



AMERICAN OSTEOPATHIC ASSOCIATION

**Basic Standards for Fellowship Training in
Maternal/Fetal Care and Operative Obstetrics
in Osteopathic Family Practice and Manipulative
Treatment**

**American Osteopathic Association
and the
American College of Osteopathic Family Physicians**

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PART ONE: INTRODUCTION

Definition

- 1.1 This document provides the basic minimal requirements and standards for establishing and maintaining osteopathic training programs in **Maternal/Fetal** Care and Operative Obstetrics in conjunction with Osteopathic Family Practice and Manipulative Treatment as approved by the American Osteopathic Association (AOA) and the American College of Osteopathic Family Physicians (ACOFP). These standards provide minimum requirements for advanced and concentrated training in **Maternal/Fetal** Care and Operative Obstetrics within an Osteopathic Family Practice Residency Program. In addition to these standards, all requirements as outlined in the Basic Standards for Residency Training in Osteopathic Family Practice and Manipulative Treatment must be met.
- 1.2 These basic standards are developed to allow for the training of physicians in advanced maternal care and skills including operative birth. It is the intent to allow programs flexibility in the way in which the standards are met. Upon the successful completion of this program in “**Maternal/Fetal** Care and Operative Obstetrics in Osteopathic Family Practice and Manipulative Treatment” the physician will be competent to provide obstetrical care including operative procedures as specified in these standards.

Purpose

- 1.3 To provide properly organized training programs, in both cognitive and procedural domains, that will enable the **fellow** to acquire the base of knowledge and skill competence needed to achieve expertise in **Maternal/Fetal** and operative obstetrical care in a family practice environment.
The training in the application of osteopathic principles and practice is an integral part of all programs.

Training Requirements

- 1.4 It is the intent of these standards that a **fellow** will achieve additional competence in **Maternal/Fetal** Care and Operative Obstetrics in one (1) year beyond the three (3) year family practice residency. To be accepted for advanced training in “**Maternal/Fetal** Care and Operative Obstetrics in Osteopathic Family Practice and Manipulative Treatment”, the physician must have successfully completed three years of an AOA/ACOFP-approved residency in family practice or be an AOBFP certified osteopathic family physician.
- 1.5 All programs must provide the **fellow** with extensive training in care of maternity patients requiring operative intervention. Care in all settings for medical and/or surgical problems will be emphasized. Special attention shall be placed on osteopathic principles and practice in the care of the patient. Additional training in other disciplines that are of special concern to the maternity patient must be provided.

PART TWO: INSTITUTIONAL REQUIREMENTS

Sponsoring Institution

- 2.1 This **fellowship** training program shall be in conjunction with the family practice program at the sponsoring institution.
- 2.2 A training program in this subspecialty shall commence only after it has received the approval of the AOA Program and Trainee Review Council (PTRC).
- 2.3 The institution must provide a sufficient number of supervised operative obstetrical patient cases to insure adequate training for a minimum of one **fellow**.
- 2.4 The institution shall provide access to carefully selected medical literature pertaining to the training in **Maternal/Fetal** Care and Operative Obstetrics.
- 2.5 Upon satisfactory completion of this training program, the institution shall award the **fellow** a certificate of completion. The certificate shall confirm the fulfillment of the program requirements, starting and completion dates of the program, the name of the training institution, and the name of the Program Director.

Appointment of **Fellows**

- 2.6 Candidates for acceptance into this subspecialty training may:
 - a. Be an AOBFP certified practicing Osteopathic Family Physician who desires a certificate of added qualification in **Maternal/Fetal** Care and Operative Obstetrics.
 - b. Be a graduate of an AOA/ACOFPP approved family practice residency program-or a resident in good standing at an AOA-approved family practice residency program, who desires additional training in **Maternal/Fetal** Care and Operative Obstetrics.

Administration of the Educational Program

- 2.7 At the beginning of the **fellowship** training program, there shall be a period devoted to the formal orientation of the **fellow** to the administrative and professional organization of the program facilities available in the laboratories, nursing, social services, risk management, quality assessment, dietetics, medical records, and pharmacy. **Fellows** will be advised regarding the duties, professional ethics and conduct towards other members of the health care team.
- 2.8 There shall be a **fellow** manual, which will include, but not be limited to the following:
 - a. Educational goals and objectives for all core and/or regularly assigned rotations.
 - b. A set of rules and regulations stating **fellow** duties and responsibilities, including hospital floor procedures and general orders.
 - c. Leave policies.
 - d. All financial arrangements including housing, meals and other benefits, as determined by the

institution and described in the **fellow** contract.

- e. An outline of the content of the orientation program.
 - f. Membership in the AOA and ACOFP is required.
 - g. Policies governing evaluation and appeal mechanisms.
- 2.9 If a **fellow** is given a leave of absence for reasons of maternity, physical or mental disabilities and returns to duty, he/she may continue the training to completion for the required fifty-two (52) weeks of training. The program shall have a written statement of policies regarding leave in the **fellow** manual.

PART THREE: FACULTY QUALIFICATIONS AND RESPONSIBILITIES

Program Director for Advanced Training Program

Qualifications

- 3.1 Must be certified by the AOA through the American Osteopathic Board of Family Physicians (AOBFP) in Osteopathic Family Practice and Manipulative Treatment.
- 3.2 Must meet the standards of the position as formulated in the Basic Standards for Residency Training in Osteopathic Family Practice and Manipulative Treatment of the ACOFP.
- 3.3 Must have the expertise to implement a training program in **Maternal**/Fetal Care and Operative Obstetrics and Osteopathic Family Practice and Manipulative Treatment.
- 3.4 **Must have an AOA CAQ in Maternal/Fetal Care and** shall demonstrate to the Committee on Education & Evaluation of ACOFP expertise in the field of **Maternal**/Fetal Care and Operative Obstetrics.

Responsibilities

- 3.5 Shall ensure oversight of this curriculum by qualified physicians in the area of **Maternal**/Fetal Care and Operative Obstetrics in Osteopathic Family Practice and Manipulative Treatment.
- 3.6 The overall design and implementation of this curriculum will be the responsibility of the family practice residency Program Director.

PART FOUR: FACILITIES

- 4.1 All programs must provide the facilities required for the education of **fellows**. These facilities must be geographically close enough to the primary training facility to permit efficient functioning of the educational program, or have the capacity to link facilities via live interactive video conferencing. The institution must assume the financial, technical and educational support necessary to maintain such facilities.

- 4.2 There must be facilities to allow surgical interventions, and adequately treat obstetrical complications.

PART FIVE: PROGRAM REQUIREMENTS

Synopsis

- 5.1 The **fellow** must participate in didactic activities relating to **Maternal**/Fetal Care and Obstetrics as directed by the Program Director.
- 5.2 The **fellow** must participate in a comprehensive study program consisting of reference materials, courses, and other formal training structured to develop a knowledge base in the field of obstetrics.
- 5.3 If necessary, the program must provide suitable arrangements for outside rotations to insure the complete education of the subspecialty **fellow** and for broadening the scope of training. All rotations must meet standards as formulated in the AOA Accreditation Document for Osteopathic Postdoctoral Training Institutions (OPTI) and the Basic Document for Postdoctoral Training Programs.
- 5.4 The teaching of procedural skills should occur within the larger cognitive context of the indications, options, and complications of these procedures. In addition, successful completion of this curriculum will require the candidate to demonstrate their familiarity with the principles of risk management, and the ACOFP training standards for obstetrical training.
- 5.5 Required components of this curriculum must include training in neonatology, obstetrical ultrasound, and genetic counseling.
- 5.6 Current certification in NALS and ALSO is required.
- 5.7 Attendance at obstetrical department educational sessions will be required and this shall become part of the candidate's portfolio.

Osteopathic Principles and Practice

- 5.8 The program shall integrate the principles and practices of osteopathic medicine into the diagnosis and treatment of the obstetrical patients in accordance to the standards outlined in the Basic Standards for Residency Training in Osteopathic Family Practice and Manipulative Treatment.

Cognitive Knowledge

Objectives

Upon successful completion of this program, the physician will be able to demonstrate competence in his/her ability to:

- 5.9 Describe the indications for cesarean section.
- 5.10 Describe options to cesarean section.
- 5.11 Describe conditions that increase risks of operative complications including but not limited to:

1. Preterm caesarean section
2. Grand multiparous
3. Placenta previa and accreta
4. Repeat c-section with extensive adhesions
5. Morbidly obese patients
6. Fetal abnormalities
7. Maternal coagulopathy
8. Multiple gestation

5.12 List the complications of cesarean sections:

1. Injury to the bowel or bladder
2. Extension of uterine incision into uterine arteries, cervix or vagina
3. Uterine atony
4. Uterine infection
5. Wound hematoma or infection
6. Coagulopathy or thromboembolic disease

5.13 Diagnose and manage common perinatal conditions such as:

1. Antepartum hemorrhage
2. Premature labor
3. Post maturity
4. Intrauterine growth retardation
5. Infections in pregnancy
6. Gestational diabetes
7. Hypertensive disorders
8. Fetal demise
9. Fetal distress
10. Chorioamnionitis
11. Malpresentation
12. Abnormal progression of labor
13. Postpartum hemorrhage in vaginal deliveries
14. Spontaneous abortion (threatened, complete, and incomplete)
15. Cesarean section (indications)
16. Post partum bleeding with cesarean section (uterine artery ligation, b-lynch suture)
17. Substance abuse
18. Pre-eclampsia
19. Rh incompatibility
20. Shoulder Dystocia
21. HELLP syndrome

Procedures

Synopsis

This **fellowship** program must ensure that each graduating **fellow** is competent in the performance of appropriate procedures. The **fellow** must be provided, through observed clinical training, educational experiences that will prepare him/her to perform procedures that are necessary to provide operative care to obstetrical patients.

Objectives

5.14 Mandatory Procedural Competence (Required Procedures)

The program must develop training and evaluation methodologies to document that each graduate is competent to perform the following procedures: (minimum number in parentheses)

- a. Vaginal delivery (100)
- b. Cesarean sections assisted (15).
- c. Cesarean sections- primary surgeon (25).
- d. Vacuum extraction (10).
- e. Repair of 3rd and 4th degree laceration.
- f. Manual removal of retained placenta.
- g. Manual rotation.
- h. Treatment of obstetrical emergencies.
- i. Neonatal intubation.
- j. Umbilical catheterization.
- k. Obstetrical ultrasound
- l. Pudental block anesthesia

5.15 Optional Procedures

The program must offer exposure to the following procedures and the **fellow** shall demonstrate knowledge in the following areas.

Documentation of experience is encouraged:

- a. Repair of bladder.
- b. Repair of lacerated cervix.
- c. Twin birth.
- d. Internal version.
- e. Breech presentation.
- f. External version.
- g. Repair of bowel.
- h. Epidural analgesia
- i. Cerclage of the cervix.
- j. Low or outlet forceps.
- k. Post Partum tubal ligation.
- l. Termination of pregnancy

Research and Scholarly Activity Requirements

Synopsis

- 5.16 The program shall include active involvement by the subspecialty **fellow** in scientific research or scholarly writing pertaining to the obstetrical patient.
- 5.17 This shall be in addition to the scholarly activity specified in Part Five, Program Requirements of the main body of this document.
- 5.18 Assume teaching responsibilities as assigned by the Program Director.

PART SIX: EVALUATION

Evaluation of **Fellows**

- 6.1 An integral part of the ongoing and exit evaluation is the portfolio of case management and procedures. Each **fellow** will be required to keep a portfolio. The following information will be kept in the portfolio. This should include but not limited to:
 - a. Case management records (as on hospital chart.)
 - Procedure (e.g. lower uterine segment cesarean section.)
 - Level of responsibility (e.g. primary surgeon.)
 - Indication (e.g. fetal distress.)
 - Complications (if any.)
 - Blood loss (HGB. preop and 2nd day, units transfused if any.)
 - Post op fever (if any.)
 - Apgar scores, cord gases and fetal outcome.
 - b. Teaching responsibilities
 - c. Self evaluation
 - d. CV
- 6.2 Formative Evaluation
 - a. All candidates will be evaluated quarterly by criteria standardized by the program.
- 6.3 Summative Evaluation
 - a. The Program Director will prepare a summative evaluation in “**Maternal**/Fetal Care and Operative Obstetrics in Osteopathic Family Practice and Manipulative Treatment”.
 - b. Evaluation in the seven core competencies found in Part Five, Program Requirements as outlined in the Basic Standards for Residency Training in Osteopathic Family Practice and Manipulative Treatment will be completed utilizing the AOA core competency annual form.

Program Evaluation

- 6.4 Evaluation of the program will be by the Committee on Education & Evaluation of the ACOFP.
- 6.5 Outside evaluation from the American College of Osteopathic Obstetricians and Gynecologists (ACCOG) is encouraged.