

SCOPE OF PRACTICE

Maternal Fetal Medicine
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This document pertains to (fellow) rotations under the auspices of the (Maternal Fetal Medicine) at (University of South Florida). All Accreditation Council of Graduate Medical Education (ACGME), Joint Commission (JC), Agency for Health Care Administration (AHCA), and CMS guidelines pertaining to graduate medical education apply to this scope of practice.

The purpose of this policy is to ensure that fellows are provided adequate and appropriate levels of supervision during the course of the educational training experience and to ensure that patient care continues to be delivered in a safe manner. The privilege of progressive authority and responsibility, conditional independence, and a supervisory role in patient care delegated to each fellow is assigned by the program director and faculty members to ensure effective oversight of fellow supervision.

Each fellow and faculty must inform each patient of their respective roles in patient care. Fellows must know the limits of his/her scope of authority and the circumstances under which he/she is permitted to act with conditional independence. Fellows must communicate with the supervising faculty in the following circumstances: transfer of care to or from the Gynecologic Oncology service, decisions for surgery or procedures, chemotherapy, radiation therapy or termination/end of life decisions. Supervision may be provided by senior fellows in addition to attendings. However, all patient care must be provided under a credentialed and privileged attending physician. The attending physician is ultimately responsible for management of the individual patients and the supervision of the residents involved in the care of the patient. Supervision must be documented in the medical record in accordance with the Maternal Fetal Medicine Fellowship at the University of South Florida compliance guidelines.

Fellows and faculty can report concerns regarding inadequate supervision on the GME website or the hospital reporting system. Any reports will be protected from reprisal. This document is available on the GME website for all residents, faculty, other team members, and patients. The program follows the ACGME classification of supervision as noted below. The supervising physician can refer to a faculty, fellow, or resident that who has been given supervisory privilege. These supervisory levels are used throughout the Scope of Practice document.

Direct Supervision

- 1) The supervising physician is physically present with the Fellow during the key portions of the patient interaction.
- 2) The supervising physician and/or patient is not physically present with the Fellow and the supervising physician is concurrently monitoring the patient care through appropriate telecommunication technology.

Indirect Supervision

The supervising physician is not providing physical or concurrent visual or audio supervision but is immediately available to the fellow for guidance and is available to provide appropriate direct

supervision.

Oversight

The supervising physician is available to provide review of procedures/encounters with feedback after care is delivered.

The fellowship program has a curriculum for providing knowledge and performance competence that includes (procedure training, simulation, and number of procedures that need to be completed before obtaining indirect supervision). Annual decisions about competence are made by the program's clinical competency committee to ensure a successful transition and preparation for the next PGY level. All fellows need to maintain current ACLS training.

	Supervising Physician present (Direct)	Supervising Physician is not providing physical or concurrent visual or audio supervision but is immediately available (Indirect)	Supervising Physician is available to provide a review of procedures/en counters with feedback after care is delivered (Oversight)				
Designated Levels	1	2	3	See below for level of supervision required for each procedure and year of training			
CORE PROCEDURES (Tampa General Hospital, Genesis Healthpark, USF Outpatient Offices)					PGY-5	PGY-6	PGY-7
Perform patient care and consultations in outpatient setting					1	2	2
Admit patients and complete inpatient H&P for general or high-risk OB service				n-risk	2	2	2
Admit patients to ICU and complete H&P for ICU level of care				1	2	2	
Treat and manage common obstetrical complications					2	2	2
Make referrals and request consultations					2	3	3
Provide consultations within the scope of his/her privileges				2	2	2	
Render any care in a life-threatening emergency					2	3	3
Provide consultative service to other obstetrical care providers				2	2	2	

	Supervising Physician present (Direct)	Supervising Physician is not providing physical or concurrent visual or audio supervision but is immediately available (Indirect)	Supervising Physician is available to provide a review of procedures/en counters with feedback after care is delivered (Oversight)				
Designated Levels	1	2	3	See below for level of supervision required for each procedure and year of training			
SEDATION (Tampa General Hospital, Genesis Healthpark, USF Outpatient Offices)				PGY-5	PGY-6	PGY-7	
Local anesthesia				2	3	3	
Fetal Procedures (Tampa General Hospital, Genesis Healthpark, USF Outpatient Offices)				PGY-5	PGY-6	PGY-7	
Amniocentesis					1	1	1
Chorionic villus sampling					1	1	1
Perform diagnostic fetal ultrasound					1	2	2
Perform fetal echocardiogram				1	2	2	
Perform fetal Dopplers				2	2	2	
Perform fetal biophysical profile				2	2	2	
Perform fetal periumbilical blood sampling				1	1	1	
Perform fetal laser therapy				1	1	1	
Perform fetal shunts				1	1	1	
Inpatient Procedures (Tampa General Hospital)							
Perform vaginal delivery*				1	1	1	
Perform cesarean delivery*				1	1	1	
Surgery for non obstetric issues in pregnant women*				1	1	1	

	Supervising Physician present (Direct)	Supervising Physician is not providing physical or concurrent visual or audio supervision but is immediately available (Indirect)	Supervising Physician is available to provide a review of procedures/en counters with feedback after care is delivered (Oversight)				
Designated Levels	1	2	3	See below for level of supervision required for each procedure and year of training			
Perform cerclage procedures*					1	1	1

^{*} For procedures, 1 means direct supervision for the critical portions

DocuSigned by:		
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