THE AMERICAN BOARD OF OBSTETRICS AND GYNECOLOGY
AND
THE AMERICAN BOARD OF MEDICAL GENETICS AND GENOMICS

PROGRAM REQUIREMENTS FOR COMBINED
MATERNAL-FETAL MEDICINE FELLOWSHIP /
MEDICAL GENETICS RESIDENCY

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A. INTRODUCTION

Combined training in Maternal-Fetal Medicine (MFM) and Medical Genetics (MG) should allow the development of physicians who are fully qualified in both disciplines. Physicians completing this training should be competent MFM subspecialists and MG specialists capable of professional activity in either discipline. It is anticipated that many trainees will develop careers focused on genetic diseases in pregnancy. The strengths of the two programs should complement each other to provide the optimal educational experience. The goal is to have the trainee become board certified by both the ABOG and ABMGG and participate in maintenance of certification.

The combined program should be considered separate from the MFM fellowship program and the MG residency program. Actions rendered against the combined program will not affect the MFM fellowship or MG residency; however, actions taken against the MFM fellowship or MG residency may affect the combined program.

In addition to these requirements, programs are required to abide by the:

1. ABOG Program Requirements for Fellowship Graduate Medical Education for Maternal-Fetal Medicine
2. ABOG’s Guide to Learning in Maternal-Fetal Medicine
3. ACGME Program Requirements for Graduate Medical Education in Medical Genetics

The Fellowship Department of the ABOG will be the administrator of the combined programs on behalf of the ABOG and ABMGG; therefore, the PIF as well as any other correspondence or questions should be emailed to fellowship@abog.org or mailed to the ABOG Fellowship Department. The ABOG Fellowship Department will share the submitted information with the ABMGG. All correspondence should be addressed to the ABOG Executive Director and the ABMGG Executive Director.

B. ACCREDITATION

1. New Program Application

To establish a combined program, a Program Information Form (PIF) must be completed and submitted. There is no fee required. The current PIF can be obtained from either the ABOG or ABMGG websites. Submission of a PIF to establish a combined program does not have to be delayed until the next accreditation review of the standard MFM program.

The PIF will be reviewed separately by the ABOG and ABMGG for approval. Each Board must approve the PIF before the program will be accredited.

Once a decision is rendered on the proposed program, a letter will be sent from each Board to the director of the combined program, with copies to select individuals. The cycle length will be linked to the cycle of the standard MFM program.
Approval from the ABOG and the ABMGG must be received before any trainees can be accepted into the combined program.

2. **Accredited Program Review**

Combined programs will be reviewed for continuing accreditation by the ABOG, on behalf of the ABOG and ABMGG, at the same time the standard MFM program is reviewed. At the designated time, the ABOG will schedule a site visit, and a separate PIF must be submitted to the ABOG along with the standard MFM PIF.

At the site visit, a representative will interview select MFM and MG faculty, fellows, residents, combined program trainees, and any ancillary faculty as deemed appropriate by the ABOG and the ABMGG. The list of interviewees is at the discretion of the ABOG and the ABMGG.

After the site visit, the submitted documents and all subsequent materials will be reviewed, and a status and cycle will be granted. The cycle length will be linked to the cycle of the standard MFM program.

**C. PROGRAM CRITERIA**

1. **Sponsoring Institution**

The ABOG-accredited fellowship program in MFM and the ACGME-accredited residency program in MG must be within the same sponsoring institution or the sponsoring institution must be a participant in an integrated multi-institutional program.

The sponsoring institution must provide:
- An administrative home within the department and institution where the director of combined program primarily functions
- Salaries and benefits for trainees that are arranged in such a way as to minimize difficulties/disparities for trainees, regardless of the rotations taken, to protect trainees from the vagaries of different institutional policies

2. **Program Administration**

   a. **Program Director**

      Combined programs must have a designated director who will be responsible for the administration of the program. The Program Director must be:
      - Certified in MFM, MG, or both; and
      - Either the director of the MFM fellowship program or the director of the MG residency program.

      The Program Director must have a sufficient amount of protected time to devote to the combined program.

   b. **Associate Program Director**

      Each combined program must have a designated Associate Program Director. The Associate Program Director must be certified in MFM, MG, or both. If the Program Director is certified in MFM, the Associate Program Director must be certified in MG, and conversely, if the Program Director is certified in MG, the Associate Program Director must be certified in MFM.
The Associate Program Director must have a sufficient amount of protected time to devote to the combined program.

c. **Assistant Director for Educational Oversight**

A combined program may, at its discretion, appoint one or more individuals as Assistant Director(s) for Educational Oversight to strengthen, merge, and support trainee education.

d. **Program Coordination**

The Program Director and Associate Program Director must meet at least quarterly to assure that the training is well coordinated, particularly in those areas where the specialty and subspecialty overlap. In addition, regular meetings of the entire MFM and MG teaching faculties should be scheduled to review the educational objectives of each training program. At least one trainee should be invited to attend these meetings.

e. **Responsibilities**

The Program Director and Associate Program Director are responsible for assuring all aspects of the program requirements are met. Together they should:

- Submit the initial application
- Provide notification should any significant changes occur in either of the MFM fellowship or MG residency programs
- Provide notification should any significant changes occur in an individual trainee’s program (e.g., extension of time, intent to transfer, change in rotation schedule, etc.)
- Complete evaluation forms for all trainees as required by the ABOG (MFM) and the ACGME (MG)

f. **Appointment of New Directors**

A program cannot function without a director and an associate director. Therefore, when a Program Director or Associate Program Director leaves the position, a suitable replacement must be appointed. ABOG and ABMGG must be notified of the departure, the name of the replacement, and the effective date. The new Program Director or Associate Program Director must be either the current Program Director of the MFM fellowship program or the MG residency program, and approval is automatic.

g. **Appointment of an Interim Program Director**

If an interim Program Director is appointed there is a limit to the time they may serve in that position. If no permanent Program Director is appointed and approved by ABOG and ABMGG after 12 months, the program will be automatically placed on probation. If no Program Director is appointed and approved at the end of 24 months, the program’s accreditation will be withdrawn.

3. **Trainees**

   a. **Qualifications**
A trainee entering a combined program must have met the requirements for participation as an MFM fellow and a MG resident*

* Fellow must meet the ABOG/ABMGG certification requirements as outlined on the ABOG/ABMGG websites.

b. Complement
Combined programs are approved for one trainee every other year, for a maximum number of two trainees in a four-year period. This complement is in addition to the standard MFM fellowship program and MG residency program complements.

4. Training Time
a. Minimum Requirements
The duration of training is a minimum of 48 months, and rotations must be in a minimum of one-month blocks, unless otherwise specified.

b. Allocation of Time
Combined programs must ensure that each trainee entering the program is allocated the following:

1) Medical Genetics
   • 18 months clinical*

2) Maternal-Fetal Medicine (effective July 1, 2013)
   • 15 months
     o 12 months clinical
     o 3 months electives
   • 2 months supervisor of a Labor and Delivery Unit
     o Minimum block is 2 weeks
     o Night and weekend call performed throughout the fellowship cannot apply towards this time requirement
   • 1 month of Critical Care
     o No MFM or Ob/Gyn duties, including night and weekend call

3) 12 months protected research (counts as 6 months MFM and 6 months MG)

*OB and/or MFM call may continue throughout the MG training period but must be approved by the Program Director and Associate Program Director prior to the beginning of training. The amount of call must be no more than that described by ABOG MFM guidelines. The call schedule must be adapted so that it does not interfere with clinical genetics daytime responsibilities more than two weekdays per month.

c. Rotations
1) Rotations in areas not directly related to Ob/Gyn and MFM must be part of MG training. These areas of training include, but are not limited to, the genetic disorders of children, adolescents, adults (including obstetrics), cancer, metabolic disease and other basic genetic areas, as delineated in the ACGME Program Requirements for Graduate Medical Education in Medical Genetics.
2) The first six months of MG residency must be consecutive with no more than 10% (one-half day per week) devoted to MFM continuity clinics.

3) Rotations appropriate for credit for both MFM and MG may occur, but no more than six months of rotations within the MG residency may be deemed “shared” with the MFM fellowship. Shared rotations may not occur until after the first six months of the MG residency is completed (See C.4.c.2.) and must have supervision by instructors from both specialties.

4) Efforts must be made to integrate the trainee with MFM fellows and MG categorical residents at all levels of training.

5) Must be a minimum of two continuous weeks each in clinical biochemical genetics, clinical molecular genetics, and clinical cytogenetics laboratories during MG, as described in the ACGME Program Requirements for Graduate Medical Education in Medical Genetics.

6) Must fulfill the MFM and MG training requirements for continuity clinics. This may include patients in specialty clinics. Clinics for patients seen in the MFM training may continue during MG training.

d. Leave Policy
Leave must be equally distributed between MFM and MG training time.

1) MFM in accordance to the ABOG Program Requirements for Fellowship Graduate Medical Education for Maternal-Fetal Medicine.

2) MG in accordance to the ACGME Program Requirements for Graduate Medical Education in Medical Genetics.

e. Withdrawal
Combined programs must inform a trainee who leaves before completing the program of the need to request ABOG and ABMGG approval to receive credit for training experience.

D. EDUCATIONAL CURRICULUM
Combined programs must be based on the written curricula of planned educational experiences of both MFM and MG and not simply a listing of rotations between the two. The written curricula must be reviewed by faculty and trainees. Avoid unnecessary duplication of educational experiences to provide as many clinical/educational opportunities as possible. All curricular requirements for both MFM and MG must be fulfilled.

1. Didactic Conferences and Lectures
Didactic conferences and lectures are mandatory during both MFM and MG
rotations. The didactic material and topics are outlined in the *ABOG Program Requirements for Fellowship Graduate Medical Education* for Maternal-Fetal Medicine and in the *ACGME Program Requirements for Graduate Medical Education in Medical Genetics.*

2. **Research**
   Trainees must complete a research project that is pertinent to the fields of MFM and MG. The project must result in a thesis that:
   
   a. A written manuscript is completed before the completion of the training;
   b. Meets the requirements outlined in the ABOG’s *Bulletin for Subspecialty Certification in Maternal-Fetal Medicine*; and
   c. Has been defended before an appropriate committee within the MFM and MG division/department.

   * For all fellows starting in July 2013, the thesis must be published or accepted for publication prior to submission for the MFM oral examination.

E. **EVALUATIONS**

   There must be adequate, ongoing evaluation of the knowledge, skills, and performance of trainees as well as a method of documenting procedures and providing written evaluations following each rotation. Formal written evaluations must be conducted according to each specialty/subspecialty’s requirements.

   1. MFM in accordance to the *ABOG Program Requirements for Fellowship Graduate Medical Education* for Maternal-Fetal Medicine.

   2. MG in accordance to the *ACGME Program Requirements for Graduate Medical Education in Medical Genetics.*