Dear Fellowship Applicant,

Thank you for your interest in our Sports Fellowship at the Shirley Ryan AbilityLab and Northwestern Feinberg School of Medicine. July 2024 will mark the start of the 32th year of this program. The fellowship is twelve months in duration and includes clinical, teaching, and research experiences. The fellowship is ACGME-accredited in sports medicine so physicians completing this fellowship will be eligible to take the subspecialty board exam for sports medicine.

Requirements for the spine and sports fellowship at our institution include:
1. Completion of an ACGME- or RCPSC-accredited residency in emergency medicine, family medicine, internal medicine, pediatrics, or physical medicine and rehabilitation
2. Completion of an ERAS application

Interviews will be granted only following receipt of all application materials.

Selection of the fellow will occur via the National Resident Matching Program (NRMP).

Submit your application at the website for the Electronic Residency Application Service (ERAS):
https://students-residents.aamc.org/training-residency-fellowship/applying-fellowships-eras/

For further questions about the fellowship application process, contact Jaimelee Byrne, Fellowship Coordinator, by email at jbyrne@sralab.org. You may contact Sam Chu at schu@sralab.org if you have any questions about the fellowship. Once again, we thank you for your interest in our program.

Samuel Chu, MD
Associate Professor, Department of Physical Medicine and Rehabilitation
Program Director, Sports Medicine Fellowship
Associate Program Director, PM&R Residency
Northwestern Feinberg School of Medicine
Shirley Ryan AbilityLab
Program Mission Statement
The Sports Medicine Fellowship is dedicated to developing future leaders in sports medicine by providing comprehensive training in sports medicine and musculoskeletal clinical care, research and medical education.

Program Aims
1. Provide comprehensive clinical training that includes a broad exposure to and opportunities for sports medicine coverage (including adaptive sports and performing arts coverage)
2. Provide extensive exposure to and training for the use of diagnostic musculoskeletal ultrasound and ultrasound-guided procedures
3. Provide exceptional opportunities for scholarly and academic activities in the area of sports and musculoskeletal medicine

Fellow Curriculum & Expectations

EDUCATION
1. Clinical Education
   a. Spend the majority of clinical time in Musculoskeletal Clinics at the Shirley Ryan AbilityLab and Northwestern Medicine
   b. Spend at least ½-1 day per week with primary care sports medicine physicians at Northwestern University and Lurie Children’s Hospital who see sports-related injuries and diseases
   c. Cover team sports at Northwestern University in Evanston, IL (Varsity and club), adaptive sports events and mass sporting events, including the Chicago Marathon
   d. Gain exposure to acute, subacute, and chronic musculoskeletal pathology
   e. Opportunity to learn and become competent in performing fluoroscopically-guided spinal injections, diagnostic ultrasound and ultrasound-guided procedures
   f. Opportunity to set up elective time with orthopedic surgeons at Northwestern Medicine and other physiatrists at Shirley Ryan AbilityLab

2. Teaching responsibilities
   a. Organize and plan weekly musculoskeletal journal club
   b. Supervise residents presenting at musculoskeletal journal club
   c. Attend Resident Musculoskeletal Foundations lecture series
   d. Prepare for and give lectures for Kinesiology section of the resident Musculoskeletal Foundations lecture series
   e. Prepare for and proctor presentations for the Anatomy section of the resident Musculoskeletal Foundations lecture series
   f. Prepare for and teach the musculoskeletal Physical Examination section of the resident curriculum
   g. Review rotation objectives with the PGY-3 and PGY-4 residents on the Sports Medicine/Musculoskeletal Rotation
   h. Opportunities to teach at Northwestern Feinberg School of Medicine (physical examination, musculoskeletal ultrasound)

3. Opportunity to attend major academic conferences (AAPM&R, NASS, ACSM, AMSSM, AAP, SIS)
4. Attend Shirley Ryan AbilityLab Spine Injection Course and Ultrasound Course during fellowship year
5. Each fellow has an educational and book stipend
6. Opportunity to attend Shirley Ryan AbilityLab Academy sponsored courses at discounted rate
7. Fellows are considered PGY-5 residents of the Northwestern McGaw Center and are expected to follow the guidelines of the Northwestern McGaw Center for Graduate Medical Education policies. For more information, see http://mcgaw.northwestern.edu/

SCHOLARLY ACTIVITY
1. Adopt and work on a musculoskeletal research project with fellowship faculty
2. Present research project at the Resident & Fellow Research Day (June)
3. Opportunity to write a chapter or article by the end of the academic year
4. Present research or case report at national meeting (e.g., ACSM, AMSSM, AAPM&R, AAP)
Prior Sports Fellows (Current Affiliation):

1. 1993-94: Nick Olson – Colorado
2. 1994-95: Marc Sherman – Texas
3. 1995-96: Brian Casazza – Georgia
4. 1996-98: Anne Zeni Hoch* (Medical College of Wisconsin)
5. 1997-98: Venu Akuthota* (University Spine Center Director, University of Colorado)
6. 1998-99: Stuart Willick* (Director, Spine and Sports Program, University of Utah)
7. 1999-00: Larry Chou (Premier Orthopedics, Philadelphia, PA)
8. 2000-01: Paul Lento (Sarasota Orthopedic Associates, Sarasota, FL)
9. 2001-02: Ed Hanada* (Dalhousie University, Halifax, Nova Scotia)
10. 2002-03: Jennifer Reed* (Spine Center Director, Eastern Virginia Medical School)
11. 2003-04: Lee Wolfer (San Francisco, California)
12. 2004-05: Brad Sorosky (Arizona Pain Institute)
15. 2007-08: Paula Dawson* (University Hospital of the West Indies, Jamaica) and Shana Margolis* (Shirley Ryan AbilityLab)
16. 2008-09: D.J. Kennedy* (Vanderbilt University) and Chris Visco* (NewYork-Presbyterian Hospital/Columbia University Medical Center)
17. 2009-10: Ellen Casey* (Weill Cornell Medical College/Hospital for Special Surgery) and Kevin Carneiro* (University of North Carolina)
18. 2010-11: Jason Hu* (New York Hospital of Queens - Weill Cornell Medical College) and James Sigler (Overland Park, KS)
19. 2011-12: Farah Hameed* (NewYork-Presbyterian Hospital/Columbia University Medical Center) and Cindy Lin* (University of Washington)
20. 2012-13: Bryan Murtaugh* (National Rehabilitation Hospital) and Fariba Shah* (National Rehabilitation Hospital)
21. 2013-14: Cheri Blauwet* (Brigham and Women's Hospital/Stapulding) and Maria Reese* (Shirley Ryan AbilityLab)
22. 2014-15: David Woznica (Oak Park, IL) and Melinda Loveless* (University of Washington)
23. 2015-16: Samuel Chu* (Shirley Ryan AbilityLab) and Prakash Jayabalan* (Shirley Ryan AbilityLab)
24. 2016-17: Lindsay Ramey (University of Texas, Southwestern) and Julian Willoughby* (Carolinas Rehabilitation)
25. 2017-18: Jennifer Soo-Hoo* (NewYork-Presbyterian Hospital/Weill Cornell Medicine) and Stacey Bennis* (Loyola University Chicago Stritch School of Medicine)
26. 2018-19: Matthew Santa Barbara* (Henry Ford/Wayne State) and Lauren Splittergerber (Oak Park, IL)
27. 2019-20: Joseph Dadabo (Northshore University Health Systems) and Alexandria Haselhorst* (Seton Ascension/UT Dell Medical School)
28. 2020-21: Kevin Huang (Kaiser Permanente Woodland Hills) and Benjamin Washburn* (University of Missouri)
29. 2021-2022: Matthew Sherrier* (Medical University of South Carolina) and Dayna Yorks* (Spaulding/Harvard)
30. 2022-2023: Michael Lu* (National Rehabilitation Hospital) and Meghan Urban (Albany Medical College)

* Academic positions
Skills and Competencies

PATIENT CARE

2. Develop and implement patient management plans.
3. Perform competently all medical procedures, and provide services and patient education aimed at preventing secondary complications.
5. Identify indications for imaging, and electrodiagnostic studies.
6. Identify indications for peripheral joint injection treatment.
7. Identify indications for ordering fluoroscopically guided spinal injections, and be able to describe level and routes.
8. Understand risks of injection treatments to patients, and be able to consent a patient for injection.
9. Compose a therapeutic exercise prescription.
10. Identify conditions that require surgical referral.
11. Demonstrate the role of the physiatrist and the concept of the team approach to care, working effectively/collaboratively as leader of the team.
12. Communicate effectively and demonstrate caring/respectful behaviors with patients and staff.
13. Be able to perform peripheral joint and soft tissue injections under sterile technique safely.
14. Be able to perform spinal injection procedures under sterile technique safely.
15. Use fluoroscopy during procedure in a safe manner.
17. Understand the role for complementary/alternative medicine.
18. Be a well-rounded sports medicine physician who can care for athletes throughout the spectrum of life from children through the geriatric years.
19. Be able to function as a team physician.
20. Be able to provide an appropriate assessment and care in a sports medicine emergency.
22. Evaluate and treat patient problems independently and without supervision.

MEDICAL KNOWLEDGE

1. Generate a differential diagnosis for patients presenting with acute and chronic sports medicine injuries and other regional pain complaints.
2. Demonstrate knowledge of the biologic basis for tissue injury and repair.
3. Demonstrate knowledge of biologic pain mechanisms.
4. Understand kinesiology principles of the spine, shoulder, knee, ankle, foot.
5. Understand basics of reading imaging studies (plain films, MRI, and CT) of peripheral joints, spine and long bones.
6. Understand anatomy of the musculoskeletal system in detail and how each muscle functions to move and support the joint which it affects.
8. Understand physiologic effect of therapeutic modalities on soft tissues.
9. Understand the degenerative cascade of the spine.
11. Name expected effects and side effects of commonly used oral and injected medications.

PRACTICE BASED LEARNING AND IMPROVEMENT

1. Identify strengths, deficiencies, and limits in your knowledge and expertise.
2. Set learning and improvement goals.
3. Demonstrate that you can locate, appraise, and assimilate evidence from scientific studies related to their patients’ health problems.
4. Use information technology to optimize learning.
5. Actively participate in the education of others, including residents, health care providers and patients.

SYSTEM BASED PRACTICE
1. Understand financial and quality of life implications for the patient and society.
2. Advocate for quality patient care and assist patients in dealing with system complexities.
3. Partner with health care managers as appropriate to assess, coordinate, and improve health care and how these activities impact system performance.
4. Demonstrate understanding of how potential lost income or desire to return-to-play affects management decisions for patients with musculoskeletal injuries.
5. Demonstrate understanding of how a patient’s insurance status or income affects patient management decisions.
6. Be able to develop and implement a screening pre-participation physical for a sports medicine population.
7. Be able to develop and implement a plan for medical coverage of a mass-participation sporting event.
8. Use diagnostic and therapeutic procedures judiciously.

PROFESSIONALISM
1. Practice medicine with high ethical and moral standards.
2. Exemplify core humanistic values (honesty, integrity, caring, compassion, altruism, empathy, respect for others, trustworthiness).
3. Accept responsibility for own actions and decisions.
4. Apply ethical principles in obtaining informed consent.

INTERPERSONAL SKILLS AND COMMUNICATION
1. Use effective listening skills and elicit and provide information using effective nonverbal, explanatory, questioning, and writing skills.
2. Present material clearly and accurately to patients, coaches, athletic trainers, other sports medicine team members, and referring providers using effective verbal and nonverbal skills.
3. Communicate effectively with the support staff.