

REQUIREMENTS FOR ENDOUROLOGY FELLOWSHIP TRAINING

MISSION STATEMENT

The mission of Endourology Society fellowship training and certification of advanced clinical training programs is to facilitate the development of academic and clinical excellence in endourology and minimally Invasive Surgery.

I. SCOPE OF TRAINING

Fellowship training is focused on development of advanced knowledge, experience and technical skills in endourologic and laparoscopic and/or robotic assisted surgery. Fellows should also receive training in translational or basic science, as an underlying goal is the training of future academicians and potential national and international leaders in the specialty.

II. QUALIFICATION OF THE APPLICANT

The applicant must have completed a nationally approved and accredited residency program in urology.

III. DURATION OF FELLOWSHIP TRAINING

The duration of training is 24 months.

IV. INSTITUTIONAL REQUIREMENTS

The training program must have an affiliation with an ACGME or Royal College of Physicians and Surgeons accredited urology residency program or a nationally accredited alternative body such as a medical school. The sponsoring institution must have sufficient clinical volume and technology to meet the needs of the trainee.

The sponsoring institution must have a solid research environment. Fellows are expected to participate in translational and/or basic science research for at least 12 months. They must work in either a laboratory which has external funding (NIH, NCI, DOD, etc) or in which the mentor is doing novel research and has had a history of publications in high impact scientific journals. Another option is for the fellow to complete an advanced degree (Masters) during these two years such as a MPH, MPHE, Masters in clinical research, Masters in a biological discipline (pathology, biochemistry, molecular genetics, physiology, pharmacology etc.).

VI. DIRECTOR RESPONSIBILITIES / REQUIREMENTS

- A director must demonstrate commitment to the clinical and academic education of the trainee.
- A separate director for each clinical domain is recommended.
- A director must be 3 years out of fellowship/residency training and in practice at the sponsoring institution for at least 2 years.
- The focus of the director's practice and academic endeavors should be the respective domain area. The majority of the director's cases must be endourologic, laparoscopic or robotic. They must submit their case logs documenting this at the time of applying for a fellowship program and fellowship program review.
- A director must be actively involved in clinical, translational and/or basic science research.
- A director must be a member in good standing of the Endourological Society.
- The collective faculty of the fellowship program must have a minimum of 6 publications pertaining to the field every 2 years.
- The program director must have attended the World Congress meeting at least 2 out of every 3 years.
- Directors must be approved by the fellowship committee.
- The Program Director of an accredited fellowship may transfer the fellowship program to a different institution subject to application, review and approval by the fellowship committee.
- The director must formally evaluate the fellow at least every 6 months and forward these evaluations to the fellowship review committee via society headquarters. The number of index cases performed by the fellow in each of the following categories (independently, under indirect supervision, under direct supervision, assisted throughout or part of the procedure), the technical and clinical skills, research and academic acumen and productivity must be key components of this evaluation/report.
- Only index cases should be entered in the case log.
- The director(s) is responsible for approving and validating the fellow's case log that is submitted both at 6 months and at the end of the fellowship. It cannot be changed once these signed documents have been submitted.
- A summary of the director's fulfillment of these requirements must be submitted in

June of every year to the Endourology Society Office for review by the Fellowship Review Committee.

- Image-guided procedures, including percutaneous ablation, are encouraged.
- All programs will be required to submit a letter from their department/division chair stating that they will provide funding for salary and fringe.
- Programs will have to declare whether they will take only North American graduates or if they are willing to take foreign graduates as well.
- Program director endorsement letters must state that they have signed off on fellow case logs to ensure that the fellows did indeed enter their cases.

VII. FELLOWSHIP REQUIREMENTS

- For the combined Endourology Fellowship, trainees must actively participate in at least the following number of operations during the 2 year course of training: 60 retrograde ureteroscopic – uretero-rensoscopic cases, 60 percutaneous renal cases, 100 laparoscopic or robotic assisted cases. At least 20 of these 100 robotic assisted or laparoscopic cases must be upper and lower urinary tract operations.
- For the 2 year Endourology Fellowship in Lap/Robotics: 150 robotic cases, 30 of which should be upper and lower
- For the 2 year Endourology Fellowship in Endo/Stone: 60 PCNL, 120 Ureteroscopies.
- The fellow must participate in basic science/translational research for a minimum of 12 months or receive an advanced degree as previously described during the 2 year period of training. The 12-month research time can be non-consecutive but a 6 month minimal block is strongly encouraged.
- Fellows are required to have 1 published article in the Journal of Endourology, from work they performed during the fellowship with the fellow as the first author, to receive certification.
- The fellow must also submit a paper to the annual essay contest of the Endourological Society during the last year of training before successful certification can be awarded. This paper must be either a translational or basic science investigation or an original clinical study (reviews are not acceptable). Review of this paper by a panel of 9 judges will assess quality. The review committee is divided into Basic/Translational Science and Clinical Research categories. If the majority of the judges believe that the essay is thought to be of insufficient quality to be submitted for publication, the fellowship

committee will review the manuscript to determine if it is acceptable for certification. If not, the fellow will be given 4 weeks to submit a revised manuscript to the fellowship committee for review. If the committee determines that the revised manuscript is again deficient, the fellow will not receive a certificate. The program will be given a warning if the majority of judges determine that the initial essay is not suitable to be submitted for publication. If this again occurs the following year, the program will be placed on probation and if happens a third year in a row, the program will lose its accreditation for at least 3 years.

- Graduating fellows must submit an academic portfolio of works produced during their 2 years of training including manuscripts, chapters, videos, lectures, poster presentations and abstracts (to national and international meetings) to the Society Office.
- The program director(s) must submit a letter of endorsement regarding the fellow's progress and successful completion of their training program.
- A certificate of completed fellowship training will only be granted to those who have completed the aforementioned requirements.
- A yearly \$500 (US) administrative fee is required from each fellowship program payable to the Society.

VIII. EVALUATION

- The endourology fellowship program must have an ongoing independent assessment of the following components of the education program: fellow performance (clinical judgment, management strategy, informed consent, operative ability, aftercare and management of complications, critical evaluation of journal articles and research domains), faculty performance, patient care, and program objectives. Well-defined mechanisms for evaluation of each of these components must be implemented as well as methods for using the feedback gained for improvement of the program.
- Each program must be subjected to external peer review by the Fellowship Review Committee. This external review should occur every five years and will ensure that all of the essential elements of the fellowship are available and adhered to by the trainee, the trainer and the host institution.

IX. MATCH PROCESS

- Fellowship programs in the United States and Canada must participate in the match

process which is conducted by the American Urological Association. A fee of \$200 (US) is required for the applicants participating in the match.

- Programs that did not match may enroll un-matched candidates or other individuals after completion of the match. These trainees will be eligible for certificates if they complete the necessary requirements.
- All programs must submit match lists for each of the positions that they register for and are obligated to accept the applicant that they match with.
- If a program does not match and finds a fellow outside the match, a fellowship application needs to be completed by the fellow and reviewed by the fellowship committee. There will be a \$200 application fee if the applicant has not already registered for the match. Trainees whose programs do not participate the match will not receive a training certificate from the Endourology Society.
- It is each respective program's responsibility to determine whether a candidate has proper credentials to be a fellow at their respective institution. If they do not have proper credentials, the program should not list the candidate on their match list. If a candidate matches with a program, the program is obligated to provide training unless the candidate provided false information regarding their credentials. If the program refuses to train a matched applicant, they will lose their accreditation. They may re-apply for fellowship accreditation 3 years later. If the candidate does not accurately disclose credentials, the matching program is not obligated to provide fellowship training. In addition, the individual will be banned from participating in the endourology match process.

X. REMEDIAL ACTION(S)

PROBATION

- A program may be placed on probation for 2 years if the minimum number of index cases is not performed, if the academic productivity (minimum number of publications and fellowship essay) is inadequate, if case logs are not submitted by the end of the fellowship, if the program director is delinquent in the aforementioned responsibilities/qualifications, or if significant deficiencies are found at the time of the 5 year review of the program. The program director will receive written notification, and is expected to respond by letter within a month on how each deficiency in the training program will be rectified in a reasonable time scale. The probation may be appealed. The initial step in this process is to send a letter to the Fellowship Review Committee outlining the rationale for reversal of probation. Subsequent steps may include a phone interview with the head of the Fellowship Review Committee or interview with the Fellowship Review Committee members during the occasion of the World Congress meeting. If the deficiencies in the program are not rectified within one year of the start of probation, the program will lose accreditation. The program

must wait a minimum of 2 years before reapplying for accreditation. Programs on probations will be listed on the Endourology Society's website.

LOSS OF ACCREDITATION

- Other reasons for loss of accreditation include absence of a qualified program director, academic fraud/unethical conduct, and violation of the match process. An example of the latter is if the program offers specific ranking information or makes a job offer to an applicant prior to the match. If accreditation is lost because of lack of a qualified program director, it will be restored immediately once this deficiency is rectified. If match rules are violated, the program must wait 3 years before applying for accreditation. Individuals who have matched with a program that has lost accreditation but have not started their fellowship may be allowed to seek positions in accredited program which have open positions post-match. In addition, those who are currently enrolled in such a program may transfer to an accredited program which has an open position post-match. If the fellow elects to stay in the program, he/she may be eligible to receive a fellowship certificate if the aforementioned criteria have been met. If the reason for this action is academic fraud/unethical behavior the program and the director must wait 5 years before reapplying for accreditation. In addition, the individual (s) involved in such misconduct may not participate in future fellowship training. Programs that have lost accreditation may not participate in the match program. The same process outlined for the probation can be used to appeal loss of accreditation.
- Programs that do not have a fellow for 3 consecutive years, must reapply for fellowship program site.

CERTIFICATES OF ADVANCED CLINICAL TRAINING

- The Society recognizes that individuals may desire further training in endourology/stone surgery or laparoscopic/robotic assisted surgery. Such training should result in the improved delivery of patient care which is a priority of the Society.
- Individuals can participate in one year advanced clinical training programs.
- The following 2 programs are available: endourology/stone surgery, laparoscopic/robotic surgery.
- Training programs must be approved by the Endourology Fellowship Review Committee.
- The requirements of the program director(s) and sponsoring institution are the same as to those listed for the fellowship programs.
- The participants and the programs are subject to the same process as those for fellowship programs.
- Participants must submit a clinical, translational or basic science paper for the annual essay contest. These papers will be judged using the same process for the fellowship essay contest but they will be recognized as a separate category. If the majority of judges feel that the essay is not suitable to be submitted for publication, the previously outlined process for essays thought to be deficient will be enacted.
- The trainees will need to actively participate in at least the following number of cases to obtain a certificate:
 - Endourology/Stone Surgery
 - 60 retrograde ureteroscopic cases
 - 30 percutaneous renal cases
 - Laparoscopic/Robotic Surgery
 - 100 laparoscopic/Robotic cases (minimum of 20 cases each in lower and upper urinary tract)
- A program may participate in both fellowship training and advanced clinical training.
- Image-guided procedures, including percutaneous ablation, are encouraged.

- Candidates for these programs in the USA must participate in a match conducted by the American Urological Association
- Participants must complete the aforementioned requirements to receive a certificate in advanced clinical training.
- An individual can only receive 1 certificate at the completion of their one-year training period (no dual certificates).
- The Endourology Society Fellowship Review Committee will be responsible for reviewing these metrics.
- Deficiencies in case volume and/or completion of the essay will result in a program being put on suspension and may eventuate in loss of the program accreditation as per the process outlined for fellowship. The appeals process is the same as for fellowship programs.
- A program may lose accreditation for the same reasons listed for the fellowship programs. The appeals process, penalties and re-instatement policies are also identical.