1. Subspecialty in Obstetrics and Gynaecology: definition
2. Definition of Ob/Gyn Subspecialist Training Centre
3. General requirements for an Ob/Gyn Subspecialty Training Centre
4. Specific requirements for a Subspecialty Training Centre of Materno-Fetal and Perinatal Medicine
5. Subspecialist programme for training in Materno-Fetal and Perinatal Medicine (EBCOG/EAPM)
6. Logbook for subspecialist training in Materno-Fetal and Perinatal Medicine (EBCOG/EAPM)
7. Questionnaire regarding visits to a Subspecialist training centre in Materno-Fetal and Neonatal Medicine:
   a) for Head of the Centre
   b) for fellows
8. Schedule for visit of a Centre of Materno-Fetal and Perinatal Medicine applying for European accreditation related to subspecialist training
9. Visiting:
   a) visiting process
   b) visiting report
10. List of potential visitors in Europe prepared by EAPM/EBCOG
1) Subspecialty in Obstetrics and Gynaecology: definition

Subspecialty is a highly qualified branch of obstetrics and gynaecology which implies:

- A specific area requiring expertise, practice and knowledge beyond that managed by a general Obstetrician Gynaecologist.

- It is an area in which a multidisciplinary team is involved and not limited to the expertise of a single person and/or a technology. The subspecialist obstetrician/gynaecologist should be qualified to lead the team.

- A subspecialty requires: specific personnel (spending the majority of the time in this practice), equipment and technology.

- Subspecialisation has a specific and well established training curriculum, log-book, accredited centres.

- Subspecialisation is characterised by specific International Journals, International Societies and relevant scientific developments in the field.
2) Definition of Ob/Gyn Subspecialist Training Centre

A subspecialty centre is a centre covering the entire field of the subspecialty (no modular approach) with dedicated personnel in a multidisciplinary setting. The centre should be part of the Department of Obstetrics and Gynaecology in a hospital setting.

The Centre should provide:

A) Definition of a subspecialist in the specific subspecialty
B) Aims of subspecialisation
C) Definition of a subspecialty centre
D) Definition of minimum requirements for recognition of a subspecialist centre according to the following items:
   - personnel:
     - defined disciplines
   - number of subspecialists in proportion to clinical workload
   - diagnostic and treatment facilities:
     - referrals
   - spectrum (categories of patients). NB. It should cover the entire field of the subspecialty and should therefore meet the criteria for training as defined in the EBCOG/EAPM logbook for subspecialty.
   - collaboration with other specialties:
     - define which disciplines are mandatory in house
   - define for each of these disciplines their contribution to your subspecialty
   - quality measures:
     - protocols
     - audits
     - ethics review
   - annual statistics/reports
   - training facilities:
     - consult the EBCOG/EAPM subspecialty programme
     - consult the EBCOG/EAPM logbook
   - determine the number of fellows needed
   - research programme:
     - input: the presence of funding of research projects in your subspecialty at national/regional/international level
     - output: regular publications in national peer-reviewed journals in your subspecialty

3) General requirements per Ob/Gyn Subspecialty Training Centre

To be eligible for a subspecialty, a training centre must:
A) provide a service for the referral and transfer of patients who would benefit from subspecialty facilities, expertise and experience;
B) establish a close collaboration with related disciplines to provide the high degree of teamwork and concentration of resources for the intensive investigation and management of such patients;
C) establish a close collaboration with other obstetricians and gynaecologists and related specialists within and outside the centre, including major regional roles in continuing postgraduate education and training, research advice and coordination, and audit;
D) have an adequate workload providing a full range of experience in the subspecialty; alternatively two or more centres may combine to provide a programme with all the required experience;
E) have a programme director who will coordinate the training programme, accept the main responsibility for its supervision and be actively involved in it; if more than one centre provides the programme, there must be a supervisor at each centre, with one having overall responsibility as a director. Directors and supervisors will be consultants with special experience in the relevant subspecialty field, and with the eventual development of subspecialisation the directors and supervisors will themselves be trained subspecialists. If the programme director changes, the programme and training centres will be revisited;
F) have adequate medical staffing to enable the fellow to be engaged in his/her subspecialty field on a full-time basis (or in the case of a part-time fellow, during his/her normal working hours); participation in emergency and on-call work besides normal working hours is not excluded, subjected to approval by the subspecialty Committee;
G) have adequate library, laboratory and other resources to support subspecialty work, training and research;
H) provide the resources for a research programme related to the subspecialty.
4) **Specific requirements for a Subspecialty Training Centre of Materno-Fetal and Perinatal Medicine**

A) annual statistics;
B) internal quality control and audit;
C) organised teaching sessions

In particular, the centre should:

a) provide an integrated service for the referral and transfer of high risk obstetric patients, in close collaboration with other obstetricians and disciplines within and outwith the centre;
b) have an adequate clinical workload with a full range of high risk maternal and fetal problems - usually the centre would be expected to have at least 1,500 births per year including a significant proportion of referred/transferred high perinatal risk patients;
c) be a referral centre for the specialised prenatal diagnosis of fetal abnormalities, of which there should be at least 40 diagnosed cases/year.
d) ultrasound facilities and expertise for detecting the majority of structural malformations in the fetus;
e) a close working relationship with a medical genetics centre and clinical genetics consultant(s) and supporting staff, providing a specialised obstetric and pre-pregnancy service with appropriate laboratory support;
f) provide a full range of fetal monitoring/assessment techniques, including fetal biometry, biophysical profile, Doppler and cardiotocography;
g) have a neonatal intensive care unit with consultant paediatricians and supporting staff whose major duties are in neonatal care; and an association with a neonatal surgical unit;
h) have an association with a neonatal surgical unit;
i) have a twenty-four hour obstetric anaesthetic service with consultant anaesthetists and supporting staff having major commitments to obstetric anaesthesia, analgesia and related work;
j) collaborate closely with consultant physicians and their supporting staff having special interests in the management of medical disorders in pregnancy;
k) have close collaboration with an adult intensive care unit having a full range of diagnostic facilities and support, which must be readily available to the obstetric unit;
l) have an adequate perinatal pathology service with at least one consultant pathologist having a major commitment in this field;
m) have adequate support from, and close collaboration with, a biophysics service;
n) have a research programme in the subspecialty field, with access for the fellow to support his own training programme; this should include facilities and support for the teaching of research methodology including statistics and epidemiology.
5) Subspecialist programme for training in Materno-Fetal and Perinatal Medicine (EBCOG/EAPM)

CONTENT OF THE SUBSPECIALIST TRAINING PROGRAMME

1- Definition.
The feto-maternal and perinatal medicine subspecialist is a specialist in Obstetrics and Gynaecology who has had theoretical and practical training in:
   a) Detailed risk assessment before, during and after pregnancy
   b) Antenatal diagnosis of the wide range of materno and fetal disorders, some of which may require invasive procedures
   c) Management of very high risk pregnancies during the antenatal, intrapartum and postpartum period
   d) The practice of materno-fetal and perinatal medicine exclude training and practice in another subspecialty

Comprehensive management of these items includes diagnostic, therapeutic procedures and audit of outcome.

2- Aim of the training.
To improve the outcome of women and fetuses who are at high risk, in collaboration with other care providers.

3- Objectives of the training:
To train a subspecialist to be capable of:
   • improving knowledge, practice, teaching, research and audit.
   • co-ordinating and promoting collaboration in organising the department
   • providing leadership in the development and in research within subspecialty.

4- Organisation of training:
   • the number of training positions should be strictly regulated by the relevant national body in order to provide sufficient expertise.
   • centre should use guidelines and protocols finalised by national professional bodies reviewed at regular intervals.
   • training programme should be in a multidisciplinary centre of obstetrics and gynaecology and should be organized by a subspecialist or an accredited subspecialist.
   • Training as a subspecialist in maternofetal does not imply an exclusive activity in that field

5- Means of training.
5.1 Entry requirements:
   • a recognised specialist qualification in Obstetrics & Gynaecology or have completed a minimum of five years an approved training programme.

1 Initially there will be a transitional period when accreditation for training will be given by the national appointing authority to a Specialist in Obstetrics and Gynaecology with proven scientific and clinical
expertise in Maternofetal and Perinatal Medicine. Subsequently only individuals with training in the subspecialty should hold such position.

• the availability of a recognised training positions.

5.2 An adequately remunerated position in a recognised training programme is a basic condition. Each fellow must be allocated an appointed tutor for guidance and advice.

5.3 For each country, the number of training positions should reflect the national need for sub specialists in maternal and perinatal medicine as well as the facilities and finance available for training.

5.4 Fellows should participate in all relevant activities of the training unit such as the care of out-patients and patients, on call duties, performing ultrasound examinations, intra uterine procedures and participating educational activities, including the teaching of other health professionals. Participation in audit and clinical basic research is essential.

5.5 Arrangements for postgraduate training must be compatible with national employment legislation in relation to remuneration, hours of work and rights of employees in such matters as sick leave, maternity and paternity leave and compulsory military service.

5.6 Duration of training
Duration of subspeciality training should include a minimum of two years in an approved programme and should cover the clinical and research aspects of the following areas:

- endocrinology of pregnancy;
- embryology and teratology;
- fetal physiopathology;
- placental physiology;
- biochemistry, pharmacology and pathology relating to the pregnant woman and the fetus;
- genetics;
- immunology;
- medical and surgical complications of pregnancy;
- infectious diseases in pregnancy;
- fetal medicine including ultrasound examination and invasive procedures;
- complicated obstetrics; and other imaging procedures
- operative procedures and intrapartum management;
- pre / post-pregnancy and bereavement counselling;
- adult medicine, anaesthesia, resuscitation and intensive care;
- neonatal medicine and surgery;
- clinical and laboratory genetics;
- laboratory based subjects including: - microbiology, pathology, haematology, clinical chemistry; blood transfusion;
- administration and management;
- teaching;
- legal and ethical issues;
- epidemiology, statistics, research and audit.
5.7 Training should be structured throughout with clearly defined targets
to be met after specified intervals.
An educational plan should be drawn up agreement with the fellow at the beginning of each
attachment and progress should be monitored regularly by mean of the log book.

5-8 A fellow may spent some training time in another (1 or 2) centre(s) recognised by the
national committee.

6-Assessment of training

6.1 Approval of training and trainers should be
the responsibility of a national or regional authority which has the power
to withdraw recognition if necessary.

6-2 Approval of institutions as training centres should be based on the following criteria :
   j) annual statistics
   k) internal quality control and audit
   l) organised teaching sessions
Particularly the centre should:
   m) provide an integrated service for the referral and transfer of high risk obstetric patients,
in close collaboration with other obstetricians and disciplines within and outwith the
centre;
   n) have an adequate clinical workload with a full range of high risk maternal and fetal
problems - usually the centre would be expected to have at least 1,500 births per year
including a significant proportion of referred/transferred high perinatal risk patients;
   o) preferably have a special care unit for pregnant at risk such as severe preeclampsia,
eclampsia, uncontrolled diabetes/keto-acidosis e.g. ;
   p) be a referral centre for the specialised prenatal diagnosis of fetal abnormalities, of which
there should be at least 40 diagnosed cases/year; have an adequate experienced and
skilled fellow for invasive procedures;
   q) ultrasound facilities and expertise for detecting the majority of structural malformations
in the fetus;
   r) a close working relationship with a medical genetics centre and clinical genetics
consultant(s) and supporting staff, providing a specialised obstetric and pre-pregnancy
service with appropriate laboratory support;
   s) provide a full range of fetal monitoring/assessment techniques, including fetal biometry,
biophysical profile, Doppler and cardiotocography;
   t) have a neonatal intensive care unit with consultant paediatricians and supporting staff
whose major duties are in neonatal care; and an association with a neonatal surgical unit;
   u) have an association with a neonatal surgical unit;
   v) have a twenty-four hour obstetric anaesthetic service with consultant anaesthetists and
supporting staff having major commitments to obstetric anaesthesia, analgesia and
related work;
   w) collaborate closely with consultant physicians and their supporting staff having special
interests in the management of medical disorders in pregnancy;
   x) have close collaboration with an adult intensive care unit having a full range of
diagnostic facilities and support, which must be readily available to the obstetric unit;
y) have an adequate perinatal pathology service with at least one consultant pathologist having a major commitment in this field;
z) have adequate support from, and close collaboration with, a biophysics service;
  aa) have a research programme in the subspecialty field, with access for the fellow to support his own training programme; this should include facilities and support for the teaching of research methodology including statistics and epidemiology.

Fulfilment of defined criteria for minimum activity for each fellow per year:

- 200 supervised high risk pregnancies and deliveries
- 200 advanced ultrasound examinations
- 200 fetal invasive procedures (amniocentesis, choriovillus sampling, fetal blood sampling).

6.3 Assessment of the fellow should be carried out by a national or federal committee of experts and would take into consideration:
- participation in materno-fetal and perinatal medicine courses particularly those recognised by EBCOG advised by the European Association of Perinatal Medicine.
- completion of a Log Book of clinical experience in fetomaternal medicine
- peer review publications in a nationally recognised journal

6.4 A representative from the EBCOG Postgraduate Training and Assessment Working Party may be an observer on the national or federal assessment committee

6.5 EBCOG in conjunction with European Association of Perinatal Medicine (EAPM) is willing to organise an evaluation visit to a subspecialist unit if requested.
6) Logbook for subspecialist training in Materno-Fetal and Perinatal Medicine (EBCOG/EAPM)

Training in Feto-Maternal and Perinatal Medicine

LOG BOOK

Approved by
The European Board and College of Obstetrics and Gynaecology (EBCOG) and The European Association of Perinatal Medicine (EAPM)

TO BE COMPLETED AFTER EACH YEAR OF TRAINING AND SENT WITHIN THREE MONTHS THEREAFTER TO THE ASSESSMENT COMMITTEE (CERTIFICATION BOARD)

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TARGETS FOR THE FIRST YEAR OF TRAINING

description by trainer and tutor of what is expected in terms of knowledge, technical skills and fulfilment of tasks at the end of this year of training.
To be completed at the beginning of the year of training.
Year: 20..... - 20.....

KNOWLEDGE:

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TARGETS FOR THE SECOND YEAR OF TRAINING

description by trainer and tutor of what is expected in terms of knowledge, technical skills and fulfilment of tasks at the end of this year of training

To be completed at the beginning of the year of training.

Year: 20...... - 20......

KNOWLEDGE :

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TECHNICAL SKILLS :

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DATE: NAME OF THE TUTOR:

SIGNATURES: TUTOR: ----------------- FELLOW: -----------------
TARGETS FOR ADDITIONAL YEAR OF TRAINING

Description by trainer and tutor of what is expected in terms of knowledge, technical skills and fulfilment of tasks at the end of this year of training.

To be completed at the beginning of the year of training.

Year: 20...... – 20......

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TECHNICAL SKILLS:

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### ON CALL DUTIES

**FREQUENCY OF ON CALL DUTIES:** (e.g. : 1/4)

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**BRIEF DESCRIPTION OF ACTIVITIES WHEN ON CALL:**

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EVALUATION OF CLINICAL AND TECHNICAL SKILLS

Every target defined in the EBCOG – EAPM recommendation on training and assessment has an expected competence level that must be achieved. The level of competence ranges from observation (level 1) to independent practice (level 4 or 5). Many of the targets do not require an assessment of every competence level and shaded boxes indicate these. Fellows can choose whether or not to tick the shaded boxes as they progress. Certain targets do not require the fellow to be level 5 (Independent). These are identified by a black box. The open targets require your tutor or trainer to check your competence and sign you off. When you feel ready for this it is your responsibility to organise with your trainer, for these targets to be observed. When an entire module is completed (excluding black boxes) request the educational supervisor to sign the completed module.

SCORING SYSTEM:

1: Passive attendance, assistance
2: Needs close supervision
3: Able to carry out procedure under some supervision
4: Able to carry out procedure without supervision
5: Able to supervise and teach the procedure

The general aim is to get at least mark 4.
## Diagnosis and management of medical and surgical complications of pregnancy

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<td>Psychiatric disorders</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Infectious, parasitic diseases</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Signature to confirm completion of the module:
Name of the trainer:
Hospital:
Date:
### Intrapartum Management of High Risk Pregnancies

<table>
<thead>
<tr>
<th>Target</th>
<th>Expected competence level</th>
<th>Fellow ticks when achieved</th>
<th>Trainer sign when competence level achieved</th>
<th>Sign</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Induction of labour</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Utilisation of oxytocin</td>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Utilisation of tocolytics</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fluid balance and transfusion</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fetal heart rate monitoring</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Prolonged labour</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Coagulopathy</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fetal resuscitation</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Maternal resuscitation</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Neonatal resuscitation</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Labour ward management and policy</td>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

Signature to confirm completion of the module:

Name of the trainer:  
Date:  
Hospital:
# Ultrasound

**Target**

**Perform ultrasound scan to assess:**

<table>
<thead>
<tr>
<th>Expected competence level</th>
<th>Trainer sign when competence level achieved</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Biometry to assess gestational age and fetal growth</th>
<th></th>
<th></th>
<th></th>
<th></th>
<th>Sign</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anomaly scanning (morphology)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Biophysical profile</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Doppler ultrasound blood velocity scanning of all the major vessels of the fetus and placenta</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Alternative imaging technique like MRI</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Signature to confirm completion of the module:
Name of the trainer:
Hospital

# Ultrasound guided invasive procedures

**Target**

<table>
<thead>
<tr>
<th>Expected competence level</th>
<th>Trainer sign when competence level achieved</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Amniocentesis</th>
<th></th>
<th></th>
<th></th>
<th></th>
<th>Sign</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>CVS</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fetal blood sampling</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fetal blood transfusion</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Feto-amniotic shunting</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other invasive procedures (specify)</td>
<td></td>
<td></td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

Signature to confirm completion of the module:
Name of the trainer:
Hospital


# SURGICAL PROCEDURES

<table>
<thead>
<tr>
<th>Target</th>
<th>Expected competence level</th>
<th>Trainer sign when competence level achieved</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Caesarean hysterectomy</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Caesarean before 32 weeks</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Technique for control of haemorrhage</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Management of postpartum and postoperative complications</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Embryo reduction</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ultrasound guided ovarian cyst aspiration during pregnancy</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Signature to confirm completion of the module:
Name of the trainer: Date:
Hospital: 
NUMBER OF PROCEDURES AND TECHNICAL ACTS PERFORMED DURING THE TRAINING AS FIRST ASSISTANT

<table>
<thead>
<tr>
<th>PROCEDURES</th>
<th>YEAR 1</th>
<th>YEAR 2</th>
<th>YEAR 3</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Caesarian section &lt; 32 weeks</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Caesarian hysterectomy</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cervical cerclage</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>External cephalic version</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Operative vaginal delivery</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Technique for control of haemorrhage</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Management of postpartum and postoperative complications</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Medical and surgical first and second trimester abortion</td>
<td></td>
<td></td>
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<td></td>
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<tr>
<td>Embryo reduction</td>
<td></td>
<td></td>
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<td></td>
</tr>
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<td></td>
</tr>
<tr>
<td>Amniocentesis</td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>CVS</td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Fetal blood sampling</td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fetal blood transfusion</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Feto-amniotic shunting</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other fetal invasive procedures (specify)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Date: .................................................. Name and signature of fellow: ..................................................

1 Add extra page(s) if space provided is insufficient.
### NUMBER OF PROCEDURES AND TECHNICAL ACTS PERFORMED DURING THE TRAINING AS SURGEON

<table>
<thead>
<tr>
<th>PROCEDURES</th>
<th>YEAR 1</th>
<th>YEAR 2</th>
<th>YEAR 3</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Caesarian section &lt; 32 weeks</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Caesarian hysterectomy</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cervical cerclage</td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>External cephalic version</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Operative vaginal delivery</td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Technique for control of haemorrhage</td>
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<tr>
<td>Management of postpartum and postoperative complications</td>
<td></td>
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<tr>
<td>Medical and surgical first and second trimester abortion</td>
<td></td>
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<td></td>
</tr>
<tr>
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<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ultrasound guided ovarian cyst aspiration during pregnancy</td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Amniocentesis</td>
<td></td>
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</tr>
<tr>
<td>CVS</td>
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<tr>
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</tr>
<tr>
<td>Fetal blood transfusion</td>
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<td></td>
</tr>
<tr>
<td>Feto-amniotic shunting</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other fetal invasive procedures</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(specify)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Date: ........................................................................

Name and signature of fellow: ..................................................

....../........../......... (day/mo/yr) ..................................................

1 Add extra page(s) if space provided is insufficient.
### ASSESSMENT OF KNOWLEDGE, ATTITUDES AND FULFILLMENT OF TASKS

**Scoring system:**
- A = Excellent
- B = Sufficient
- C = Weak
- D = Unacceptable
- E = Not applicable

Assessment of fulfillment of the targets defined on pages 3 - 9

<table>
<thead>
<tr>
<th>Year</th>
<th>1</th>
<th>2</th>
<th>3</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>INTEGRATED KNOWLEDGE</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>REACHING OF APPROPRIATE DECISIONS; COLLECTION AND INTERPRETATION OF DATA</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>MOTIVATION, SENSE OF DUTY, DISCIPLINE, PUNCTUALITY</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>TECHNICAL SKILLS</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>ORGANISATORY SKILLS</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ADMINISTRATIVE TASKS (MEDICAL FILES, CORRESPONDENCE, ETC.)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>ETHICS</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>RELATIONS WITH PATIENTS</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>RELATIONS WITH MEDICAL AND OTHER STAFF</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ATTENDANCE AND ACTIVE PARTICIPATION IN STAFF MEETINGS</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>SCIENTIFIC INTEREST</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>SCIENTIFIC ACTIVITY</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Date:       /       /       (day/ mo / yr)

Signature of Fellow: 

Signature of Trainer:

23
CUMULATIVE LIST OF SCIENTIFIC MEETINGS AND COURSES ATTENDED BY THE FELLOW
(entire duration of training; to be up-dated yearly)\(^1\)

example: Joint Meeting of the South-East Gynaecological Society and the Flemish Society of Obstetrics and Gynaecology, Bruges, Belgium, 10.10.1999. Theme: "Endometriosis".

The number is not limited

1. 
2. 
3. 
4. 
5. 

\(^1\) Certificate of attendance as to be provided
CUMULATIVE LIST OF PAPERS PRESENTED AT
SCIENTIFIC MEETINGS
(entire duration of training; to be up-dated yearly)
(A MINIMUM OF 1 AS 1ST AUTHOR IS REQUIRED)²


The number is not limited

1.

2.

3.

4.

5.

² Abstracts as to be provided
CUMULATIVE LIST OF PEER REVIEWED PUBLISHED PAPERS IN INTERNATIONAL JOURNALS
(entire duration of training; to be up-dated yearly)
(AT LEAST 1 AS 1ST AUTHOR IS REQUIRED) \(^3\)

The number is not limited

1.

2.

3.

4.

5.

\(^3\) Published manuscript should be provided
CUMULATIVE LIST OF PEER REVIEWED PUBLISHED PAPERS IN NATIONAL JOURNALS
(entire duration of training; to be up-dated yearly)
(AT LEAST 1 AS 1ST AUTHOR IS REQUIRED)\(^4\)

The number is not limited

1.
2.
3.
4.
5.

\(^4\) Published manuscript should be provided
SURGICAL REPORTS

Each fellow will keep in a separate book copies of all reports pertaining to acts performed as first assistant, as surgeon or as supervisor.
7) Questionnaire regarding visits to a Subspecialist training-centre in Materno-Fetal and Perinatal Medicine:

a. for Head of the centre

1. General Information
   a) Country/Region………………………………………………………………………………
   b. Hospital Address……………………………………………………………………………
   (Please encircle the appropriate option) Regional  County  Community
   c. Department ………….University Department. YES  NO
   d. Centre………………………………………………………………………………………. .
   e. Population of the area served by the hospital …………………
   f. Total births per annum ………………………………………………..
   g. Average number of births over the last three years………………
   h. Number of referrals per year…………………………………………………………
   i. Number of obstetric ultrasound scans per year…………………..
   j. Number of invasive fetal procedures (transfusions, etc.)…………………..
   k. Number of prenatal diagnostic procedures per year (amniocentesis, chorion villus sampling, cordocentesis)……………………………………
   l. Number of newborns: < 1500 g per year  NO (%),…………………..
   < 1000 g per year  NO (%),…………………………
   m. Number of multiple pregnancies………………………………………...
   n. Number of PIH, HELLP, IUGR, preeclamptic patients per year…………………………………………………………………………………….
   o. Number of insulin-dependent diabetes mellitus …………………….
p. Number of cesarean sections (and %)……………………………
q. Number of cesarean hysterectomies………………………………

Remarks (please comment)
……………………………………………………………………………………………………
……………………………………………………………………………………………………
……………………………………………………………………………………………………
……………………………………………………………………………………………………

2. The National Training programme

a) Is there a national training programme? YES NO
(if Yes, please let us have a copy of it)

The EBCOG – EAPM Subspecialist Training Programme is enclosed

Remarks (please comment)
……………………………………………………………………………………………………
……………………………………………………………………………………………………
……………………………………………………………………………………………………
……………………………………………………………………………………………………

3. Medical Staff (Doctors)

<table>
<thead>
<tr>
<th>NUMBER</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) Subspecialists</td>
</tr>
<tr>
<td>b) Fellows</td>
</tr>
<tr>
<td>c) Specialists</td>
</tr>
<tr>
<td>d) Doctors in the department not specialising in obstetrics and gynaecology or in training (if any)</td>
</tr>
</tbody>
</table>
4. **Working conditions of training:**

a) In your opinion has your centre got all the necessary requirements for training (see point 2 for explanation)?

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>......</td>
<td>......</td>
</tr>
</tbody>
</table>

- structure, e.g., laboratories, etc.

| ...... | ...... |

- process, e.g., lectures, seminars, audit meeting, tutorials, etc

| ...... | ...... |

b) What additional requirements do you feel that would be helpful?

…………………………………………………………………………………………………………
…………………………………………………………………………………………………………
…………………………………………………………………………………………………………
…………………………………………………………………………………………………………

5. **Tutors for doctors in training**

*Tutors are senior staff member supervising training of an individual fellow or group of fellows or have regional training responsibility*

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>......</td>
<td>......</td>
</tr>
</tbody>
</table>

a) Is there a designated doctor responsible for coordinating the training?

| ...... | ...... |

If yes, please indicate his/her position

………………………………………………

b) Is there a tutor in the centre with main responsibility for the training?

| ...... | ...... |
c) Do fellows have personal tutors during training?    ........    ........

d) Is there a syllabus for fellows? (if yes, please enclose)    ........    ........

e) Is there a written instruction for tutors in the department? (if yes, please enclose)    ........    ........

f) Is there a training programme for tutors in the department? (if yes, please enclose)

g) Is time scheduled for tutoring?    ........    ........

h) Does your hospital have a log book for fellows? (if yes, please enclose)    ........    ........

6. **Is training available in the following:**

<table>
<thead>
<tr>
<th>a) Basic training in:</th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>- genetics</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- maternal physiology and endocrinology</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- embryology and teratology</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- fetal and placental physiology and pathology</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- biochemistry and pharmacology</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(relating to the pregnant woman and the fetus)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- immunology</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- adult medicine, anesthesia, resuscitation and intensive care</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>


- neonatal medicine and surgery
- laboratory based subjects including: microbiology haematology
- administration and management
- legal and ethical issues
- epidemiology, statistics, research and audit

b) Instruction in:

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
</table>
- medical and surgical complications of pregnancy
- infectious diseases in pregnancy
- fetal medicine including ultrasound examination and invasive procedures
- operative procedures and intrapartum management
- pre/post pregnancy and bereavement counselling
- biochemistry and pharmacology relating to the pregnant woman and the fetus
- embryonic, fetal and placental physiology and pathology
- neonatal care and resuscitation in the delivery room

6.1. Are all these trainings available in the centre or are you connected to other excellence centres where the a specific training could be practiced? If yes, please specify which and how

...
7. Courses etc. for fellows:

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
</table>

a) Are fellows able to participate regularly in seminars and conferences in the centre? 

b) Are fellows able to attend seminars, conferences etc. in other centres? 

c) How much paid study leave does a fellow have per year? 

d) How much working time is allotted for the fellows theoretical studies every week? 

8. Research

a) How many medical doctors are involved in research towards a higher degree? 

b) How many scientific doctors (e.g. Ph, PhD, Bs, ) are there In the department at present? 

c) How many fellows are involved in research projects? (In what areas) 

……………………………………………………………………………………………………………………………………………………………………(if possible, please enclose a list of projects) 

d) How many fellows in the department have published papers in peer-reviewed journals during the past two years? (Please enclose reprints or abstract copies from Pub Med.) 

……………………………………………………………………………………………………………………………………………………………………

e) Please enclose a research profile of the centre 

e) Number of publications in the last two years
9. Training in Administration and Management

YES  NO

a) Does the fellow receive any training in administration or management? (e.g. duties relating to organisation of Centre, duty rotas, laws related to materno-fetal and perinatal medicine etc.)

b) If yes, is this on a regular basis?

State frequency

10. Library etc.

YES  NO

Do the fellows have access to:

a) Scientific library at the hospital with a professional librarian?

b) Library in the centre?

c) International medical journals in the centre? per year?

d) Connection to data base?

e) Personal computer?

f) Conference room in the centre or shared conference room with other departments?

g) Room with a desk for the fellow?

11. Audit

Please state activities related to clinical audit in your centre
12. What are the three best aspects of your centre for the fellows?

13. What are the three most important changes you would like to see introduced in your centre?

14. Miscellaneous (Please comment on any other aspects of training in your centre).

Name (Please print) .................................................................
Date .................................................................
7 b) Questionnaire regarding subspecialty training in Materno-fetal and Perinatal Medicine

(FOR FELLOWS)

1. General Information
   a) Country/Region
   b) Hospital
   (Please encircle the appropriate option) Regional County Community
   It is part of a General Hospital (Yes/No)
   c) Department University Department
   d) Centre

2. Working conditions of training:

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
</table>
   a) In your opinion has your centre got all the necessary requirements for training (see logbook EAPM/EBCOG)? ..... ......
   - structure, e.g. library, laboratories, etc. ...... ......
   - process, e.g., lectures, seminars, audit meeting, tutorials, etc ...... ..... 
   b) What additional requirements do you feel that would be helpful?
   ..............................................................................................................................
   ..............................................................................................................................
   ..............................................................................................................................
c) Are the missing components of the training available outside your main hospital (if applicable?) ……… ……..

d) How often do fellows participate in on-call duties? (e.g. 24 hours every third day or once a week, etc.) …………………………………………………………………………………………………………… …………………………………………………………………………………………………………… …………………………………………………………………………………………………………… ……………………………………………………………………………………………………………

3. Tutors for doctors in training

Tutors are senior staff member supervising training of an individual fellow or group of fellows or has regional training responsibility

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
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</thead>
</table>

a. Is there a designated doctor responsible for Coordinating training? ……… ……..

If yes, please indicate his/her position …………………

b. Is there a tutor in the centre with main responsibility for the training? ……… ……..

c. Do fellows have personal tutors during training? ……… ……..

d. Is there a syllabus for fellows? (if yes, please enclose) ……… ……..

Knowledge ……… ……..

Skills ……… ……..

e. Is there a written instruction for tutors in the department? ……… ……..

(if yes, please enclose)

f. Is there a training programme for tutors in the department? (if yes, please enclose)

g. Is time scheduled for tutoring? ……… ……..

h) Does your hospital have a log book for fellows? ……… ……..

(if yes, please enclose)
4. Is training available in the following:

<table>
<thead>
<tr>
<th>a) Basic training in:</th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>- genetics</td>
<td>.....</td>
<td>......</td>
</tr>
<tr>
<td>- maternal physiology and endocrinology</td>
<td>......</td>
<td>......</td>
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<tr>
<td>- embryology and teratology</td>
<td>.....</td>
<td>......</td>
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<tr>
<td>- fetal and placental physiology and pathology</td>
<td>.....</td>
<td>......</td>
</tr>
<tr>
<td>- biochemistry and pharmacology (relating to the pregnant woman and the fetus)</td>
<td>......</td>
<td>......</td>
</tr>
<tr>
<td>- immunology</td>
<td>......</td>
<td>......</td>
</tr>
<tr>
<td>- adult medicine, anesthesia, resuscitation and intensive care</td>
<td>......</td>
<td>......</td>
</tr>
<tr>
<td>- neonatal medicine and surgery</td>
<td>......</td>
<td>......</td>
</tr>
<tr>
<td>- laboratory based subjects including: microbiology haematology</td>
<td>......</td>
<td>......</td>
</tr>
<tr>
<td>- administration and management</td>
<td>......</td>
<td>......</td>
</tr>
<tr>
<td>- legal and ethical issues</td>
<td>......</td>
<td>......</td>
</tr>
<tr>
<td>- epidemiology, statistics, research and audit</td>
<td>......</td>
<td>......</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>b) Instruction in:</th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>- medical and surgical complications of pregnancy</td>
<td>.....</td>
<td>......</td>
</tr>
<tr>
<td>- infectious diseases in pregnancy</td>
<td>.....</td>
<td>......</td>
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<tr>
<td>- fetal medicine including ultrasound examinations and invasive procedures</td>
<td>.....</td>
<td>......</td>
</tr>
<tr>
<td>- operative procedures and intrapartum</td>
<td></td>
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</tbody>
</table>
management
… … ……
-pre/post pregnancy and bereavement
counselling
…… ………
- biochemistry, pharmacology and pathology
relating to the pregnant woman and the fetus
…… ………
- embryonic, fetal and placental pathology
…… ………
- neonatal care and resuscitation in the delivery room
…… ………
- neonatal intensive care

4.1. Are all these trainings carried out in one centre or is the fellow referred to connected
excellence centres (i.e. ultrasound, etc.)
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5. Courses etc. for fellows:

   YES    NO

  a. Are fellows able to participate regularly
     in seminars and conferences in the centre?
     ……… ………

  b. Are fellows able to attend seminars, conferences etc.
     in other centres?
     ……… ………

  c. How much paid study leave does a fellow have
     per year?
     ……… Days/year

  d. How much working time is allotted for the fellows
     theoretical studies every week?
     ……… Days/year

6. Research

Are you involved in:

   YES    NO

  1. Research Training –methodology ……… ………
  2. Research
i. Basic scientific ...... ...... 
ii. Clinical ...... ...... 

Specify the subject
..................................................................................................................................................
..................................................................................................................................................

7 Training in Administration and Management

a. Did you receive any training in administration or management? (e.g. duties relating to organisation of Centre, duty rotas, laws related to materno-fetal and perinatal Medicine etc.) ...... ....
b) If yes, is this on a regular basis? ...... ....

State frequency .................................................................
..................................................................................................................................................

8 Library etc.

Do the fellows have access to:

a) Scientific library at the hospital with a professional librarian? ............... ............
b) Library in the centre? ............... ............
c) International medical journals in the centre? per year? ............... ............
d) Connection to data base? ............... ............
e) Personal computer? ............... ............
f) Conference room in the centre or shared conference room with other departments? ............... ............
g) Room with a desk for the fellow? ............... ............
9 What clinical audit are you involved in?

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10 What are the three best aspects of your training at the centre?

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11 What are the three most important changes you would like to see introduced?

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12 Miscellaneous (Please comment on any other aspects of training at your centre).

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........................................................................................................................................ Signature ..............................
........................................................................................................................................ (Fellow)

Name (Please print) ...........................................................................................................

Date ........................................... Year of training ..............................
8) Schedule for visit of a Centre of Materno-Fetal and Perinatal Medicine applying for European accreditation related to subspecialist training

SCHEDULE FOR A VISIT

1 Meeting with the Head of the Centre, senior staff, Postgraduate Dean, or Hospital Director. Presentation of departmental structuring, facilities, training programme and future plans.

2 Guided tour of the Centre

3 Interview with fellows

4 Lunch with senior staff and fellows

5 Interview with neonatologists, pathologists, anesthesiologists, geneticists, if appropriate

6 Interview with the Head of the Centre and senior staff including designated clinical tutors

7 Preparation of preliminary conclusions and recommendations

8 Presentation to Head of the Centre and Senior Staff

Seven hours is the minimum any visit of the centre should take, if conducted properly.
9) Visiting :

9a) Visiting Process

- Applications for Visits should be made by the Centre concerned to the Subspecialty Subcommittee (SSSC) of EBCOG and a copy should be sent to the EAPM’s Educational Committee;

- Two visitors should be selected and each subspecialist society will provide two names of visitors;

- Each subspecialty will produce an application form, a format for a day programme and a format for a visit report using the EBCOG/EAPM Hospital Recognition Committee documents as templates;

- The Visit should take place;

- The Visit Report should be submitted to the SSSC;

- The SSSC will look at the report and send it to the Executive Board/Educational Committee of EAPM, which will hand over its views to the SSSC;

- The recommendation for accreditation for a five-year period will be made by the SSSC to the EBCOG Executive and, if appropriate, accreditation will be awarded for a five-year period jointly by EBCOG/EAPM
9b) Visiting Report

VISITING REPORT
EUROPEAN BOARD AND COLLEGE OF OBSTETRICS AND GYNAECOLOGY AND
EUROPEAN ASSOCIATION OF PERINATAL MEDICINE

1. General Information
   a) Country/Region ........................................................................
   a. Hospital ........................................................................
      (Please encircle the appropriate option) Regional County Community
   b. Department ...........................................University Department YES NO
   c. Centre ..........................................................................

2. Centre. Short description of the local organization
   Does the Centre fulfil the general and special requirements for training in Materno-fetal and Perinatal Medicine? YES NO
   Specify: ........................................................................
   ........................................................................
   ........................................................................
   ........................................................................
   ........................................................................
   ........................................................................
   Are the facilities provided by the Centre appropriate? YES NO
Is the volume of clinical workload appropriate?   YES   NO

Is the quality and volume of scientific activities appropriate?   YES   NO

3. Training programme

Is the quality of the training programme up to standards?   YES   NO
4. **Tutors**  
Is tutorship adequate?  

<table>
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<tr>
<th>YES</th>
<th>NO</th>
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Specify:………………………………………………………………………………………………
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5. **What are the strong points of the Centre?**

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6. **What are the weak points of the Centre?**

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7. **Conclusions**

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8. **Recommendations**
### 10) List of potential visitors in Europe prepared by EAPM/EBCOG

<table>
<thead>
<tr>
<th>Name</th>
<th>Department and Address</th>
<th>Contact Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Zarko Alfirevic, MRCOG, obstet.</td>
<td>Dept. of Ob/Gyn University of Liverpool Liverpool L69 3BX UK</td>
<td>Tel. +44 – 151 – 702 4113 Fax: +44 - 151- 702 4024 <a href="mailto:zarko@liv.ac.uk">zarko@liv.ac.uk</a></td>
</tr>
<tr>
<td>Aris Antsaklis</td>
<td>1st Dept of Ob/Gyn &quot;Alexandra Hospital&quot; University of Athens 11 Lampsakou str. 11528 Athens GREECE</td>
<td>Tel: +30 10 770 8749 Fax: +30 10 771 9271 <a href="mailto:arisants@otenet.gr">arisants@otenet.gr</a></td>
</tr>
<tr>
<td>Grzegorz H. Breborowicz</td>
<td>Dept. of Perinatology University School of Medical Sciences ul. Polna, 33 60 535 Poznan POLAND</td>
<td>Tel. +48-61-8419283 Fax +48-61-8419204 <a href="mailto:gbrebor@sk3.usoms.poznan.pl">gbrebor@sk3.usoms.poznan.pl</a></td>
</tr>
<tr>
<td>Gian Carlo Di Renzo</td>
<td>Centre of Perinatal and Reproductive Medicine Dept. of Gyn/Obst. and Ped. Sciences University of Perugia P.O.Box 1433 Policlinico Monteluice 06122 Perugia ITALY</td>
<td>Tel. +39 - 075 - 5720563 or 5720574 Fax: +39 - 075 - 5729271 <a href="mailto:direnzo@unipg.it">direnzo@unipg.it</a></td>
</tr>
<tr>
<td>William Dunlop</td>
<td>Dept. of Obstetrics and Ginecology University Hospital Newcastle UK</td>
<td><a href="mailto:william.dunlop@ncl.ac.uk">william.dunlop@ncl.ac.uk</a> <a href="mailto:William.Dunlop@newcastle.ac.uk">William.Dunlop@newcastle.ac.uk</a></td>
</tr>
<tr>
<td>Luis Cabero Roura,</td>
<td>Dept. of Obstetrics and Ginecology Hospital Vall de Hebron Avda. Vall de Hebron 119-129 08035 Barcelona SPAIN</td>
<td>Tel. +34-93-4893085 Fax: +34-93- 4893083 Home:C/Somatens 44, bajo, 08950 Esplugues de LL Tel. +34 93 473 4850 Fax: +34 93 473 5025 <a href="mailto:lcbabor@meditex.es">lcbabor@meditex.es</a></td>
</tr>
<tr>
<td>Name</td>
<td>Department</td>
<td>Address</td>
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<tr>
<td>-----------------------------</td>
<td>-----------------------------------------------</td>
<td>----------------------------------------------</td>
</tr>
<tr>
<td>Wolfgang Holzgreve</td>
<td>University Women's Hospital Basel</td>
<td>Schanzenstrasse 46 CH-4031 Basel Switzerland</td>
</tr>
<tr>
<td>Jens Langhoff-Roos</td>
<td>Dept. of Obstetrics</td>
<td>Juliane Marie Centre Rigshospitalet Blegdamsvej 9 DK - 2100 Copenhagen DENMARK</td>
</tr>
<tr>
<td>Anton V. Michailov</td>
<td>Div. of Ultrasound Diagnosis Inst. of Ob/Gyn</td>
<td>Academy of Medical Sciences Mendeleevskaya line 3 St Peterburg - RUSSIA</td>
</tr>
<tr>
<td>Nebojsa Radunovic</td>
<td>Dept. of Obstetrics and Gynecology</td>
<td>University Hospital Belgrad</td>
</tr>
<tr>
<td>Steve Robson</td>
<td>Dept. of Obstetrics and Gynecology</td>
<td>University Hospital Nottingham UK</td>
</tr>
<tr>
<td>Peter Rolfe</td>
<td>Dept. of Obstetrics and Gynecology</td>
<td>University Hospital Oslo Norway</td>
</tr>
<tr>
<td>Name</td>
<td>Institution</td>
<td>Contact Information</td>
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<td>---------------------------------------------------</td>
</tr>
<tr>
<td>Cihat Sen</td>
<td>P.O. Box 33 Cerraphasa, Istanbul 34301, Turkey</td>
<td>Tel. +90-212-5891141 Fax: +90-212-6334685 <a href="mailto:cesen@obusg.org.tr">cesen@obusg.org.tr</a></td>
</tr>
<tr>
<td>Peter Soothill</td>
<td>Fetal Medicine Research Unit, Dept. of Obstetrics and Gynaecology, St. Michael’s Hospital, Bristol, UK</td>
<td>Tel. +44-117-9285277 Fax: +44-117-9285683</td>
</tr>
<tr>
<td>Magnus Westgren</td>
<td>Dept. of Obstetrics and Gynaecology, University Hospital, Karolinska, Stockholm, Sweden</td>
<td></td>
</tr>
<tr>
<td>Juriy Wladimiroff</td>
<td>Dept. of Ob/Gyn, Erasmus Univ. Rotterdam, Academisch Ziekenhuis Dijkzigt, Postbus 1738, Dr. Molwaterplein 50, 3000 DR Rotterdam, The Netherlands</td>
<td>Tel. +31 - 10 - 463 3632 Fax: +31 - 10 - 463 5826 <a href="mailto:s.breur@erasmusmc.nl">s.breur@erasmusmc.nl</a> <a href="mailto:j.wladimiroff@erasmusmc.nl">j.wladimiroff@erasmusmc.nl</a></td>
</tr>
<tr>
<td>Yves Ville</td>
<td>Université Paris V, Centre Hospitalier Intercommunal, Poissy St. Germain en Laye, Hôpital de Poissy, 10 Rue du Champ Gaillard, BP 3082, 78303 Poissy Cedex, France</td>
<td>Tel. +33 139275251 Fax: +33 139274412 <a href="mailto:yville@wanadoo.fr">yville@wanadoo.fr</a></td>
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</tbody>
</table>