

Functional Fellowship

Trainee Position Description and Essential Functions

Functional

Position Identification: Non-ACGME Fellow (Acting Instructor)

Position Summary: The University of Washington Stereotactic and Functional Neurosurgery service offers a one-year CAST-accredited Functional Fellowship accredited by the American Board of Neurological Surgery Committee on Advanced Subspecialty Training (CAST), within a high-volume clinical training environment spanning the full spectrum of Stereotactic and Functional Neurological Surgery (SFNS). Clinical care is provided across multiple sites, including University of Washington Medical Center Montlake, Harborview Medical Center, and University of Washington Medical Center Northwest, with a strong emphasis on exposure to diverse surgical approaches and advanced technical experience.

The fellowship provides comprehensive clinical and research training across all SFNS subspecialty areas, including epilepsy surgery, movement disorder surgery, pain, eloquent cortex brain tumor surgery, and peripheral nerve surgery. We believe this multimodality, integrated training experience is essential for preparing the next generation of functional neurosurgeons. The breadth and depth of clinical and research opportunities at UW enable fellows to design an individualized training experience aligned with their professional goals and interests.

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General Overview of the Fellow Role

A Functional Neurosurgery Fellow is a post-residency physician undergoing advanced subspecialty training in stereotactic and functional neurosurgery, focused on treating disorders of neural circuit dysfunction. The fellow manages patients with movement disorders, epilepsy, chronic pain, spasticity, and selected neuropsychiatric conditions using techniques such as deep brain stimulation, epilepsy surgery, stereotactic lesioning, and neuromodulation therapies. Responsibilities include patient evaluation, surgical candidacy assessment, operative participation, neurophysiologic monitoring, and postoperative device programming. The fellow works within a multidisciplinary team and also contributes to teaching, supervision, conferences, and research, with the goal of achieving independent expertise in functional and device-based neurosurgical care.

UW GME Expectations for Professional Behavior

A Functional Neurosurgery Fellow is a post-residency physician in advanced training in stereotactic and functional neurosurgery, focusing on movement disorders, epilepsy, pain, spasticity, and neuropsychiatric conditions. Fellows provide supervised patient evaluation, surgical planning, neuromodulation procedures, and device management while collaborating in multidisciplinary care, teaching, research, and progressive operative independence.

UW GME Expectations for Professional Behavior

- All fellows must comply with the [UW Medicine Policy on Professional Conduct](#) and the UW Medicine [Compliance Code of Conduct](#)
- All fellows must comply with [GME Policies](#)

Essential Functions

Essential functions for a Functional Neurosurgery Fellow include clinical, cognitive, operative, communication, physical, and professional skills for safe stereotactic and neuromodulation training. Fellows must meet CAST and institutional requirements while demonstrating responsibilities including evaluating and managing complex neurologic disorders, performing DBS, stereo-EEG, and lesioning, and providing device programming. They integrate data-driven decisions, communicate effectively, maintain operative endurance, and engage in teaching and research.

Administrative Functions

The Functional Neurosurgery Fellow is responsible for completing onboarding, credentialing, licensure, mandatory training, and institutional compliance requirements; participating in clinical scheduling and call coverage; adhering to departmental and hospital policies; and maintaining accurate documentation of operative cases, procedures, and scholarly activity. Fellows must maintain professional communication, meet institutional requirements, support patient safety, and ensure accurate, timely administrative and clinical responsibilities throughout training.

Core Educational Functions

Essential Program Core Educational Functions include didactic learning, multidisciplinary conferences, and simulation training in functional neurosurgery topics such as movement disorders, epilepsy, and neuromodulation. Fellows participate in DBS, stereo-EEG, lesioning, and device programming with progressive autonomy, engage in research and quality improvement, teach trainees, and develop self-directed learning for independent subspecialty practice.

Patient Care

A Functional Neurosurgery Fellow provides comprehensive care for movement disorders, epilepsy, pain, psychiatric neurosurgical indications, and peripheral nerve conditions. Duties include outpatient evaluation, surgical candidacy assessment, and longitudinal management. Fellows perform stereotactic and neuromodulation procedures (DBS,

stereo-EEG, lesioning), integrate multidisciplinary data, manage perioperative care, respond to consultations, and ensure continuity of follow-up care.

Shift and Schedule Functions

Essential Shift and Schedule Functions for a Functional Neurosurgery Fellow include clinical duties across outpatient clinics, inpatient wards, ICU, OR, EMU, and procedural suites. Fellows work variable day, night, weekend, and holiday shifts, and provide attending-level call coverage for urgent neuromodulation and neurosurgical emergencies.

Cognitive Functions

Fellow are required to include advanced clinical reasoning and decision-making for stereotactic and neuromodulation surgery. Fellows integrate neurologic, psychiatric, imaging, and electrophysiologic data to guide patient selection, operative planning, and intraoperative adaptation for DBS, stereo-EEG, lesioning, and device management, while applying evidence-based, multidisciplinary, longitudinal care strategies.

Communication

Fellows must ensure clear verbal, written, and electronic communication with patients, families, and multidisciplinary teams. Fellows must convey complex neuromodulation risks, benefits, and plans, obtain informed consent, and ensure accurate documentation. They must communicate effectively in high-acuity settings, support safe handoffs, present cases, and maintain professionalism and confidentiality.

Physical and Psychomotor Functions

Fellows must demonstrate sensory acuity for interpreting neuroimaging, intraoperative data, and physiologic monitoring; mobility and endurance across OR, ICU, and clinic settings; and fine motor precision for stereotactic and microsurgical procedures. Fellows must safely perform examinations, operate complex systems, and function in high-risk, sterile environments.

Statement of Nondiscrimination

The University of Washington prohibits discrimination, harassment, and sexual misconduct in any education program or activity that it operates. Individuals may report concerns, make complaints, or direct inquiries to the Civil Rights Compliance Office. Please refer to the University's Statement of Nondiscrimination for additional information.

This document reflects requirements, established practices, policies, procedures, and resources as of the date of publication; however, portions of this document may be updated periodically in accordance with changes in applicable laws, accreditation requirements, institutional policies, clinical practices, and available resources. Continued participation in the fellowship program constitutes acknowledgment of and agreement to

adhere to such updates. The program will communicate substantive changes to fellows through official program communications and institutional channels.

Reasonable Accommodation Statement

A fellow must be able to perform the essential functions of the fellowship position with or without an approved reasonable accommodation. Reasonable accommodations are determined through an interactive process involving the fellow, the fellowship program, Graduate Medical Education, Human Resources, and applicable institutional offices in accordance with federal, state, and institutional policies.