



Specialty Update: Obstetrics and Gynecology

Gabriella Gosman, MD

Chair

Kathleen Quinn-Leering, PhD

Executive Director

SES090



Conflict of Interest Disclosure

Speakers:

Gabriella Gosman, MD

Kathleen Quinn-Leering, PhD

Disclosure to the Learner:

None of the speakers for this educational activity have relevant financial relationship(s) to disclose with ineligible companies whose primary business is producing, marketing, selling, re-selling, or distributing health care products used by or on patients.



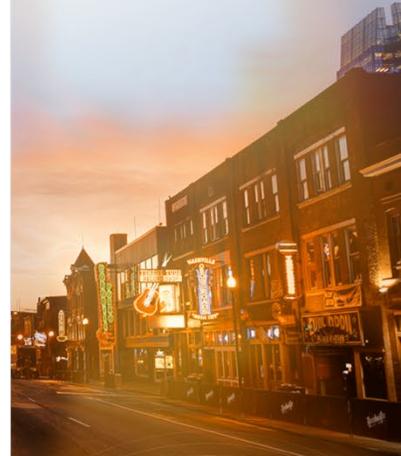
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Topics

- Review Committee Members, Staff, and Meetings
- Review Committee News
- ADS Annual Update
- ACGME News
- Q&A



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RC Membership

- All volunteers
- Diversity valued (e.g., gender, geography, subspecialty)
- 14 members nominated by ABOG, ACOG, AMA & AOA (6-year term)
- 1 resident member (2-year term)
- 1 public member (6-year term)*
- 3 ex-officio members from ABOG, ACOG and AOA

*RC seeking nominees for next public member



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RC Voting Members

Gabriella Gosman, MD, Chair
UPMC Magee-Womens Hospital

Meredith Alston, MD, Vice Chair
St. Joseph Hospital

Erika H. Banks, MD
NYU Langone Health-Long Island

Seine Chiang, MD
University of Washington

William Cliby, MD
Mayo Clinic

Marlene Corton, MD
University of Texas Southwestern

Adrienne Dade, MD*
Rush University

Felicia Lane, MD
University of California Irvine

Kurt Ludwig, DO*
Henry Ford Macomb Hospital

Joseph (Tony) Ogburn, MD
*University of Texas
Rio Grande Valley*

Michelle Owens, MD
University of Mississippi

* New Member as of 7/1/2022

Elizabeth H. Roberts, MBA
(Public Member)
Rhode Island

Randal Robinson, MD
*University of Texas Health
San Antonio*

Shanice Robinson, MD*
(Resident Member)
*University of Missouri-
Kansas City*

Scott A. Sullivan, MD
Inova Health System

Paul Sparzak, DO
*Cape Fear Valley Medical
Center*



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RC Staff

- Kathleen Quinn-Leering, PhD *Executive Director*
- Emma Breibart-White, MALS *Associate Executive Director*
- Yesenia Ruiz, MS *Accreditation Administrator*



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RC Meetings

- Three meetings a year: February, April, September
 - Agendas close ~2 months before meeting
- Upcoming meetings
 - April 26-27, 2023
 - September 20-21, 2023
 - February 7-9, 2024
 - April 18-19, 2024
 - September 18-19, 2024

FEB 3 2023	Agenda Closing Date
APR 26-27 2023	Meeting Date
<p>Because a new application requires a site visit, both the application and the Accreditation Field Representative's Site Visit Report verifying/clarifying the application must be received by the Review Committee staff by the agenda closing date.</p>	
<p>Submission Deadline for New Applications: September 2, 2022.</p>	
JUL 7 2023	Agenda Closing Date
SEP 20-21 2023	Meeting Date
<p>Because a new application requires a site visit, both the application and the Accreditation Field Representative's Site Visit Report verifying/clarifying the application must be received by the Review Committee staff by the agenda closing date.</p>	
<p>Submission Deadline for New Applications: February 3, 2023.</p>	

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OB/GYN Residency



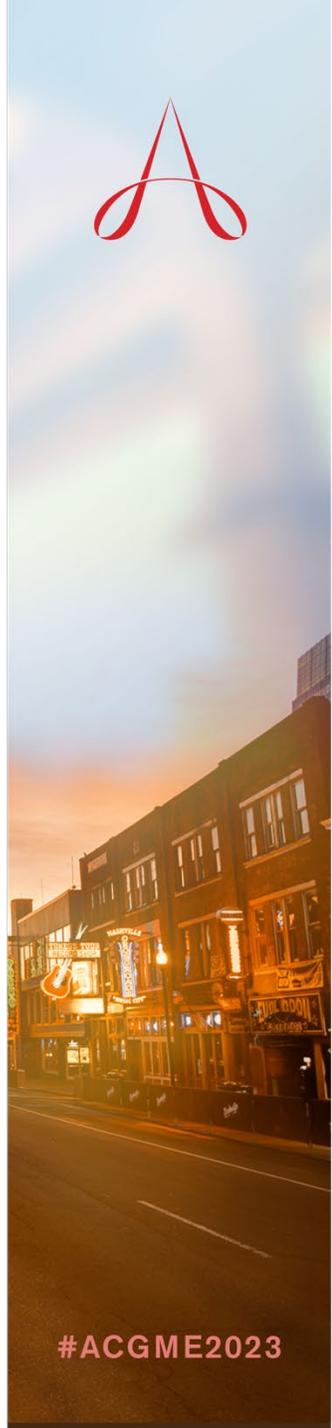
Accreditation Status	Count
Initial Accreditation	16
Initial Accreditation with Warning	3
Continued Accreditation without Outcomes	10
Continued Accreditation	260
Continued Accreditation with Warning	8
Probation	2
Total	299



Fellowships



	CFP	FPMRS	GO	MFM	REI
Initial Accreditation	29	5	6	6	3
Initial Accreditation with Warning	0	0	0	0	0
Continued Accred. without Outcomes	1	3	8	9	3
Continued Accreditation	0	49	53	87	43
Continued Accreditation with Warning	0	0	0	0	0
Probation	0	0	0	0	0
Total Programs	30	57	67	102	49



Review Committee News

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OB/GYN Family Planning Requirements

- RC's guiding principle has been that residents must be trained to provide comprehensive reproductive health care
- Revised OB/GYN Program Requirements in effect September 17, 2022
 - Comprehensive family planning education
 - All programs must provide clinical experience or access to clinical experience in the provision of abortions—in state or elsewhere
 - Opt-out structure remains
- **Thank you** to those who provided an update on abortion training in your program in Major Changes and Other Updates
 - Next Annual Update to the Accreditation Data System (ADS) *may* include abortion training questions



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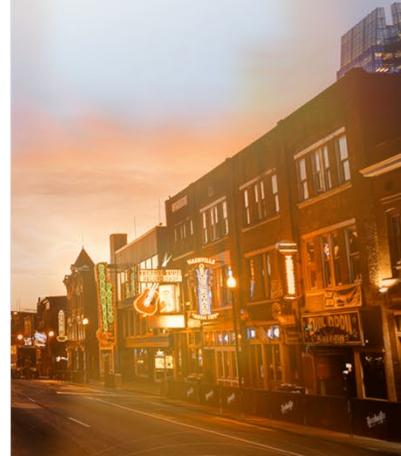
ACGME Surveys

- Surveys opened **February 13, 2023 for 8 weeks**
- This year, programs remain responsible for notifying and reminding residents/fellows and faculty to complete survey
- Starting in **2024**, likely that **ACGME** will **notify** residents/fellows and faculty when the survey opens



ACGME Resident Survey OB/GYN-specific Section

- **2022:** Revised Resident Survey **OB/GYN-specific** section
 - PGY 3 – 4
 - Items ask about preparedness for practice in specific procedural domains and progressive responsibility
- **2023:** Items added about preparedness for operative vaginal delivery, induced abortion, and miscarriage management
- This year's annual program review: RC **not** giving citations or AFIs for low ratings
 - Next year: TBD



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ACGME Surveys

Small Programs & ACGME Surveys

- Multi-year survey reports now available for small programs
- RC will use them in the annual review - may see citations or areas for improvement (AFI)
- Located in ADS > Survey Tab > View Reports

Academic Year: 2021-2022

Program: - Female pelvic medicine and reconstructive surger

View Reports

Report Type - Aggregated by Program	Resident/Fellow	Faculty
Resident/Fellow and Faculty Survey	Reports (circled in red)	Reports
Well-being Survey	Program [PDF] Program [Excel] Program (Multi-Year) (pointed to by red arrow) Specialty [PDF]	Reports

[back to top](#)



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OB/GYN Residency Case Log



- No more MIH minimum
- RC still taking into consideration COVID explanation for missed minimum
- RC understands some programs face challenges meeting operative vaginal delivery minimum
- *TIP: If minimum(s) missed, use Major Changes and Other Updates during the ADS Annual Update to provide explanation and outline program efforts to address deficiencies*



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Fellowship Case Logs: 2022-2023 AY

- CFP Case Log implemented
- GO, MFM and REI Case Logs revised to focus on fellowship-level activities and reduce the burden of logging
- On-going efforts to re-assess FPMRS Case Log with a plan to review minimums in 2023-2024
- **PLEASE** ensure fellows are consistently and accurately logging to facilitate data driven Case Log decisions
- Fellowship Case Log Information available at acgme.org > Specialties > OB/GYN > [Documents and Resources](#)



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Program Changes



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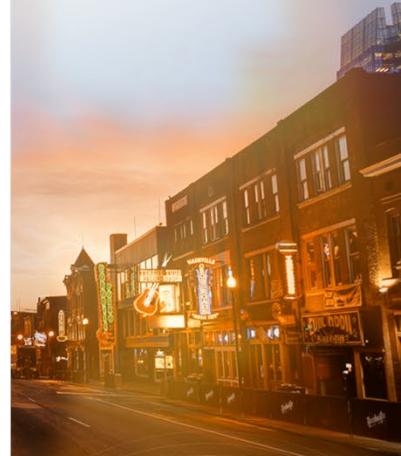
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Program Changes

- The following changes are submitted in ADS:
 - Complement
 - Program Director
 - Participating Site
 - Sites must be added if at least one month and a required experience for all residents/fellows
 - However, *can* add other sites and it helps RC understand resident/fellow experience
- **All** three changes require RC approval!



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Program Changes

- RC carefully reviews all changes submitted in ADS to ensure they benefit resident/fellow education
- On behalf of the RC staff: **PLEASE** enter **all** requested information **completely** and **accurately** 😊
- Reach out to ADS@acgme.org with questions



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Permanent Complement Increase Request

- RC will want to see sufficient patient/procedural volume
 - Most recent Graduate Case Log Report
 - Institutional Procedural/Patient Data
- Educational rationale should outline how increase will benefit resident/fellow education
 - Example of a strong rationale:



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The primary reasons we are requesting complement expansion are to pursue new educational opportunities, take fuller advantage of existing educational opportunities, and better balance obstetric and gynecologic education. We need a seventh resident to maintain what we are currently doing well and expand our schedule to include these new opportunities. We have three new OB/GYNs, one new FPMRS, and one new GYN ONC faculty. Simultaneously, our geographic area has experienced significant growth, while our resident presence has remained stable. We have kept pace with obstetric needs (without increasing resident workload) by incorporating more Advanced Practice Providers (APPs) in our OB triage and postpartum floors and growing our academic hospitalist division. We have not kept pace with the growth in our GYN operative space, leading to underutilization of this important experience. Every week we have GYN OR cases uncovered by residents. This has created an ideal environment in which to train seven OBGYN residents annually in a very balanced program with exceptional obstetric and gynecologic experience.

Adding a seventh resident allows for the addition of one core rotation each year or the expansion of existing rotations. Specific plans for schedule changes, with rationale, are as follows:

1. Addition of a GYN surgery rotation: To make use of uncovered GYN case volume and optimize double-scrubbing when appropriate, an additional GYN surgery rotation will be added PGY-4 year. Overall time on benign



Permanent Complement Increase Request

- Ensure alignment between educational rationale and proposed block diagram
- Use color to identify changes in **proposed** block diagram, for example:

Block	1	2	3	4	5	Total Count
Site	1	1	1	1	2	N/A
Rotation Name	OB	OB	Ben Gyn	GYN	REI	N/A
Half-day ambulatory care sessions (Number)	10	9	9	9	10	47
Does rotation address family planning and contraception?	Yes	Yes	Yes	Yes	Yes	N/A
Does rotation provide training/access to training in provision of abortions?	No	No	No	No	No	N/A

- See [acgme.org > Specialties > OB/GYN > Documents and Resources > Request for Changes in Resident/Fellow Complement](https://www.acgme.org/Specialties/ObGyn/Documents-and-Resources/Request-for-Changes-in-Resident-Fellow-Complement)



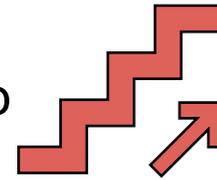
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New Programs and Permanent Complement Increases

- If approved, the number of residents/fellows is expected to rollout **year by year** until the full complement is reached
- In some circumstances, the Committee will consider a first- **and** second-year resident/fellow start the initial year of approval
- Questions? See [OB/GYN FAQs](#) or contact RC staff



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Reminders



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International Rotations

Guidance for international rotations is available at [acgme.org](https://www.acgme.org) > Specialties > OB/GYN > [Documents and Resources](#)



International Rotations Review Committee for Obstetrics and Gynecology

Residents and fellows can participate in a two-to-six-week rotation abroad under two conditions:

- The rotation must clearly fulfill an educational purpose.
- The elements outlined below under “Required Documentation” must be documented in writing and maintained in the resident’s or fellow’s file and be available to the ACGME upon request. **This documentation should not be sent to the ACGME unless requested.**

Note: Procedural cases performed during this experience may be entered into the ACGME Case Log System.

Required Documentation

1. Educational rationale:
 - a. a statement describing the unique educational experience that will be provided to the resident or fellow during the international rotation
 - b. verification that this is an elective and not a required rotation
 - c. documentation that the primary purpose of this rotation is education rather than service
2. A description of the clinical experience, to include:
 - a. type of institution (governmental, non-governmental, private)
 - b. supervision and oversight
 - i. CV of the faculty member who will be the primary faculty supervisor for the resident or fellow
 - ii. a description of other faculty member(s) at the international site



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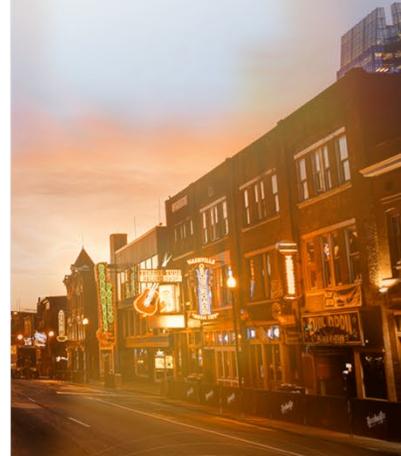
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Resident/Fellow Evaluations

- Longitudinal experiences must be evaluated at least every three months
- Evaluations must be completed by faculty members **and others**
- Semi-annual/summative evaluation:
 - Document review of the Milestones and Case Logs
 - Fellowships: Document progress on the thesis
 - At the end of the year, document readiness to progress to the next year



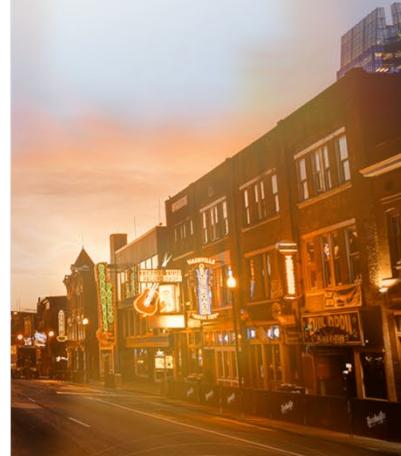
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Resident/Fellow Evaluations

- Final evaluation
 - Document review of the Milestones and Case Logs
 - Fellowships: Document completion of the thesis
 - Includes the statement: _____ has demonstrated the knowledge, skills, and behaviors necessary to enter autonomous practice.



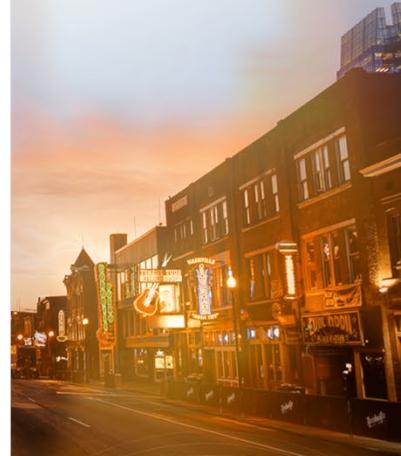
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PD, APD and PM Dedicated Time

- Program administration required FTE now based on program size
- OB/GYN **residency** programs
 - Minimum 40% FTE for **PD**: Programs with 7-10 approved positions
 - Minimum 50% FTE for **PD**: Programs with ≥ 11 approved positions
 - Programs with ≥ 16 approved positions have additional time for PD **and/or** APD
 - Minimum program manager FTE for is only for GME professional
 - Programs with ≥ 26 approved positions must have additional support from a PM **and/or** other administrative staff



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PD, APD and PM Dedicated Time

- OB/GYN **fellowship** programs:
 - Minimum 20% PD FTE is only for **PD**
 - Minimum program manager FTE is only for GME professional
- This year's annual program review: RC **not** giving citations or AFIs for non-compliance
- Next year: A citation or AFI may be issued for non-compliance
- *TIP: Ensure accurate PD, APD and PM % FTE is entered into ADS during the Annual Update*



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Letters of Notification

RC continues to share general information, updates and tips under “Other Comments”

Based on the information available to it at its recent meeting, the Review Committee accredited the program as follows:

Status: Continued Accreditation
Maximum Number of Residents: 6
Residents per Level: 2 - 2 - 2
Effective Date: 02/02/2022

The Review Committee commended the program for its demonstrated substantial compliance with the ACGME's Program Requirements and/or Institutional Requirements without any new citations.

OTHER COMMENTS



The Review Committee for Obstetrics and Gynecology would like to inform all programs of the following four items regarding diversity, transitions in care, fellow scholarly activity, and block diagrams:

Diversity: Programs are reminded to involve fellows and faculty members in the program's diversity efforts. The Committee uses the Fellow and Faculty Surveys' Diversity and Inclusion domain to help determine program compliance in this area.

Transitions in Care: The 2021 Faculty Survey results suggest fellowship faculty members may not be aware of the program's process for a fellow to transition care to another individual should the fellow be unable to perform their responsibilities due to fatigue, illness, or family emergency. Programs are reminded that there must be a process in place for transitioning care in these circumstances, and both fellows and faculty must be familiar with the process.

Fellow Scholarly Activity: Fellow scholarly work during the program that leads to a



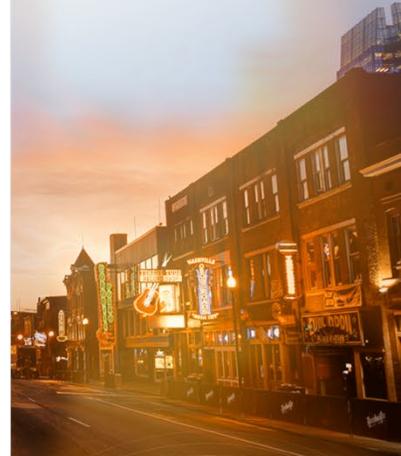
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Helpful RC Resources

- OB/GYN Program Requirement [FAQS](#) **UPDATED!**
- Case Log instructions and other materials/links available on the RC's [Documents and Resources](#) page



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Looking ahead. . .



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Competency-Based Medical Education (CBME)

- CBME is the future of GME
- What can programs do now?
 - Establish a **growth mindset** in your program
 - **Partner** with learners on their education
 - Assessment **with** (not to) learners
 - Create an Individualized Learning Plan **with** each learner
 - Identify strengths and areas for growth
 - Review and update semi-annually



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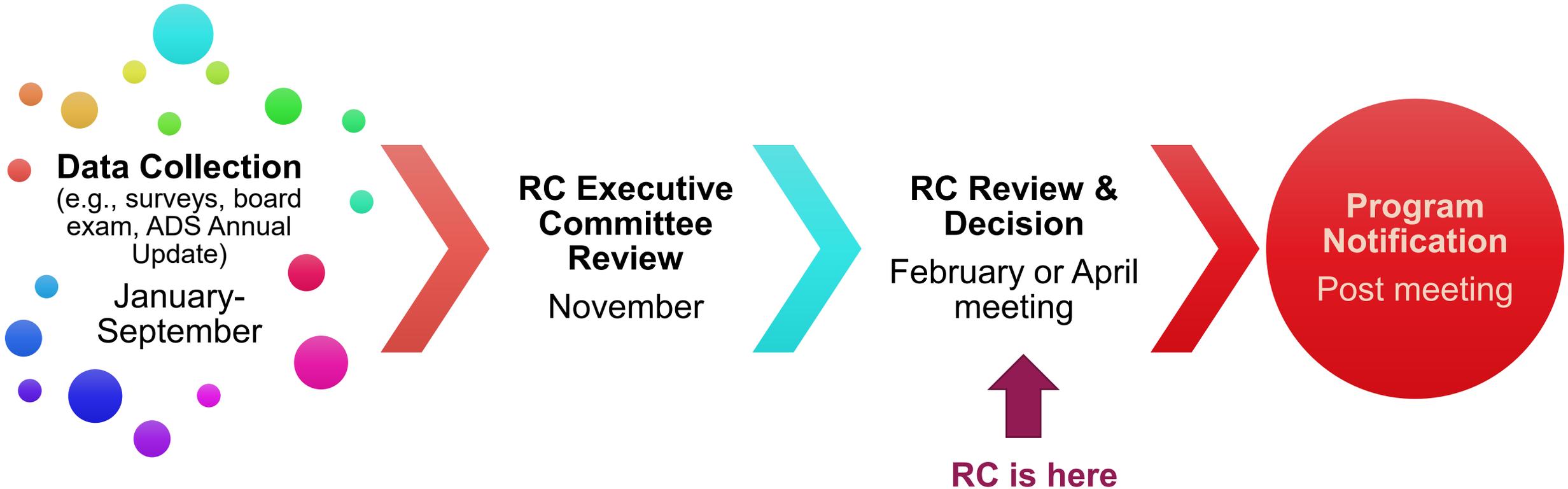
ADS Annual Update

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Annual Program Review



ADS Annual Update

- Late summer/early fall each year
- **Very** important to provide complete and accurate program information during the annual update
- The information entered provides key information to the RC that may be used during the annual program review
- ACGME continues efforts to make the update easier to complete



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Faculty Certification

- ABMS and AOA faculty certification data is now **automatically** populated in faculty profiles
- Programs are expected to review certification information and make corrections if needed
- **Manual** entry available for faculty who recently completed training (“board eligible”), missing, incorrect, or other certification data
 - *TIP: If incorrect certification information, check NPI number using the “Search National Provider ID” link in ADS*



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Faculty Certification: Manual Entry

Specialty Certification - Manual Entries

Only complete this section if the faculty member has additional certifications, is board eligible, is not certified or ABMS/AOA data above is inaccurate or missing.

+ Add

ABMS missing/inaccurate data
AOA missing/inaccurate data
RCPS(C)
Other Certifying Body
Not Certified
ABMS Board Eligible
AOA Board Eligible

Certification Name:

Specialty Certification - Manual Entries

Only complete this section if the faculty member has additional certifications, is board eligible, is not certified or ABMS/AOA data above is inaccurate or missing.

Cancel

Save

Certification Type:

Duration Type:

Initial Year:

Certification Name:

Other Certification:



Subspecialty Faculty Educators

General Information

Salutation:
Dr. ▾

First Name: ⓘ Middle Initial: Last Name:

Degrees: ⓘ

Program Specific Title:

- OB/GYN programs must have subspecialty faculty educators in each of the subspecialty areas, including Complex Family Planning
- **Must** identify these individuals in the faculty roster



Subspecialty Faculty Educators

If the identified subspecialty faculty educator is not certified in subspecialty, explain qualifications through the manual entry process, for example:

Specialty Certification - Manual Entries

i Only complete this section if the faculty member has additional certifications, is board eligible, is not certified or ABMS/AOA data above is inaccurate or missing.

Certification Type: ABMS Board Eligible Edit 🗑️ ↑ ↓

Certification Name: Complex family planning

Other Certification:

Initial Year:

Duration Type:

Year Completed GME: 2022

Explain Equivalent Qualifications for RC Consideration (or missing information): Will be taking the boards Fall 2023 + Add



Faculty Scholarly Activity

- Scholarly activity must be entered for **all** faculty members listed on the faculty roster
 - *TIP: To lessen data entry burden, review faculty roster instructions to see if any faculty can be removed*
 - *TIP: Faculty scholarly activity can be copied from another program IF a record is available to copy*



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Fellow Publications

Fellow publications **after** graduation can be reported in the ADS Annual Update – must be based on work during fellowship

The screenshot shows the ADS Annual Update interface. At the top, there is a navigation bar with tabs: Overview, Program, Faculty, Fellows, Sites, Surveys, Milestones, Case Logs, Summary, and Reports. A red arrow labeled '1' points to the 'Fellows' tab. Below the navigation bar, there is a '< Back To Fellows' link. Under 'Academic Years', a dropdown menu is set to '2021 - 2022'. A red arrow labeled '2' points to the 'Post Graduate PMIDs' button, which is highlighted in blue. Below this, there is a section titled 'Post Graduate PMIDs' with an 'Add' button. A red arrow labeled '3' points to the 'Add' button. The text in the 'Post Graduate PMIDs' section reads: 'For reporting year 2021-2022, in the previous 5 academic years (between 2020-2021 and 2016-2017), did any of your fellows participate in scholarly activity PMIDs that were published AFTER the fellow graduated? If applicable, add and only report scholarly activity that occurred during their fellowship and was not previously reported. PMIDs that were previously reported in this program will not be accepted.' Below this text, there is an 'Intent' section: 'Intent: Used as a supplement to the program's fellow scholarship from the last five graduate cohorts. Meant to capture work that the fellows had started while training in the program and were moved to publication after their graduation date. It is not meant for scholarly work after leaving the training program.' At the bottom, there is a table header with columns: PMID, Title, Author, and Date.



Block Diagrams

OB/GYN RC-specific block diagram instructions available on ACGME website

The screenshot shows the ACGME website interface. At the top left is the ACGME logo and the text "Accreditation Council for Graduate Medical Education". To the right is a "LOG INTO" section with links for "Accreditation Data System (ADS)", "ACGME Surveys", "Case Log System", and "Institution and Program Finder". Below this is a navigation menu with categories: "What We Do", "Designated Institutional Officials", "Program Directors and Coordinators", "Residents and Fellows", "Meetings and Educational Activities", "Data Collection Systems", and "Specialties". The breadcrumb trail reads "ACGME Home > Specialties > Obstetrics and Gynecology". The main heading is "Obstetrics and Gynecology". Underneath, there is a "Documents" section with a list of links. The third link, "Block Diagram: Obstetrics and Gynecology Residency (Fillable Diagram) REQUIRED", is highlighted with a yellow box. To the right of the documents list is a sidebar menu with options: "Overview", "Program Requirements and FAQs and Applications", "Milestones", and "Documents and Resources". A yellow arrow points from the highlighted document link to the "Documents and Resources" sidebar option.

Accreditation Council for Graduate Medical Education

LOG INTO
Accreditation Data System (ADS)
ACGME Surveys
Case Log System
Institution and Program Finder

What We Do | Designated Institutional Officials | Program Directors and Coordinators | Residents and Fellows | Meetings and Educational Activities | Data Collection Systems | Specialties

ACGME Home > Specialties > Obstetrics and Gynecology

Obstetrics and Gynecology

Documents

- Block Diagram Instructions and Example: Obstetrics and Gynecology Fellowships
- Block Diagram Instructions and Example: Obstetrics and Gynecology Residency
- Block Diagram: Obstetrics and Gynecology Residency (Fillable Diagram) REQUIRED**
- Case Log Information: Female Pelvic Medicine and Reconstructive Surgery
- Case Log Information: Obstetrics and Gynecology Residency

Overview »

Program Requirements and FAQs and Applications »

Milestones »

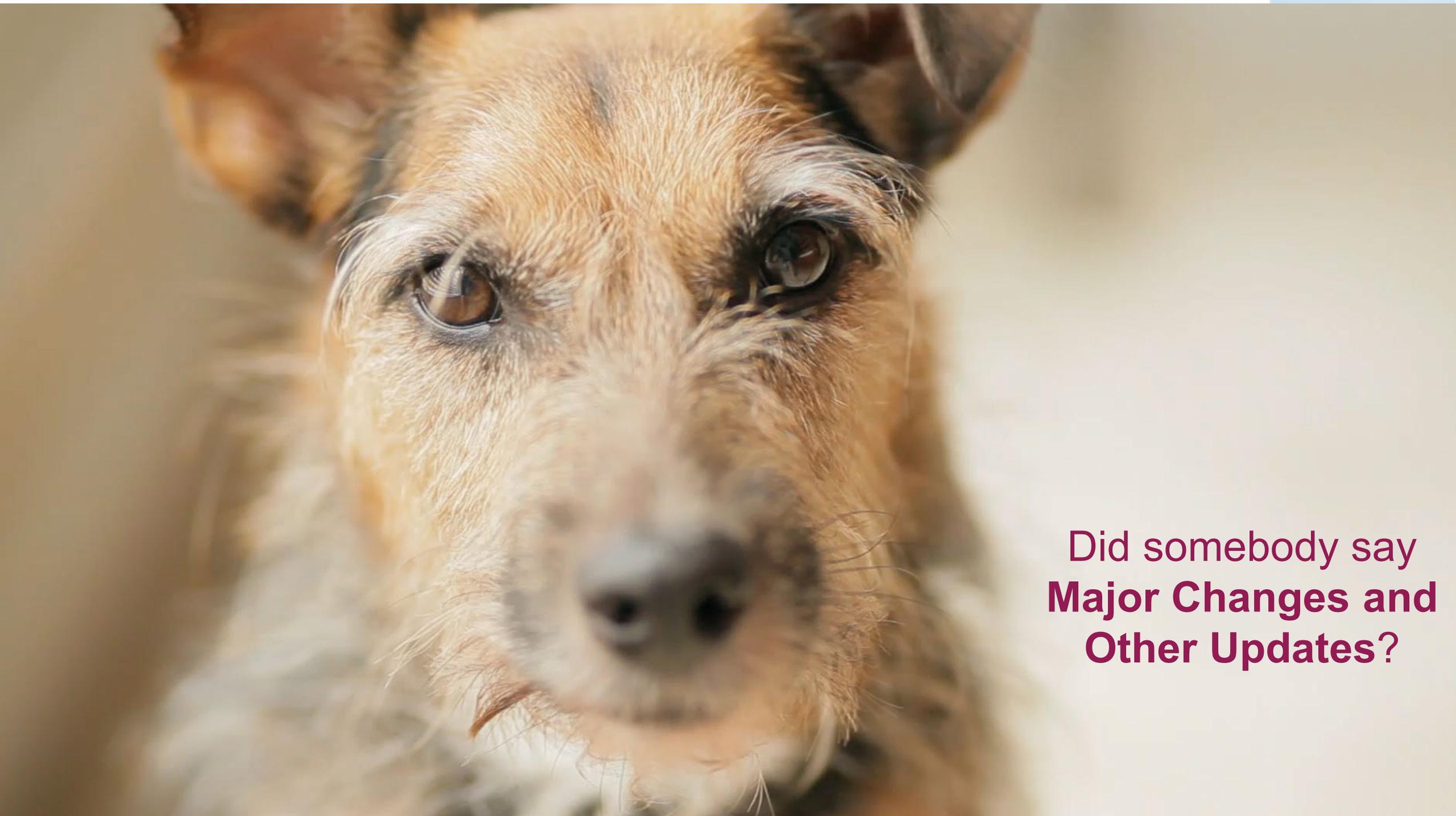
Documents and Resources ○



Fellowship Block Diagrams

- Must demonstrate compliance with the Program Requirements
 - CFP: 12 months clinical, 6 months research, 6 months at the discretion of the PD
 - FPMRS 36-month program: 24 months clinical, 12 months research
 - GO: 24 months clinical, 12 months research
 - REI: 18 months clinical, 12 months research, 6 months at the discretion of the PD
 - MFM: 18 months clinical (including 3 months ultrasound, 2 months outpatient, 2 months genetics, 2 months L&D supervisor, 1 month ICU), 12 months research, 6 months at discretion of the PD
- *TIP: Ensure **longitudinal** experiences are clearly shown in the blocks and/or in a note below—see block diagram instructions for options*



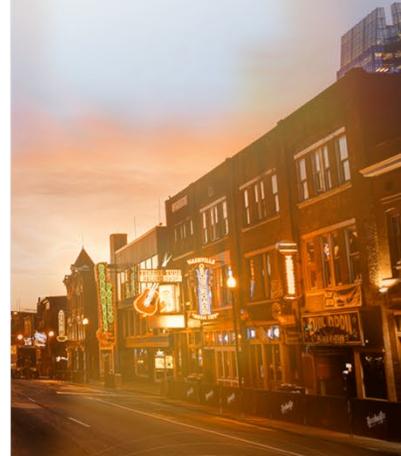


Did somebody say
**Major Changes and
Other Updates?**

Major Changes and Other Updates

Use **Major Changes and Other Updates** to communicate to the RC about:

- Low ACGME Survey ratings
- How the program has addressed any Areas for Improvement
- Program changes (rotations, faculty)
- Innovations
- *TIP: Keep a running document during the year of program highlights, changes, and challenges*



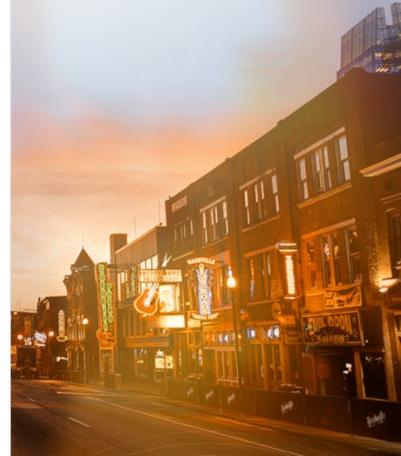
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Major Changes and Other Updates

Don't be afraid to air your program's dirty laundry!



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Responding to Citations

- Be clear and concise
- Demonstrate understanding of non-compliant area
- Outline implemented action plan
- Describe verifiable outcomes (e.g., survey trending up, minimums met)
 - If goals not met, explain why and outline next steps



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ADS Annual Update

Bottom Line:

Provide the RC with complete and accurate information about your program's compliance with the Program Requirements!



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ACGME News

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Applications

New application resource!
acgme.org > What We Do >
[Program Application Information](#)



Accreditation Council for
Graduate Medical Education

What We Do	Designated Institutional Officials	Program Directors and Coordinators	Residents and Fellows	Meetings and Educational Activities
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[ACGME Home](#) > [What We Do](#) > [Accreditation](#) > [Program Application Information](#)

Program Application Information

Overview

An ACGME-accredited Sponsoring Institution interested in seeking ACGME accreditation for a program must initiate, prepare, and submit a program application. It typically takes six to 12 months to gather the necessary information and complete the program application. After the submission of the application, it may take four to 12 months for the relevant Review Committee to make an accreditation decision regarding the program's application. This page provides additional information about the application submission and review process for program accreditation applications.

For an institution to apply for accreditation of a program, it must be accredited by the ACGME as a Sponsoring Institution. Learn more about Sponsoring Institution accreditation [here](#).

Steps for Submission of a New Program Application

Click on a step to jump to that section below.

- STEP 1**
Locate and read Program Requirements and FAQs
- STEP 2**
Locate and save Review Committee staff contact
- STEP 3**
Gather information needed to prepare the
- STEP 4**
Initiate the application in ADS.
- STEP 5**
Submit the application





New “Upload” Tab in ADS

Overview Program Faculty Residents Sites Surveys Milestones Case Logs Summary **Uploads** Reports

Original Accreditation Date: September 01, 1949
Accreditation Status: Continued Accreditation
Effective Date: February 02, 2022
Accredited Length of Training: 4 Year(s)
Program Format: Standard
Case Logs: Use Required by ACGME

Last Site Visit Date: August 07, 2012
Date of Next Site Visit (Approximate): No Information Currently Present
Self-Study Due Date: Postponed
10-Year Site Visit: Postponed

Total Approved Resident Positions: 32
Total Filled Resident Positions*: 32
Program Offers Preliminary/Other Positions: No

Complement Breakdown: Approved					
Years:	1	2	3	4	Total
Approved:	8.0	8.0	8.0	8.0	32.0

Complement Breakdown: Filled					
Years:	1	2	3	4	Total
Filled:	8.0	8.0	8.0	8.0	32.0

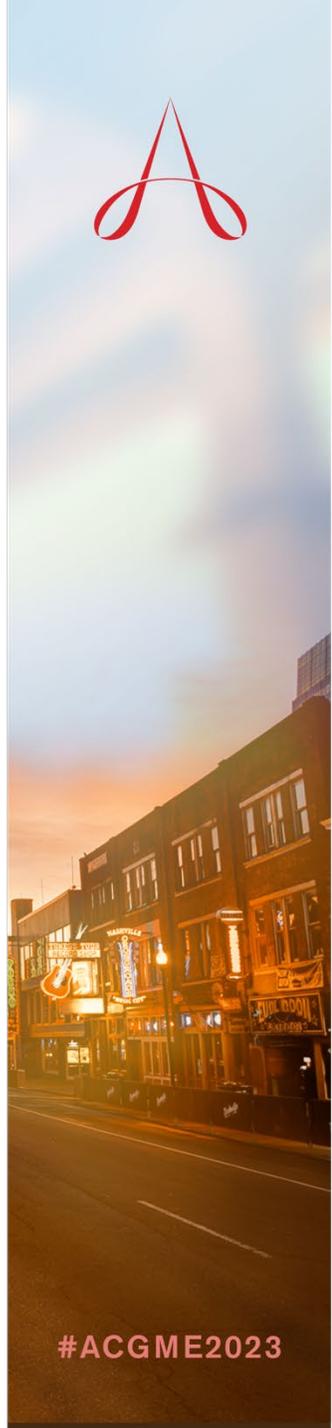
For program uploads

- Documents requested by a field representative
- Requests from the RC (e.g., Progress Report)

Self-Studies and 10-Year Site Visits

- Self-study and 10-year site visit process re-design still underway
- *What should programs do for now?*
Continue to conduct and document high quality annual program evaluations

Stay tuned!



Common Program Requirements

Revised **Common** Program Requirements (CPRs) in effect July 1, **2023**

- Number of CPRs reduced
- A few revisions may impact programs, e.g., annual program evaluation requirements significantly reduced
- Review revisions on acgme.org > What We Do > Common Program Requirements
 - *TIP: Review Tracked Changes Copy*

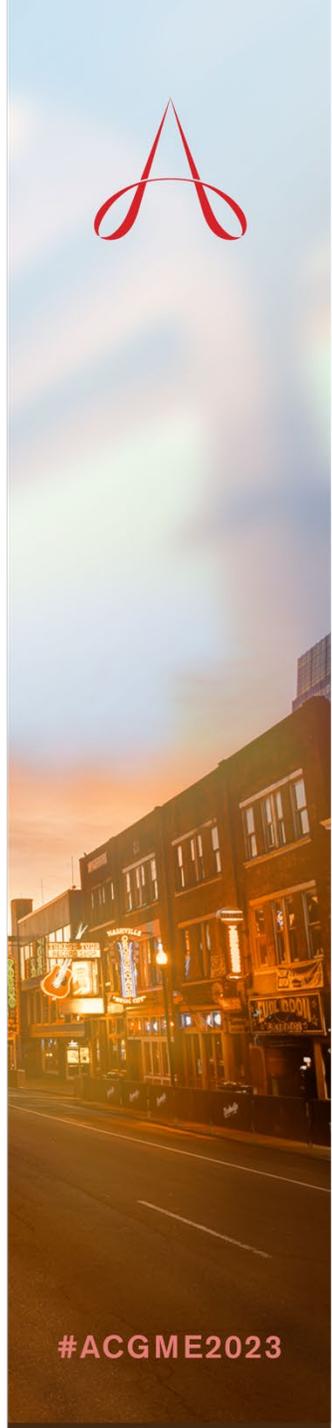
Common Program Requirements Future Effective Date

7/1/2023  [Common Program Requirements \(Residency\) »](#)

7/1/2023  [Common Program Requirements \(Residency\) Tracked Changes Copy »](#) 

7/1/2023  [Common Program Requirements \(Fellowship\) »](#)

7/1/2023  [Common Program Requirements \(Fellowship\) Tracked Changes Copy »](#) 



Resident/Fellow Leaves of Absence



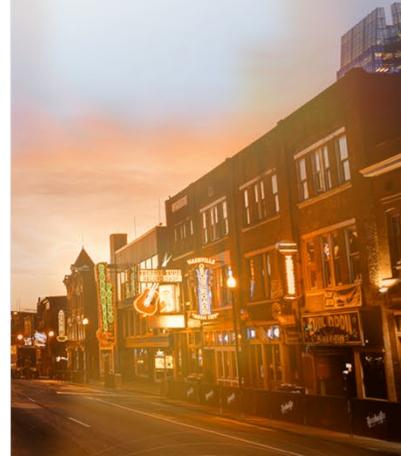
Effective July 1, 2022, the Institutional Requirements require Sponsoring Institutions to provide residents and fellows with at least six weeks of paid medical/parental/ caregiver leave

- Look to the Sponsoring Institution and Boards for guidance
- RC **requires** a resident/fellow to be in program for a minimum amount of time from start to finish
- RC **does not** have requirements about leaves or vacations
 - *No need to contact the RC about a leave*



Rural Track Program (RTP) Designation

- The ACGME has developed processes for programs that seek to create “rural tracks” *as defined by Centers for Medicare and Medicaid Services (CMS)*
- ACGME RTP designation options
 - Type 1 = separately accredited program
 - Type 2 = expansion of existing program with a new rural site
- Information available at [acgme.org > What We Do > Rural Track Program Designation](https://www.acgme.org/what-we-do/rural-track-program-designation)



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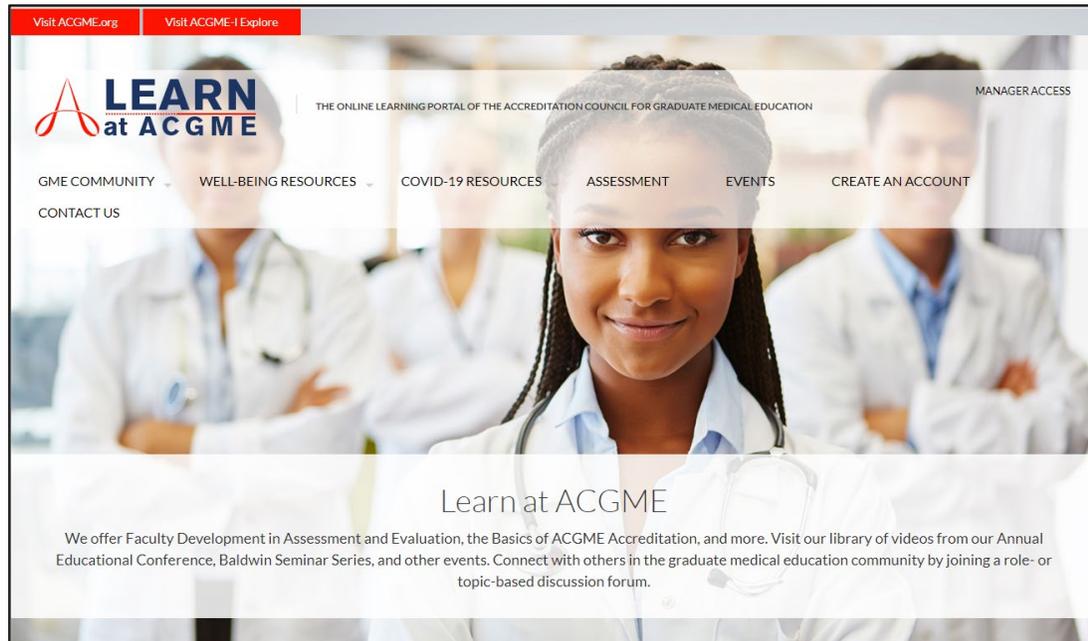
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Online Learning Portal



Visit our learning portal at
dl.acgme.org
or scan the QR code below.



Have a question or need assistance? Contact
desupport@acgme.org

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EQUITYMATTERS™

The History of Race in Medicine
From Enlightenment to Flexner

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The screenshot shows a video player interface with a small inset video of a man wearing a headset. The main content area has a purple background with a network of gold dots and lines. The text is white and purple. Logos for ACGME and EQUITYMATTERS are visible at the bottom.

Self-directed curricula provide the fundamentals of DEI and will enable participants to move through progressively more complex concepts.

CME credit available!

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Distance Learning



Faculty Development Courses

- Foundations of Competency-Based Medical Education
- Managing your Clinical Competency Committee
- Multi-Source Feedback





April 11, 2023

Registration required

An ACGME listening session focused on creating a space for program directors to share experiences and hear from peers regarding issues related to program director well-being.

Join the event for an open discussion of challenges faced by program directors and potential solutions.





Milestones 2.0 Update

Celebrating the completion of Milestones 2.0 for all specialties this spring!

Multi-year Milestones Program Evaluation will begin this fall. Many opportunities to share your thoughts via focus groups, surveys, and interviews. Watch the Milestones Engagement page and the weekly ACGME Communications email!





Milestones Resources

Resources are added and updated throughout the year

Current resources include:

- CCC Guidebook
- Assessment Guidebook
- DOCC and TEAM Assessment Tools
- Clinician Educator Milestones
- Resident and Fellow Guidebook



Clinician Educator Milestones

- Joint effort of the ACGME, ACCME, AAMC, and AACOM
- Designed to help develop teaching skills
- **Not** an ACGME requirement
- Available at [acgme.org > What We Do > Milestones > Resources](https://www.acgme.org/What-We-Do/Milestones/Resource)

Universal Pillar 1: Reflective Practice and Commitment to Personal Growth				
Level 1	Level 2	Level 3	Level 4	Level 5
Accepts responsibility for personal and professional development by establishing goals	Demonstrates openness to performance data (feedback from learners and other input) to inform goals	Seeks performance data episodically, with adaptability and humility	Consistently solicits specific performance data, with adaptability and humility, including from learners, that leads to behavior change	Role models consistently seeking performance data with adaptability and humility and making positive behavior changes
Identifies the factors that contribute to gap(s) between expectations and actual performance	Analyzes and reflects on the factors that contribute to gap(s) between expectations and actual performance	Analyzes, reflects on, and institutes behavioral change(s) to narrow the gap(s) between expectations and actual performance	Challenges personal assumptions and considers alternatives in narrowing the gap(s) between expectations and actual performance	Coaches others on reflective practice
Actively seeks opportunities to improve	Designs and implements a learning plan, with prompting	Independently creates and implements a learning plan	Uses performance data to measure the effectiveness of the learning plan and, when necessary, improves it	Facilitates the design and implementation of learning plans for others
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments: Not Yet Completed Level 1 <input type="checkbox"/>				



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Where to go for help?

RC Staff

[Obstetrics and Gynecology section of website](#) > Contact Us

- Program requirements
- Notification letters
- Complement requests
- Case Log content

Milestones Staff

milestones@acgme.org

- Milestones

ADS Staff

ADS@acgme.org

- ADS
- Surveys
- Case Log System

Field Activities Staff

fieldrepresentatives@acgme.org

- Site Visit
- Self-Study



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Questions?





Claim your CME today!

Complete the Evaluation for CME or Certificate of Completion!

The evaluation can be found in the mobile app and a link will be sent post-conference by email to attendees.

Evaluations are tied to your registered sessions.

Register/un-register sessions in the mobile app.

Deadline – March 24, 2023

Questions? cme@acgme.org

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Thank You

