Trends and Academic Attributes of U.S. Otolaryngology—Head & Neck Surgery Residency Program Directors: A Cross-Sectional Evaluation

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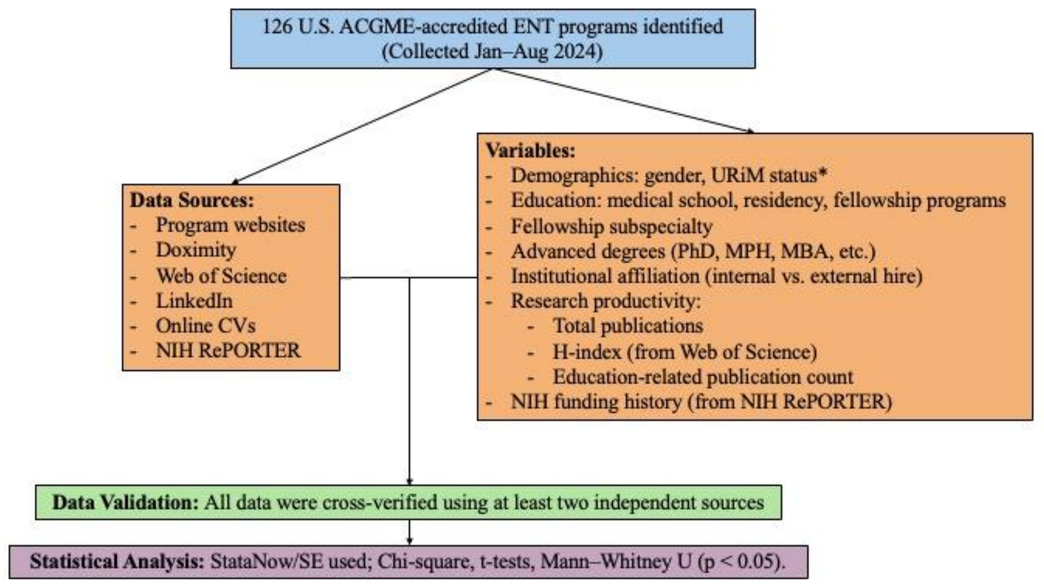
Introduction

- Program Directors (PDs) are essential to shaping Otolaryngology—Head & Neck Surgery residency programs and resident professional identities.[1,2]
- Prior studies focused on residency program structure, not leadership pathways.[3,4]
- No longitudinal characterization of PD-specific demographics, training, and academic productivity has been performed.

Objective

To evaluate demographic trends, research productivity, and institutional hiring patterns of U.S. Otolaryngology PDs and identify factors linked to leadership pathways.

Methods



*URiM = Underrepresented in Medicine; includes African American, American Indian/Alaska Native, Hawaiian/Pacific Islander, and Latino/Hispanic

Results

Table 1. Demographics of Otolaryngology Program Directors (n=126)

	n (%)
Gender	
Male	80 (63.5%)
Female	46 (36.5%)
Advanced Degree*	23 (18.3%)
Fellowship trained	103 (81.7%)
Graduated from U.S. Medical School	125 (99.2%)
History of NIH funding	4 (3.2%)

*Advanced degree other than MD or DO
NIH = National Institutes of Health

Table 2. Faculty Location and Training Prior to Appointment

	n (%)
Known Hire Type (n=120)⁺	
Internal	110 (91.7%)
External	10 (8.3%)
Known Prior Training at Current Institution (n=126)	
Multiple affiliations	25 (19.8%)
Fellowship	9 (7.1%)
Residency	13 (10.3%)
Medical school	15 (11.9%)
No connection	64 (50.8%)

★ 91.7% of PDs were promoted internally

★ Nearly half (49.2%) completed some training at their current institution

⁺Hire type data is available for 120 of the 126 total program directors (PDs)

Table 3. Subspecialty Distribution by Gender

Subspecialty	All (n (%)), n=126	Male (n, (%)), n=80	Female (n, (%)), n= 46	p-value
Head and neck surgery	26 (20.6%)	15 (18.8%)	11 (23.9%)	0.50
Laryngology	11 (8.7%)	6 (7.5%)	5 (10.9%)	0.53
Facial Plastics	14 (11.1%)	10 (12.5%)	4 (8.7%)	0.57
Neurotology	15 (11.9%)	11 (13.8%)	4 (8.7%)	0.57
Pediatrics	16 (12.7%)	7 (8.8%)	9 (19.6%)	0.10
Rhinology	23 (18.3%)	18 (22.5%)	3 (6.5%)	0.15
Skull base surgery	18 (14.3%)	15 (18.8%)	3 (6.5%)	0.07
Other	2 (1.6%)	0 (0%)	2 (4.3%)	0.13

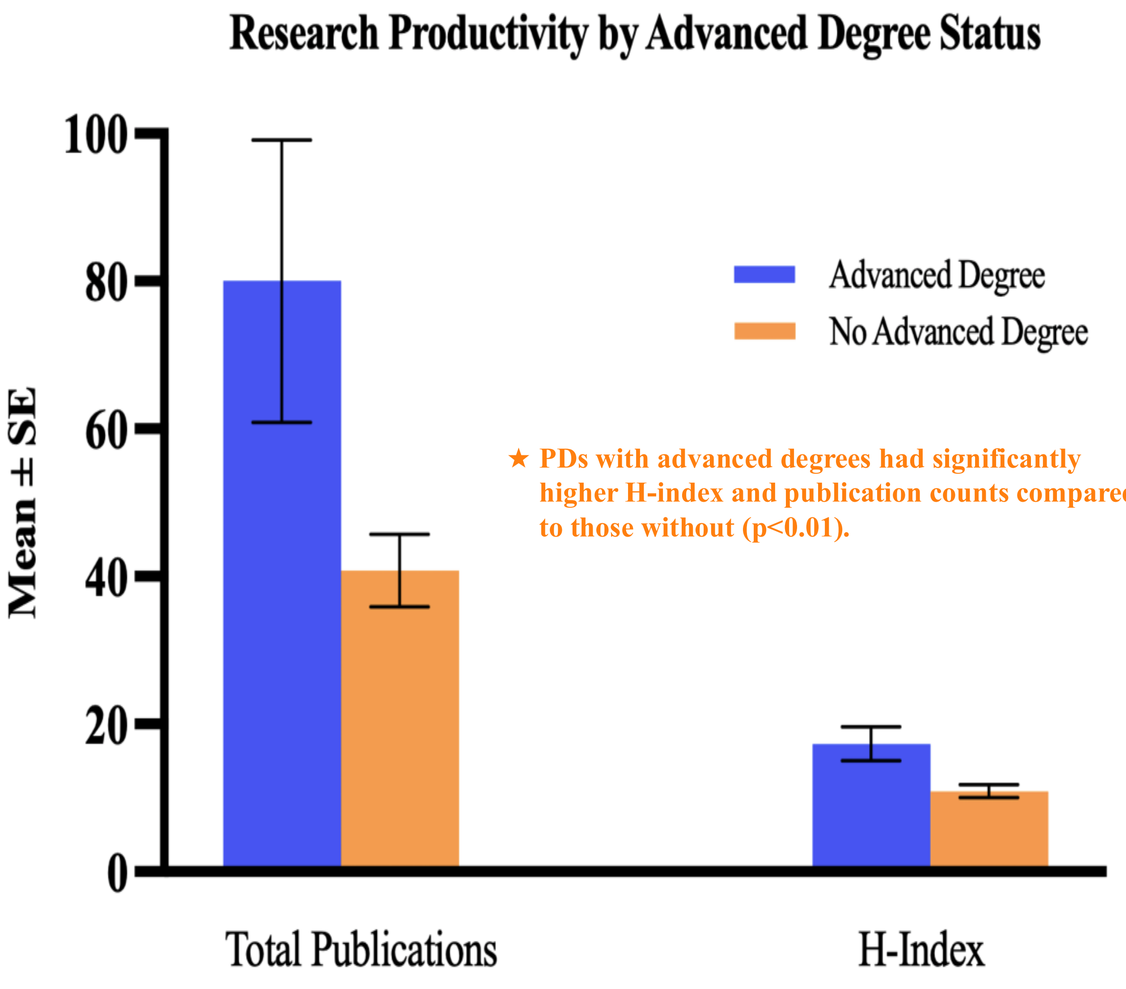


Figure 1. Research productivity by advanced degree status. Mean ± standard error (SE) of total publications and H-index shown. p-value <0.05 for both comparisons.

Discussion

- Internal hiring dominates, which promotes stability but may limit diversity and innovation.
- A significant portion of PDs hold additional advanced degrees, which are associated with increased research productivity and NIH funding.
- Gender does not affect research productivity, suggesting systemic barriers rather than differences in capability.
- Fellowship training remains a key pathway to leadership, especially in Head & Neck and Pediatrics.

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