



International Federation of Facial Plastic Surgery Societies

Guidelines for Training in Facial Plastic and Reconstructive Surgery

Introduction

The International Federation of Facial Plastic Surgery Societies (IFFPSS) aims to train, maintain and uphold the highest quality in Facial Plastic and Reconstructive Surgery through its recognized fellowships and certification process.

This ensures training compliance with all IFFPSS member societies involved, maintains uniformity in the highest standards of training, and reassures patients and the public.

The fellowship in Facial Plastic and Reconstructive Surgery is available to surgeons who have completed training in Otolaryngology- Head and Neck Surgery or Plastic Surgery and have passed the respective specialty exams of the member societies' countries.

Fellows who successfully complete recognized fellowships are required to sit for the examination and expected to pursue certification by the International Board for Certification in Facial Plastic and Reconstructive Surgery (IBCFPRS) or the European Board for Certification in Facial Plastic and Reconstructive Surgery (EBCFPRS).

General Rules

1. The IFFPSS is continually developing its member societies' fellowship programs and invites prospective fellows to apply annually.
2. The purpose of the fellowship is to provide the fellow with the opportunity to study the art, science and skills of facial plastic surgery from excellent teachers and mentors within a protected time frame and environment.
3. The IFFPSS recommends completion of the fellowship within one year. Taking the ABFPRS examination under the auspices of the IBCFPRS or EBCFPRS is required for completion of the fellowship.

4. Options are available for spending 3 months of a required 12-month fellowship in an approved fellowship program, coordinated with an IFFPSS approved observership program.
5. For Board certification fellows are allowed 5 years to submit 100 personal qualified operative case records (see Appendix A for a list of cases) after sitting for the ABFPRS examination under the auspices of the IBCFPRS or EBCFPRS. Passing the examination is a requirement for successful completion of an IFFPSS fellowship and the fellow will be expected to complete certification requirements set forth by the IBCFPRS or EBCFPRS.
6. Upon completion of the 12-month fellowship, the fellow is required to submit the operative log supplied by the IFFPSS to document the fellowship experience.

General Requirements for Fellowship Program Application

1. The applicant must have completed residency training in Otolaryngology- Head and Neck Surgery or Plastic Surgery and have passed the respective Otolaryngology-Head and Neck Surgery or Plastic Surgery exams of the member societies' countries.
2. Applicants must complete an application for fellowship~~s~~ and submit to the IFFPSS Program Director and the IFFPSS office. The IFFPSS office will review the application for completeness and the Program Director will review for suitability for training and acceptance in the program.
3. The closing date for fellowship applications will be determined by the member societies.
4. The applicant must be a member of the sponsoring society and the IFFPSS.
5. Other fellow application requirements include:
 - A current curriculum vitae
 - \$50 Application Fee
 - Required Operative Report Form
 - Future Plans Statement
 - Diploma
 - Medical School Transcript
 - 3 Reference Letters (one must be from Residency Training Department Chair, one must be from Member Society President, and the last from a colleague)

Fellowship Program Requirements

1. The fellowship director must develop a structured written curriculum with defined goals and objectives.
2. The fellowship design and structure will be submitted as part of the Program Director Application and must be approved by the Fellowship Review Committee.
3. Clinical, basic science and research conferences as well as seminars and critical literature review activities pertaining to the entire subspecialty must be part of the fellowship training program.

4. It is expected that fellows participate in planning and conducting selected conferences, where applicable. Both faculty and fellows should attend and participate in multi-disciplinary conferences.
5. Fellows must have the appropriate supervised opportunities to develop skills in providing consultation and communication with colleagues and referring physicians.
6. The program should provide fellows with the opportunity to teach medical students, resident physicians and other professional personnel.
7. Written lines of responsibility must be clearly delineated for fellows they relate to areas of training and clinical responsibilities. This document must be provided to the Fellowship Review Committee with the Director Application.

Fellowship Program Goals and Objectives

1. Although educational programs in facial plastic surgery may differ in format and objectives, each program must demonstrate that fellows are provided with an adequate and structured clinical opportunity to develop the advanced knowledge, skills, clinical judgment and attitudes essential to the practice of all aspects of facial plastic surgery.
2. The facial plastic surgery fellow must be provided with progressive senior surgical responsibility in the four essential phases of total patient care: pre-operative evaluation, development of surgical and/or non-surgical treatment plans, operative experience and post-operative management.
3. The facial plastic surgery fellow must be provided with sufficient knowledge in the basic sciences including anatomy, physiology and pathology as related to the diagnosis and management of diseases, aging, and aesthetics of the face, head and neck.

Academic and Clinical Components

1. The fellowship program must provide a sufficient number and variety of cases to assure primary clinical responsibility as well as adequate inpatient and outpatient experience for each fellow in conjunction with resident training program=
2. The fellowship program must provide adequate and structured clinical opportunities for fellows to develop advanced skills in facial plastic and reconstructive surgery.
3. Fellows should be provided opportunities for graduated responsibility as the operating surgeon to gain adequate operative experience.
4. The fellowship program should include the following components:
 - i) Recognition and management of congenital anomalies, deformities, lesions, trauma, and aging process of the face, head and neck;

- ii) Surgical management of congenital, inflammatory, neoplastic, traumatic and aging states of the face, head and neck including, but not limited to: a) nasal surgery; b) maxillofacial, plastic and reconstructive surgery of the head and neck c) oncologic surgery of the head and neck; d) head and neck reconstructive surgery as it relates to the restoration of function, congenital anomalies, head and neck trauma; e) pre- and postoperative care; f) minimally invasive techniques; and g) management of complications;
- iii) Diagnostic methods including related laboratory procedures;
- iv) Knowledge of current literature pertaining to all areas of the curriculum;
- v) Knowledge of the habilitation and rehabilitation techniques and procedures pertaining to facial plastic and reconstructive surgery;
- vi) Additional basic and clinical science topics pertinent to the specialty.

Fellowship Program Requirements

All fellowship programs must be approved by the respective IFFPSS member societies and the IFFPSS Fellowship Review Committee.

Fellowship Program Director and Allied Staff

A single responsible individual must direct the fellowship program. This fellowship director must:

maintain active hospital privileges to perform facial plastic surgery procedures or have privileges in an outpatient setting to perform facial plastic surgery procedures; be an experienced facial plastic surgeon with sufficient administrative experience and research interest to ensure effective training of the fellow and steer the fellowship program.

sit for and pass the IBCFPRS or EBCFPRS exam to become certified within 5 years of applying for Fellowship Program Directorship.

The Fellowship Director application includes submitting:

- Completed application
- Written Educational goals
- Fellowship Program Description
- Full Curriculum Vitae (CV) for Director/Co-Director
- Full CV for each faculty member
- List of scholarly activities available to fellow
- Weekly list of expected fellow activities
- List of professional meetings attended by Director/Co-Director)
- Operative Report Forms for the past 3 years for Director/Co-Director
- 35 Operative Notes (10 notes per year) for the past 3 years for Director/Co-Director
- Copy of Current Medical License(s) for Director/Co-Director
- Proof of IBCFPRS or **10 Years Experience (beyond training)**
- \$100 program Fee

The fellowship director must ensure that the fellowship program:

1. Meets the goals and objectives as set forth by the IFFPSS and systematically assesses that these goals have been met.
2. Provides adequate educational resources and materials, such as library facility, books, journals and videos. The fellow also requires appropriate space to carry out his/her duties.
3. Evaluates the knowledge, skills and professional growth of the fellow, using appropriate written criteria and procedures,
4. Provides formal evaluation and documentation of the fellow's performance at six- and twelve-months in each of the following categories: knowledge, operative skills, surgical exposure, and complications (Appendix B).
5. Submits a final written evaluation as supplied by the IFFPSS Fellowship Committee of each fellow upon completion of the program. The evaluation includes a review of the fellow's performance during the training program, 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 and recorded with the IFFPSS.
6. Provides as required by the IFFPSS, policies and procedures to address any deficiencies and has, as required by the IFFPSS, policies and procedures to address any deficiencies.

Institutional Commitment

Qualifying sponsoring institutions include hospitals and universities. While sponsoring institutions are not required their responsibility will be to provide sufficient faculty, financial resources and academic support to enable the program to comply with the fellowship requirements.

The program must be compliant with the occupational health, health & safety, and mandatory training programs required by the sponsoring institution or regulatory body in that jurisdiction.

Facilities and Resources

Qualifying program Institutional facilities include private practices, ambulatory care settings, outpatient clinics or a combination of the above. The facilities must provide adequate educational experiences and opportunities required to fulfil the needs of the educational program as specified above. 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; an adequate library and internet capability providing access to standard reference texts and current journals; and, sufficient space for instruction.

Didactic Requirement

There shall be frequent didactic sessions including, but not limited to, conferences, journal clubs, clinical presentations, and research and basic science presentations.

On-going Outcome Assessment

Each fellowship program must comply with the goals and objectives of the IFFPSS. To aid in the assessment of IFFPSS fellowship programs, each program must regularly evaluate the degree to which its goals are being met through a formal assessment and appraisal of outcomes. To accomplish this, each fellowship program will submit an annual report to the IFFPSS and will undergo a more extensive formal review every three to five years, as determined by the Fellowship Review Committee of the IFFPSS.

On-going Development of Fellowship Program

These guidelines for training in facial plastic and reconstructive surgery will be reviewed annually, or more often as deemed necessary, to be amended if indicated.

Appendix A:

Qualifying Procedures and suggested reporting format **for applicants and fellows :**

<u>I. TRAUMA</u>	Performed	Assisted	Subtotal	Observed	Total
Repair Soft Tissue Injury/Lacerations					
Facial Nerve Repair					
Lacrimal Duct Repair					
Nasal Fracture					
Frontal Sinus Fracture					
Nasoethmoid Fracture					
Skull/Cranial Fracture					
Midface Fracture					
Malar (Zygoma) Fracture					
Orbital Fracture					
Mandibular Fracture					
Other					
Subtotal Trauma					

<u>II. CONGENITAL</u>	Performed	Assisted	Subtotal	Observed	Total
Hemangioma/Lymphangioma Resection Treatment					
Choanal Atresia Repair					
Cleft Lip Unilateral Repair Bilateral Repair					
Alveolar Cleft Repair					
Cleft Palate Repair					
Craniofacial Procedure					
Microtia Reconstruction					
Otoplasty (#patients-not ears)					
Other Auricular Revision					
Other					
Subtotal Congenital					

<u>III. RECONSTRUCTIVE</u>	Performed	Assisted	Subtotal	Observed	Total
Mandible Reconstruction					
Facial Bone Grafting/Reconstruction					
Orthognathic Procedures					
Grafts Split Thickness Full Thickness Composite Dermal/Dermal-Fat Cartilage Grafts Auricular Rib Septal					
Flaps Local Regional Distal Free Lip Detachment of Pedicle Flap					
Facial Nerve Reconstruction Nerve Graft Gold Weight Lower Lid Tightening Microvascular Flap Muscle Sling Static Sling Other					
Scar Revision Surgery Z-Plasty W-Plasty/Geometric Broken Line Closure Complex Other Full Face Dermabrasion					
Tissue Expanders					
Other					
Subtotal Reconstructive					

<u>IV. COSMETIC/RECONSTRUCTIVE</u>	Performed	Assisted	Subtotal	Observed	Total
Rhinoplasty					
Septorhinoplasty					
Septoplasty					
Blepharoplasty (count bilaterals as 1 procedure <u>only</u> ; count upper & lower blephs <u>each</u> as 1 procedure) Upper Cosmetic Upper Functional Lower W/ Fat Repositioning Lower Skin Pinch					
Rhytidectomy: Extended SMAS W/Smart Lipo Laser Deep Plane Mini-Lift W/ Smart Lipo Laser Plication Lift W/ Smart Lipo Laser Midface Lift					
Mentoplasty (Chin) Augmentation Reduction					
Facial Implants (e.g. malar)					
Coronal/Frontal Lift					
Browlift Endoscopic Forehead Lift Transtemporal Tricophytic					
Cervicofacial Liposuction					
Skin Resurfacing Dermabrasion (major-not scars) Chemical Peel (medium & deep only) Face, Eyelid, and/or Perioral Laser Resurfacing Laser Treatment of Vascular Lesions					
Fat Transfer					
Other					
Subtotal Cosmetic/Reconstructive					

V. <u>HEAD AND NECK</u>					
Subtotal Head and Neck					

Recommended 6 month and 12 month evaluation form:

**SIX AND TWELVE MONTH
IN-TRAINING EVALUATION REPORT**

FELLOW:

FELLOWSHIP DIRECTOR:

DATES OF FELLOWSHIP: _____ TO _____

Please complete the following evaluation at the sixth month and again at the completion of the fellowship using **the same form**, and the following rating:

1 Outstanding 2 Above Average 3 Average 4 Below Average 5 Poor

Please note that a copy of the completed six-month evaluation will be returned to you for the completion of the twelve-month column.

	Six-Month Evaluation	Twelve-Month Evaluation
<u>Clinical Skills</u> Is able to work quickly and efficiently, analyze clinical problems, and choose appropriate evaluation and therapy.		
<u>Communication Skills</u> Is able to communicate orally and in writing with patients, on rounds, in conferences, and with colleagues.		
<u>Curiosity</u> Is able to look beneath superficial explanations, interest in research.		
<u>Integrity</u> Is honest, ethical and moral.		
<u>Intelligence and Scholarship</u> Is able to analyze and process new information, stays abreast of current practices in the field.		
<u>Interpersonal Skills</u> Is able to establish rapport with patients and work easily with colleagues.		
<u>Motivation</u> Seeks opportunities and assumes responsibility, desires to achieve, and shows initiative.		

Six-Month/Twelve-Month
In-Training Evaluation Report

1 Outstanding 2 Above Average 3 Average 4 Below Average 5 Poor

	Six-Month Evaluation	Twelve-Month Evaluation
<u>Performance and Reliability</u> Is dependable, is able to achieve or exceed goals, perseverance, and endurance.		
<u>Surgical Skills</u> Possesses the motor ability and skills to competently perform common surgical procedures in head and neck surgery.		

TYPEWRITTEN ONLY

COMMENTS FOR SIX-MONTH EVALUATION:

Please give a narrative assessment of the fellow, emphasizing the reasons for your ratings.

List goals and objectives that should be accomplished prior to completion of the fellowship.

COMMENTS FORTWELVE-MONTH EVALUATION:

Please give a narrative assessment of the fellow's **completion**, emphasizing the reasons for your ratings.

Fellowship Director's Signature

Date

Fellow's Signature

Date