

These training requirements apply to those who begin training on or after July 1, 2022.

ELIGIBILITY REQUIREMENTS TO BEGIN TRAINING

Royal College certification in Obstetrics and Gynecology

OR

Eligibility for the Royal College examination in Obstetrics and Gynecology

ELIGIBILITY REQUIREMENTS FOR EXAMINATION¹

All candidates must be Royal College certified in Obstetrics and Gynecology in order to be eligible for the Royal College examination in Maternal-Fetal Medicine.

The following training experiences are required, recommended, or optional as indicated.

TRANSITION TO DISCIPLINE (TTD)

The purpose of this stage is to verify achievement of the competencies of Obstetrics and Gynecology, particularly pertaining to confirmation of skills in clinical assessment and in obstetric ultrasonography. This stage also provides residents with an orientation to the Maternal-Fetal Medicine program and the setting in which they will train and work.

Required training experiences (TTD stage):

1. Clinical training experiences
 - 1.1. Maternal-Fetal Medicine, including
 - 1.1.1. Ultrasonography
 - 1.1.2. Outpatient unit
2. Other training experiences

¹ These eligibility requirements do not apply to Subspecialty Examination Affiliate Program (SEAP) candidates. Please contact the Royal College for information about SEAP.

MATERNAL-FETAL MEDICINE TRAINING EXPERIENCES (2022)

- 2.1. Orientation to the hospital(s), including the following: policies and procedures; information systems and, as applicable, electronic medical records; admission and discharge processes; and relevant care protocols
- 2.2. Orientation to the program, including structure, policies, resources (including local wellness support), and expectations
- 2.3. Orientation to Competence by Design, including the portfolio and observation tools

Recommended training experiences (TTD stage):

3. Clinical training experiences
 - 3.1. Maternal-Fetal Medicine
 - 3.1.1. Labour and delivery suite
 - 3.1.2. Inpatient unit
 - 3.1.3. Consultation service to obstetric care providers, inpatient services, and/or emergency department
 - 3.1.4. After-hours coverage
4. Other training experiences
 - 4.1. Formal instruction in ultrasound safety, physics, and knobology
 - 4.2. Attendance at departmental and/or divisional educational rounds

Optional training experiences (TTD stage):

5. Other training experiences
 - 5.1. Simulation training in obstetric ultrasonography

FOUNDATIONS OF DISCIPLINE (F)

The focus of this stage is the development of the competencies necessary to provide assessment, counselling, and management for patients with common maternal, fetal, or obstetrical/placental conditions seen at the pre-conception, antepartum, and postpartum stages. Residents provide post-procedural care for patients who have undergone surgical and/or invasive prenatal procedures, anticipating and managing complications should they occur. They also advance their ultrasonography skills, particularly as related to the detection of fetal anomalies.

Required training experiences (Foundations stage):

1. Clinical training experiences
 - 1.1. Maternal-Fetal Medicine, including
 - 1.1.1. Ultrasonography
 - 1.1.2. Labour and delivery suite
 - 1.1.3. Inpatient unit
 - 1.1.4. Outpatient unit
 - 1.1.5. Consultation service to obstetric care providers, inpatient services, and/or emergency department

2. Other training experiences
 - 2.1. Formal instruction in the basic and clinical sciences of Maternal-Fetal Medicine
 - 2.2. Formal instruction in ultrasound safety, physics, and knobology (if not done in Transition to Discipline)
 - 2.3. Formal instruction in research ethics, which may include TCPS 2² online training, local/institutional ethics training, and/or ALDO³
 - 2.4. Attendance at departmental and/or divisional educational rounds
 - 2.5. Critical appraisal activities such as journal club
 - 2.6. Initiation of a scholarly project

Recommended training experiences (Foundations stage):

3. Clinical training experiences
 - 3.1. After-hours coverage of the maternal-fetal medicine service
4. Other training experiences
 - 4.1. Completion of the Fetal Medicine Foundation⁴ (FMF) online course on the 11-13 weeks scan
 - 4.2. Simulation training in
 - 4.2.1. Obstetric ultrasonography
 - 4.2.2. Crisis resource management
 - 4.3. Resident-as-teacher training
 - 4.4. Participation in relevant committees (e.g., perinatal mortality, residency program committee)
 - 4.5. Training in scholarly project methodology

Optional training experiences (Foundations stage):

5. Clinical training experiences
 - 5.1. Longitudinal clinic in maternal-fetal medicine
 - 5.2. Medical genetics
 - 5.3. Obstetric medicine
 - 5.4. Neonatal intensive care unit
 - 5.5. Neonatal-perinatal medicine clinic

² Canadian Institutes of Health Research, Natural Sciences and Engineering Research Council of Canada, and Social Sciences and Humanities Research Council of Canada, *Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans*

³ Collège des médecins du Québec, *Legal, Ethical and Organizational Aspects of Medical Practice in Québec (ALDO-Québec)*

⁴ The Fetal Medicine Foundation, a UK charity, has internet-based courses available free of charge in several languages. See fetalmedicine.org.

CORE OF DISCIPLINE (C)

This stage builds on the skills and knowledge of Foundations to add the assessment, counselling, and management of patients with complex maternal, fetal, or obstetrical/placental conditions, including pre-conception or postpartum counselling, antepartum care, and intrapartum and postpartum management. This includes performing diagnostic and therapeutic procedures and ultrasonography for patients with complex conditions.

Required training experiences (Core stage):

1. Clinical training experiences
 - 1.1. Maternal-Fetal Medicine, including
 - 1.1.1. Ultrasonography
 - 1.1.2. Labour and delivery suite
 - 1.1.3. Inpatient unit
 - 1.1.4. Outpatient unit
 - 1.1.5. Transport coordination and triage
 - 1.1.6. Consultation service to obstetric care providers, inpatient services, and/or the emergency department
 - 1.1.7. Longitudinal clinic
 - 1.1.8. Multidisciplinary clinic/rounds in fetal and maternal medicine
 - 1.1.9. Participation in interprofessional rounds, including care planning for labour and delivery as well as discharge planning
 - 1.2. Neonatal-perinatal medicine and/or pediatrics clinic
 - 1.3. Medical genetics
 - 1.4. Obstetric internal medicine clinics, which may include obstetric medicine, general internal medicine, and/or other internal medicine subspecialties
 - 1.5. Fetal echocardiography
2. Other training experiences
 - 2.1. Formal instruction in
 - 2.1.1. Basic and clinical sciences of Maternal-Fetal Medicine
 - 2.1.2. Communication of difficult topics, such as poor prognosis and disclosure of adverse events
 - 2.1.3. Conflict resolution
 - 2.1.4. Ethical issues in Maternal-Fetal Medicine
 - 2.1.5. Equity, diversity, and inclusion
 - 2.1.6. Systemic racism and anti-racism
 - 2.1.7. Determinants of health
 - 2.1.8. Quality improvement and patient safety
 - 2.1.9. Leadership
 - 2.1.10. Physician wellness
 - 2.1.11. Career planning

- 2.1.12. Practice management, including contract negotiation
- 2.1.13. Financial management

- 2.2. Attendance at departmental and/or divisional educational rounds
- 2.3. Supervision of junior learners
- 2.4. Participation in quality improvement initiatives and/or patient safety programs
- 2.5. Participation in and conduct of scholarly project
- 2.6. Critical appraisal activities such as journal club

Recommended training experiences (Core stage):

- 3. Clinical training experiences
 - 3.1. Perinatal pathology
 - 3.2. After-hours coverage of the maternal-fetal medicine service
- 4. Other training experiences
 - 4.1. Formal instruction in
 - 4.1.1. Ultrasound physics and instrumentation
 - 4.1.2. Teaching skills
 - 4.1.3. Critical reflection and/or reflective writing
 - 4.1.4. Cultural safety
 - 4.2. Simulation training
 - 4.2.1. Obstetric ultrasonography
 - 4.2.2. Procedures
 - 4.2.3. Crisis resource management
 - 4.3. In training examinations
 - 4.3.1. Objective structured clinical examinations (OSCEs)
 - 4.3.2. Written examinations, including short answer question and/or multiple choice question formats
 - 4.4. Certification in
 - 4.4.1. Advanced Cardiovascular Life Support (ACLS)
 - 4.4.2. Neonatal Resuscitation Program (NRP)
 - 4.4.3. Nuchal translucency - FMF course
 - 4.4.4. Cervical assessment - FMF course or equivalent

Optional training experiences (Core stage):

- 5. Clinical training experiences
 - 5.1. Maternal-fetal medicine in the community or regional hospital setting
 - 5.2. Obstetric anesthesia service
 - 5.3. Pediatric specialty and/or subspecialty clinics, which may include

- 5.3.1. Neurology
 - 5.3.2. Neurosurgery
 - 5.3.3. Pediatric surgery
 - 5.3.4. Urology
- 5.4. Global health experience
6. Other training experiences
- 6.1. Courses in
 - 6.1.1. Fetal echocardiography
 - 6.1.2. Gender-based violence

TRANSITION TO PRACTICE (TTP)

The focus of this stage is preparation for independent practice. This includes consolidation of clinical and ultrasonographic skills, demonstrating independence in the management of patients with complex maternal, fetal, and obstetrical/placental conditions. Residents provide consultation for practitioners outside the maternal-fetal medicine specialist's practice location, including management of transfer requests. This stage also includes taking responsibility for administrative tasks, such as teaching, supervising, and scheduling junior learners. The resident will prepare for the demands of practice management and continuing professional development.

Required training experiences (TTP stage):

- 1. Clinical training experiences
 - 1.1. Maternal-Fetal Medicine in the role of junior attending⁵, including
 - 1.1.1. Ultrasonography
 - 1.1.2. Labour and delivery suite
 - 1.1.3. Inpatient unit
 - 1.1.4. Outpatient unit
 - 1.1.5. Transport coordination and triage
 - 1.1.6. Triage of referral requests
 - 1.1.7. Consultation service to obstetric care providers, inpatient services, and/or the emergency department
 - 1.1.8. Longitudinal clinic
 - 1.1.9. After-hours coverage
 - 1.1.10. Multidisciplinary clinic/rounds in fetal and maternal medicine
 - 1.1.11. Participation in interprofessional rounds, including care planning for labour and delivery as well as discharge planning

⁵ "Junior attending" means that the resident assumes responsibility for patient care, and leadership in the education and clinical supervision of junior colleagues, with as much independence as permitted by ability, law, and hospital policy.

MATERNAL-FETAL MEDICINE TRAINING EXPERIENCES (2022)

2. Other training experiences
 - 2.1. Attendance at departmental and/or divisional educational rounds
 - 2.2. Participation in the administrative activities of the maternal-fetal medicine service, such as hospital committees or protocol development
 - 2.3. Provision of formal teaching sessions, such as grand rounds
 - 2.4. Supervision of junior learners, including administrative aspects such as scheduling and daily work assignment
 - 2.5. Presentation and/or dissemination of a completed scholarly project

Recommended training experiences (TTP stage):

3. Other training experiences
 - 3.1. Orientation to the requirements of maintenance of certification and professional development

CERTIFICATION REQUIREMENTS

Royal College certification in Maternal-Fetal Medicine requires all of the following:

1. Royal College certification in Obstetrics and Gynecology;
2. Successful completion of the Royal College examination in Maternal-Fetal Medicine; and
3. Successful completion of the Royal College Maternal-Fetal Medicine Portfolio.

NOTES:

The Maternal-Fetal Medicine Portfolio refers to the list of entrustable professional activities across all four stages of the residency Competence Continuum, and associated national standards for assessment and achievement.

MODEL DURATION OF TRAINING

Progress in training occurs through demonstration of competence and advancement through the stages of the Competence Continuum. Maternal-Fetal Medicine is planned as a 2-year residency program. There is no mandated period of training in each stage. Individual duration of training may be influenced by many factors, which may include the resident's singular progression through the stages, the availability of teaching and learning resources, and/or differences in program implementation. Duration of training in each stage is therefore at the discretion of the faculty of medicine, the competence committee, and the program director.

Guidance for programs

The Royal College Specialty Committee in Maternal-Fetal Medicine's suggested course of training, for the purposes of planning learning experiences and schedules, is as follows:

- 8 weeks in Transition to Discipline*
- 12-20 weeks in Foundations of Discipline*
- 60-72 weeks in Core of Discipline*
- 8-16 weeks in Transition to Practice*

Guidance for postgraduate medical education offices

The stages of the Competence Continuum in Maternal-Fetal Medicine are generally no longer than

8 weeks for Transition to Discipline

20 weeks for Foundations of Discipline

72 weeks for Core of Discipline

16 weeks for Transition to Practice

Total duration of training – 2 years

This document is to be reviewed by the Specialty Committee in Maternal-Fetal Medicine by December 31, 2023.

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