

# Core Curriculum for FMBS

## I. COGNITIVE EXPERIENCE

It is expected that the fellow In addition to the clinical and technical experience detailed below, will also participate in non-clinical educational endeavours. These activities must be documented and validated by the Program Director.

### A. Didactic Educational Sessions

The fellow must document that they participated in at least 80% of meetings. Online Sign-Off Sheet can be used for this required documentation. The didactic sessions may include ASMBS textbook of bariatric - Volume 1 & 2 review sessions, journal clubs, peer-review conferences, and resident teaching rounds. The following topics must be covered during the fellowship:

1. Epidemiology of Obesity
2. History of Bariatric Surgery
3. Physiology and Interactive Mechanisms in Morbid Obesity
4. Preoperative Evaluation of the Bariatric Patient
5. Psychology of the Morbidly Obese Patient
6. Essentials of a Bariatric Program
7. Preoperative Management of the Bariatric Patient
8. Laparoscopic Vs Robotic Vs Reduced Port / SILS Techniques
9. Laparoscopic Sleeve Gastrectomy
10. Other Restrictive Operations
11. Roux-En-Y Gastric Bypass
12. One Anastomosis Gastric Bypass
13. Other Malabsorptive Surgeries
14. Revisional Weight Loss Surgery
15. Managing Intraoperative and Postoperative Complications
16. Nutritional Considerations & Deficiencies
17. Obesity in Childhood and Adolescence
18. Outcomes of Bariatric Surgery
19. Role of Endoscopy in Bariatric Surgery
20. Documentation and Scientific writing
21. ERAS in Bariatric Surgery
22. Bariatric Emergencies
23. Special Considerations ( GERD, NASH, Hernia, etc)

Click here to purchase ASMBS Textbook of Bariatric Surgery - Volume I  
(<https://www.springer.com/in/book/9781493912056>)

Click here to purchase ASMBS Textbook of Bariatric Surgery - Volume II  
(<https://www.springer.com/in/book/9781493911967>)

### B. Audit Meeting Requirements

Fellows are expected to participate in at least quarterly morbidity and mortality, including quality improvement and peri-operative management meets. Participation must be documented.

### C. Research Requirements

Fellows are expected to conduct research and are expected to complete at least one clinical and/or research project during the fellowship and submitted to FMBS project director. The research project need to be presented in the OSSI national conference OSSICON or accepted for publication in the journal to which it will be submitted.

### D. Multidisciplinary Requirements

Fellows are expected to participate in regular bariatric multidisciplinary meets. They also must attend OSSICON during their fellowship tenure and at least one patient support group and one patient educational seminar every quarter.

## **II. CLINICAL AND TECHNICAL EXPERIENCE**

Fellows in the department are required to provide outstanding evidence based clinical care to bariatric patients while advancing the future of medicine through innovative research.

### **A. Surgical Operation Requirements**

In order to meet the designation of comprehensive training, fellows must be exposed to more than one type of weight loss operation and participate in at least 50 weight loss operations. The fellow should have assumed the role of primary surgeon in at least 10% of cases, defined as having performed the key components of the operation.

There should be a minimum of 10 intestinal bypass operations (Roux – En–Y gastric bypass or One Anastomosis Gastric Bypass / other bypasses); a combined total of at least 10 Restrictive operations (sleeve gastrectomy and/or restrictive procedures); 5 revisional procedures or complications; and exposure to and/or extensive teaching of bariatric-specific emergency procedures (leaks, bowel obstructions, internal hernias, intussusceptins, gastrointestinal haemorrhage and ulcers), as deemed adequate by the program director to establish competence in managing these complications. Fellows should also have an exposure to endoscopy (attested by the Gastroenterology Consultant).

### **B. Evaluation Requirements**

The fellow will participate in 25 patient preoperative evaluations, 25 postoperative in-patient management encounters, and 50 postoperative outpatient evaluations. All the evaluation requirement must be documented.

### **C. Performance Assessment Synopsis**

The Program Director will be responsible for conducting at least 2 fellow performance assessment interviews (theory & clinical) and provide the FMBS committee with outcome of the meeting.

## **III. ELIGIBILITY CRITERIA**

- Post MS / DNB General Surgery candidate with at least 2 years experience having sufficient skills in basic and intermediate laparoscopic surgery including fundoplication, herniaoplasty and stapled bowel anastomosis.
- Post MCh / DNB GI surgery having sufficient experience and skills in basic and intermediate laparoscopic surgery including fundoplication, herniaoplasty and stapled bowel anastomosis.
- International Fellow – Completion of the post graduation training in Upper GI Surgery having sufficient skills in basic and intermediate laparoscopic surgery including fundoplication, herniaoplasty and stapled bowel anastomosis.
- A fully completed application form with all necessary documents attached.
- Candidate must be a member of OSSI.

## **IV. FELLOWSHIP GUIDELINES**

- All certified "Center of Excellence" hospitals will be running one year clinical fellowship program every year.
- A fully completed application form along with supporting documents of adequate qualification and experience to be submitted online.
- Candidates will be applying with 2 choices of available centres. Once cleared, the candidate will be completing the course as per the core curriculum.
- The candidate is expected to submit his logbook online at regular intervals with monthly assessment of the program director. After the completion of the course, the FMBS committee will be assessing the logbook for final approval.
- The candidate will also be submitting his literature review and research articles online by the end of the

deadline after assessment from the project director.

- Successful candidates will be felicitated during the annual OSSICON

## **V. FELLOWSHIP PERIOD**

- A typical fellowship will be for one year duration. The announcement of candidate will be latest by 30 March for that calendar year
- The fellowship course will commence from 1 April - 31 March of the following year. A period of 15 days grace period will be allowed for candidate provided a valid reason has been intimated to the program director duly by email or post.
- A grace period of three months will be given for completion of any pending requirements if any additional correction is requested by the examiners after submission. The FMBS committee should be able to access the fellow's completed logbook and the final online evaluation sheets from the participating hospital no later than three months from the completion of the term.

## **VI. EXAMINATION**

- Examination will be held in the fourth quarter of the course period during annual conference OSSICON, and the exact date will be announced 3 months in advance.
- Examination will attract a fee structure which needs to be paid during examination application process once the dates are announced.

## **VII. FEE STRUCTURE**

- The fellowship will not attract any admission fee. However a non-refundable examination fees of Rs.25000 will be levied while applying for the examination.
- Repeat candidates need to re-apply for examination once the fellowship board approves his / her reappearance.
- The candidate will be withdrawing a minimum stipend of Rs. 60,000 per month during the course period.
- All other expenses related to stationaries, accommodation, food, travel and conferences will be borne by the candidate themselves.

For further queries and information, write to: [support@theossi.com](mailto:support@theossi.com)