matthew S. PT, DPT, PhD, AT; Weber, Mark D. PT, PhD, AT; Olson-Kellogg, Becky J. PT, DPT; DeWitt, John J. PT, DPT, AT; Hensley, Craig P. PT, DPT; Harrington, Kendra L. PT, DPT, MS; Kidder, Melissa S. PT, DPT; Farrell, Joseph P. PT, MAppSci, DPT, FAPTA; Tichenor, Carol Jo PT, MA, FAPTA. Factors Contributing to Physical Therapists' Job and Career Satisfaction in the United States: Results From a National Survey. *Journal of Physical Therapy Education* 36(3):p 232-241, September 2022. | DOI: 10.1097/JTE.000000000000244
- Briggs, Matthew S. PT, DPT, PhD, AT; Whitman, Julie PT, DSc, FAAOMPT; Olson-Kellogg, Becky PT, DPT; Farrell, Joseph PT, MAppSci, DPT, FAPTA; Glaws, Kathryn R. PT, DPT; Walker, Joann M. PT, DPT; Clutter, Jill PhD; Tichenor, Carol Jo PT, MA, FAPTA. Employer Perceptions of Physical Therapists' Residency and Fellowship Training: Insights for Career Development Planning. *Journal of Physical Therapy Education* 33(1):p 40-48, March 2019. | DOI: 10.1097/JTE.000000000000078
- Osborne R, Janson C, Black L, Jensen GM. Motivations to Pursue Physical Therapy Residency Training: A Q-Methodology Study of Stakeholder Perspectives. *Phys Ther.* 2020 Jan 23;100(1):57-72. doi: 10.1093/ptj/pzz142. PMID: 31596470.
- Whitman JM, Shepherd M, Neilson B, Janicky TJ, Garcia WJ, Peterson S, Stevens BJ. An orthopedic manual physical therapy fellowship training's impact on professional development, involvement, personal lives, and income - A survey study. *J Man Manip Ther.* 2020 Dec;28(5):287-297. doi: 10.1080/10669817.2020.1748333. Epub 2020 Apr 10. PMID: 32275200; PMCID: PMC7734091.
- Winslow, John PT, DPT, OCS, MTC, ATC; Costello, Michael PT, DSc, OCS, MTC. Implementation of a Hospital-Based Orthopaedic Physical Therapy Residency Program: A Case Report Describing Clinical Outcomes, Productivity, and Perceived Benefits. *Journal of Physical Therapy Education* 33(4):p 307-314, December 2019. | DOI: 10.1097/JTE.000000000000100

*\*Credit Darren Calley, PT, DScPT, OCS and Matt Briggs, PT, PhD, AT, SCS for presentation content.*