

**AMERICAN ACADEMY OF COSMETIC SURGERY**

**GUIDELINES FOR CLINICAL FELLOWSHIP  
TRAINING**

**IN**

**COSMETIC SURGERY**

## PREFACE

Maintaining and improving the quality of advanced education in nationally recognized cosmetic surgery fellowships is a primary aim of the American Academy of Cosmetic Surgery (Academy). The Academy is an accredited council of professionals devoted to post-graduate medical education in the field of cosmetic surgery. It is the nation's largest multi-disciplinary medical organization that exclusively devotes its educational efforts to cosmetic surgery.

A fellowship in cosmetic surgery is a planned post-residency program that contains advanced education and training designed to enhance clinical skills (Fellowship Program). The Academy recognizes, through its certification, Fellowship Programs that meet or exceed specific standards. Certification of Fellowship Programs is a voluntary effort of all parties. The Academy's certification process seeks to ensure the fellow, specialty boards and the public that the certified Fellowship Programs are in compliance with the Academy's published standards.

In order to become certified by the Academy, the Fellowship Program's director must complete and present for the Academy's consideration a sworn application (Application), on the Academy's prescribed form, certifying the requisite information, and submit to an on-site evaluation by the Academy's assigned representatives and/or consultants. The Fellowship Program director must also respond to all questions and provide all additional information and documentation requested by the Academy in connection with its certification process. Based on the Fellowship Program director's submission, the Academy's on-site visit, and/or any other information obtained by the Academy, the Academy Board of Trustees (Board) will determine, in its sole discretion, whether to grant the Application and certify the Fellowship Program.

## AUTHORIZED ENROLLMENT

Academy certified Fellowship Programs permit a specified number of fellows in each year of the program. The Academy's prior authorization is required for an increase in enrollment 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 enrollment. Failure to comply with this policy will jeopardize the Fellowship Program's certified status.

## QUALIFYING TERMS

The use of the words: "must;" "shall;" "will;" "should;" "may;" and "could" were specifically selected to indicate the relative weight the Academy attaches to each word. The definitions of these words as used in this document are as follows:

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

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

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

## **FELLOWSHIP STATUS**

A Fellowship Program that presents a completed and sworn Application; submits to an on-site evaluation; and provides all information and documentation requested by the Academy, shall be notified of the Board's decision to either: (i) approve the Application; (ii) provisionally approve the Application; or (iii) deny the Application. In this regard, the Board's decision represents the following:

**Approve:** The Academy received and considered the Fellowship Program's Application, on-site evaluation, and other submissions, and determined it to qualify for certification pursuant to these Guidelines for Clinical Fellowship Training in Cosmetic Surgery (Guidelines). Accordingly, the Academy certifies the Fellowship Program.

**Provisionally Approve:** The Academy received and considered the Fellowship Program's Application, on-site evaluation, and other submissions, and determined it to be in substantial compliance with these Guidelines with minor deficiencies that could be corrected within twelve (12) months. The Fellowship Program will not be certified until and unless it completes all designated corrective action within the time period prescribed by the Academy, and receives a subsequent notice of approval from the Academy.

**Deny:** The Academy determined the Fellowship Program does not qualify for certification and does merit provisional approval.

### **1. INSTITUTIONAL COMMITMENT:**

**1.1** A Fellowship Program must have one sponsoring institution with primary responsibility for the entire program (Qualified Institution).

**1.2** Qualified Institutions include only university centers, medical schools, hospitals, ambulatory care settings, and private practices accredited by a recognized accrediting organization, such as the Joint Commission (previously known as the Joint Commission on Accreditation of Healthcare Organizations), the Accreditation Association for Ambulatory Health Care (AAAHC), the American Association for Accreditation of Ambulatory Surgery Facilities (AAAASF), or other accrediting organizations deemed equivalent by the Academy.

**1.3** The Qualified Institution must ensure that sufficient teaching staff, financial resources and academic support exist to enable the Fellowship Program to comply with the Academy's certification requirements. This support must include sufficient operating time to ensure the fellow obtains adequate surgical experience.

**1.4** When there is a cooperative education effort involving multiple institutions, the commitment of each Qualified Institution to the Fellowship Program must be documented in an affiliation agreement that conforms to the Academy's institutional requirements.

**1.5** Fellowship Programs based in institutions or centers which also sponsor surgery residency training programs (e.g., Otolaryngology, Dermatology, Oral and Maxillofacial Surgery, Ophthalmology, General Surgery) must demonstrate that the fellowship and residency programs are not in conflict, and that the Fellowship Program experience does not compete with the residency training program for surgical cases. Separate statistics must be maintained for each program.

**2. PROGRAM DIRECTOR AND TEACHING STAFF:**

**2.1 Fellowship Program Director:**

The Fellowship Program must be directed by a single responsible individual (Director) who is board certified by the American Board of Cosmetic Surgery (ABCS). The Director should be an active fellow member of the Academy and must maintain active hospital privileges to perform cosmetic surgery procedures or have privileges in a Qualified Institution to perform cosmetic surgery procedures. The Director must be an experienced clinician with sufficient administrative experience to ensure effective direction of the Fellowship Program. The Director must ensure that the Fellowship Program includes a defined process for the:

**2.1.1** Development of the Fellowship Program's goals and objectives and a systematic method of assessing that the goals have been met by appropriate outcomes measures.

**2.1.2** Selection and supervision of the teaching staff, including performance of formal periodic (at least annual) evaluations of the teaching staff.

**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 be required to read a list of significant materials prepared by the Director. In addition, the Director should engage in verifiable scholarly activities, such as basic research; publication in peer-reviewed scientific journals or books; and presentation at scientific meetings and/or continuing education courses.

**2.1.4** Selection of the fellow ensuring all appointed fellows meet the minimum eligibility requirements set forth in Section 4 below.

**2.1.5** Periodic (at least semi-annual) evaluation of the knowledge, skills and professional growth of fellow, 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 Fellowship Program.

**2.1.6** Formal evaluation and documentation of the fellow's performance in each of the following categories: diagnosis, treatment planning, operative procedures, surgical assistance, and complications.

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

**2.1.8** Provision for due process in connection with fellow grievances.

**2.1.9** Maintenance of Fellowship Program records, patient statistics, and affiliated institutional agreements. The 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 retain a copy of the fellow's case log upon completion of the Fellowship Program.

**2.1.10** Preparation of a final written evaluation of the fellow upon completion of the Fellowship Program. The evaluation must include a review of the fellow's performance during the Fellowship Program, and should verify that the fellow has demonstrated sufficient competency with respect to the completed training. The purpose of the evaluation is to document satisfactory completion of the Fellowship Program. The evaluation must be included in the fellow's permanent record and must be maintained by the Fellowship Program.

## **2.2 Teaching Staff:**

**2.2.1** Members of the Fellowship Program's 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 Program are met, and to provide 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 teaching staff members in the Fellowship Program, and the Fellowship Program shall consist of no less than two (2) teaching staff members. The fellow must spend a reasonable period of time with each teaching staff member. The Director and/or a majority of the teaching staff members shall have an academic appointment.

**2.2.3** There must be evidence of scholarly activity among the teaching staff. Such evidence may include basic research; publication in peer-reviewed scientific journals

or books; and presentation at scientific meetings and/or continuing education courses.

**2.2.4** The teaching staff must be supervised by an ABCS certified individual.

**2.2.5** The teaching staff must have significant education, training, experience, and proven ability to practice the specialty of cosmetic surgery including, without limitation, the cosmetic surgery procedures identified in Section 5.1 below applicable to the Fellowship Program.

**2.2.6** The teaching staff should be involved in direct patient care and/or didactic instruction for the fellow by means of lectures, journal club, or other educational programs.

**2.2.7** The teaching staff shall have hospital transferring privileges.

**2.3 Substitution of Fellowship Program Director and Teaching Staff Members:**

**2.3.1** In the event a Director resigns, or the Director's position is terminated for any other reason, the Fellowship Program's certification shall automatically terminate unless, within thirty (30) days of said termination (or such extended period as the Academy provides), a written request is made to the Academy, in the form prescribed by the Academy, to approve a separate individual as the Director of the Fellowship Program. A request to approve a substitute Director must include documentation required by the Academy and confirmation that the proposed individual's qualifications meet all requirements set forth in Section 2.1 above. The Academy may request additional information and documentation it deems necessary to ascertain the qualifications of the proposed substitute Director. The Academy's decision regarding whether to approve the proposed substitute 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 Director is not submitted to the Academy or in the event a timely request to approve a substitute Director is denied by the Academy, the Fellowship Program's certification by the Academy shall automatically terminate.

**2.3.2** The Director shall notify the Academy within fourteen (14) days in the event a member of the Fellowship Program's teaching staff resigns or a teaching staff member's position is terminated for any other reason. In the event the Academy determines, in its sole discretion, said resignation or termination results in the Fellowship Program's failure to comply with the requirements of Section 2.2 above, the Academy shall notify the Director regarding the change in compliance and provide the Director no less than thirty (30) days to retain additional teaching staff and fulfill the requirements of Section 2.2 above. In the event the Director retains an appropriate substitute teaching staff member within the time prescribed in the

Academy's notice, the Director shall submit a written request to the Academy, in the form prescribed by the Academy, for continuation of the Fellowship Program's certification based on the proposed substitute teaching staff member. The request must include documentation required by the Academy and confirm that the proposed teaching staff renders the Fellowship Program compliant with Section 2.2 above. The Academy may request additional information and documentation as it deems necessary to ascertain whether the proposed teaching staff renders the Fellowship Program compliant with Section 2.2 above. The Academy's decision regarding whether to continue or revoke the Fellowship Program's certification based on the proposed teaching 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 Program's certification is not submitted to the Academy or in the event a timely request to continue the Fellowship Program's certification is denied by the Academy, the Fellowship Program's certification 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 fulfill the needs of the Fellowship Program as specified in these Guidelines. These include, but are not limited to, facilities and personnel resources for the fellow to carry out his/her 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 to manage 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, anesthetics agents, drugs and other substances and techniques such as ionizing radiation that might be hazardous to patients or personnel.

**3.4** Each Qualified 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 the fellow, teaching staff and appropriate support staff.

**3.5** Mechanisms must be established for continuously monitoring compliance with these protocols within the Qualified Institution and affiliated sites. The Fellowship Program must document its compliance with applicable regulations.

**3.6** The teaching staff, fellow, and support staff involved in the direct provision of patient care must be certified in basic life support procedures, including cardiopulmonary resuscitation. The teaching staff and fellow must maintain active certification in basic and

advanced cardiac life support. The Fellowship Program must maintain certifications evidencing compliance with this Section.

**3.7** The fellows should show proof of immunization status against infectious diseases (e.g., mumps, measles, rubella, 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.

**3.8** The Academy only endorses the use of Qualified Institutions in connection with Fellowship Programs.

**3.8.1** Clinical facilities must be properly equipped for the performance of all appropriate cosmetic procedures, including administration of general anesthesia and sedation for ambulatory patients in strict accordance with the facility's active accreditation status.

**3.8.2** There must be a designated space properly equipped for monitoring the patient's recovery from ambulatory surgery, general anesthesia and sedation in strict accordance with the facility's active accreditation status.

#### **4. PREREQUISITES TO FELLOWSHIP TRAINING:**

**4.1** To qualify for a Fellowship Program, the fellow must, at a minimum, first be board certified in one of the specialties listed below. To qualify, board certification in the following specialties must be granted by a certifying board recognized by: the American Board of Medical Specialties (ABMS); the American Osteopathic Association's Bureau of Osteopathic Specialists (BOS); the American Board of Oral-Maxillofacial Surgery (ABOMS); or another certifying organization deemed equivalent by the Academy.

- a.** Dermatology
- b.** General Surgery
- c.** Obstetrics and Gynecology
- d.** Ophthalmology
- e.** Oral and Maxillofacial Surgery
- f.** Otolaryngology
- g.** Plastic Surgery
- h.** Other surgical specialty deemed equivalent by the Academy

In addition to being board certified in one of the above specialties, an fellow must have and maintain an active medical license (i.e., MD, DO). In addition, depending on the applicant's board certification, and residency training completed in accordance therewith, the applicant may be required to complete additional training (e.g., additional year(s) of general surgery) to qualify for specific Fellowship Programs.

**4.2** Non-discriminatory policies must be followed in selecting fellows, and there must be no discrimination in the selection process based on professional degree(s).

**4.3** The applicant must maintain active certification in basic and advanced life support, including cardiopulmonary resuscitation.

**5. CURRICULUM FOR CERTIFIED FELLOWSHIP PROGRAMS:**

**5.1 REQUIREMENTS SPECIFIC TO AREA OF CERTIFICATION SOUGHT:**

Depending on whether the Fellowship Program is certified as a Body, Breast and Extremity Cosmetic Surgery Fellowship, Dermatologic Cosmetic Surgery Fellowship, Facial Cosmetic Surgery Fellowship, or General Cosmetic Surgery Fellowship, the Fellowship Program must encompass, at a minimum, the following requirements:

**5.1.1 BODY, BREAST AND EXTREMITY COSMETIC SURGERY**

**5.1.1.1** The Director must be board certified by the ABCS in Body, Breast and Extremity Cosmetic Surgery or General Cosmetic Surgery.

**5.1.1.2** The fellow must meet the requirements set forth in Section 4.1 above. Fellows whose prerequisite board certification is in dermatology must have also completed two (2) years of general surgery residency training prior to applying for a Body, Breast and Extremity Cosmetic Surgery fellowship. Fellows whose prerequisite board certification is in ophthalmology must have also completed either: (i) two (2) years of general surgery residency training; or (ii) an oculoplastic fellowship plus at least one (1) year of general surgery residency training prior to applying for a Body, Breast and Extremity Cosmetic Surgery fellowship.

**5.1.1.3** The fellow must participate as surgeon or co-surgeon in a minimum of three hundred (300) specific Body, Breast and Extremity Cosmetic Surgery Procedures (defined below). Procedures in which the fellow participates as an assistant only are not included when calculating the number of procedures. Each Fellowship Program is responsible for providing the fellow with adequate opportunities to perform all of the Body, Breast and Extremity Cosmetic Surgery Procedures and must ensure that the three hundred (300) minimum procedures encompass an adequate diversity among the listed Body, Breast and Extremity Cosmetic Surgery Procedures. The following Body, Breast and Extremity Cosmetic Surgery Procedures are not to be construed as limiting, and the Fellowship Program is encouraged to include education, training and experience in additional body, breast and extremity cosmetic surgery procedures as it deems appropriate, and as may hereafter be developed, as part of the practice of body, breast and extremity cosmetic surgery. The Academy will review and monitor the number and

type of procedures performed by the fellow to ensure there is an appropriate distribution among the Body, Breast and Extremity Cosmetic Surgery Procedures.

**Body, Breast and Extremity Cosmetic Surgery Procedures**

- a. Liposuction (body, extremity)
- b. Abdominoplasty
- c. Breast Augmentation
- d. Breast Reduction/Mastopexy
- e. Soft Tissue Augmentation (fat and/or body implants)
- f. Soft Tissue Excision (ex. Body/gluteal lifts, brachioplasty or thigh lifts)

**5.1.2 DERMATOLOGIC COSMETIC SURGERY**

**5.1.2.1** The Director must be board certified by the ABCS in Dermatologic Cosmetic Surgery or General Cosmetic Surgery.

**5.1.2.2** The fellow must meet the requirements set forth in Section 4.1 above.

**5.1.2.3** The fellow must participate as surgeon or co-surgeon in a minimum of three hundred (300) specific Dermatologic Cosmetic Surgery Procedures (defined below). Procedures in which the fellow participates as an assistant only are not included when calculating the number of procedures. Each Fellowship Program is responsible for providing the fellow with adequate opportunities to perform all of the Dermatologic Cosmetic Surgery Procedures and must ensure that the three hundred (300) minimum procedures encompass an adequate diversity among the listed Dermatologic Cosmetic Surgery Procedures. The following Dermatologic Cosmetic Surgery Procedures are not to be construed as limiting, and the Fellowship Program is encouraged to include education, training and experience in additional dermatologic cosmetic surgery procedures as it deems appropriate, and as may hereafter be developed, as part of the practice of dermatologic cosmetic surgery. The Academy will review and monitor the number and type of procedures performed by the fellow to ensure there is an appropriate distribution among the Dermatologic Cosmetic Surgery Procedures.

**Dermatologic Cosmetic Surgery Procedures**

- a. Dermabrasion
- b. Soft Tissue Augmentation (not injectable)
- c. Laser Resurfacing
- d. Chemical Peel (medium or deep peel)
- e. Liposuction (body, extremity)
- f. Surgical Scar Revision

- g. Hair Transplant
- h. Face and Neck Rejuvenation including Rhyidectomy
- i. Blepharoplasty

### **5.1.3 FACIAL COSMETIC SURGERY**

**5.1.3.1** The Director must be board certified by the ABCS in Facial Cosmetic Surgery or General Cosmetic Surgery.

**5.1.3.2** The fellow must meet the requirements set forth in Section 4.1 above.

**5.1.3.3** The fellow must participate as surgeon or co-surgeon in a minimum of three hundred (300) specific Facial Cosmetic Surgery Procedures (defined below). Procedures in which the fellow participates as an assistant only are not included when calculating the number of procedures. Each Fellowship Program is responsible for providing the fellow with adequate opportunities to perform all of the Facial Cosmetic Surgery Procedures and must ensure that the three hundred (300) minimum encompass an adequate diversity among the listed Facial Cosmetic Surgery Procedures. The following Facial Cosmetic Surgery Procedures are not to be construed as limiting, and the Fellowship Program is encouraged to include education, training and experience in additional facial cosmetic surgery procedures as it deems appropriate, and as may hereafter be developed, as part of the practice of facial cosmetic surgery. The Academy will review and monitor the number and type of procedures performed by the fellow to ensure there is an appropriate distribution among the Facial Cosmetic Surgery Procedures.

#### **Facial Cosmetic Surgery Procedures**

- a. Facial Rhytidectomy
- b. Rhinoplasty
- c. Facial Implants
- d. Otoplasty
- e. Blepharoplasty (upper and lower)
- f. Brow/Forehead Lift
- g. Hair Transplant
- h. Cervicofacial Liposuction
- i. Scar Revision
- j. Medium to Deep Skin Resurfacing (Laser, Chemical or Dermabrasion)
- k. Soft Tissue Grafting

### **5.1.4 GENERAL COSMETIC SURGERY**

**5.1.4.1** The Director must be board certified by the ABCS in General Cosmetic Surgery.

**5.1.4.2** The fellow must meet the requirements set forth in Section 4.1 above. Fellows whose prerequisite board certification is in dermatology must have also completed two (2) years of general surgery residency training prior to applying for a General Cosmetic Surgery fellowship. Fellows whose prerequisite board certification is in ophthalmology must also have completed either: (i) two (2) years of a general surgery residency training; or (ii) an oculoplastic fellowship plus at least one (1) year of general surgery residency training prior to applying for a General Cosmetic Surgery fellowship.

**5.1.4.3** The fellow must participate as surgeon or co-surgeon in a minimum number of three hundred (300) General Cosmetic Surgery Procedures; including the specific Facial and Body Cosmetic Surgery Procedures (defined below). Procedures in which the fellow participates as an assistant only are not included when calculating the number of procedures. Each Fellowship Program is responsible for providing the fellow with adequate opportunities to perform all of the Facial and Body Cosmetic Surgery Procedures and must ensure that the three hundred (300) minimum procedures encompass an adequate diversity among the listed Facial and Body Cosmetic Surgery Procedures. The following Facial and Body Cosmetic Surgery Procedures are not to be construed as limiting, and the Fellowship Program is encouraged to include education, training and experience in additional general cosmetic surgery procedures as it deems appropriate, and as may hereafter be developed, as part of the practice of general cosmetic surgery. The Academy will review and monitor the number and type of procedures performed by the fellow to ensure there is an appropriate distribution among the General Cosmetic Surgery Procedures.

#### **Facial and Body Cosmetic Surgery Procedures**

- a. Facial Rhytidectomy
- b. Rhinoplasty
- c. Facial Implants
- d. Otoplasty
- e. Blepharoplasty (upper and lower)
- f. Brow/Forehead Lift
- g. Cervicofacial Liposuction
- h. Scar Revision
- i. Medium to Deep Skin Resurfacing (laser, chemical or dermabrasion)
- j. Hair Transplant
- k. Liposuction (body, extremity)
- l. Abdominoplasty
- m. Breast Augmentation
- n. Breast Reduction/Mastopexy

- o. Soft Tissue Augmentation (fat and/or implants)

## **5.2 ADDITIONAL REQUIREMENT APPLICABLE TO ALL FELLOWSHIPS:**

All Fellowship Programs must encompass the following requirements.

**5.2.1** Fellowship Programs must obtain the fellow's written confirmation that the fellow read, understands, acknowledges and agrees to abide by the Fellowship Program requirements and these Guidelines.

**5.2.2** In addition to the specific requirements otherwise set forth in these Guidelines, the duration of the Fellowship Program must in no event be less than twelve (12) consecutive months.

**5.2.3** The Fellowship Program must include a formally structured curriculum. The curriculum should include a list of topics which will be discussed in weekly seminars with the fellow. A reading list from landmark cosmetic surgery topics should be available to the fellow. The Academy should maintain an updated cosmetic surgery article log that will be updated at least every two (2) years. The Director is responsible for disseminating articles and information to their fellows.

**5.2.4** A specific time should be scheduled each week for didactic seminars.

**5.2.5** The Fellowship Program must provide a broad and complete sequence of patient experiences in the area of emphasis during the Fellowship Program. The fellow must have the opportunity to see patients preoperatively 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 Program.

**5.2.6** The fellow must maintain a surgical case log 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 anesthesia/sedation, preoperative diagnosis, the operative procedure performed, and the outcome of the procedure.

**5.2.7** The fellow must participate as surgeon or co-surgeon in three hundred (300) or more cosmetic surgery procedures during the Fellowship Program, including the minimum number of cosmetic surgery procedures required for the applicable areas of certification set forth in Section 5.1 above.

**5.2.8** The fellow must perform clinical or basic research, and, as part of the Fellowship Program, submit at least one (1) paper reflecting said research for publication to the American Journal of Cosmetic Surgery (AJCS). Following submission of the paper, the fellow must cooperate with, and respond to all requests from, the AJCS's editor or editorial staff in connection with said submission.

**5.2.9** The fellow must maintain an active certification in basic and advanced life support, including cardiopulmonary resuscitation.

**5.2.10** The fellow must keep an accurate record of the number and type of cosmetic surgery procedures performed during his/her fellowship in an electronic format utilizing the specific program provided by the Academy. This record may be requested of the fellow at any time. The Director must keep on file a current and accurate record of all present and former fellows. The fellow must submit his/her surgical log to the Academy fellowship committee in the format provided by the Academy within two (2) months of completing his/ fellowship. The patients' names should be redacted for the submission.

## **6. AFFILIATIONS:**

When the resources of two (2) or more affiliated institutions are utilized for a single Fellowship Program, each participating institution must be a Qualified Institution and must demonstrate a commitment to the Fellowship Program. Documented evidence of agreements between the institutions must be available for inspection by the Academy and Academy representatives conducting on-site visits. The agreements should specifically set forth, without limitation, the following:

**6.1** The designation of a single Director and the scope of the Director's authority to direct and coordinate the Fellowship Program's activities in all participating institutions.

**6.2** The designation of teaching staff responsible for the Fellowship Program and the fellow's supervision in each institution.

**6.3** The delineation of the each institution's expected contribution to the Fellowship Program and fellow's supervision.

**6.4** The fellow's assignment with respect to the respective segments of the Fellowship Program provided by each institution and any assignment priority.

**6.5** Each institution's financial commitment to the Fellowship Program.

**6.6** The Fellowship Program's primary sponsor's acknowledgement and acceptance of full responsibility for the quality of education provided in all affiliated institutions.

**6.7** All parties' acknowledgement and agreement that these Guidelines apply to training provided in the affiliated institutions.

**6.8** All parties' compliance with these Guidelines and all applicable rules, regulations, ordinances, and other governing laws.

**7. VACATION/LEAVE OF ABSENCE:**

Leaves of absence or vacations may be granted at the discretion of the Director, but may not exceed two (2) weeks in a given year unless required for medical reasons. A full “fellowship year” shall include a consecutive twelve (12) month period. Additional time off for job interviews may be made available at the discretion of the Director but must not exceed ten (10) working days.

**8. PRACTICE RESTRICTIONS DURING FELLOWSHIP:**

The Fellowship Program encompasses a full-time position for the fellow. Concurrent academic or private practice during the fellowship is not permitted to the extent it interferes with the fellow’s obligations to the Fellowship Program.

**9. DIDACTIC REQUIREMENTS:**

There shall be didactic sessions at least two (2) times each week including, but not limited to, morbidity and mortality conferences, journal club, clinical presentations, research and basic science presentations.

**10. FELLOW EVALUATION:**

There must be documented ongoing evaluations and advancement of the fellow consistent with 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 Qualified Institution when possible and must ensure due process to protect the recognized rights and responsibilities of the fellow. 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 a fellow’s dismissal. When there are grievances against a Fellowship Program or a Qualified Institution, review of the grievances should be initiated at the local level prior to the involvement of outside organizations or agencies.

**12. FELLOW RIGHTS AND RESPONSIBILITIES:**

The Director should apprise all Fellowship Program candidates of the general and educational experience included in the Fellowship Program, including without limitation the nature of assignments, any participation of other departments or institutions, and the teaching staff commitments. Additionally, the Director should provide Fellowship Program candidates with written notification of the fellow’s obligations and responsibilities to the Qualified Institution, the Fellowship Program and the teaching staff. The written notice should enclose a copy of these

Guidelines and include, without limitation, information about: (1) tuition, stipend and/or other compensation; (2) vacation and sick leave; (3) practice privileges and other activities outside the Fellowship Program; (4) professional liability coverage; (5) due process policy; and (6) the current accreditation status of the program.

**13. RESEARCH:**

The application of research methods and the evaluation of investigative data should 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 5.2.8 above, the fellow should be encouraged to engage in an investigative project. Such research may take the form of: investigations in laboratories and/or clinics; or comprehensive summaries of scientific literature or the preparation of statistical analyses based on clinical case records.

**14. OUTCOME ASSESSMENT:**

The Fellowship Program must define its goals and objectives. The Fellowship Program must regularly evaluate the degree to which its goals are being met through formal written assessments of outcomes. The written assessments must be ongoing and systematically compiled. The written assessments will be reviewed by the Academy during on-site evaluations and must also be provided to the Academy at any time upon its request. Studies and assessments required by the Qualified Institution's accrediting organization (e.g., the Joint Commission, AAAHC, AAAASF) should be integrated into the Fellowship Program written assessments.

**15. ON-SITE VISITATION:**

Fellowship Programs must undergo a site visitation by one (1) or two (2) ABCS board certified cosmetic surgeons appointed by the Academy. Following the initial on-site visitation and certification by the Academy, Fellowship Programs must undergo additional on-site visitations, at a minimum, every five (5) years. The Academy may conduct additional on-site visitations at anytime in its sole discretion. The intent of on-site visitations is to verify a Fellowship Program's compliance with these Guidelines.

**16. ANNUAL REPORTS:**

An official Annual Report documenting enrolled fellows and appropriate case logs must be submitted to Academy headquarters by July 1 of each year (or any alternate date determined by the Academy). The Annual Report must be submitted in the format established and provided by the Academy.

**17. FELLOWSHIP COMPLETION CERTIFICATE:**

The Director must attest to the fellow's satisfactory completion of the Fellowship Program. The Director must complete and submit to the Academy a Completion Certificate on the form provided by the Academy.

**18. BOARD ELIGIBILITY:**

Completion of an Academy certified Fellowship Program does not guarantee a fellow the right to take the ABCS board exam or otherwise guarantee that the fellow is eligible for certification by the ABCS. In addition, a Fellowship Program's continued certification by the Academy is not guaranteed and, therefore, there is no guaranty that a Fellowship Program will be certified by the Academy at the time a fellow completes the Fellowship Program. The ABCS, which establishes its certification requirements and evaluates and examines those seeking to become board certified, is a separate and distinct entity from the Academy. It is the responsibility of the Director and fellow to be apprised of current ABCS certification requirements.

**19. SUSPENSION/REVOCAION OF CERTIFICATION:**

The Academy may suspend or revoke a Fellowship Program's certification at any time in accordance with this Section.

**19.1 Acts Subject to Sanction.** The Board may sanction a Fellowship Program in accordance with the procedures set forth in Section 19.2 below, if: (i) the Fellowship Program is not in full compliance with these Guidelines; or if (ii) the Director or any teaching staff engaged or is engaging in conduct that is contrary to the objectives of the Academy because of its fraudulent, unethical or unprofessional nature; or if (iii) the Academy determines in its sole discretion that it is in its best interest to do. Such sanction may consist of the suspension of the Fellowship Program's certification (for a specified period of time), or the revocation of its certification. There is no process for reinstatement following the revocation of a Fellowship Program's certification. Therefore, if an Academy certified Fellowship Program ever has its certification revoked, and if that Fellowship Program thereafter seeks Academy certification, the Fellowship Program must proceed through the application process as a new Fellowship Program. However, a Fellowship Program seeking Academy certification following a prior revocation of its certification is not eligible for Provisional Approval and may only be recognized following final certification by the Board.

**19.2 Disciplinary Procedures.** All matters subjecting a Fellowship Program to sanction shall be submitted to the Board for consideration. The Academy's current President shall appoint an *ad hoc* committee (Investigation Committee) to investigate any suspicion or allegation of a Fellowship Program's noncompliance with these Guidelines, or any other grounds for sanction. The 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 on-site visit by a representative(s) or appointee(s) of the Investigation Committee. The Director shall respond to all written inquiries and document requests, and shall facilitate an expedited on-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 Investigation Committee, and the Board, that the Fellowship Program is not in compliance with these Guidelines, or that the Fellowship Program is otherwise subject to sanction. If the Investigation Committee determines that the Fellowship Program is not in compliance with these Guidelines or is subject to sanction for any other reason, then the Investigation Committee shall send written notice to the Director and to the Board specifying all areas of noncompliance and any other conduct subjecting the Fellowship Program to sanction (Notice). Within thirty (30) days of delivery of the Notice to the Director's address (as maintained by the Academy), the Director shall submit a written response to the Investigation Committee's Notice along with any documentation supporting said response (Response). The Board 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 Director's Response. If the Director does not submit a Response, the Board shall render a decision based solely on the Notice (and any written and/or oral presentation the Committee may submit in support thereof), and may deem any unopposed allegations set forth in the Notice as admitted by the Director for the purposes of its decision. If the Board deems it necessary, in its sole discretion, it may request a hearing to be conducted at a duly called meeting of the Board, and provide separate notice thereof to the Director no less than thirty (30) days prior thereto, which notice shall set forth:

- a.** the date, time and place of the Board's meeting;
- b.** that the Board will consider the entry of sanctions against the Fellowship Program which (if applicable) may include the revocation of the Fellowship Program's certification at the meeting, and including a statement regarding the basis for the potential sanction; and
- c.** an invitation to the Director to attend the meeting in person; to submit evidence regarding the matter being considered; and to set forth why a sanction should not be entered against the Fellowship Program.

In the event that a hearing is requested by the Board, the Board may appoint the Academy's Legal Counsel as prosecutor representing the position set forth in the Notice.

Following the Notice, any Response, and, if requested, following the hearing in accordance with this Section, the Board may enter a sanction against the Fellowship Program in accordance with this Section upon a two-thirds (2/3) majority vote. Prompt written notice of any sanction shall be sent to the Director. The Director is solely responsible for any impact that any sanction may have upon a fellow or other third party to the Fellowship Program.

Only disinterested and impartial members of the Board shall participate in deliberations with respect to proposed sanctions against a Fellowship Program. All decisions of the Board are final and not subject to appeal.

**20. NOTIFICATION OF ADVERSE ACTIONS:**

The Director shall send written notice to the Academy within fourteen (14) days of any legal, governmental or other action initiated, consummated, or threatened against the Director, any teaching staff members, the Fellowship Program, or any Qualified Institution 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 Director, any teaching staff member, or any Qualified Institution;
- c. Any action or sanction by the State or Federal government for fraud or abuse in connection with the Medicare or Medicaid programs.

**21. RELEASE, INDEMNIFICATION AND HOLD HARMLESS:**

The Fellowship Program, all participating institutions, the Director, the teaching and administrative staffs, the fellows, and all other employees, agents and participants in the Fellowship Program agree to release, indemnify and hold the Academy, 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 Program, the content and implementation of these Guidelines, or any certification or approval processes and decisions.

**22. ACKNOWLEDGMENT:**

By seeking the Academy's certification of the Fellowship Program, the Director represents and acknowledges that he/she has read these Guidelines, fully understands its contents, and accepts and agrees to all of the covenants and commitments stated herein on behalf of the Fellowship Program, on his/her individual behalf, and on behalf of all participants in the Fellowship Program and all participating institutions including, without limitation, the teaching and administrative staff. The Director represents that he/she provided a copy of these Guidelines to all teaching and administrative staff personnel, the fellow, and other employees, agents and participants of the Fellowship Program and has been duly authorized by each to accept and agree to the covenants and commitments stated herein on their behalf. The 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 Fellowship Program who hereafter participate in the Fellowship Program and, in each case, obtain their authorization to accept and agree to the covenants and commitments stated herein on their behalf prior to the commencement of their participation in the Fellowship Program.

**Approved by the American Academy of Cosmetic Surgery Board of Trustees – May 4, 2000**

**Modified by the American Academy of Cosmetic Surgery Board of Trustees – May 6, 2001**

**Modified by the American Academy of Cosmetic Surgery Board of Trustees – February 3, 2002**

**Modified by the American Academy of Cosmetic Surgery Board of Trustees – October 3, 2002**

**Modified by the American Academy of Cosmetic Surgery Board of Trustees – February 1, 2004**

**Modified by the American Academy of Cosmetic Surgery Board of Trustees – January 30, 2005**

**Modified by the American Academy of Cosmetic Surgery Board of Trustees – October 28, 2007**

**Modified by the American Academy of Cosmetic Surgery Board of Trustees – September 21, 2008**

**Modified by the American Academy of Cosmetic Surgery Board of Trustees – June 27, 2009**