



CURRENT SURGICAL EXPERIENCE AND DEFICITS IN REPRODUCTIVE ENDOCRINOLOGY AND INFERTILITY TRAINING ACROSS FELLOWSHIPS IN THE UNITED STATES

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Abstract:

OBJECTIVE: To quantify the interest, surgical volume and deficits in reproductive surgery training according to recently graduated and current REI fellows in the United States.

DESIGN: Initial and follow-up survey

MATERIALS AND METHODS: A survey was sent to all current REI fellows (as of September 2016) and those that graduated in June 2016 (total n = 158). Attitudes regarding reproductive surgery as well as quantitative assessment of current training and desired surgical training was assessed and analyzed with student t-test.

RESULTS: The survey response rate was 39.2% (62/158) and equally distributed between first (n=17), second (n= 18), third year fellows (n = 18), and first year attendings (n = 9). Of respondents, 45% (28/62) desired additional surgical training during fellowship, 53% (33/62) felt that it was adequate and one fellow desired less surgical training. Participants were asked to quantify the number of a specific procedure performed and how many they felt they would need to feel adequately prepared to perform that procedure independently outside of fellowship (Table 1). Training in abdominal and hysteroscopic cases was felt to be adequate, but significant deficits in surgical volume of laparoscopic and robotic cases were noted (Table 1). The majority of fellows desired additional laparoscopic (55%) and robotic (52%) surgical experience with only 23% reporting no desire for any additional surgery. When asked about interest in method of additional training, 71% (44/62) endorsed interest in a surgical 'away-rotation' and 32% (20/62) reported an interest in an additional one-year surgical training program.

Surgery	Estimated number performed	Estimated number needed to feel competent	p-value
Tubal reversal	2.0 +/- 1.7	12.6 +/- 4.3	<0.01
Minimally invasive myomectomy	3.2 +/- 2.3	18.4 +/- 9.4	<0.01
Open myomectomy	9.9 +/- 3.4	10.7 +/- 6.8	NS
Advanced laparoscopy	9.4 +/- 6.7	16.8 +/- 5.9	<0.01
Hysteroscopy	31.2 +/- 14.2	15.3 +/- 4.2	<0.01

CONCLUSIONS: However, there are perceived deficits in surgical experience in current fellowship training that may require fellows to seek additional surgical opportunities.