

## **Subspecialty Procedural Volume Guidelines Review Committee for Obstetrics and Gynecology**

The Review Committee for Obstetrics and Gynecology has established guidelines for determining the procedural and patient strength of programs in gynecologic oncology, maternal-fetal medicine, and reproductive endocrinology and infertility. The Review Committee uses the guidelines when reviewing the institutional procedural data provided by programs in the specialty-specific application to determine if there is adequate procedural and patient volume in a program to educate fellows in the subspecialty. The specialty-specific application is part of the accreditation application, and is completed again when the program is reviewed after the one- to two-year Initial Accreditation period. The guidelines were a collaboration between the American Board of Obstetrics and Gynecology (ABOG) and the ACGME, as part the part of the process of transitioning accreditation of programs in these subspecialties from ABOG to the ACGME.

While a formal citation is not given if a program fails to meet a guideline, an Area for Improvement (AFI) is typically issued. Programs that receive an AFI are encouraged to consider ways to improve the procedural/patient volume in the specified area(s). Programs can use the guidelines to inform this discussion. Guideline counts are based on one fellow per year, and programs may need to adjust the counts depending on their respective complement.

It is important to emphasize that the guidelines are not procedural and patient minimum requirements for individual fellows. The ACGME collects Case Log data for several years before setting minimums for fellows. Once sufficient data are gathered, subspecialty experts will review the data and set required minimums. Programs will be informed when the minimum requirements are established.

Email Review Committee staff ([OBGYN-RC@acgme.org](mailto:OBGYN-RC@acgme.org)) with questions.

**Gynecologic Oncology  
Procedural Volume Guidelines**

<b>Category</b>	<b>Program Count* (at least)</b>
<b>Simple Hysterectomy, including:</b>	75
Vaginal	
Abdominal	
Laparoscopic	
Robotic	
<b>Surgical Treatment of Cervical Cancer, including:</b>	10
Radical trachelectomy	
Abdominal radical hysterectomy	
Laparoscopic radical hysterectomy	
Robotic radical hysterectomy	
Brachytherapy applicator placement	
<b>Surgical Treatment of Ovarian Cancer, including:</b>	40
Radical debulking, including:	
Primary debulking BSO/omentectomy +/- hysterectomy	
Interval debulking BSO/omentectomy +/- hysterectomy	
Splenectomy	
Diaphragmatic stripping	
Liver resection	
IP port placement	
<b>Intestinal Surgery, including:</b>	20
Colostomy	
Bowel resection and/or anastomosis	
Low rectal resection and/or anastomosis	
<b>Exenteration, including:</b>	2
Anterior	
Posterior	
Total	
<b>Vulvar Resection, including:</b>	10
Simple	
Radical	
<b>Vaginal Resection, including:</b>	No guideline set
Simple	
Radical	
<b>Urinary Diversions, including:</b>	2
Continent conduit	
Ileal conduit	
<b>Lymphadenectomy/Sentinel Node Biopsies, including:</b>	50
Inguinal	
Pelvic-open	
Pelvic-laparoscopic	
Pelvic-robotic	
Para-aortic-open	
Para-aortic-laparoscopic	
Para-aortic-robotic	

<b>Number of Cycles of Chemotherapy by Tumor Site, including:</b>	100
Cervical	
Ovarian/Fallopian Tube	
Uterine	
Vaginal	
Vulvar gestational trophoblastic disease	

\*Programs with one fellow per year

**Maternal-Fetal Medicine  
Procedural Volume Guidelines**

<b>Category</b>	<b>Program Count* (at least)</b>
Deliveries	1500
OB admissions	No guideline set
Primary Cesarean	>10%
Cervical cerclage	7
NICU admissions >37 wks	No guideline set
Infants < 1500 grams	50
Infants 1501-2499 grams	100
Antepartum admissions	100
Maternal transports	No guideline set
OB critical care patients (ICU only)	17
<b>Medical Complications of Pregnancy</b>	
Preexisting diabetes mellitus	25
Autoimmune connective tissue disease	10
Cardiac disease	No guideline set
Hypertensive diseases	100
Asthma	No guideline set
HIV	5
Hematologic disorders	25
Renal disease	10
<b>Fetal Disorders</b>	
Isoimmunization	5
Fetal malformations	100
Genetic disorders	100
Congenital viral or parasitic infections	25
<b>Obstetrical Complications</b>	
Placental abruption	10
Placental previa	10
Multiple gestations	50
Substance abuse	10
<b>Procedures</b>	
Ultrasounds for fetal anatomic surveys	500
Ultrasounds for fetal growth assessment	500
Nuchal translucency measurements	50
Fetal echocardiograms	No guideline set
Doppler assessments	100
Genetic amniocentesis	25
CVS (do not include mocks)	No guideline set
Fetal blood sampling/transfusion	No guideline set
Fetal therapeutic procedures	No guideline set
Genetic counseling	No guideline set

\*Programs with one fellow per year

**Reproductive Endocrinology and Infertility  
Procedural Volume Guidelines**

<b>Category</b>	<b>Program Count* (at least)</b>
<b>Laparotomies</b>	
Tubal anastomosis	No guideline set
Myomectomy	10
Endometriosis	No guideline set
Other	No guideline set
<b>Surgery for Developmental</b>	15
Any type	
<b>Laparoscopies, including:</b>	30
Diagnostic	
Operative-non-robotic	
Operative-robotic	
<b>Hysteroscopies, including:</b>	40
Diagnostic	
Operative	
<b>In Vitro Fertilization (IVF)</b>	
Retrievals	100
Transfers (includes mock)	80
<b>Ultrasound</b>	
Follicle scans	100
Complete gynecologic scans	50
First trimester pregnancies	40
Saline sonograms	40
<b>Intrauterine Insemination</b>	40

\*Programs with one fellow per year