The recent summer meeting of the America Board of Nuclear Medicine in South Carolina was a mixture of both the sweet and the sad for me. As I move into the role of Chair of the ABNM, I am excited to be working even more closely with our incredible new Executive Director, George Segall. However, we have now fully transitioned our ED position, and Henry Royal will no longer be sitting across from me in these meetings or on the other end of the line on our weekly conference calls. People often say it is an honor to work with Henry, but it has been more than that- it has been an incredible education. I think people watching the Board work from the outside can have no idea how hard Henry has worked to constantly urge progress in our specialty and to defend it with his great knowledge and diplomatic insight. I won’t go on because, fortunately, this is not a eulogy, and we will still be able to ask his advice without the use of a Ouija board!

We were thrilled to welcome our newest Board members (Drs. Dan Pryma, Erin Grady, Joanna Fair, and Heather Jacene) into full service. They are great additions, bringing a wealth of ideas and experiences to the group. As our diplomates face continued challenges to their practices, it is refreshing to include the perspective of younger professionals. Discussions at the meeting included ways to help our diplomates stay relevant in their practices, improve the MOC exam, making it more user friendly and applicable to every day work, and how to make the MOC SAMs (Self-Assessment Modules) process simpler.

Lifelong learning and Self-Assessment (LLSAP) is the second of four parts of Maintenance of Certification. Self-Assessment is an important part of learning because it informs a physician where his or her knowledge may be weak by comparison to peers, and indicates where self-guided focused learning may be helpful. The ABNM requires physicians to earn a minimum 5-year average of 25 CME AMA Category 1 credits per year, including 17.5 credits related to Nuclear Medicine, of which 8 credits must be self-assessment. Physicians may use their discretion as to what areas fall under the Nuclear Medicine umbrella. For example, critical topics in areas such as correlative imaging with MR or CT would certainly be correctly listed under Nuclear Medicine.

The ABNM accepts SAMs qualified by any member board of the American Board of Medical Specialties (ABMS). The ABNM website includes links to the SAM provided by SNMMI, RSNA, and ACR. In addition, the ABNM now accepts AMA PRA Category 1 Credit™, types 2 (enduring materials) and 3 (journal-based articles) for self-assessment credit, referred to as SA-CME. This category includes journal articles approved for CME credit, even if the articles have not been explicitly approved by ABNM or other ABMS member board, for self-assessment.

The ABNM is also developing a list of Key Articles to identify core knowledge for trainees and practicing physicians. The articles will also serve as the basis for approximately 30% of the content of the ABNM Certification Exam, and the Maintenance of Certification Exam. Additionally, the Key Articles will provide an opportunity for physicians to earn self-assessment credits from home or office, which will be especially helpful for physicians who do not have the time or the institutional financial support to attend professional meetings.

The ABNM is also working to improve the system whereby physicians earn self-assessment credit through attendance at live meetings. The requirements for earning self-assessment credit from ABNM are different than the
requirements for earning CME credit from an ACCME accredited organization. ABNM, for example, requires documentation of participation in a self-assessment educational activity, but does not define a minimum performance level, nor require physician-specific data from the organizer. ABNM is working to streamline the process for physicians and organizations to make self-assessment more valuable as well as more efficient and these changes should soon be evident.

Finally, ABNM continues to work closely with many other groups to strengthen our specialty and the prospects of our diplomats. This includes continued discussions with the ABR, exploring ways we might work together to accomplish these goals. Although times remain tough for all of us, I am glad to report the ABNM remains solid and viable, able to help serve as a voice for those we represent.