**New Application: Urogynecology and Reconstructive Pelvic Surgery**

**Review Committee for Obstetrics and Gynecology or Urology**

**ACGME**

**Oversight**

**Participating Sites**

1. Does the Sponsoring Institution also sponsor an ACGME-accredited residency program in either obstetrics and gynecology or urology? [PR 1.2.a.] YES  NO
2. Program Name and Number of the associated obstetrics and gynecology or urology residency program:

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| Click here to enter text. |

1. Briefly describe how the fellowship program is meaningfully involved with the associated residency program. [PR 1.2.b.] (Limit response to 200 words)

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**Resources**

1. Indicate whether the following resources are available at the primary clinical site and whether access to these resources is available at all times. [PR 1.8.a.]

|  | **Available at Primary Clinical Site** | **Accessible at All Times** |
| --- | --- | --- |
| Operating rooms | YES  NO | YES  NO |
| Ambulatory clinic facilities | YES  NO | YES  NO |
| Recovery rooms | YES  NO | YES  NO |
| Intensive care units | YES  NO | YES  NO |
| Blood banks | YES  NO | YES  NO |
| Diagnostic laboratories | YES  NO | YES  NO |
| Imaging services | YES  NO | YES  NO |

If no is checked for any of the resources, provide a brief explanation below. (Limit response to 200 words)

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1. Briefly describe the resources for clinical and laboratory research available to the fellowship. Include type of laboratory space, equipment, database access, faculty resources, statistical support, and other pertinent resources. [PR 1.8.b.] (Limit response to 200 words)

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1. Institutional Data: Enter the total number of procedures for a recent one year period (e.g., academic year, calendar year) at each participating site. The site number must match the participating site number listed on the Sites tab in ADS. If the count is zero, enter 0. [PR 1.8.b.]

|  | **Site #1** | **Site #2** | **Site #3** | **Site #4** | **Total** |
| --- | --- | --- | --- | --- | --- |
| **Diagnostic Studies** | | | | | |
| Complex urodynamics | # | # | # | # | # |
| **Procedures for Urinary Incontinence** | | | | | |
| Stress Incontinence | # | # | # | # | # |
| Periurethral injection | # | # | # | # | # |
| Sling procedures | # | # | # | # | # |
| Urgency Incontinence | # | # | # | # | # |
| Sacral nerve modulation | # | # | # | # | # |
| Botox Injection | # | # | # | # | # |
| **Surgery for Prolapse** | | | | | |
| Sacrocolpopexy | # | # | # | # | # |
| Colpocleisis | # | # | # | # | # |
| Vaginal colpopexy | # | # | # | # | # |
| Extraperitoneal | # | # | # | # | # |
| Intraperitoneal | # | # | # | # | # |
| Posterior repair | # | # | # | # | # |
| **Surgery on Urinary System** | | | | | |
| Urinary fistula repair | # | # | # | # | # |
| Urethral diverticulectomy | # | # | # | # | # |
| Ureteral stent placement | # | # | # | # | # |
| Retrograde pyelogram | # | # | # | # | # |
| Removal or revision of sling | # | # | # | # | # |
| Urethrolysis (transvaginal, secondary, open) | # | # | # | # | # |
| Closure of cystotomy | # | # | # | # | # |
| **Surgery on Genital System** | | | | | |
| Vaginal hysterectomy | # | # | # | # | # |
| Lap hysterectomy (total and supracervical) | # | # | # | # | # |
| Revision/removal prosthetic vaginal graft | # | # | # | # | # |
| **Surgery on Gastrointestinal System** | | | | | |
| Repair of anal sphincter laceration | # | # | # | # | # |
| Rectovaginal fistula repair | # | # | # | # | # |

**Personnel**

**Faculty**

1. List each physician faculty member with a special interest and expertise in anorectal disorders (fecal incontinence, functional anorectal pain, and functional defecation disorders) and rectovaginal and anovaginal fistulae. [PR 2.9.b.-2.9.b.1.]

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| --- | --- | --- |
|  | **Faculty Member Name(s)** | **(Sub)specialty** |
| **Anorectal disorders** | Click here to enter text. | Click here to enter text. |
| **Rectovaginal and anovaginal fistulae** | Click here to enter text. | Click here to enter text. |

**Educational Program**

**Professionalism**

1. Briefly describe one example of a learning activity in which fellows develop a commitment to carrying out professional responsibilities and an adherence to ethical principles. [PR 4.3.] (Limit response to 200 words)

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**Patient Care and Procedural Skills**

1. Briefly describe the settings and activities in which fellows develop the **skills** needed to care for patients with pelvic floor disorders. [PR 4.4.-4.5.f.] (Limit response to 200 words)

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1. Briefly describe how the program assesses fellows’ patient care and procedural skills. [PR 4.4.- 4.5.f.] (Limit response to 200 words)

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**Medical Knowledge**

1. Briefly describe the settings and activities in which fellows develop the knowledge needed to care for patients with pelvic floor disorders. [PR 4.6.-4.6.l.] (Limit response to 200 words)

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1. Briefly describe how the program assesses fellows’ medical knowledge. [PR 4.6.-4.6.l.] (Limit response to 200 words)

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**Practiced-based Learning and Improvement**

1. Briefly describe one learning activity in which fellows develop the ability to investigate and evaluate their care of patients, to appraise and assimilate scientific evidence, and to continuously improve patient care based on self-evaluation and life-long learning. [PR 4.7.] (Limit response to 200 words)

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**Interpersonal and Communication Skills**

1. Briefly describe one learning activity in which fellows develop interpersonal and communication skills that result in the effective exchange of information and collaboration with patients, their families, and/or health professionals. [CPR 4.8.] (Limit response to 200 words)

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**Systems-based Practice**

1. Briefly describe one learning activity through which fellows develop an awareness of and responsiveness to the larger context and system of health care, including the structural and social determinants of health, as well as the ability to call effectively on other resources in the system to provide optimal health care. [CPR 4.9.] (Limit response to 200 words)

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**Curriculum Organization and Fellow Experiences**

1. Describe the ways in which fellows are given supervised responsibility for the total care of the patient, including initial evaluation, establishment of diagnosis, selection of appropriate therapy, and management of complications. [PR 4.11.e.1.-4.11.e.2.]

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1. List regularly scheduled didactic activities below (e.g., lectures, journal club, grand rounds, morbidity and mortality conference). Designate whether the activity is required or optional (R=Required, RS=Required when on particular service or at that site, O=Optional), if the activity is conducted at the fellowship level, who is responsible for planning the activity, and frequency and duration. **List didactic activities in the order of R, then RS, then O**. [PR 4.11.f.- 4.11.f.2.]

| **Didactic Activity** | **R/RS/O** | **Fellowship Level? (Yes/No)** | **Who is responsible for planning the activity?** | **Frequency/Duration** |
| --- | --- | --- | --- | --- |
| Click or tap here to enter text. | Choose an item. | YES  NO | Click or tap here to enter text. | Click or tap here to enter text. |
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**Scholarship**

1. Briefly describe the process by which each fellow will complete a scholarly project. (For obstetrics and gynecology graduates this must be a thesis. For urology graduates, this must be a scholarly manuscript/quality improvement project.) [PR 4.15.a.-4.15.d.1. and 4.15.e.-4.15.e.3.] (Limit response to 200 words)

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1. Does each obstetrics and gynecology graduate defend their thesis/each urology graduate give an oral presentation of the scholarly project? [For OB/GYN see PR 4.15.d.1.; For Urology see PR 4.15.e.4.]

YES  NO