American Society for Reproductive Medicine position statement on qualifications for providing ultrasound procedures in reproductive medicine

Practice Committee of the American Society for Reproductive Medicine

American Society for Reproductive Medicine affirms that completion of fellowship training in reproductive endocrinology and infertility meets the criteria for requisite education, training, and demonstrated competence to order, perform, and interpret gynecologic ultrasound imaging studies and hysterosalpingography. Additional accreditation through other organizations is not required. Certification and maintenance of certification through the American Board of Obstetrics and Gynecology satisfy the requirement of accreditation and currency. (Fertil Steril® 2022;118:668-70. ©2022 by American Society for Reproductive Medicine.)

El resumen está disponible en Español al final del artículo.

AFFIRMATION

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PHYSICIAN QUALIFICATIONS AND RESPONSIBILITIES

Ultrasound imaging is the most commonly employed procedure used by reproductive endocrinology and infertility specialists (1). Advances in imaging technology and availability have allowed improved diagnostic capability for the initial fertility evaluation, demonstration of tubal patency, delineation of uterine cavity architecture, monitoring during assisted reproductive technology cycles, and evaluation of subsequent pregnancy outcomes.

The Accreditation Council for Graduate Medical Education requires obstetrics and gynecology residency training program graduates to demonstrate a minimum of 50 obstetric ultrasounds and 50 gynecologic ultrasounds (2).

Physicians who complete fellowship training in reproductive endocrinology and infertility are further required to “demonstrate competence in performing transvaginal and transabdominal ultrasound, sonohysterography, hysterosalpingography, and the interpretation of all imaging modalities used in the practice of reproductive endocrinology and infertility (3).”

Credentialing of physicians who perform, supervise, and interpret focused ultrasound examinations, sonohysterography, hysterosalpingography, and all other imaging modalities used in the practice of reproductive endocrinology and infertility should be demonstrated on the basis of education, training, experience, and proficiency. They should comprehend the indications and contraindications, performance steps, potential outcomes and management, and any safety concerns. They should appropriately perform, interpret, and document the procedure and are responsible for patient safety.

Completion of fellowship training in reproductive endocrinology and infertility meets the criteria for the required education, training, and experience necessary to order, perform, and interpret these types of imaging studies. Additional accreditation through other organizations is not required, and maintenance of credentialing is by continued certification through the American Board of Obstetrics and Gynecology. Any policy that prohibits a reproductive endocrinology and infertility specialist from performing procedures in patient care for which they
meet the necessary criteria as noted above interferes with appropriate patient care.

Acknowledgments: This report was developed under the direction of the Practice Committee of the American Society for Reproductive Medicine as a service to its members and other practicing clinicians. Although this document reflects appropriate management of a problem encountered in the practice of reproductive medicine, it is not intended to be the only approved standard of practice or to dictate an exclusive course of treatment. Other plans of management may be appropriate, taking into account the needs of the individual patient, available resources, and institutional or clinical practice limitations. The Practice Committee and the Board of Directors of the American Society for Reproductive Medicine have approved this report. This document was reviewed by the members of the American Society for Reproductive Medicine, and their input was considered in the preparation of the final document. The following members of the American Society for Reproductive Medicine Practice Committee participated in the development of this document: Alan Penzias, M.D.; Jacob Anderson; Kristin Bendikson, M.D.; Clarisa Gra-cia, M.D., M.S.C.E.; Tommaso Falcone, M.D.; Karl Hansen, M.D., Ph.D.; Micah Hill, D.O.; Sangita Jindal, Ph.D.; Suleena Kalra, M.D., M.S.C.E.; Tarun Jain, M.D.; Michael Thomas, M.D.; Richard Reindollar, M.D.; Jared Robins, M.D.; Chevis N. Shannon, Dr.Ph., M.B.A., M.P.H.; Anne Steiner, M.D., M.P.H.; Cigdem Tanrikut, M.D.; and Belinda Yauger, M.D. The Practice Committee acknowledges the special contribution of Belinda Yauger, M.D., in the preparation of this document. All committee members disclosed commercial and financial relationships with manufacturers or distributors of goods or services used to treat patients. Members of the Committee who were found to have conflicts of interest based on the relationships disclosed did not participate in the discussion or development of this document.

REFERENCES
Pronunciamiento de la Sociedad Americana de Medicina Reproductiva sobre las competencias para hacer procedimientos de ultrasonido en medicina reproductiva.

La Sociedad Americana de Medicina Reproductiva afirma que al completar el entrenamiento de subespecialidad en endocrinología reproductiva e infertilidad se deben cumplir los requisitos educativos, de entrenamiento y demostrar la competencia para ordenar, realizar e interpretar los estudios de ultrasonido ginecológico y la histerosalpingografía. La acreditación por parte de otras organizaciones, no es requerida. La certificación y el mantenimiento por parte del Board Americano de Obstetricia y Ginecología satisface el requerimiento de acreditación y su vigencia.