SRS Surgical Scholars Track Overview

Introduction
The SRS Surgical Scholars Track (SRS-SST) is a program aimed at training future reproductive surgeons within Reproductive Endocrinology and Infertility (REI) fellowship programs in the U.S. It provides a tailored surgical curriculum, mentorship, and research opportunities to enhance surgical skills and leadership in the field. Currently 10 REI fellowship programs in the U.S. have been accepted as SRS-SST sites and in 2023 the first graduating class of SRS-SST fellows completed the program.

The value of highly-trained reproductive surgeons: provide continuity of care throughout the fertility journey and provide surgical expertise to preserve and/or enhance fertility.

Mission
The mission of SRS-SST is to train select REI fellows to become highly skilled reproductive surgeons and leaders in the field. This is achieved through a structured curriculum, mentorship, and research opportunities, positioning scholars to be primary referral surgeons for reproductive surgery in their future practices.

SRS-SST Mission Includes:
- Core surgical education through structured didactic curriculum.
- Surgical training with skilled mentors and adequate case volumes.
- Completion of a research project related to reproductive surgery.

Requirements to be an SRS-SST Site

Surgical Volume: Minimum yearly case volumes for various procedures for all surgeons within the site (can be all services)
- 10 Laparotomies
- 75 Hysteroscopies
- 75 Laparoscopies

Upon initial approval of SST site, a minimum of 30% of cases in each category above must be performed with a board eligible/certified REI surgeon.

Within 5 years of a program joining the SRS SST, 50% of cases in each category above must be performed with a board eligible/certified REI surgeon.

Site Director: Program must have dedicated high-volume reproductive surgeon as SST Site Director.

The SRS-SST Site Director must be an SRS member.

The SRS-SST Site Director along with the SRS-SST Committee will ensure approved sites have the surgical volume, research capacity, and educational pathways to qualify to be a site for this fellowship track.

Every 5 years each SST Site Director must reaffirm commitment to the mission of the SRS SST and confirm adequate mentorship and surgical volume as outlined above.
SRS Surgical Scholars Track Overview

Institutional Support: Support from department and division leadership, including Department Chair, Division Director, and REI Fellowship Director.

Application Process
Programs interested in becoming an approved SRS SST site may apply by submitting a Cover Letter (see template document) confirming that the program will meet the site requirements of highly skilled mentorship, minimum surgical volume, research opportunities, and engagement in core curriculum. The Cover Letter must be submitted along with the written support of the program’s Chairman, REI Division Chief and Fellowship Director to become a site of the SRS SST. Every five years each approved site must resubmit a signed cover letter confirming the above requirements are continued to be met. If a primary reproductive surgeon leaves a program there may be a probation period applied and audit performed to assess continued eligibility as an SST site. Application documents should be emailed to the ASRM SRS Administrator, Megan Miller, mmiller@asrm.org.

Fellow application process: Fellows at an approved site interested in joining the track must apply with submission of the following:
- SRS Fellow Application
- Letters of Recommendation (2)
- Personal statement
- Curriculum Vitae

Fellow Requirements for Achieving SRS SST Certificate:
- Completion of ABOG-approved REI fellowship.
- Surgical competencies signed off by the SRS site director.
- Completion of reproductive surgery research project
- Must be approved for SRS-SST Research Subcommittee
- Must be submitted to ASRM, AAGL or other national/international meeting
- Minimum number of cases in various surgical categories.
- Hysteroscopic septoplasty and intrauterine adhesion excision cases: 20
- Hysteroscopic myomectomy: 20
- Minimum numbers for the following:
  - Myomectomy: 25 (15 minimum laparoscopic)
  - Ovarian cystectomy: 30
  - Endometriosis: 30
  - Adnexal surgeries: 30 (not including ovarian cystectomy)
  - Retroperitoneal dissection: 15
Tubal anastomosis cases not required but numbers should be tracked. The total number of cases can be collected through the entirety of the 3-year fellowship. One surgery can be counted to include more than one category (for instance, endometriosis excision with retroperitoneal dissection could be counted for both.

80% or higher attendance in curriculum activities, including lectures, journal clubs, research meetings, and conferences.

**Current SRS-SST Training Programs:**
- Mayo Clinic
- Johns Hopkins School of Medicine
- Massachusetts General
- Brigham and Women’s
- University Hospital of Cleveland
- Cleveland Clinic Foundation
- Washington University
- University of South Florida
- University of Pennsylvania
- University of Iowa

**Conclusion:** The SRS Surgical Scholars Track provides a comprehensive training program for REI fellows, ensuring they acquire the necessary skills, mentorship, and research experience to excel as reproductive surgeons and leaders in the field.
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Suggested letter template:

[Date]

Dear SRS Surgical Scholars Track Committee,

We, at the [Insert Hospital Affiliation and Division], are excited to submit our application for the SRS Surgical Scholars Track that fellows may elect to pursue to enhance their reproductive surgical skills during their REI fellowship.

We acknowledge that the SRS Surgical Scholars Track will provide structured surgical training, core surgical education, and completion of a research study related to reproductive surgery within the REI fellowship.

We also acknowledge that the SRS Surgical Scholars Track (SST) curriculum will require the fellow under the direction of our Site Director:

☐ Maintains procedure logs of all reproductive surgical cases performed during the three-year fellowship and be granted the opportunity to complete the absolute minimum number of surgical cases as outlined below.
   - Operative hysteroscopies: polypectomy (30), myomectomy (15), septoplasty/lysis of adhesions (20)
   - Operative laparoscopies: myomectomy (25), cystectomy (30), endometriosis excision (30), adnexal surgery (30), retroperitoneal dissection (15)

☐ Confirms institutional volume of all cases performed by the REI-MIGS-Oncology divisions (if part of the on-site SST Program) for uniform assessment and monitoring by the SRS SST Committee to meet the minimum institutional standard of: 75 laparoscopies, 75 hysteroscopies and 10 laparotomies performed yearly. At least 30% of cases in EACH category must be performed with a board certified/eligible REI (with goal of 50% of cases performed by REI surgeons within 5 years of becoming SRS SST site).

☐ Attends at least 80% of the core didactics curriculum.

☐ Performs a research project related to reproductive surgery.

Our proposed Site Director, who is both fellowship-trained in Reproductive Endocrinology and Infertility and a member of the ASRM-SRS societies, is:

Site Director Name: [ ]
Position/Title at Institution: [ ]
Business Address:
Phone Number:
Fax Number:
Email:

Additionally, we have enclosed the written support of our Chairman, REI Division Chief and Fellowship Director for our proposal as a member to the ASRM- SRS Surgical Scholars Track program.

Respectfully submitted,

[Applicant]
[Title]