

Focus on Subspecialties: Pediatric hospitalists get initial OK in quest for subspecialty status

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The American Board of Pediatrics (ABP) has provided initial approval toward subspecialty status for pediatric hospital medicine (PHM) in response to a petition filed by the Joint Council of Pediatric Hospital Medicine (JCPHM).

While this represents a significant milestone, subspecialty status for PHM will next be considered by the American Board of Medical Specialties (ABMS) prior to final authorization.

Rapid growth

The field of PHM has been growing rapidly over the last few decades. While the first division of PHM was formed in San Diego as early as 1978, most growth in the field occurred after Robert M. Wachter, M.D., coined the term “hospitalist” in 1996.

Since then, PHM has established an annual scientific meeting, developed national collaborative groups for research (Pediatric Research in Inpatient Settings) and quality improvement (Value in Inpatient Pediatrics), initiated a peer-reviewed journal published by the Academy (*Hospital Pediatrics*), expanded to over 30 fellowship programs and has grown in individual pediatrics departments across the country. The AAP Section on Hospital Medicine now has more than 1,500 members.



Looking toward the future

With this progress, a process was initiated to consider future directions for the field.

A strategic planning committee comprised of hospitalist volunteers was established in 2010. First, the group drafted individual vision statements for the field and used these to generate overarching themes. A national survey was developed to garner broader representation from the community using three of these themes: 1) fellowship with ABP subspecialty designation, 2) recognition of focused practice (similar to adult hospitalist medicine), and 3) hospitalist track during residency.

The committee report was delivered to the PHM community over two years via conferences, blogs and a Listserv. Eventually, a consensus emerged to petition for ABP subspecialty designation.

Next steps

With its initial approval, the ABP confirmed the duration of PHM fellowships would be two years, and PHM board-certified physicians would not be required to maintain certification in general pediatrics, similar to other ABP subspecialists. The proposal soon will move to ABMS; should it be approved by ABMS, the process will shift back to the ABP. At that time, the ABP will designate a sub-board to develop a board certification exam for future fellowship graduates and develop a pathway for how current pediatric hospitalists may be eligible for the certifying exam.

While the ABP will work toward certifying individual physicians, an Accreditation Council for Graduate Medical Education Residency Review Committee would develop standards for certifying fellowship programs.

“All of this is ultimately for the kids we take care of. There are overwhelming benefits for the kids in going forward with ABP subspecialization,” said Daniel A. Rauch, M.D., FHM, FAAP, a member of the AAP Section on Hospital Medicine Executive Committee and chair of JCPHM.

Dr. Rauch noted that the recent ABP subspecialty designation for pediatric emergency medicine (PEM) has allowed for higher patient care standards in all emergency departments taking care of children, regardless of whether they employ PEM board-certified physicians. He said he expects similar gains in the care of inpatient children with ABP specialty designation for PHM.

“It is the best way to do it,” he said.

While ABP subspecialty status would mean a sweeping change for the field of PHM, Dr. Rauch also cautions, “Nothing is happening tomorrow.” The process of ABMS approval and subsequent ABP workings can easily take another decade.

“This statement of acceptance by the ABP,” Dr. Rauch said, “sends a strong message that our field is identified as a unique one that is focused on improving the health of the hospitalized child and advancing scholarly work around this.”

Dr. Joshi is a resident member and liaison from the AAP Section on Medical Students, Residents, and Fellowship Trainees to the Section on Hospital Medicine Executive Committee.

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