Does the Organization of Plastic Surgery into Independent Departments Affect Academic Productivity?

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INTRODUCTION: Plastic surgery has traditionally been a division of general surgery. However, there are an increasing number of plastic surgery departments. A microeconomic analysis of divisions versus departments in 2011 concluded that different surgical services under a single financial and administrative umbrella is no longer logical or optimal¹. The purpose of this study was to determine whether or not departmental status (independent department vs. division) affects academic productivity in plastic surgery, as measured by publications, citations and NIH funding.

MATERIALS AND METHODS: The American Council of Academic Plastic Surgeons (ACAPS) website was used to generate a list of all plastic surgery divisions/departments with residency programs. Scholarly metrics were determined for 955 faculty at the 88 ACGME plastic surgery departments and divisions with residency programs. Divisions and departments were ranked based on publications, citations and NIH funding and general characteristics were compared.

RESULTS: The majority of programs continue to be divisions of general surgery (64 vs 24). The highest cited plastic surgery program in this dataset was at the Brigham and Women's Hospital (division). Brigham and Women's Hospital (division) also had the highest total publications, and Stanford University (division) also had the highest total numbers of NIH awards. There were no clear differences between the top five institutions by each category regarding whether they were divisions or independent departments. Departments had higher numbers of integrated residents (9 vs. 5, p = 0.03), had a more even male to female ratio (2.8 vs 4.1, p = 0.06), and a trend towards higher numbers of PhDs (0.67 vs 0.28 p = 0.1).

CONCLUSIONS: No one program is the strongest in every metric of productivity, and the top five most academically productive programs using the metrics in this study represented both independent departments and divisions of general surgery. Based on this study, plastic surgery departments are at least equivalent to divisions and may be better resourced to meet their clinical obligations but also to develop their academic enterprise going forward.

1. Mar PL, Yu RA, Yu JC. Division or department: a microeconomic analysis. Plast. Reconstr. Surg. 127: 2487, 2011.