

# EUROPEAN ASSOCIATION FOR CRANIO-MAXILLO-FACIAL SURGERY



## GUIDELINES FOR FELLOWSHIP TRAINING

IN

## FACIAL COSMETIC SURGERY

A **facial cosmetic surgery** is a planned post-residency programme that contains advanced education, training and clinical research designed to enhance clinical skills

Effective November, 2009

## PREFACE

Maintaining and improving the quality of advanced education in EACMFS recognized Fellowships is one of the goals of the European Association for Cranio-Maxillo-Facial Surgery (EACMFS).

Certification of advanced fellowship programmes is a voluntary effort of all parties involved. The process assures fellows, specialty boards and the public that training programmes are in compliance with published standards.

A fellowship in facial cosmetic surgery is a planned post-residency program that contains advanced education, training and clinical research designed to enhance clinical skills.

Certification actions by EACMFS are based on the Program Director's submission and EACMFS' receipt and approval of a sworn application certifying the requisite information followed by an on site evaluation by assigned consultants and final approval by EACMFS Executive Committee. EACMFS has established advisory committees to review annual reports, site visits, and progress reports and make recommendations. Advisory committees are composed of representatives selected by EACMFS. EACMFS has the ultimate responsibility for determining a programme's accreditation status. EACMFS Executive Committee will approve or deny applications for fellowship certification in its sole discretion.

## AUTHORIZED ENROLLMENT

EACMFS fellowship programs are recognized for a specified number of Fellows in each year of the programme. Prior authorization is required for an increase in enrolment beyond the authorized level in any year, for any reason and regardless of whether the increase is a one-time-only or a permanent change in enrolment. Failure to comply with this policy will jeopardize the programme's accreditation status.

## DEFINITION OF TERMS

The verbs used in this document (i.e., shall, must, should, can and may) indicate the relative weight that EACMFS attaches to each statement. The definitions of these words as used in the Standards are as follows:

**Must or Shall:** Indicates an imperative need and/or duty; an essential or indispensable item; mandatory.

**Should:** Indicates the recommended manner to obtain the standard; highly desirable.

**May or Could:** Indicates freedom or liberty to follow a suggested alternative.

**Fellowship Approval:** Status granted only upon the EACMFS' receipt and approval of requisite information by application and following a site visit and subsequent final approval by the EACMFS Executive Committee.

**Provisional Approval:** Status granted only upon the EACMFS' receipt and approval of requisite information by application and following a site visitation, which in the discretion of the EACMFS Executive Committee establishes that the program has minor deficiencies in fellowship training that can be corrected within 12 months.

**Unapproved:** the Fellowship Program is not in compliance with EACMFS guidelines, and does not qualify for Provisional Approval.

### 1. INSTITUTIONAL COMMITMENT:

1.1 Qualifying institutions include university centres, medical schools, hospitals, private practices, ambulatory care settings and outpatient clinics, or a combination.

1.1.1 A Cleft Fellowship Programme in a focused area must have one sponsoring institution with primary responsibility for the entire programme.

1.2 The sponsoring institution must ensure that sufficient faculty, financial resources and academic support exist to enable the programme to comply with the Fellowship requirements. This support must include sufficient operating time to ensure the fellow of adequate surgical experience.

1.3 When there is a cooperative education effort involving multiple institutions, the commitment of each institution to the programme must be documented in an affiliation agreement approved by EACMFS Executive Committee.

1.4 Fellowships which are based in institutions or centres which also sponsor surgery residency training programs must demonstrate that the fellowship and residency programmes are not in conflict. The fellowship experience must not compete with the residency training program for surgical cases. Separate statistics must be maintained for each programme.

1.5 Members of the teaching staff participating in an accredited Fellowship Programme must be able to practice the speciality of facial cosmetic surgery in accordance with their training, experience and demonstrated competence.

## **2. PROGRAMME DIRECTOR AND TEACHING STAFF:**

### **2.1 Programme Director**

The programme must be directed by a single responsible individual. The Programme Director must maintain active hospital privileges to perform facial cosmetic surgery procedures or have privileges in an out-patient setting to perform facial cosmetic surgery procedures. Programme faculty shall have hospital transferring privileges. The Programme Director must be an experienced clinician with sufficient administrative experience to ensure effective direction of the Fellowship Programme. The Programme Director must assure that the Fellowship Programme includes:

2.1.1 Development of the goals and objectives of the programme and a systematic method of assessing that these goals have been met by appropriate outcomes measures.

2.1.2 Selection and supervision of the teaching staff. Performance of formal periodic evaluations of the teaching staff at least annually.

2.1.3 Provision of adequate educational resource materials, which may include a health science library or computer access to a library. The fellow should complete a significant reading list prepared by the Programme Director.

2.1.4 Selection of the Fellow(s) and ensuring that all appointed Fellows meet the minimum eligibility requirements set forth in section 4 below.

2.1.5 Periodic, semi-annual, evaluation of the knowledge, skills and professional growth of its Fellow(s), using appropriate written criteria and procedures. More frequent evaluations and documentation of such evaluations should be made if it is determined a Fellow may not be properly motivated or eligible for advancement or retention in the programme.

2.1.6 Formal evaluation and documentation of Fellows' performance in each of the following categories: operative procedures, surgical assistance, and complications.

2.1.7 Maintenance of a personal record of evaluation for each Fellow which is accessible to the Fellow and available for review during site visits.

2.1.8 Provision for due process and appeal.

2.1.9 Maintenance of programme records, patient statistics, and institutional agreements. The Programme Director must keep an accurate and complete record of the number and variety of clinical procedures performed by the Fellow. The director must obtain and maintain in his files a copy of the Fellow's case log upon completion of the Fellow's training.

2.1.10 Preparation of a final written evaluation of each Fellow upon completion of the programme. The evaluation must include a review of the Fellow's performance during the training programme, and should verify that the Fellow has demonstrated sufficient competency to that point of training. The purpose of evaluation is to document satisfactory completion of the fellowship. This evaluation must be included as part of the Fellow's permanent record and must be maintained by the institution.

### **2.2 Teaching Staff:**

2.2.1 Members of the fellowship teaching staff must actively participate in professional societies and their meetings.

2.2.2 The teaching staff must be of adequate size and commitment to ensure that the goals of the fellowship are met and to provide for direct supervision appropriate to the Fellow(s) competence, level of training, and credentialing in all patient care settings. The number of Fellows in a Fellowship Program shall never be more than the number of faculty members in the Programme.

2.2.3 There must be evidence of scholarly activity among the faculty. Such evidence may include participation in clinic and/or basic research; publication of books and peer-reviewed scientific journals and books; and presentation at scientific meetings and/or continuing education courses at the local level.

### **2.3 Substitution of Programme Director and Teaching Staff Members:**

2.3.1 In the event a Programme Director resigns, or the Programme Director's position is terminated for any other reason, the Fellowship programme's approved status shall automatically terminate unless, within thirty (30) days of said termination (or such extended period as EACMFS provides), a written request is made to EACMFS, in the form prescribed by EACMFS, to approve a separate individual as the Programme Director of the fellowship programme. A request to approve a substitute Programme Director must include documentation required by EACMFS and confirm the proposed individual's qualifications meet all requirements set forth in Section 2.1 above. EACMFS may request additional information and documentation as it deems necessary to ascertain the qualifications of the proposed substitute Programme Director. EACMFS' decision regarding whether to approve the proposed substitute Programme Director shall be rendered in its sole discretion and is not subject to challenge or appeal. In the event a timely written request to approve a substitute Programme Director is not submitted to EACMFS or in the event a timely request to approve a substitute Programme Director is denied by EACMFS, the fellowship programme's approved status shall automatically terminate.

2.3.2 The Programme Director shall notify EACMFS within fourteen (14) days in the event a member of the fellowship programme's teaching staff resigns or a teaching staff member's position is terminated for any other reason. In the event EACMFS determines, in its sole discretion, said resignation or termination results in the fellowship programme's failure to comply with the requirements of Section 2.2 above, EACMFS shall notify the Fellowship Director regarding the change in compliance and provide the Programme Director no less than thirty (30) days to retain additional teaching staff and fulfil the requirements of Section 2.2 above. Within the time prescribed in EACMFS' notice, the Programme Director shall submit a written request to EACMFS, in the form prescribed by EACMFS, for continuation of the fellowship programme's approved status based on the proposed additional staff. The request must include documentation required by EACMFS and confirm that the proposed additional staff renders the fellowship program compliant with Section 2.2 above. EACMFS may request additional information and documentation as it deems necessary to ascertain whether the proposed additional staff renders the fellowship programme compliant with Section 2.2 above. EACMFS' decision regarding whether to continue the fellowship programme's approved status based on the proposed additional staff shall be rendered in its sole discretion and is not subject to challenge or appeal. In the event a timely written request to continue the fellowship programme's approved status is not submitted to EACMFS or in the event a timely request to continue the fellowship programme's approved status is denied by EACMFS, the fellowship programme's approved status shall automatically terminate.

### **3. FACILITIES AND RESOURCES:**

3.1 Institutional facilities and resources must be adequate to provide the educational experiences and opportunities required to fulfil the needs of the educational programme as specified in these Standards. These include, but are not limited to, facilities and personnel resources for fellows to carry out their patient care and personal educational responsibilities, administrative offices, and an adequate library providing access to standard reference text and current journals, and sufficient space for instruction.

3.2 Equipment and supplies for use in managing medical emergencies must be readily accessible and functional.

3.3 Attention must be directed to the judicious use and monitoring of nitrous oxide, cocaine, narcotics, anaesthetics agents, drugs and other substances and techniques such as ionising radiation that might be hazardous to patients or personnel.

3.4 Each institution must establish and enforce written clinical/laboratory protocols to ensure adequate asepsis, infection and hazard control, and disposal of hazardous waste. These protocols must be provided to all fellows, faculty and appropriate support staff.

3.5 Mechanisms must be established for continuously monitoring compliance with these protocols within the

institution and affiliated sites. The programme must document its compliance with applicable regulations.

3.6 Fellows should be immunized against infectious diseases, for example, mumps, measles, rubella and hepatitis B, prior to contact with patients and/or potentially infectious objects or materials, in an effort to minimize risk of infection to patients and personnel.

3.7 EACMFS only endorses the use of qualified facilities and affiliated institutions in connection with fellowship programs. Such institutions include university centres, medical schools, hospitals, private practices, ambulatory care settings and outpatient clinics.

3.7.1 Clinical facilities must be properly equipped for the performance of all appropriate ambulatory cleft procedures, including administration of general anaesthesia and/or sedation for ambulatory patients.

3.7.2 There must be a designated space properly equipped for monitoring patients' recovery from ambulatory surgery, general anaesthesia and sedation.

#### **4. CURRICULUM :**

4.1 Non-discriminatory policies must be followed in selecting fellows.

4.2 To qualify for fellowship training the fellow (applicant) must have successfully completed a recognized OMFS surgery residency, with valid license to practice medicine (MD).

4.3 The fellow must participate as surgeon, co-surgeon or assistant-surgeon in the following minimum number of specific procedures.

##### **Description of Procedures (minimum number)**

- a. Facial Rhytidectomy  
(traditional, deep plane, subperiosteal) (10)
- b. Rhinoplasty (primary, revision, reconstruction) (15)
- c. Blepharoplasty, upper and lower (5)
- d. Facial implants, facial osteotomies (10)
- e. Otoplasty (3)
- f. Brow/Forehead Lift (coronal, endoscopic) (4)
- g. Cervicofacial Liposuction (may be included as part of Face Lift and Neck Lift) (10)
- h. Scar Revision (5)
- j. Skin Resurfacing (medium to deep chemical peel, laser resurfacing, dermabrasion) (5)
- k. Soft Tissue Augmentation (lipostructure, injectables) (10)

#### **5. ADDITIONAL REQUIREMENTS:**

All fellowship programmes must encompass the following requirements.

5.1 The Fellowship Programme is a structured post-residency program which is designed to provide special knowledge and skills. The goals of the fellowship must be clearly identified and documented.

5.2 In addition to the specific requirements regarding number of procedures, the duration of the fellowship must in no event be less than twelve consecutive months.

5.3 The Fellowship Programme must include a formally structured curriculum. The curriculum should include a list of topics which will be discussed in weekly seminars with the fellow(s).

5.4 The Fellowship Programme must provide a complete sequence of patient experiences in the area of emphasis during the training period. The Fellow must have the opportunity to see patients preoperative and postoperatively to ensure experience in a continuum of care. The Fellow must also have adequate operating experience to meet the goals of the fellowship.

5.5 The Fellow must maintain a surgical logbook of all procedures and must include at a minimum the date of the procedure, patient name, patient identification number, geographic location where procedure was performed, type

of anaesthesia/sedation, preoperative diagnosis, the operative procedure performed and the outcome of the procedure.

5.6 The Fellow must actively participate in one hundred (100) or more facial cosmetic surgery procedures during the Fellowship Programme, including the minimum number of facial cosmetic surgery procedures required for the applicable areas of certification set forth in Section 4.3 above.

5.7 Clinical or basic research is required. At least one (1) paper reflecting said research must be submitted for publication to the Journal of Cranio-Maxillo-Facial Surgery. Following submission of the paper, the Fellow must cooperate with, and respond to all requests from, the Journal's editor or editorial staff to complete the review process.

5.8 The fellow is required to keep an accurate record of the number and type of cleft surgical procedures performed during his/her fellowship in an electronic format utilizing the specific program provided by EACMFS. This procedure report may be requested of the candidate at any time. The Fellowship Programme Director must keep on file a current and accurate record of all present and former fellows.

## **6. AFFILIATIONS:**

When the resources of two or more institutions are involved in the conduct of a single programme, each participating institution or organizational unit must demonstrate a commitment to the advanced educational program. Documented evidence of agreements, approved by the institutions, must be available for inspection by assigned site visit consultants. The following items should be covered in such inter-institutional agreements:

6.1 Designation of a single Programme Director. The scope of the director's authority to direct and coordinate the programme's activities in all participating institutions must be clearly set forth.

6.2 The teaching staff responsible for providing the educational programme and Fellow's supervision in each institution must be designated.

6.3 The expected contribution of the educational programme and Fellow's supervision in each institution of the programme must be delineated.

6.4 The period of assignment of the Fellow(s) to the segment of the programme provided by each institution and any priority of assignment must be identified.

6.5 Each institution's financial commitment to the direct support of the programme must be specifically identified.

6.6 The primary sponsor of the educational programme must accept full responsibility for the quality of education provided in all affiliated institutions.

6.7 All standards in this document must apply to training provided in affiliated institutions.

## **7. VACATION/LEAVE OR ABSENCE:**

Leaves of absence or vacation may be granted at the discretion of the Programme Director, but may not exceed two (2) weeks in a given year unless required for medical reasons. A full "fellowship year" shall include a full fifty (50) weeks of training within a consecutive twelve (12) month period.

## **8. PRACTICE RESTRICTIONS DURING FELLOWSHIP:**

The fellowship is a full-time position. Concurrent academic or private practice during the fellowship is not permitted to the extent it interferes with fellowship obligations.

## **9. DIDACTIC REQUIREMENTS:**

There shall be didactic sessions at least once a week including, but not limited to, morbidity and mortality conference, journal club, clinical presentations, research and basic science presentations.

## **10. FELLOW EVALUATION:**

There must be documented ongoing evaluation and advancement of fellow(s) as stipulated in Section 2 above.

## **11. DUE PROCESS:**

There must be specific written procedures for adjudication of academic and disciplinary complaints. These procedures should parallel those established by the parent institution when possible and must ensure due process to protect the recognized rights and responsibilities of the fellow(s). The procedures must include institutional policy, which provides for due process for all individuals who may be potentially involved when actions are contemplated or initiated which could result in dismissal of a fellow. When there are grievances against a programme or an institution, it is imperative that review of these grievances be initiated at the local level prior to the involvement of outside organizations or agencies.

## **12. FELLOW RIGHTS AND RESPONSIBILITIES:**

Candidates for acceptance should be informed, in general, of the educational experience to be provided, including the nature of assignments or other departments or institutions and teaching commitments. Additionally, the fellow(s) should be provided with written information ( or contract) which affirms the fellow(s) obligations and responsibilities to the institution, the programme and programme faculty. The statement should include, but not necessarily be limited to, information about

- (1) tuition, stipend or other compensation;
- (2) vacation and sick leave;
- (3) practice privileges and other activities outside the educational programme;
- (4) professional liability coverage;
- (5) due process policy and
- (6) the current accreditation status of the programme.

## **13. RESEARCH:**

The application of research methods and the evaluation of investigative data develop intellectual growth, a creative attitude, a better interpretation of scientific literature and a desire for continued study. In addition to the requirement set forth in Section 5.above, Fellows should be encouraged to engage in an investigative project. Such research may take the form of:

13.1 Investigation in laboratories or clinics.

13.2 Systematic reviews of scientific literature or the preparation of statistical analyses based on clinical case records.

## **14. OUTCOME ASSESSMENT:**

Each programme must regularly evaluate the degree to which its goals are being met through a formal assessment of outcomes. Each Fellowship Programme must define its own goals and objectives.

14.1 Accredited fellowship programmes must design and implement their own outcomes measures to determine the degree to which their stated goals and objectives are being met. Such measurement must be ongoing and systematically documented. Results of the assessment process must be used to evaluate the programme's effectiveness in meeting its goals and to foster enhanced fellow achievement.

## **15. SITE VISITATION:**

Each recognized Fellowship Programme must undergo a site visitation by two (2) surgeons appointed by EACMFS. Every Fellowship Programme must undergo a site visitation, at a minimum, every five (5) years. EACMFS may conduct additional site visitations at anytime at its discretion. The intent of this visitation is to verify a programme compliance with EACMFS guidelines.

## **16. ANNUAL REPORTS:**

An official Annual Report documenting enrolled fellows and appropriate case logs must be submitted to EACMFS Secretariat by August 1 of each year. The Annual Report must be submitted in the format established by EACMFS.

## **17. FELLOWSHIP COMPLETION CERTIFICATE:**

The Fellowship Programme Director is required to attest to the candidate's satisfactory completion of the Fellowship Programme. The Programme Director must complete and submit to EACMFS Secretariat a Completion Certificate in the format provided by EACMFS.

## 18. SUSPENSION/REVOCAION OF APPROVED STATUS:

The EACMFS may suspend or revoke a Fellowship Programme's Approval status at any time in accordance with this section.

**18.1 Acts Subject to Sanction.** EACMFS Executive Committee (Exec) may sanction a Fellowship Programme in accordance with the procedures set forth in section 18.2 below, if (i) the Fellowship Programme is not in full compliance with EACMFS' Fellowship Guidelines; or if (ii) the Fellowship Director or any faculty has engaged or is engaging in conduct that is contrary to the objectives of EACMFS because of its fraudulent, unethical or unprofessional nature. Such sanction may consist of the suspension of the Programme's Approval status (for a specified period of time), or the revocation of its Approval status. There is no process for reinstatement following the revocation of a Programme's Approval status. Therefore, if an EACMFS approved Fellowship Program ever has its Approval status revoked, and if that Programme thereafter seeks EACMFS Approval, the Programme must proceed through the application process as a new Fellowship Programme. However, a Programme seeking EACMFS approval following a prior revocation of Approval status is not eligible for Provisional Approval and may only be recognized following final Approval by the Exec.

**18.2 Disciplinary Procedures.** All matters subjecting a Fellowship Programme to sanction shall be submitted to the Exec for consideration. EACMFS' President shall appoint an *ad hoc* committee (Investigation Committee) to investigate any suspicion or allegation of a Fellowship Programme's non-compliance with EACMFS Fellowship Guidelines, or any other grounds for sanction. The Fellowship Director must cooperate fully with any investigation by the Investigation Committee including, but not limited to, written inquiries, document requests, and a request for an expedited site visit by a representative(s) or appointee of the Investigating Committee. The Fellowship Director shall respond to all written inquiries, document requests, and shall facilitate an expedited site visit within thirty (30) days of any request, unless additional time is provided by the Investigation Committee at its discretion. Any failure or refusal to cooperate or comply with the Investigation Committee shall be grounds for a determination by the Committee, and the Exec, that the Fellowship Programme is not in compliance with EACMFS Fellowship Guidelines, or that the Fellowship Programme is otherwise subject to sanction. If the Investigation Committee determines that the Fellowship Programme is not in compliance with EACMFS Fellowship Guidelines or is subject to sanction for any other reason, then the Investigation Committee shall send written notice to the Fellowship Director and to the Exec specifying all areas of non-compliance and any other conduct subjecting the Fellowship Programme to sanction (the "Notice"). Within thirty (30) days from receipt of the Notice, the Fellowship Director shall submit a written response to the Investigation Committee's notice along with any documentation supporting said response (the "Response"). The Programme Director may also request a hearing before the Exec as part of the Response. If a hearing is not requested as part of the Response, the Exec shall render a decision based upon the Investigation Committee's Notice (and any written and/or oral presentation the Committee may submit in support thereof), and the Fellowship Director's Response. If the Programme Director neither submits a Response nor requests a hearing, the Board shall render a decision based solely on the Notice, and may deem any unopposed allegations set forth in the Notice as admitted by the Fellowship Director for the purposes of its decision. If a hearing is requested, the hearing shall be conducted at a duly called meeting of the Exec, and notice thereof shall be provided to the Programme Director not less than 30 days prior thereto, which notice shall set forth:

- (a) the date, time and place of the Executive's meeting;
- (b) that the Executive will consider the entry of sanctions against the Fellowship Programme which (if applicable) may include the revocation of the Programme's Approval status at the meeting, and including a statement regarding the basis for the potential sanction; and
- (c) inviting the Programme Director to attend the meeting in person or by representative and to have the benefit of legal counsel; to submit evidence regarding the matter being considered; and to set forth why a sanction should not be entered against the Fellowship Programme.

In the event that a hearing is requested, the Executive may appoint the EACMFS' Legal Counsel as prosecutor representing the position set forth in the Notice.

Following the receipt of the Notice, any Response, and, if requested, following the hearing in accordance with this Section, the Board may enter a sanction against the Fellowship Programme in accordance with this Section upon a two-thirds majority vote. Prompt written notice of any sanction shall be sent to the Programme Director. The Fellowship Director is solely responsible for any impact that any sanction may have upon a fellow or other third party to the Fellowship Programme.

Only disinterested and impartial members of EACMFS Executive Committee shall reside in deliberations with respect to proposed sanctions against a Fellowship Programme.

All decisions of the Executive Committee are final.

#### **19. NOTIFICATION OF ADVERSE ACTIONS:**

The Programme Director shall send written notice to EACMFS within fourteen (14) days of any legal, governmental or other action initiated, consummated, or threatened against the Programme Director or any teaching staff members, including, but not limited to:

- a. Any medical negligence action or other civil claim arising out of the provision of health care services;
- b. The sanction, termination, probation, suspension or any other action taken voluntarily or initiated by a regulatory authority, health care institution, professional association, or other in connection with any license, registration, certification, privilege or accreditation held by the Programme Director or any teaching staff member relating to the provision of health care services;
- c. Any action or sanction by the national government for fraud or abuse in connection with the health care system.

#### **20. HOLD HARMLESS:**

The Fellowship Programme, Programme Director, Programme teaching and administrative staffs, Fellows, and all other employees, agents and participants in the Fellowship Programme agree to indemnify and hold EACMFS, and its members, board, agents and employees harmless against all claims, demands, causes of action, loss, damages and expenses including any legal fees and costs incurred in defending such claims resulting from, arising out of, or in any way related to the Fellowship Programme, the content and implementation of these Guidelines, or any certification or approval processes and decisions.

#### **21. ACKNOWLEDGMENTS:**

By seeking EACMFS approval of the Fellowship Programme and signing below, the Fellowship Director hereby represents and acknowledges that he/she has read the Guidelines for Facial Cosmetic Surgery Fellowship Training, fully understands its contents, and accepts and agrees to all of the covenants and commitments stated herein on behalf of the Fellowship Programme and on his/her individual behalf. The Programme Director represents that he/she has provided a copy of these Guidelines to all teaching and administrative staff personnel, Fellows, and other employees, agents and participants of the Programme and has been duly authorized by each to accept and agree to the covenants and commitments stated herein on their behalf. The Programme Director further agrees to provide a copy of these Guidelines to all teaching and administrative staff personnel, Fellows, and other employees, agents and participants of the Programme who hereafter participate in the Programme and, in each case, obtain their authorization to accept and agree to the covenants and commitments stated herein on their behalf.

**Approved by the European Association for Cranio-Maxillo-Facial Surgery, October, 2009**



PO Box 85  
Midhurst  
West Sussex GU29 9WS  
UNITED KINGDOM  
Tel: +44 (0)1730 810951  
Fax: +44 (0)1730 812042  
E-mail: secretariat@eacmfs.org