Clarification on Requirements Regarding Family Planning
Review Committee for Obstetrics and Gynecology

Clarification of Program Requirements IV.C.7.-IV.C.7.c)
The ACGME accredits graduate medical education programs and the institutions that sponsor them. It establishes and maintains accreditation standards (Program Requirements) that reflect the practice of medicine in each specialty, as well as the program resources necessary to educate physicians in all elements of each specialty.

In the past, consistent with its role as an educational accreditor, the ACGME has not stated a “pro” or “con” position on pending legislation addressing family planning and elective abortion. Instead, it has responded to government inquiries relating to the potential accreditation effect of such pending legislation. It will continue to do this.

ACGME Obstetrics and Gynecology Program Requirements IV.C.7.-IV.C.7.c) state:

IV.C.7. Family Planning and Contraception

IV.C.7.a) Programs must provide training or access to training in the provision of abortions, and this must be part of the planned curriculum. (Core)

IV.C.7.b) Residents who have a religious or moral objection may opt-out, and must not be required to participate in training in or performing induced abortions. (Core)

IV.C.7.c) Residents must have experience in managing complications of abortions and training in all forms of contraception, including reversible methods and sterilization. (Outcome)

The ACGME Review Committee for Obstetrics and Gynecology examines each obstetrics and gynecology residency program’s curriculum on contraception, family planning, and abortion to determine its substantial compliance with the above requirements. All programs must have an established curriculum for family planning, including for complications of abortions and provisions for the opportunity for direct procedural training in terminations of pregnancy for those residents who desire it.

Access to experience with induced abortion must be part of residency education. Programs with restrictions to the provision of family planning services or the performance of abortions at their institutions must make arrangements for such resident experience to occur at another institution. Programs must be structured such that residents may “opt out” rather than needing to “opt in” to this curriculum, education, and training.

The program must allow those residents who do not desire to participate in an aspect of family planning education and training to “opt out” of this experience. Even if no residents have
requested the family planning experience or procedural training, the Committee would consider a program with an “opt out” curriculum to be in substantial compliance with the requirements.

If a program does not have a specific family planning curriculum that includes direct procedural training in abortions, this may prevent a resident from acquiring desired competency in family planning and uterine evacuation techniques. In this situation, there would be no structured curriculum or experience in the program, unless it is requested by and developed for a resident desiring training. Such a program would be considered to have an “opt in” curriculum, and the Committee would find this program to be non-compliant with the requirements.

Residents may record in the ACGME Case Log System a range of surgical uterine evacuation techniques, including surgical management of incomplete abortions, missed abortions, therapeutic abortions, and elective abortions.

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