ACGME Program Requirements for Graduate Medical Education in Reproductive Endocrinology and Infertility
Summary and Impact of Focused Requirement Revisions


Requirement Revision (significant change only):

I.E.2. The program director must monitor the impact of other learners on the experience of the fellows. (Core)

I.E.3. Prior to the appointment of reproductive endocrinology and infertility fellowship-level learners to non-ACGME-accredited program in the department, a written statement outlining the areas of education, clinical responsibilities, duration of the appointment of each learner in a non-ACGME accredited program; and impact of such learners on the accrediting program must be submitted to the Review Committee. (Core)

I.E.4. The program director must monitor the impact of such learners on the experience of ACGME-approved fellows. (Core)

I.E.5. The appointment of learners in a non-ACGME-accredited program must not detract from the educational experience of the reproductive endocrinology and infertility fellows in the ACGME-accredited program. (Core)

1. Describe the Review Committee’s rationale for this revision:
   The Committee believes the program director is in the best position to ensure reproductive endocrinology and infertility fellows are not adversely affected by other learners. As such, the Committee determined that the program director should monitor the impact of all learners on fellow education, not just fellows in non-ACGME-accredited programs. The revision reduces programs’ administrative burden by eliminating the need to notify the Committee regarding other learners.

2. How will the proposed requirement or revision improve resident/fellow education, patient safety, and/or patient care quality?
   Fellow education may be improved as program directors are now required to monitor how all other learners impact the fellows.

3. How will the proposed requirement or revision impact continuity of patient care?
   N/A

4. Will the proposed requirement or revision necessitate additional institutional resources (e.g., facilities, organization of other services, addition of faculty members, financial support; volume and variety of patients), if so, how?
   N/A

5. How will the proposed revision impact other accredited programs?
   The reproductive endocrinology and infertility program director may determine that residents or fellows in another ACGME-accredited program are having a negative
impact on fellows’ education. If this occurs, both program directors will need to develop and implement a plan to ensure all of the residents/fellows have the experiences needed to achieve competence in their (sub)specialties.

Requirement #: II.A.3.c)

Requirement Revision (significant change only):

[Qualifications of the program director:]

II.A.3.c) must include five years of experience as a maternal-fetal medicine physician following completion of a reproductive endocrinology and infertility fellowship, or qualifications that are acceptable to the Review Committee; (Core)

1. Describe the Review Committee’s rationale for this revision:
   While five years of experience as a reproductive endocrinology and infertility subspecialist before becoming a program director is preferable, the revision allows the Committee to consider a program director with fewer years of experience. This provides the opportunity for programs to propose a faculty member with less experience if that individual is the best person for the program director role.

2. How will the proposed requirement or revision improve resident/fellow education, patient safety, and/or patient care quality?
   The revision may improve fellow education by giving programs some flexibility in who can serve as the program director.

3. How will the proposed requirement or revision impact continuity of patient care?
   N/A

4. Will the proposed requirement or revision necessitate additional institutional resources (e.g., facilities, organization of other services, addition of faculty members, financial support; volume and variety of patients), if so, how?
   N/A

5. How will the proposed revision impact other accredited programs?
   N/A

Requirement #: III.A.1.c)-III.A.1.c).(2)

Requirement Revision (significant change only):

III.A.1.c) Fellow Eligibility Exception

The Review Committee for Obstetrics and Gynecology will allow the following exception to the fellowship eligibility requirements:

III.A.1.c).(1) An ACGME-accredited fellowship program may accept an exceptionally qualified international graduate applicant who does not satisfy the eligibility requirements listed in III.A.1., but who does
meet all of the following additional qualifications and conditions:
(Core)

III.A.1.c).(1).(a) evaluation by the program director and fellowship selection committee of the applicant’s suitability to enter the program, based on prior training and review of the summative evaluations of training in the core specialty; and, (Core)

III.A.1.c).(1).(b) review and approval of the applicant’s exceptional qualifications by the GMEC; and, (Core)

III.A.1.c).(1).(c) verification of Educational Commission for Foreign Medical Graduates (ECFMG) certification. (Core)

III.A.1.c).(2) Applicants accepted through this exception must have an evaluation of their performance by the Clinical Competency Committee within 12 weeks of matriculation. (Core)

1. Describe the Review Committee’s rationale for this revision:
The Committee determined that reproductive endocrinology and infertility programs should be able to make an exception to the eligibility requirements for an exceptionally qualified candidate.

2. How will the proposed requirement or revision improve resident/fellow education, patient safety, and/or patient care quality?
N/A

3. How will the proposed requirement or revision impact continuity of patient care?
N/A

4. Will the proposed requirement or revision necessitate additional institutional resources (e.g., facilities, organization of other services, addition of faculty members, financial support; volume and variety of patients), if so, how?
Reproductive endocrinology and infertility programs that choose to use the eligibility exception option may experience additional expenses associated with exceptionally qualified candidates (e.g., visa fees).

5. How will the proposed revision impact other accredited programs?
N/A

Requirement #: IV.C.1.a)

Requirement Revision (significant change only):

IV.C.1.a) Clinical experiences must prioritize continuity of patient care, ongoing supervision, longitudinal relationships with faculty members, and meaningful assessment and feedback. (Core)

1. Describe the Review Committee’s rationale for this revision:
The requirement reinforces the fact that high quality fellow education and safe patient care depend on sufficient time with faculty members and patients.
2. How will the proposed requirement or revision improve resident/fellow education, patient safety, and/or patient care quality?
   *More time with fellows improves faculty feedback. Ensuring continuity of care experiences will have a positive effect on patient safety and quality of care.*

3. How will the proposed requirement or revision impact continuity of patient care?
   *Clinical experiences will be required to incorporate continuity of care.*

4. Will the proposed requirement or revision necessitate additional institutional resources (e.g., facilities, organization of other services, addition of faculty members, financial support; volume and variety of patients), if so, how?
   *N/A*

5. How will the proposed revision impact other accredited programs?
   *N/A*

### Requirement #: IV.E.1.a)

#### Requirement Revision (significant change only):

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<tr>
<th>Requirement Revision</th>
<th>(Core)</th>
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<tbody>
<tr>
<td>IV.E.1.a)</td>
<td>No more than four hours per week, averaged over a four-week period, may occur on a weekday during regular office hours.</td>
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1. Describe the Review Committee’s rationale for this revision:
   *The Committee concluded that programs should be given the option of assigning fellows to independent practice. Independent practice is limited to four hours during regular office hours to ensure fellows devote to sufficient time to reproductive endocrinology and infertility-specific education to meet board certification requirements. The Committee has provided specialty-specific Background and Intent in the Program Requirements that includes additional information about independent practice hours and defines what is meant by “office hours.”*

2. How will the proposed requirement or revision improve resident/fellow education, patient safety, and/or patient care quality?
   *Fellows may have the opportunity to practice in their primary specialty.*

3. How will the proposed requirement or revision impact continuity of patient care?
   *N/A*

4. Will the proposed requirement or revision necessitate additional institutional resources (e.g., facilities, organization of other services, addition of faculty members, financial support; volume and variety of patients), if so, how?
   *N/A*

5. How will the proposed revision impact other accredited programs?
   *At some institutions, fellows practicing in their primary specialty may be permitted to independently supervise residents.*