

CERTIFICATION STANDARDS UPDATE

SUBSPECIALTY: REPRODUCTIVE ENDOCRINOLOGY AND INFERTILITY

Starting with Academic Year 2022-2023¹, the American Board of Obstetrics and Gynecology (ABOG) will be implementing important changes in the Reproductive Endocrinology and Infertility (REI) certification standards to respond to the contemporary needs of fellows and advance the knowledge, judgment, and skills acquired to practice the subspecialty.

Change #1:

Renaming of the Clinical Experience standard to REI Core Clinical Experience to emphasize the importance of these topic areas and increase consistency among graduates' knowledge, judgment, and skills in REI.

These expanded domains are outlined in the REI Blueprint and include:

- Basic Science, Physiology, and Pathophysiology
- Diagnostic Techniques and Interpretation for the Management of Reproductive Disorders
- Evaluation, Diagnosis, and Management of Reproductive Endocrine Function and Disease
- Female Fertility, Female Infertility, and PCOS
- Male Infertility
- Recurrent Pregnancy Loss
- Assisted Reproductive Technology (ART) Techniques
- Evaluation, Diagnosis, and Management of Complex Reproductive Disorders
- Complex Reproductive Surgical Procedures
- Genetics
- Core Competencies and Cross Content

Change #2:

Increasing REI Core Clinical Experience from 12 months to 18 months. This emphasizes the importance of clinical training and the experiences that comprise the core knowledge, judgment, and skills needed to practice REI.

The current REI standards broadly define core clinical experience to permit programs to have flexibility in designing an REI curriculum and scheduling of clinical experiences. Programs should consider experience in genetics, male infertility, medical endocrinology, and pediatric endocrinology as parts of the REI core curriculum.

¹ These standards are effective for fellows starting by the 2022-2023 AY (July 1, 2022). Programs may implement these standards with the 2021-22 AY (July 1, 2021).

The *Bulletin for REI* also describes the core requirements of an REI curriculum as follows:

- The candidate must gain diverse experience in the management of a wide variety of clinical problems affecting the development, function, and aging of the human reproductive system to include disorders of both men and women. Specifically, the candidate must be trained in the following areas:
 - Medical disorders
 - Surgical techniques
 - Ultrasound
 - Laboratory procedures

Change #3:

Enhancing flexibility for programs and fellows to increase clinical experience using elective months of training. In most programs, this may allow fellows to increase core clinical or elective clinical experiences by up to 6 months. The standard increases the opportunity for clinical experiences from up to 18 months previously to up to 24 months.

Fellows may choose to participate in more core clinical or elective clinical experiences that are related to REI and approved by the program and the fellow.

Change #4:

Enhancing flexibility for programs and fellows to integrate research experience during core clinical or elective clinical months of training. The focus of any clinical experience months must be clinical care (for example, evaluation, diagnosis, management, and procedures). However, ABOG does not restrict fellows from also participating in some research during these months. The new standard preserves a minimum of 12 months focused on research and allows some longitudinal participation in research in clinical months experience.

Change #5:

Enhancing flexibility in scheduling research and elective research months. The recommendation that a consecutive 12-month of block time be scheduled has been eliminated. A continuous 12-month research experience may be optimal for some types of research. Distributing the research months experience over 36 months is also appropriate.

It may be beneficial for some fellows to choose up to six months of additional research electives.

Change #6

Aligning the certification standards and leave policy to assist fellows who need to take approved parental, caregiver, or medical leave during a fellowship. In the 2019-2020 AY, ABOG increased the limits on approved leave that would not require an extension of a fellow's training. **The yearly limit increased from 8 weeks to 12 weeks. The total leave limit increased from 15 weeks to 20 weeks.** Any leave more than either of these thresholds requires an extension of a fellowship.

The new standards and policy permit a fellow to take up to 12 weeks in a year and up to 4 weeks in each of the other two years without the need to extend training. Fellows are required to meet the minimum number of 18 clinical core and 12 research months (with satisfactory evaluations) to meet the new certification standard. The policy now focuses more on meeting the minimum standards for certification than setting limits on leave.