

The Current State of Hernia Fellowships

Ajita S. Prabhu, MD FACS

Professor of Surgery, Cleveland Clinic Lerner College of Medicine
Program Director, Cleveland Clinic General Surgery Residency
Program

Disclosures

- CMR Surgical – Advisory Board
- Surgimatix – Advisory Board
- Distal Motion – Advisory Board






What is a FC Designation?

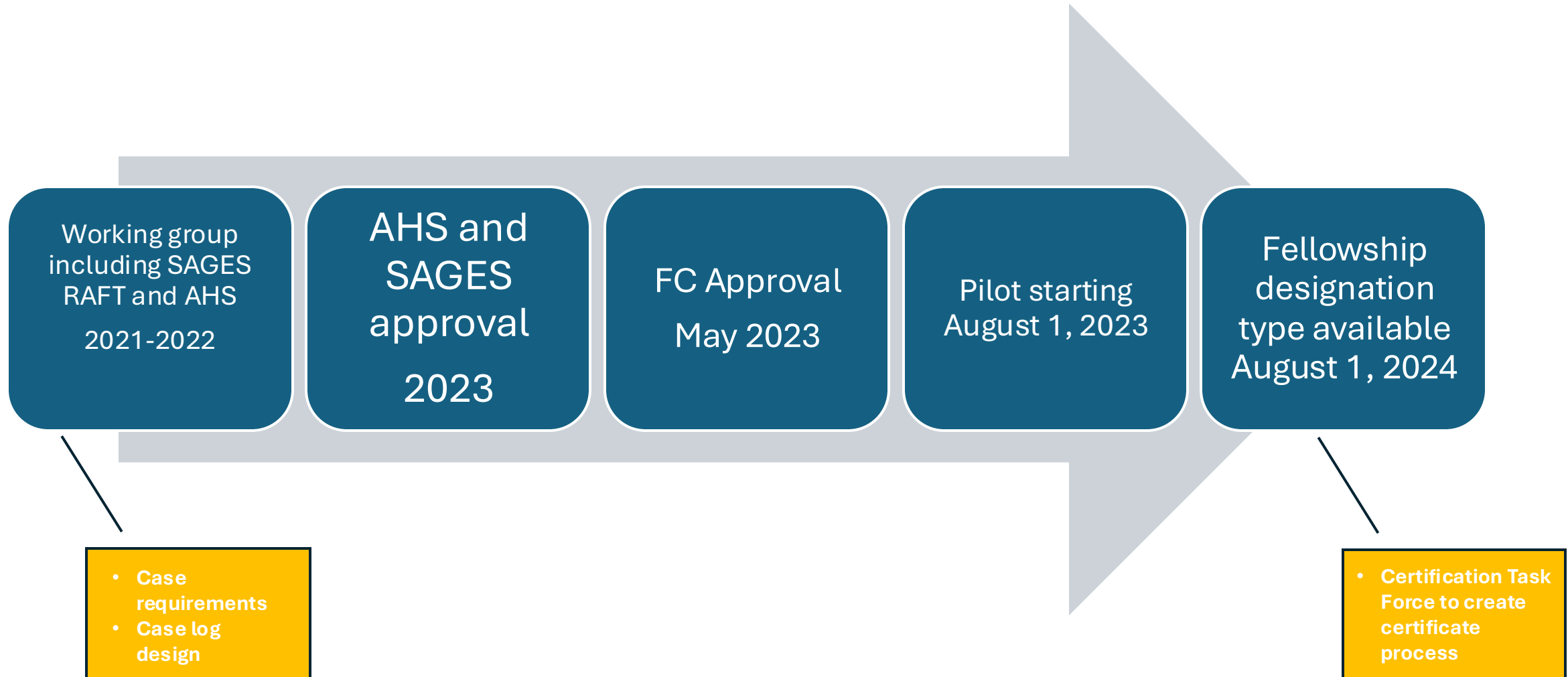


The case for a new post-graduate hernia designation: a review of fellowship council case logs from the past twelve-years

Madhuri B. Nagaraj¹  · Adnan Alseidi² · Ajita S. Prabhu³ · Jacob A. Greenberg⁴ · Michael M. Awad⁵ · Joshua J. Weis⁶ · Daniel J. Scott¹

- Examined case logs from 2007-2019
- 93,334 hernia repairs; 1558 fellows
- Hernia cases doubled
- Inguinal hernias 48% of total and rest were ventral
- Significant increase in open and robotic cases
- Decrease in lap cases
- Enough of a case to make fellowships

Process to Create Hernia Designation



Case Requirements – 100 core procedures minimum

Inguinal Hernia Repairs	Ventral/Incisional Hernia Repairs 3-10 cm width or length	Ventral/Incisional Hernia Repairs >10 cm width or length	Atypical Hernia Cases
N=30	N=30	N=25	N=15
<ul style="list-style-type: none"> • 15 MIS • 10 recurrent 	<ul style="list-style-type: none"> • May include onlay, retrorectus, IPOM, etc • 15 MIS 	<ul style="list-style-type: none"> • Anterior release • Posterior release • Preperitoneal 	<ul style="list-style-type: none"> • Groin pain • Parastomal hernias • Infected mesh • Subxiphoid • Suprapubic • Flank hernias

Additional Requirements

- 5 clinic evaluations for CGP
- Completion of the FC Hernia Curriculum
- Documentation of competence in at least 5/8 FC Hernia EPAs

Hernia and Abdominal Wall EPAs

Hernia & Abdominal Wall

AW1 Identify and Prepare Patients for Complex Hernia Repair:Prehabilitation

AW2 Evaluate and Manage Patients with Acute and Chronic Loss of Domain

AW3 Evaluate and Manage Patients with Groin Pain

AW4 Evaluate and Manage Patients with Parastomal Hernias

AW5 Evaluate and Manage Patients with Recurrent or Inguinoscrotal Hernias

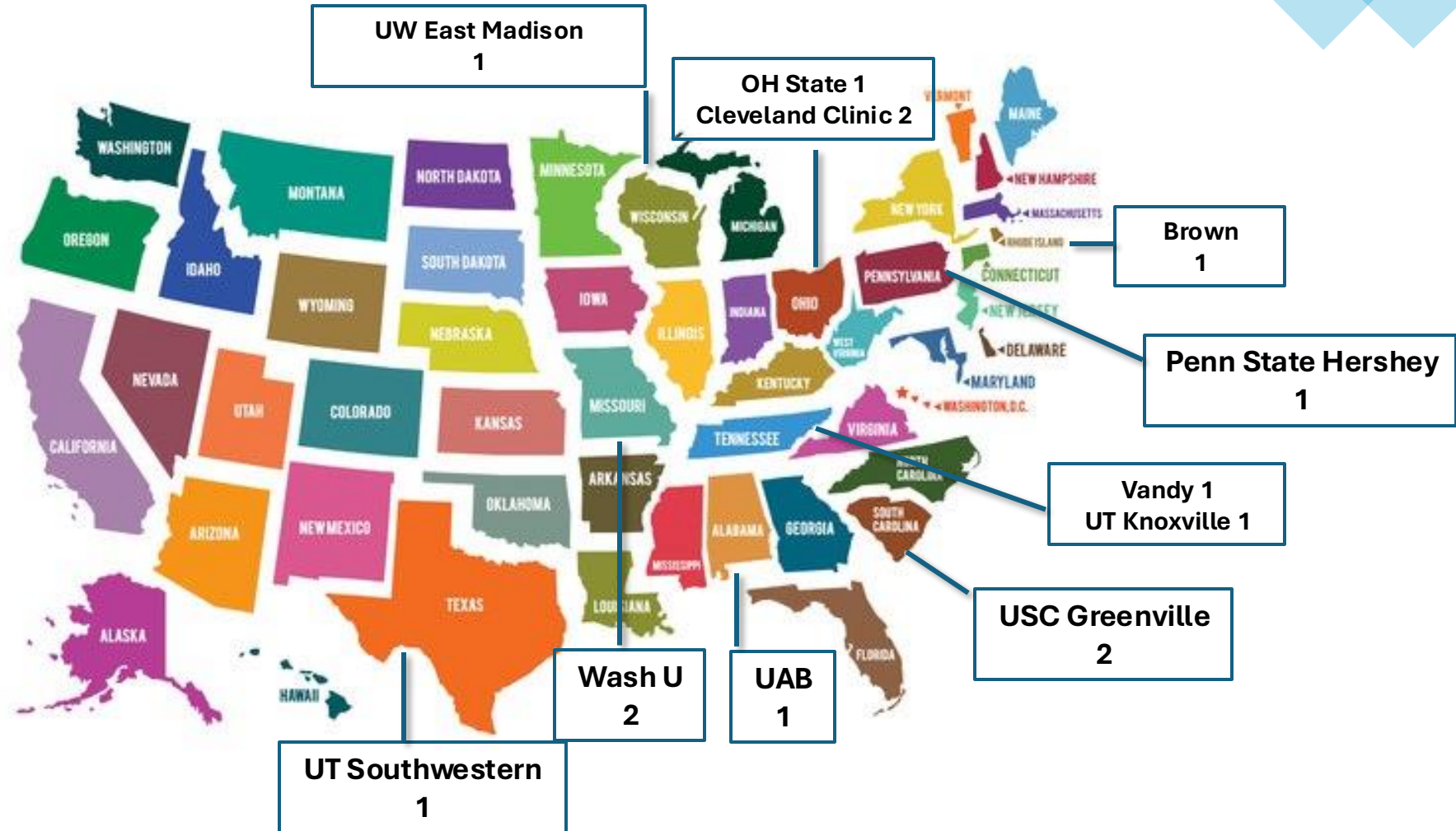
AW6 Evaluate and Manage Patients with Midline Incisional or Recurrent Ventral Hernias

AW7 Evaluate and Manage Patients with Contaminated Hernias

AW8 Evaluate and Manage Patients with Hernias in Non-Central Locations

Hernia Fellowship Designation Pilot Program

- 6 programs in pilot
- No fellows in pilot met criteria for Ventral Hernias 3-10 cm
- >50% did not satisfy criteria for Atypical Hernias
- Fellows met the criteria for 15 MIS inguinal hernia repairs
- Fellows did not meet the criteria for 10 recurrent inguinal hernia repairs



11 programs
14 fellows

Conclusion

- Fellowships are proliferating
- Certification process is evolving
- Are we training fellows to manage what is out there?

