



AMERICAN OSTEOPATHIC BOARD OF  
OBSTETRICS AND GYNECOLOGY  
Operating Under Authority of the American Osteopathic Association

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**Subspecialty Application Details**  
**Maternal Fetal Medicine Examination**  
**Fall 2018**

Applications Available: March 1 – June 25, 2018

- Applications submitted March 1 – June 18, 2018 require the standard fee (\$3525) which will be included upon submission of the application.
- Applications submitted June 19 – 25, 2018 require an additional late fee (\$250) which will be included upon submission of the application.

**Examination Dates: October 19 and 20, 2018**

Candidates will be assigned for examination on October 19<sup>th</sup> **or** October 20<sup>th</sup> from 8:00 a.m. - 12:00 p.m. **or** 1:00 p.m. – 5:00 p.m.

Location: Chicago Marriott Suites O'Hare  
6155 North River Road, Rosemont, IL 60018  
(847) 696-4400 or (800) 229-9290  
*Room reservations: A reduced rate is available upon request when candidates specify they are sitting for an AOBOG examination.*

**Be sure to read this entire application and related Library articles. Applicants are responsible to be informed about all information and instructions.** All information about this examination is located in the Library. Access the Library from your user account; click Calendar/Library; click Title in the Library header; and refer to Subspecialty articles.

**Prerequisites**

**Review the information that you have entered into your AOBOG user account under “My Profile” before submitting this application. Basic Info, Contacts (addresses), Training, and Licensing must reflect complete, current information.**

**Applicants Must:**

1. Have current primary certification in Obstetrics and Gynecology from the American Osteopathic Association (AOA.)
2. Have received written notification from the American College of Osteopathic Obstetricians and Gynecologists (ACCOG), or from the AOA confirming that your fellowship training has been **approved as complete**. (*The AOBOG highly recommends that you have this notification in hand before applying for the exam.*)
3. Be a current member in good standing of the AOA or the Canadian Osteopathic Association.
4. Hold a current, active license to practice in a state or territory.
5. Exhibit conformity to the standards as set forth in the Code of Ethics of the AOA.
6. Submit or upload the required documents (listed below):

Mail: AOBOG, 142 E. Ontario St., 4th Floor, Chicago, IL 60611-2864

Email: [aobog@osteopathic.org](mailto:aobog@osteopathic.org)

Fax: (312) 202-8482

Documents must be submitted by the final application deadline date. Applicants should retain proof of postmark or faxed confirmation in order to produce verification of date if necessary.

**Osteopathically-trained residents submit:**

- A copy of the written notification that you received from the ACOOG confirming that your osteopathic fellowship training has been **approved as complete**. (*The AOB OG highly recommends that you have this notification in hand before applying for the exam.*)
- Mail the documents specified in the Subspecialty Instructions for Application Documents by a **trackable carrier**. (See below.)

**ACGME and/or Military-trained residents submit:**

- A copy of the written notification that you received from the AOA confirming that your ACGME or Military fellowship training has been **recognized as complete**. (*The AOB OG highly recommends that you have this notification in hand before applying for the exam.*)
  - Mail the documents specified in the Subspecialty Instructions for Application Documents by a **trackable carrier**. (See below.)
7. Submit the application online by the deadline date.
8. Have been notified by the AOB OG of acceptance to this examination. (See Notifications section.)

## Notifications

Applicants must assure that their email mailbox will accept email from [aobog@aobog.org](mailto:aobog@aobog.org), [admin@aobog.org](mailto:admin@aobog.org), [noreply@aobog.org](mailto:noreply@aobog.org), [aobog@osteopathic.org](mailto:aobog@osteopathic.org), and [cbs@osteopathic.org](mailto:cbs@osteopathic.org).

**Electronic Communications:**

- Electronic communication will be utilized to notify applicant of all pertinent information about this examination.
- Email will be sent to the address as entered in the user's Profile. Profiles must be maintained with a current, viable email address.
- Emails will appear in the applicant's user account on this website. They will be displayed in the **Inbox** on the user's **Welcome** page. **Note:** As a courtesy, emails sent by the AOB OG will also be delivered to the applicant's designated email address *outside of their AOB OG user account*. This serves to alert the applicant to access their user account in order to reply or to initiate further correspondence with the AOB OG.
- A permanent record of all email correspondence is recorded within the user's portal and remains viewable for future reference.

**Application Notifications:**

**Electronic communication will be utilized to notify applicants of:**

1. Receipt of application
2. Receipt of payment
3. Receipt of required application documents
4. Application complete status after all required documents have been received
5. Acceptance or denial for examination following review of the application by the Credentials Committee (Status will not be available from the AOB OG office prior to the email notification.)
6. The date, time, and registration instructions for the scheduled examination

No further information about this examination will be issued other than in response to individual inquiries.



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**SUBSPECIALTY INSTRUCTIONS FOR APPLICATION DOCUMENTS  
(Subspecialty Certification)**

**DOCUMENTS TO SUBMIT**

**Log of Clinical Activity**

- The applicant must select a minimum of 12 cases from the topics that are listed for the subspecialty (refer to Subspecialty Topics List on pages 4-5).
  - The examiners will review the logs and select 12 acceptable cases which will qualify the applicant for examination. (It is therefore recommended that more than 12 cases be submitted in the event that any one is disqualified.)
- The cases must represent the applicant's clinical activity that occurred during the immediate 12 months prior to submission of the application.
  - No more than three (3) cases shall have similar diagnoses.
- The cases must be submitted in the form of a formal consultation letter or a transcribed case summary.
  - Both formats must contain sufficient pertinent clinical material that affords the examiners ample information to evaluate the management of each case.
- The information extracted from the 12 accepted cases will not be repeated in the General Knowledge portion of the examination.
  - If a case representing a particular topic is not submitted or was not accepted by the examiners as 1 of the 12, the applicant should assume that the knowledge of that topic will be a part of the oral assessment in the General Knowledge portion of the examination.

**Research Paper**

- The applicant must have been the primary author of a research paper that meets professional and publishable standards as determined by a review committee of peers, appointed by the AOBG Subspecialty Committee.
- The applicant must have had significant input in the planning and execution in the research and the paper must meet the following criteria:
  - Be an original research project (case review is not acceptable)
  - Add to the existing body of medical knowledge of the subspecialty
- If, at the time of the examination, it is determined by the examiners that the applicant cannot verify significant knowledge of the research design or implementation, partial or no credit will be given for the paper in the scoring of the examination.

## **HOW TO PREPARE ALL DOCUMENTS TO SUBMIT**

**Submit three (3) binders to the AOBG**

**Applicants must bring one (1) binder to the examination**

- An individual binder is to be used for each set of documents.
- Binder Cover must provide:
  - Applicant's name
  - Email address
  - Home and office addresses
  - Beginning and ending dates of log
  - Name and address of individual hospitals, ambulatory surgical facilities, and offices represented
- Each Binder must contain:
  - Cover Sheet
  - Table of Contents
  - Individual Topics separated by Tabs (if more than one case summary is submitted representing a topic, they are to be placed together under that topic tab)
  - Consultations or Case Summaries which must be type written or computer printed on standard (8 ½ x 11) paper and placed under identifying topic tabs
  - All patient identifiers must be blackened out
  - Research Paper (Thesis)

### **SUBSPECIALTY LOG TOPICS LIST**

<b><u>Maternal Fetal Medicine</u></b>	
<ol style="list-style-type: none"><li>1. Prenatal diagnosis<ol style="list-style-type: none"><li>a. Screening<ol style="list-style-type: none"><li>i. Multiple marker screening</li><li>ii. First trimester screening</li><li>iii. Teratology counseling</li></ol></li></ol></li><li>2. Ultrasound<ol style="list-style-type: none"><li>a. Diagnosis of congenital anomalies</li><li>b. Growth and well-being parameters</li><li>c. Doppler<ol style="list-style-type: none"><li>i. Diagnostic applications</li><li>ii. Well-being applications</li></ol></li></ol></li><li>3. Management of amniotic fluid abnormalities<ol style="list-style-type: none"><li>a. Oligohydramnios</li><li>b. Polyhydramnios</li></ol></li><li>4. Management of fetal arrhythmia<ol style="list-style-type: none"><li>a. Diagnosis and management</li></ol></li><li>5. Fetal therapy<ol style="list-style-type: none"><li>a. Medical</li><li>b. Surgical</li></ol></li><li>6. Intrauterine growth restriction</li><li>7. Multiple gestation management<ol style="list-style-type: none"><li>a. Diagnosis</li><li>b. Management</li></ol></li><li>8. Hemolytic disease of the newborn</li></ol>	<ol style="list-style-type: none"><li>9. Recurrent pregnancy loss</li><li>10. Preterm labor and delivery</li><li>11. Post-term pregnancy</li><li>12. Management of placental abnormalities<ol style="list-style-type: none"><li>a. Previa</li><li>b. Abruptio</li><li>c. Vasa previa</li><li>d. Succenturiate lobe</li></ol></li><li>13. Premature rupture of the membranes</li><li>14. Maternal and fetal infectious diseases</li><li>15. Management of HIV/AIDS</li><li>16. Maternal cardiac disease</li><li>17. Fetal cardiac disease</li><li>18. Maternal thromboembolic disease</li><li>19. Maternal thrombophilia</li><li>20. Hypertension diseases of pregnancy</li><li>21. Critical care management</li><li>22. Maternal medical diseases other than diabetes and hypertension</li><li>23. Maternal diabetes<ol style="list-style-type: none"><li>a. Gestational</li><li>b. Pre-gestational</li></ol></li></ol>