## Frequently Asked Questions: Urogynecology and Reconstructive Pelvic Surgery Review Committee for Obstetrics and Gynecology, and Urology ACGME

(FAQs related to Urogynecology and Reconstructive Pelvic Surgery effective July 1, 2025)

Question	Answer
Introduction	
How much leave time can a fellow have during the educational program?  [Program Requirements: 4.1.a. and 4.1.b]	Fellows must complete the required 24- or 36-month educational program, but there are no program requirements related to time off during that period. Programs must have leave policies consistent with the policies of their Sponsoring Institution and the applicable board [American Board of Obstetrics and Gynecology (ABOG), American Osteopathic Board of Obstetrics and Gynecology (AOBOG), or American Board of Urology (ABU)].
	If it is determined a fellow's educational program needs to be extended, the program should update the fellow's completion date in the ACGME's Accreditation Data System (ADS). In addition, a temporary complement increase for the additional education period may need to be requested. Obstetrics and gynecology-based programs can find additional information in "Requests for Changes in Resident/Fellow Complement" available on the <a href="Documents and Resources">Documents and Resources</a> page of the Obstetrics and Gynecology section of the ACGME website. Urology-based programs can find additional information on the <a href="Documents and Resources">Documents and Resources</a> page of the Urology section of the ACGME website. A temporary increase in fellow complement for up to one month does not require the approval of either Review Committee.
Why is the educational program length different for obstetrics and gynecology graduates and urology graduates?  [Program Requirements: 4.1.a. and 4.1.b]	The different lengths of the educational program in the urogynecology and reconstructive pelvic surgery program are related to the number of months of education in the prerequisite residency programs. Obstetrics and gynecology programs are 48 months in length and urology programs are 60 months in length. In either case, the total required length of graduate medical education to be a physician in urogynecology and reconstructive pelvic surgery is 84 months.
Can an obstetrics and gynecology-based urogynecology and reconstructive pelvic surgery program require urology graduates to complete the 36-month program?	An obstetrics and gynecology-based urogynecology and reconstructive pelvic surgery program can determine if the required length of the educational program for urology graduates will be 24 or 36 months.
[Program Requirements: 4.1.a.and 3.2.a.2.]	

Personnel	
Is there a minimum number of hours the	The required minimum of 20 percent FTE is based on a 40-hour work week. The program director must be provided with sufficient support to devote at least eight hours a week to
program director must devote to the administration of the program per week?	administrative activities related to the urogynecology and reconstructive pelvic surgery
[Program Requirement: 2.3.a.]	program.
How should a program request the Committee's review to determine if a urogynecology and reconstructive pelvic surgery physician has the qualifications to serve as the faculty member with expertise in anorectal disorders, and/or rectovaginal	The program must submit a letter that describes the faculty member's qualifications to the Review Committee for Obstetrics and Gynecology or the Review Committee for Urology, as appropriate. The letter must be signed by the program director and the designated institutional official (DIO). A CV for the faculty member must be attached. Email the letter to the applicable Review Committee's Accreditation Administrator, contact information for whom can be found on either the Obstetrics and Gynecology or Urology section of the
and anovaginal fistulae?  [Program Requirements: 2.9.b2.9.b.1.]	ACGME website.
How should faculty certification information be reported in the ADS Faculty Roster?	Programs must enter both the primary and second certification information into the Faculty Roster.
[Program Requirement: 2.9.]	Obstetrics and gynecology-based programs:
	<ul> <li>Most faculty members have time-limited certifications, and programs should indicate continuing certification by "MOC/CC Requirements" for American Board of Medical Specialties (ABMS) certification or "Osteopathic Continuous Certification (OCC)" for American Osteopathic Association (AOA) certification.</li> </ul>
	<ul> <li>For faculty members who received a time-unlimited certificate (before re-certification was required) and are not engaged in maintenance of certification, choose "Time- unlimited."</li> </ul>
	<ul> <li>For faculty members who recently completed a program and are not yet certified, programs should enter "ABMS Board Eligible" or "AOA Board Eligible."</li> </ul>

For faculty members who do not have ABMS or AOA certification, and are not eligible for ABMS or AOA certification, programs should enter "Other Certifying Body," "Not Certified," "Certification Lapsed," or "RCPS(C)." "Other Certifying Body" and "Not Certified" require an explanation in the "Explain Equivalent Qualifications for RC Consideration" section. See the next two questions for additional information. Urology-based programs: • For faculty members with time limited certifications: o Use "Time Limited/Original Currently Valid" for faculty members who have their original certification, and "Re-certified" for faculty members who have recertified. The certification expiration date must be entered. OR Indicate continuing certification by "MOC/CC Requirements" for American Board of Medical Specialties (ABMS) certification or "Osteopathic Continuous Certification (OCC)" for American Osteopathic Association (AOA) certification. The certification expiration date must be entered. For faculty members who received a time-unlimited certificate (before re-certification was required) and are not engaged in maintenance of certification, choose "Timeunlimited." For faculty members who recently completed a program and are not yet certified, programs should enter "ABMS Board Eligible" or "AOA Board Eligible." For faculty members who do not have ABMS or AOA certification, and are not eligible for ABMS or AOA certification, programs should enter "Other Certifying Body," "Not Certified," "Certification Lapsed," or "RCPS(C)." "Other Certifying Body" and "Not Certified" require an explanation in the "Explain Equivalent Qualifications for RC Consideration" section. See the next two questions for additional information. When does a program need to request Programs are expected to submit an approval request for a faculty member: the Committee's review of the whose certification is from a country outside of the United States qualifications of a faculty member who is who does not plan on becoming certified by the ABOG, AOBOG, or ABU in the near not certified in urogynecology and future reconstructive pelvic surgery by ABOG, with lapsed ABOG, AOBOG, or ABU certification AOBOG, or ABU?

| A request is *not* needed for: | | Program Requirement: 2.9.7 | • a faculty member who re

- a faculty member who recently completed a urogynecology and reconstructive pelvic surgery fellowship in the United States and has not yet received certification.
- a faculty member in another (sub)specialty who is board certified in their (sub)specialty.

The program must submit a letter of support to the Review Committee signed by the program director and the designated institutional official (DIO). A CV for the faculty member must be attached. Email the letter to the applicable Review Committee's Accreditation Administrator, contact information for whom can be found on either the Obstetrics and Gynecology or Urology section of the ACGME website.
If the Review Committee approves the individual, the program should note the approval in the ADS Faculty Roster's Specialty Certification section under "Explain Equivalent Qualifications for RC Consideration."
In addition to the program director, each program must have at least one core <b>physician</b> faculty member. This individual may also serve as the required core faculty member who is qualified and available to be a research mentor. In this case, in addition to the program
director, there must at least <b>one</b> core faculty member in the program. Alternatively, the program may identify a different core faculty member, who may or may not be a physician, who is qualified and available to serve as a research mentor. In this case, in addition to the program director, there must be at least <b>two</b> core faculty members in the program.
Programs that are a subspecialty of obstetrics and gynecology can find instructions in "Requests for Changes in Resident/Fellow Complement," available on the <a href="Documents and Resources">Documents and Resources</a> page of the Obstetrics and Gynecology section of the ACGME website.
Programs that are a subspecialty of urology can find instructions in "Requests for Changes in Resident/Fellow Complement," available on the <u>Documents and Resources</u> page of the Urology section of the ACGME website.
The Committees believe peers enhance fellow learning and well-being. Two or more fellows also provide programs with greater flexibility in terms of fellow assignments, which may allow fellows to take advantage of unique educational opportunities.
The Committees understand that it will take newly accredited programs up to three years
to meet this requirement. New programs will not receive a citation for non-compliance with this requirement. Established programs with only one fellow should provide an

Educational Program	
Does the block diagram need to include information about longitudinal educational experiences?	The Review Committees recognize that many programs use longitudinal educational experiences for certain content areas based on what is in the best interest of fellow education in their setting. The block diagram provides the Review Committee with information about fellows' clinical experiences and as such, must include information about
[Program Requirements: 4.11.a4.11.e]	both block and longitudinal educational rotations. The information for longitudinal rotations may be provided within the individual blocks on the block diagram and/or in a note below. The information provided should specify where and when the education takes place and the total amount of time dedicated to the experience.
	No, elective rotations are not required. The ACGME defines elective rotations as rotations where fellows can choose an educational experience among several options provided by
[Program Requirement: 4.11.b.2.]	the program. The Review Committees recognize that programs will vary in their use of elective rotations based on what is in the best interest of fellow education in their setting.
Why are there different scholarly activity requirements for obstetrics and gynecology graduates and urology graduates?  [Program Requirements: 4.15.a4.15.e.4.]	The requirements are separated into different sections to outline in detail those for obstetrics and gynecology graduates and help ensure compliance with ABOG's thesis requirements. Both groups of graduates must complete a scholarly project under the guidance of a faculty mentor and the project must test a hypothesis using appropriate research design and methodology. In addition, a paper must be written, and an oral presentation must be given.
How should a program calculate fellows' hours of independent practice in their primary specialty to ensure compliance with the requirements?  [Program Requirements: 4.16a4.16.a.2.]	Independent practice is limited to no more than 10 percent of a fellow's time per week, averaged over four weeks. The number of allowable hours is based on a fellow's typical work week. However, the total number of hours per month may not exceed 24 hours. Of the allowable hours, there is a limit that can occur during regular office hours. No more than four hours per week, averaged over four weeks, can be scheduled during regular office hours (8:00 a.m. through 5:00 p.m.).
	Example 1: Fellows typically work 55 hours a week. They may be assigned to independent practice up to 5.5 hours per week or 22 hours total over a four-week period. Of these 22 hours, no more than 16 hours may take place during regular office hours. The remaining six hours must take place at night or weekends.
	Example 2: Fellows typically work 65 hours per week. Ten percent of 65 hours a week is 6.5 hours per week or 26 hours total over four weeks. This exceeds the limit of 24 hours of independent practice a month. The program may schedule up to 24 hours of independent practice in a month of which no more than 16 hours may take place during regular office hours. The remaining eight hours must take place at night or weekends.

Other

Where can a program find information about a Common Program Requirement?	See Common Program Requirements Frequently Asked Questions.
Where can a program find information about accreditation site visits?	See the <u>Site Visit section</u> of the ACGME website
Where can a program find information about the Case Log System?	Information about the Case Log System is available on the <u>Documents and Resources</u> page of the Obstetrics and Gynecology section of the ACGME website and on the <u>Documents and Resources</u> page of the Urology section of the ACGME website. Additional information is available in ADS (ADS > Case Log Tab > Reference Materials).