

Abstract

Background: As assisted reproductive technologies including oocyte freezing and in vitro fertilization become more available, otolaryngology residents undergoing rigorous training may desire to explore such avenues; however, institutional support and fertility preservation education remain limited.

Objective: To assess perspectives and institutional support regarding assisted reproductive technologies among female U.S. otolaryngology residents.

Study Design: Cross-sectional survey study.

Setting: ACGME-accredited U.S. otolaryngology residency programs from June 2024 to August 2025.

Methods: A 15-question anonymous REDCap survey was distributed to otolaryngology residents examining demographics, reproductive goals, and program support for assisted reproductive technologies.

Results: Of 48 respondents (response rate 6.53%), an overwhelming majority (87.5%) planned first childbirth after age 30, and 83.3% reported delaying pregnancy during residency; while 68.8% expressed interest in oocyte freezing, only 18.8% reported employee-sponsored fertility benefits, and 89.6% received no fertility preservation education.

Discussion: Findings highlight a mismatch between rigorous residency demands and family planning. While avenues exist for preserving fertility, lack of support and education complicate navigating these processes. Expanding benefits, integrating fertility education into residency curricula, and fostering open dialogue may support resident well-being.

Conclusion: Female otolaryngology residents face barriers to family planning goals and may benefit from enhanced institutional policies and resource access.