## Society of Surgical Oncology Breast Fellowship Program Policies

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### Society of Surgical Oncology

Breast Fellowship Program Policies

#### Late and Incomplete Documentation Policy

#### **Program Fees**

An annual program fee is assessed to all approved SSO Breast Surgical Oncology Fellowship programs on a per-program basis. The annual -program fee is invoiced in June of each year. All invoices are emailed to the attention of the program director indicated in our records.

#### Late/Incomplete Documentation Fee

Programs are required to submit all completed program documentation for Plans of Action, Progress Reports, or any other documents requested by the Training Committee by the identified deadlines. All documentation must be emailed on or before the identified documentation submission due date. A fee of 10% of the annual program fee will be assessed for late/incomplete program documentation submissions.

Failure to complete and provide Site Visit Documents (includes the PID, supporting documents, and final agenda) by the identified deadline may result in site visit cancellation.

#### Site Visit Cancellation Fee

A site visit cancellation fee of \$1,000 will be assessed for cancelled scheduled site visits. The cancellation fee can be waived at the discretion of the Society of Surgical Oncology Training Committee.



#### **Breast Fellowship Match Program Violation of Binding Commitment**

**Background:** The Society of Surgical Oncology's Breast Fellowship Match application requires all applicants to acknowledge that all Match commitments are binding and that the ranking of applicants by program director and the ranking of programs by an applicant establishes a binding commitment to offer or to accept an appointment if a match results. This policy intends to outline the process the SSO leadership and Training Committee will follow if a violation of the binding commitment acknowledged in the SSO's Breast Fellowship Match application occurs on behalf of a participating program and/or applicant.

#### Policy:

- I. SSO Breast Fellowship Match applicants can submit a written request for a waiver of the binding match commitment to the SSO Training Committee prior to the Match being conducted and the results being announced.
- II. If the SSO Training Committee receives information that an applicant has applied for, discussed, interviewed for, or accepted a concurrent year position in another program before receiving a waiver from the SSO Training Committee, the SSO Training Committee will initiate an investigation to determine whether the applicant or program has violated the terms of the Match application. If the SSO Training Committee investigation determines that an applicant has violated the binding commitment policy within the SSO Breast Fellowship Match application, they can withdraw the applicant from the Match as well as submit a final report of the investigation to:
  - a. The Match Applicant's Residency Program
  - b. The Federation of State Medical Boards (if applicable)
  - c. The Canadian Licensing Board (if applicable)
  - d. The American Board of Surgery (ABS)
  - e. The American Board of Medical Specialties (ABMS)
  - f. The American Society of Breast Surgeons (ASBrS)
  - g. The American College of Surgeons (ACS)
  - h. The American Osteopathic Association (AOA)
  - i. All SSO Approved Breast Fellowship Programs



In addition, the Match applicant is to be prohibited from:

- j. Becoming an SSO member for a period five (5) years following the determination of the violation; if applicant is a current SSO member the applicant's membership will be suspended for a period of (1) year from the date it was determined that the applicant committed a violation.
- k. Participating in future SSO Breast Fellowship Matches following the determination of the violation.

SSO Breast Fellowship Programs must accept the applicant(s) who matched with to the program through the SSO match program. If a program wants to accept an applicant outside of the match, they may accept the applicant for an unaccredited fellowship position.

- III. Once a program has committed to participating in the Breast Fellowship Match, the program must complete the Match for that cycle.
- IV. SSO Breast Fellowship Programs must accept the applicant(s) who match to the program through the SSO match program. If a program wants to accept an applicant outside of the match, they may accept the applicant for an unaccredited fellowship position.
- V. If a program wishes to withdraw from the Match and not accept any applicants for accredited positions for that academic year, the Program Director is required to submit a written request for withdrawal from the Match to the SSO Training Committee prior to the Match ranking list submission date, the Match being conducted, and the results being announced. This letter should outline the rationale for withdrawal and its anticipated duration. The SSO Training Committee will review the request to determine whether the withdrawal is necessary, is in the best interest of the education and training of the Breast Fellows, and will be approved.
  - a. Depending upon the circumstances of the request, the SSO Training Committee may, at its discretion, schedule an off-cycle site visit of the program.
  - b. If a program withdraws from the Match without a formal request to the SSO Training Committee or without approval by the Training Committee, this will be considered a **violation of the Match**.
- VI. If a program requests for a delayed fellow start date and this is not approved by the SSO Training Committee, then the program will be considered in **violation of the Match**.



VII. If the SSO Training Committee receives information that a Breast Fellowship Program committed to participating in the Match, has interviewed applicants outside of the Match, and accepted an applicant for an accredited position, the SSO Training Committee will initiate an investigation to determine whether the program has violated the terms of the Match application. If the SSO Training Committee investigation determines that a Breast Fellowship Program has violated the binding commitment policy within the SSO Breast Fellowship Match application, they can withdraw the Program from the Match.

VIII. For Programs which are determined to be in **violation of the Match**, the SSO Training Committee may

- a. Prohibit the Program from participating in the SSO Breast Fellowship Match for a period of three (3) years;
- b. Upon conclusion of the three (3) years require the Program to undergo the SSO Training Committee Site Visit process prior to inclusion in future Matches.

Record of the Program's violation will be posted on the SSO's website and include information regarding the length of an imposed sanction(s) for the violation.



Breast Fellowship Program Policies

#### **Breast Fellowship Program Director & Associate Director Requirements**

#### **Program Director Requirements**

The fellowship must have a single program director with authority and accountability for the operation of the training program. The program director must be a surgeon qualified to supervise and educate trainees and must meet requirements similar to those for ACGME-accredited surgical training programs.

All changes in program director must be submitted to and approved by the SSO Training Committee no later than 30 days after appointment on institution letterhead by the <u>current Program Director</u> or senior member of the department.

Consideration should be given to the new program director's administrative time and experience. The Training Committee recommends that individuals appointed as new program directors should have served for at least five years as a faculty or full-time clinical staff member, and when possible, have at least two years of experience at the institution at which he or she is being appointed as program director and have served in a leadership capacity for at least one year or prior experience as a program director in a program in good standing. Exceptions can be made at the discretion of the Training Committee.

### The <u>current</u> program director should continue in their position for a length of time adequate to maintain continuity of leadership and program stability.

Although there is no specific requirement for length of service as Program Director, frequent changes in Program Director will be looked at closely by the SSO Training Committee and may trigger a mandatory site visit to assure continuity of educational programs. A minimum requirement of 3 years tenure as Program Director is recommended to ensure stability and commitment to the educational program.

It is also critical that the Program Director demonstrate sufficient time in independent practice and leadership experience before assuming the Program Director role. Leading a program requires knowledge and skills that begin in residency and subsequently further develop in independent practice. The time period from completion of residency until assuming the role of program director allows the individual to cultivate leadership abilities while becoming professionally established. The five-year period is intended for the individual's professional maturation. In certain circumstances, the program and Sponsoring Institution may propose, and the Training Committee may accept a candidate for program director who fulfills these goals but does not meet the five-year minimum.



Scholarly activity is imperative for fellows in order to understand the nuances of interpreting published medical literature and applying clinical data. To that end, it becomes imperative for fellows to understand the process of performing clinical research and learn this from program directors, faculty and mentors. As such, scholarly activity should be demonstrated each year by the program director; examples include:

- 1. Publications in peer reviewed journals or presentations at national meetings
- 2. Institutional primary investigator of a cooperative national trial
- 3. Participation in national committees outside of the program director committee (i.e., ACS, ASBrS and SSO committees)
- 4. Involvement in developing national curriculum (e.g., Breast SCORE)

Scholarly activity must be demonstrated within the previous 2 years at the time a request for approval of an individual comes to the Training Committee as well as at the time of a site visit.

Although exceptions may be made at the discretion of the Training Committee, qualifications of the program director must include

- 1. Program leadership, in aggregate, must be provided with support equal to a dedicated minimum of 10 percent FTE for administration of the program. This may be time spent by the program director only or divided among the program director and one or more associate (or assistant) program directors.
- 2. Specialty expertise in breast surgery (such as formal training in an accredited breast surgery/surgical oncology fellowship or extensive practice in the field of breast surgery) and documented educational and administrative experience acceptable to the Training Committee.

  The Training Committee may request specific documentation.
- Current board certification in the specialty by the American Board of Surgery or other subspecialty qualifications acceptable to the SSO Training Committee.
- 4. Current medical licensure and medical staff appointment at the primary institution of the breast fellowship program
- 5. Current membership with the Society of Surgical Oncology and the American Society of Breast Surgeons and participation on the Breast Program Directors Subcommittee.

The program director must administer and maintain an educational environment conducive to educating the breast surgery fellows in all areas described by the Program Information Database (PID).

The program director must:

- 1. Prepare and submit all information required and requested by the SSO Training Committee
- 2. Be familiar with and oversee compliance with the policies of the SSO Training Committee
- 3. Notify the SSO Training Committee in writing if:
  - a. changes in program leadership occur (including changes in program director)
  - b. requesting an increase in fellow complement
  - c. making major changes to the program structure or length of training



- d. voluntarily withdrawing the fellowship from SSO certification
- e. voluntarily withdrawing the program from the Breast Surgical Oncology Fellowship Match
- f. requesting changes in the program that would have significant impact, including financial, on the program or institution
- 4. Develop and implement lines of authority specifying expected reporting relationships for fellows and faculty members to maximize quality care and patient safety
- 5. Establish and maintain an environment of inquiry and scholarship with active research opportunities for the breast fellows
- 6. Oversee and ensure the quality of didactic and clinical education in all sites that participate in the program, including fellows' participation in conferences and other educational activities, and oversight of implementation of the fellowship curriculum
- 7. Approve a local director at each participating site who is accountable for fellow education
- 8. Monitor fellow supervision and education at all participating sites
- 9. Organize and supervise fellows' interaction with general surgery residents at the educational, research, administrative, and patient care levels

#### **Associate Program Director Requirements**

The **Associate Program Director** (APD) role is envisioned to be a training ground for the role of Program Director (PD) and to provide continuity to the program should the PD be unable to fulfill the role. Therefore, the individual chosen as APD should work towards the goal of meeting the criteria of Program Director. In the event that the PD is no longer able to serve in this position and the APD fails to meet criteria for a PD, it is the responsibility of the program to appoint another senior faculty member as interim PD (approved by the Training Committee) until a qualified PD can be identified. A non-qualifying APD may serve as the interim PD with the approval of the Training Committee but must be able to fulfill the PD criteria within two years of the appointment to interim PD, otherwise a new PD must be appointed unless an exception is granted by the Training Committee. Use of a non-qualifying APD for longer than 1 year will trigger a program review and/or site visit unless waived by the Training Committee. Failure to identify an acceptable PD in a timely fashion to the Training Committee may result in the suspension of the program from the upcoming match cycles until an acceptable PD is identified and may result in program probation, suspension or termination.

While APDs are not required to be pre-approved by the Training Committee, the committee must be notified 30 days after appointment or in the next report to the Training Committee, whichever is sooner. In addition, it is expected that all APDs meet the specialty expertise, licensure, and society membership requirements of the PD while serving as APD. In addition, the APD should be at least one year out from their terminal fellowship/specialty training. The Training Committee reserves the right to reject an APD who is substantially non-compliant with these criteria.



#### **Notification Requirements**

To notify the Training Committee regarding a change in either Program Director or Associate Program Director, your program must submit a letter on institutional letterhead outlining the change in Program Director or Associate Program Director within 30 days of appointment or at the next report to the Training Committee, whichever is sooner. Contact information and their Curriculum Vitae (CV) must be included.

The Training Committee will review your change in Program Director or Associate Program Director at their quarterly meetings and a decision letter (in the case of program director changes) aranoliication letter (in the case of associate program director changes) will be issued to the program after Training Committee review.

<u>For all Program Director changes, a Progress Report will be due one year after the change.</u> Associate Program Director changes do not trigger a Progress Report.

Breast Surgical Oncology Fellowship Program Directors and Associate Program Directors are not permitted to serve on the Training Committee.

Approved March 2020 Revised September 2022 Revised May 2023



### Society of Surgical Oncology

Breast Fellowship Program Policies

Guidelines for Enacting Probation Policy: SSO and Program Responsibilities and Options

#### SSO:

- 1. Include comprehensive list of deficiencies to program when probation notice given
- 2. Include "Enacting Probation" Policy in documents given to Program
- 3. Include copy of appeals policy
- 4. Notify trainees and interview candidates that Program was placed on probation

#### Program:

- 1. Acknowledge in writing receipt of probation letter
- 2. Options once notified of probation status
  - a. Accept probation
  - b. Appeal (see policy attached, notify Chair of Training Committee in writing within 30 days of notification)
  - c. Withdraw
- 3. Probation term
  - a. Probation is for a minimum of 1 year
  - b. Probation is for a maximum of 2 years
- 4. Documentation needed throughout probation period
  - a. Initial plan of action is due in 90 days
  - b. Progress reports due every 6 months for as long as probation status continues.
    - i. Progress report(s) must demonstrate sufficient improvements to the approval of the Training Committee.
  - c. Site visit
    - i. A minimum of six months will pass between the time a Program is placed on probationary status and the subsequent site visit to assess durability of instituted changes. The earliest a program can come off probation is one year following the initial notice.
- 5. Possible outcomes of subsequent site visit
  - a. Closure (current fellow will still receive certificate)
  - b. Continue probation (may still participate in the Match); site visit again in one year (program is responsible for additional site visit fees)
  - c. Suspension (may not participate in the Match); site visit again in one year (program is responsible for additional site visit fees)
  - d. Approval for 2 years
- 6. Program closure
  - a. Multiple episodes of probation may be grounds for program closure
  - b. More than 2 consecutive episodes of probation will trigger program closure
- 7. If a closed program desires to start a breast fellowship in the future, the program will be expected to apply through the established processes as a new program submitting a new PID.



#### **Appeal of Adverse Actions**

- 1. If the Training Committee takes an adverse action against a Program, the Program may request a hearing before an appeals panel. If a written request for such a hearing is not received by the Chair of the Training Committee within 30 days following receipt of the Letter of Notification, the action of the Training Committee will be deemed final and not subject to further appeal.
  - a. If a hearing is requested, a panel shall be appointed according to the following procedures: The Program shall receive a copy of the list of potential appeals panel members from the SSO CGSO Program Directors Committee and Training Committee and shall have an opportunity to delete a maximum of one-third of the names from the list of potential appeals panel members. Within 15 days of the receipt of the list, the program shall submit its revised list to the Chair of the Training Committee. Although all committee members are expected to behave in an unbiased manner, in order to ensure that a potential conflict of interest is minimized, any committee member who was involved in the site visit prompting the probationary status, who trained at the program in question, or trained at the same program (within 5 years) with the program director of the program in question, or who is practicing in the same referral area as the program in question, will automatically be disqualified independent of the program's deletion requests.
  - b. A five-member appeals panel will be constituted by the Training Committee from among the remaining names on the list. The panel must include the Vice-Chair of the Training Committee and Vice President of the Society. If either of these individuals will not be available in a timely fashion or are deemed ineligible due to a conflict of interest as detailed above in section 1.a, the Vice President of the Society will be substituted with the President-elect of the Society or the Vice-Chair of the CGSO Program Director Committee and/or the Chair of the Training Committee may be substituted for the Vice-Chair of the Training Committee from the revised list of potential panel members. A representative from the American Society of Breast Surgeons Education Committee, who is appointed by the president of the American Society of Breast Surgeons and meets conflict of interest requirements, should also be included.
- 2. When a hearing is requested, the following policies and procedures shall apply:
  - a. When a Program requests a hearing before an appeals panel, the Program holds the accreditation status determined by the Training Committee with the



term under appeal affixed to the status. For example, if the Training Committee determines probationary status for a Program, and the Program appeals the decision, the status of the Program shall be "probation, under appeal". This accreditation status shall remain in effect until a final determination on the accreditation status of the Program is made.

Nonetheless, at this time fellows and any candidates (applicants who have been invited to interview with the sponsoring institution) must be informed in writing as to the confirmed adverse action taken by the Training Committee on the accreditation status. A copy of the written notice must be sent to the Chair of the Training Committee within 50 days of receipt of the Training Committee's Letter of Notification.

- b. Hearings conducted in conformity with these procedures shall be held in Chicago at the SSO office headquarters or in space agreed upon by all parties within two months of the Training Committee's receipt of the appeals letter. In some cases, a videoconference for all parties may be arranged in lieu of a face- to-face meeting.
- c. The documents comprising the program file, the record of the Training Committee's action, together with oral and written presentations by the appealing Program, shall be the basis for the recommendations of the appeals panel.
- d. The appeals panel shall review the written record and receive written copies of the presentations at least ten days prior to the appeals meeting.
- e. Proceedings before an appeals panel are not of an adversary nature as typical in a court of law, but rather they provide an administrative mechanism for peer review of an accreditation decision about an educational Program.
- f. The Program may not amend the statistical or narrative descriptions on which the decision of the Training Committee was based in preparing for an appeal hearing. The file is considered "frozen" at that time with respect to the addition of any information not previously presented to the Training Committee. The appeals procedures limit the appeals panel's jurisdiction to clarification of information at the time when the adverse action was confirmed by the Training Committee. Information about the Program subsequent to that time may not be considered in the appeal. Furthermore, the appeals panel shall not consider any changes in the Program or descriptions of the Program that were not in the record at the time when the Training Committee reviewed the Program and confirmed the adverse action.
- g. Presentations shall be limited to clarifications of the record and to arguments which address compliance by the Program with the published standards for accreditation and the review of the Program according to the administrative procedures which govern accreditation of Programs. Presentations may include written and oral elements. The appellant may make an oral presentation to the appeals panel, but this presentation shall be limited to one hour.



- h. The appellant shall communicate with the appeals panel only at the hearing or in writing through the Chair of the Training Committee.
- i. The Program may submit additional written material within 15 days after the hearing. The intention to submit such material must be made known to the appeals panel at the hearing.
- j. The appeals panel shall make recommendations to the SSO Executive Committee as to whether substantial, credible, and relevant evidence exists to support the action taken by the Training Committee in the matter that is under appeal. The appeals panel will make recommendations as to whether there has been substantial compliance with the administrative procedures which govern the process of accreditation of the fellowship programs. The burden of proof shall lie with the appealing Program.
- k. The appeals panel shall submit its recommendation to the SSO Executive Committee within 20 days after receipt of additional written material or 20 days after the end of the hearing, whichever is later. The SSO Executive Committee shall act on the appeal at its next regularly-scheduled meeting.
- I. The decision of the SSO Executive Committee in this matter shall be final. There is no provision for further appeal.
- m. The Chair of the Training Committee shall, within fifteen (15) days following the final Executive Committee decision, notify the Program under appeal of the decision of the SSO.
- n. If the decision for probation is upheld, the process of removal from probation will begin with the submission of a plan of action to the Training Committee addressing major concerns from the prior site visit (see Enacting Probation policy).
- o. If the decision for probation is overturned, the probationary status will be removed immediately and accreditation status returned; however, accreditation will not be granted for more than 2 years and annual progress reports will be required <u>at a minimum</u> during that time.
- p. The appellant is fully responsible for the Appeal Fee of \$5,000.



3. Under exceptional circumstances, Programs can go from an approved status to unapproved status by immediate withdrawal of their accreditation by unanimous vote of the Training Committee. This decision would be in direct response to an egregious action by the training Program. When this occurs, Programs wishing to appeal such a decision would be subject to the same appeals process as detailed above.



#### Case Logging and Exit Survey

The SSO Training Committee is committed to ensuring that, upon completion of their fellowship, all fellows in SSO-approved breast fellowship programs are able to apply an integrated, interdisciplinary approach to the management of patients with benign and malignant breast diseases in a compassionate manner.

It is critical that all fellows are appropriately logging their operative cases and nonoperative experiences. This is the only way in which the Training Committee can objectively determine if the requirements are being met.

Fellows will also be given the opportunity to evaluate their program at the completion of their fellowship. This survey will allow fellows to provide honest feedback about their experience throughout their fellowship and will be emailed directly to the fellows. Data collected from the survey will not be routinely shared with programs, but will be used in the Training Committee's effort to continuously improve the fellowship experience. Survey data will be kept anonymous.

Prior to the issuance of the Certificate of Completion, the following must be submitted to the SSO by each fellow no later than August 15 of each year:

- Breast Oncology (SSB) Minimum Report from ACGME Case Log System (Please use Excel [.xls] format)
- Signed letter from program director attesting that minimum training requirements were met
- Completion of breast fellows survey

SSO staff will facilitate the distribution of the survey and collection of required documents. Failure to submit this required information or if the fellow's case logs are deficient may jeopardize your fellow's ability to receive a certificate at the completion of their fellowship. All certificates will be mailed directly to the fellow in September.



#### Policy on Granting Retroactive SSO Certificates & Changing Fellowship Complement

**Background:** The SSO Training Committee is committed to ensuring that any changes in fellowship complement enhance the educational environment of the training program. To that end, the SSO Training Committee has instituted the following procedures for requests for changes in fellowship complement.

Any request for an increase in the number of approved fellowship positions shall use the form available on the SSO's website, be signed by the Program Director, and be submitted to the SSO Training Committee. In the form, the Program Director must articulate the rationale for the complement increase, including how the complement increase will confer an educational benefit to current and future fellows. The Program Director must also provide revised schedules for clinical rotations and didactic activities based on the increase in fellow complement. A complement increase should not be requested for the purposes of case coverage or to increase manpower for service needs. If approved, the program will be required to provide the SSO Training Committee with a progress report in one year. Please note that requests for complement increases based solely on the service needs of the program will not be viewed favorably.

#### Policy:

- 1. Breast oncology fellowships may not award more SSO certificates than the number of SSO-approved fellowship positions within the program.
  - A. Candidates who matriculate into an SSO-approved breast fellowship program either 1) outside of the SSO matching process or 2) into a non-approved position at an SSO breast fellowship will NOT be eligible to receive an SSO certificate at the completion of their year of training. Candidates must participate in the SSO Breast Match to matriculate into an SSO-approved fellowship spot.
  - B. If an SSO-approved program does not fill all of its SSO-allocated fellowship positions in the Match, then it may fill this vacancy after the Match and that fellow will be eligible to receive a certificate if the Program Director informs the SSO Training Committee that they have taken this fellow into one of their unfilled SSO-approved positions.
- 2. In order to request an increase in fellowship complement, the Program Director must make the request in writing to the Training Committee at least three (3)



weeks prior to the October meeting (at the time of the annual Clinical Congress of the American College of Surgeons) in the same year that the match takes place. Any request for an increase of complement is limited to one (1) fellow. Requests may be considered at the March meeting at the time of the SSO Annual Cancer Symposium, but will not be enacted until the subsequent academic year's SSO Match.

- 1. It should be noted that requests for increases in complementmust include documentation of:
  - a) Historical case volumes to support an additional fellow;
  - Evidence of an organized educational curriculum and the educational rationale in support of the additional fellow position;
  - c) Detailed schedule that demonstrates how the additional fellow would integrate into the yearly schedule within the context of the other fellows and trainees.
- 2. If an increase in complement is granted, it will go into effect for the Match following the approval in complement increase.
- 3. A request for a decrease in the number of approved fellowship positions per year shall be in the form of a letter from the Program Director to the SSO Training Committee, outlining the rationale for the complement decrease and its anticipated duration. Depending upon the circumstances of the request, the SSO Training Committee may, at its discretion, schedule an off-cycle site visit of the program.
- 4. Certificates of completion of training in an SSO-approved fellowship training program will be granted by the Society for fellows who match into an approved training program, who are recommended by their Program Director at the completion of training, who submit an acceptable case log demonstrating that all requirements are met and have completed the Fellows Exit Survey.

For circumstances where an SSO-approved fellow must extend their fellowship due to family, medical, or personal issues or if they are in re-mediation, this policy does not apply. These circumstances however should be communicated directly to the Training Committee in writing, detailing the circumstances, potential trainee overlap and timing of training completion.

# Society of Surgical Oncology Breast Fellowship Program Policies

#### **Site Visits and Site Visitors Policy**

#### Site Visit and Visitors

The SSO Training Committee is committed to ensuring that each site visit is conducted in a professional, unbiased manner. The site visit team is typically comprised of one to two (1-2) Training Committee representatives and one (1) ASBS representative. The goal is to verify the information in the Program Information Database (PID) and to clarify any missing or unclear information by seeking to achieve consensus across all participants and other sources of information. A fee of \$2,000 is required with PID submission.

To ensure that each site visit is unbiased, site visitors are unable to conduct a site visit at an institution where they have previously been trained or have worked. SSO staff will facilitate to eliminate any additional potential conflicts. If a program has a concern with an assigned site visitor, please contact SSO staff.

#### Site Visit Report

The site visit report is developed by the site visitors and is presented at the next upcoming SSO Training Committee meeting. The Training Committee meets quarterly. Each site visit report, and subsequent Training Committee discussion, is confidential and will only be viewed by the Training Committee and SSO staff. A program may request their site visitor report, however, confidential comments from the site visitors to the Training Committee will be redacted. The final designation (approval, probation, or other designations) will be shared between the SSO Training Committee and the ASBrS, as a sponsoring organization to the Breast Surgical OncologyFellowship.

# Society of Surgical Oncology Breast Fellowship Program Policies

#### **Delayed Fellow Start Date**

- 1. After an SSO-approved breast fellowship program receives their match for the subsequent year, the breast fellowship program must ensure that the fellow starts their fellowship on August 1, the first day of their academic year.
  - a. If a fellow cannot start on August 1, the breast fellowship program must contact the SSO and Training Committee to alert them of a delayed start within 90 days of the match.
  - b. In this circumstance the program must submit a **letter on letterhead** detailing the rationale of the delayed start, the new start and end date for the fellow, and provide a rotation schedule to the Training Committee for approval. All information can be emailed to <a href="fellowship@surgonc.org">fellowship@surgonc.org</a>.
  - c. If the request for a delayed fellow start date is not approved by the Training Committee, then the program would be subject to the terms and conditions of the "Breast Fellowship Program Match, Withdrawal, and Violations Policy."
- 2. If a fellow cannot start their fellowship due to an extended delay, the fellow can be released from their binding match agreement with SSO Training Committee approval. If the fellow would like to participate in an SSO Breast Fellowship in a subsequent year, they must rematch through a new match cycle and submit a new application.