

## SCOPE OF PRACTICE

Fellowship in Reproductive Endocrinology and Infertility
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This document pertains to Fellow rotations under the auspices of the Fellowship Program in Reproductive Endocrinology and Infertility at all the different training sites. 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 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 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 are responsible for requesting help from the supervising physician regarding unexpected complications or event reports and whenever patients or staff request to speak with the attending. Supervision may be provided by more senior fellow 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 fellows involved in the care of the patient. Supervision must be documented in the medical record in accordance with the Fellowship Program in Reproductive Endocrinology and Infertility at the University of South Florida compliance guidelines.

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.

<u>Direct Supervision</u> The supervising physician is physically present with the fellow and patient.

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, 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/encounters with feedback after care is delivered (Oversight)			
Designated	1	2	3	See I	below for le	vel of
Levels				•	ion required	
				procedure	e and year	of training
CORE PRO	CEDURES			PGY-5	PGY-6	PGY-7
Perform pati	ent care and proce	edures in outpatient settii	ng	2	2	2
Admit patients and complete inpatient H&P for general ward service				2	3	3
Admit patients to Gynecologic Surgery and complete H&P for the required gynecologic surgery				1	2	2
Treat and manage common medical conditions				2	3	3
Make referrals and request consultations				2	3	3
Provide consultations within the scope of his/her privileges				1	3	3
Office based / Outpatient Procedures				PGY-5	PGY-6	PGY-7
Transvaginal Gynecologic Ultrasound				1	2	3
Transabdominal Gynecologic ultrasound				1	2	3
Transvaginal first trimester Obstetric ultrasound				1	2	3
Transabdominal first trimester Obstetric ultrasound				1	2	3
Endometrial Biopsy using Pipelle catheter				1	2	3
Intrauterine Device (IUD) Insertion				1	2	3
Intrauterine Device (IUD) removal				1	2	3
Diagnostic office hysteroscopy				1	2	3
Hysteroscopic polypectomy				1	1	2
Hysteroscopic resection of uterine septum				1	1	2
Hysteroscopic resection of intrauterine adhesions				1	1	2

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Designated Levels	1	2	3	supervisi	pelow for le on required and year	l for each
Karman Biopsy using Manual Vacuum Aspirator				1	2	2
Transvaginal ovarian cyst aspiration				1	1	2
Intrauterine insemination (IUI)				1	3	3
Transvagina	I guided oocyte re	trieval		1	1	2
Embryo tran	sfer			1	1	1
Mock embryo transfer				1	3	3
Operative Procedures				PGY-5	PGY-6	PGY-7
Laparoscopic supracervical hysterectomy				1	1	2
Laparoscopic total hysterectomy				1	1	2
Laparoscopic excision of endometriosis				1	1	2
Laparoscopic ovarian cystectomy				1	1	2
Laparoscopic lysis of adhesions				1	1	2
Laparoscopic oophorectomy				1	1	2
Laparoscopic ureterolysis				1	1	1
Laparoscopic myomectomy				1	1	1
Laparoscopic prescaral neurectomy				1	1	1
Laparoscopic uterine suspension				1	1	1
Laparoscopic tubal reanastamosis				1	1	1
Laparoscopic repair of uterine anomaly				1	1	1
Single incision laparoscopic surgery				1	1	1
Robot assisted laparoscopic surgery			1	1	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/encounters 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		for each
Open myomectomy				1	1	2
Open hysterectomy				1	1	2
Open ovarian cystectomy				1	1	2
Excision of extraperitoneal endometriosis				1	1	1
Repair of vaginal septum				1	1	2
Hysteroscopic polypectomy				1	1	2
Hysteroscopic myomectomy using resectoscope				1	1	2
Hysteroscopic morcellation				1	1	2
Hysteroscopic Essure placement				1	1	2
Hysteroscopic removal of foreign body				1	1	2
Hysteroscopic metroplasty				1	1	2

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