Combined Specialty Residency Programs
Vinod E. Nambudiri, MD, MBA, clinical fellow, Departments of Medicine and Dermatology, Brigham and Women’s Hospital and Harvard Combined Dermatology Program

Combined specialty residency programs offer distinct graduate medical education paths for physicians to pursue integrated clinical training in multiple fields. Twenty-one combined specialty residencies exist in the United States, comprising over 200 total residency programs:

- Internal Medicine/Pediatrics
- Internal Medicine/Emergency Medicine
- Internal Medicine/Psychiatry
- Internal Medicine/Dermatology
- Psychiatry/Family Medicine
- Pediatrics/Anesthesiology
- Pediatrics/Emergency Medicine
- Pediatrics/Physical Medicine & Rehab
- Internal Medicine/Family Medicine
- Internal Medicine/Anesthesiology
- Internal Medicine/Neurology
- Internal Medicine/Preventive Medicine
- Family Medicine/Preventive Medicine
- Psychiatry/Neurology
- Pediatrics/Medical Genetics
- Internal Medicine/Medical Genetics
- Internal Medicine/Psychiatry
- Pediatrics/Dermatology
- Pediatrics/Psychology
- Child–Adolescent Psychology
- Diagnostic Radiology/Nuclear Medicine
- Internal Medicine/Emergency Medicine/Critical Care
- Pediatrics/Dermatology
- Emergency Medicine/Family Medicine
- Pediatrics/Psychology

Combined training is longer than either field individually but shorter than pursuing components sequentially. For example, a combined internal medicine/dermatology residency condenses six years of training into five.

After completing their combined residency training, graduates are board eligible in internal medicine and dermatology, and they are able to pursue subspecialization in both fields. PGY indicates postgraduate year.

In 2014–2015, a total of 2,076 residents (1.7% of graduate medical trainees) were training in combined specialty programs. The number of combined program residents has remained stable since 2002.

Effect of combined residency programs on institutions

Benefits of combined residency programs
- Cost-effectiveness: Shortening time for residents to complete training in multiple fields
- Academic collaboration: Expanding multidisciplinary basic and translational research opportunities within institutions
- Clinical innovation: Developing individuals with multiple areas of expertise who are able to innovate in overlapping spheres

Challenges of combined residency programs
- Resident recruitment: Identifying applicants who are truly passionate about both fields—rather than simply indecisive
- Clinical curriculum: Developing longitudinal, integrated educational experiences
- Resident enrichment: Preserving time for elective experiences, research, and career development given the compressed training time line

Career paths for graduates of combined residency programs
- Graduates demonstrate a strong preference for academic careers in clinical medicine.
- Graduates may practice in one or multiple areas within their fields of training after completing their combined residency program. They are uniquely positioned to manage conditions overlapping their clinical fields and to educate peers in both areas.
- Graduates may pursue subspecialization in just one of the fields, or in both/all three fields under select combined fellowships such as adult cardiology/pediatric cardiology for graduates of internal medicine/pediatrics.
- Longitudinal follow-up data on graduates of combined specialty residencies and in comparison with their single-specialty peers for variables such as practice patterns, academic productivity, and patient outcomes are needed.

Combined specialty residency programs fulfill a unique niche in graduate medical education, prepare future physicians for clinical expertise in multiple fields, and provide specific institutional challenges and benefits.

References

First published online

Academic Medicine, Vol. 90, No. 6 / June 2015