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Communications Committee Chair

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Diplomate Corner





Click on the links above to view/login to your ABNM Profile or to catch up on the latest Frequently Asked Questions regarding CertLink.

Support the ABNM by making a tax-deductible donation.



Upcoming Events



- September 8, 2018 In-Training Examination Enrollment Begins
- October 1-6, 2018 Certification and Maintenance of Certification Examination
- October 31, 2018 In-Training Examination Enrollment Deadline
 - November 30, 2018 Deadline to Enroll in CertLink
 - for Diplomates whose certification expires in 2022 or 2023 January 2, 2019 – New CertLink Cycle Begins
- **January 7 12, 2019** In-Training Examination Administered in USA/Canada
- **April 1, 2019** Application Period Begins for Certification and Maintenance of Certification Examination



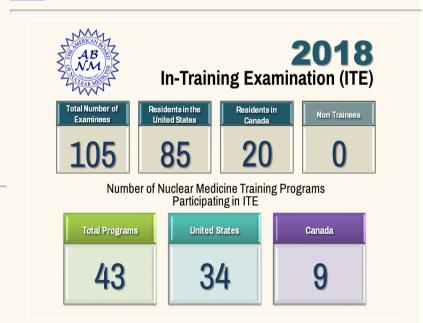
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Associate Executive Director

Message from the Associate Executive Director

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- CertLink Participant: As a reminder, you must be current with all MOC requirements in order to continue in the American Board of Nuclear Medicine's CertLink Like Hergram. Please login to your ABNM profile at www.abnm.org and confirm that you have completed all MOC parts.

 to view a quick outline of the MOC requirements.
- Keep an eye your email inbox, CertLink invoice are scheduled to deploy in September.



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From the Desk of the Chair

Challenges in the Practice of (Nuclear) Medicine

Daniel A Pryma, M.D., Chair, ABNM

Throughout our careers we enjoy many rewarding moments but also face challenges and obstacles. Many of the difficulties that we feel most acutely and personally are actually shared broadly throughout medicine. Whether related to turf battles, contracting, maintenance of

certification or insurance reimbursement, the challenges are broadly shared. A common thread in discussions of change in medicine today relate to financial pressures. Simply put, we all need to work harder today to maintain yesterday's compensation. These challenges are far from unique to nuclear medicine and are faced by all specialties and health systems in the United States. At the same time that there are downward pressures on per study reimbursement, the cost of delivering care continues to increase, leaving less margin.

Meanwhile, medicine continues to evolve with increasing rapidity. We are constantly provided with new tools to improve care for our patients. While this is one of the most rewarding aspects of a career in (nuclear) medicine, learning to apply these new tools takes time and effort. At a time when there is great strain on the resources we have for learning (i.e., available time and financial resources), we have a great deal to learn. Each of us must optimize our efforts within our constraints and the ABNM is committed to helping our diplomates with this. Conversely, the ABNM relies on the support of its diplomates in order to carry out its mission.

Each of the 12 directors of the ABNM is a practicing nuclear medicine physician; our work with the board is on a volunteer basis. We come from a variety of backgrounds and have varied practice patterns and locations. We are well aware of the challenges that ABNM diplomates face because we face them as well. We always consider these challenges when making board decisions. For example, we do all that we can to minimize the financial impact of ABNM certification for our diplomates. We are a small board with far fewer diplomates than most over whom to amortize our costs. Therefore, we take our financial responsibilities very seriously.

While fiscal discretion is critical, stagnation is not a viable option. In the face of a changing medical landscape, we do need to evolve and adjust. New programs and projects are costly. We cannot afford to get things wrong, neither can we afford to do nothing. We have great ideas, both from within the board as well as from your suggestions. While we cannot afford to implement them all, we do try to choose the most promising and come up with ways to test and refine them within strict cost constraints. We also try to leverage our membership in the American Board of Medical Specialties to share costs with the other member boards, as we have done with the CertLink pilot.

Through careers in nuclear medicine we have amazing opportunities to improve the lives of our patients. The ABNM exists to help enable its diplomates to continue to grow and improve the field and standing of nuclear medicine through positive impacts on patient care. It is our board. We all rely on the ABNM for certification and the ABNM relies on its diplomates for the financial support, input and energy to continue in its mission. We hope to optimize communication and engagement between the ABNM and the broad diplomate community to continue to help this field that we love to grow and evolve.

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Message from the Executive Director

ACMUI Considers Changes in Training and Education for Parenteral Therapy

George M. Segall, M.D., Executive Director, ABNM

As a result of "concerns of various stakeholders" the NRC Advisory Committee on the Medical Use of Isotopes (ACMUI) is considering whether the 700 hour training requirement to be

an authorized user for parenteral radionuclide therapy is "placing a hardship on patient access" to alpha and beta therapeutic radiopharmaceuticals.

In the February 19, 2018 draft report of the ACMUI Subcommittee on Training and Experience (click here to view) it was noted that there were two developments since the ACMUI last considered the training issue nearly 15 years ago: 1) FDA approval on January 26, 2018 of 177Lu-dotatate for treatment of neuroendocrine tumors, and the likely "considerable demand for this agent"; 2) the "precipitous decrease in the number of first-time candidates" sitting for the ABNM certification examination.

A follow-up draft report on July 5, 2018 (<u>click here to view</u>) recommended reconsideration of the existing pathways to authorized user status with certain caveats, including "Greater and broader stakeholder input is needed."

In a letter sent to the ACMUI on July 31, 2018 (<u>click here to view</u>), the ABNM expressed its strong belief that the current requirement for 700 hours of supervised training and experience should not be changed and that reducing the minimum requirement for 700 hours of supervised training and experience for unsealed radioisotope therapy raises concern for patient safety.

The ABNM took issue with the ACMUI concern with the number of candidates sitting for the 2016 certification examination as indicating a future shortage of authorized users. The number of initial ABNM certificates issued each year has been relatively constant from 1977 - 2015. The average number of certificates issued each year was 72 during this time (range 50 - 107). The ABNM issued 43 initial certificates in 2016, and 49 certificates in 2017. There are at least 3,591 active diplomates (not deceased or retired) at the present time.

The subcommittee draft interim report also noted a decrease in the number of ACGME accredited Nuclear Medicine training programs and residents from 57 programs with 161 residents in academic year 2007 – 2008, to 41 programs with 75 residents in 2017 – 2018.

The ABNM responded that the decrease in the number of programs and trainees is partly due to an increase in the number of Nuclear Medicine physicians who are also certified in Diagnostic Radiology by the American Board of Radiology (ABR). Certification by the ABR decreases the duration of Nuclear Medicine training required for ABNM certification from 36 months to 16 months, creating the appearance of decreasing numbers of residents, when it is the duration

of training that is decreasing. Contributing to this trend is the increasing availability of dual training pathways where residents training in Nuclear Medicine are counted as Diagnostic Radiology residents rather than Nuclear Medicine residents, due to the requirements of the ACGME and the ABR. The ABNM believes that dual training will result in better-trained physicians to meet the needs of patients in the era of molecular imaging and therapy. The ABNM sees no evidence that workforce issues have decreased patient access to care, and concern for potential future issues has not considered recent positive changes in Nuclear Medicine training.

The ABNM strongly believes that the current requirement for 700 hours of supervised training and experience should not be changed and asked the NRC to correct the errors in the number of trainees, which could reduce or end the concern about the number of authorized users available to provide these services.

The ABNM urges its diplomates to act to prevent the implementation of a change that has the potential to adversely affect patient safety, and poses an existential threat to Nuclear Medicine. The next meeting of the ACMUI will be September 20, 2018. Please send your comments to Christopher Palestro, M.D., Chair, ACMUI, care of Douglas.Bollock@nrc.gov













Message from the Associate Executive Director

Participation in CertLink™ Demonstrates a Commitment to High Quality Care

Leonie Gordon, M.D., Associate Executive Director, ABNM

Over these past few months ABNM has been very busy launching CertLink which has been very well received by all of our participating diplomates. This online learning tool, which uses adult learning theory, has been previously described in Tracers. It quizzes and reinforces knowledge to participating diplomates on a continuous basis at their convenience, using modern technology. ABNM requires that diplomates answer 9 new questions and up to 4 repeat questions (clones) every quarter. We believe that we are assessing the necessary knowledge every diplomate should know to practice nuclear medicine and ensures that we have the skills, training and current knowledge to provide quality patient care. Most questions have been mapped to a clinical problem, diagnostic or treatment knowledge, new advances or concepts that are current standard of practice. Each question has a key point and critique which is an explanation of the knowledge required to answer the question correctly. We also include a reference that is accessible by clicking on it during the learning experience. If a diplomate does not answer a question correctly, a very similar question (clone) may be sent at a later date to make sure that the knowledge gap has been filled in and proficiency is demonstrated now.

Diplomates often ask us how to prepare for CertLink. We believe that we are testing the skills you use daily in your practice and as long as you are keeping current with new developments and concepts in the field, keep reading relevant journal articles and maintaining CME you should perform well. Questions are image rich and we think you should be able to recognize image findings, create a differential diagnosis, and we test knowledge to include inquiries you may receive from technologists, residents or referring physicians in your everyday practice. Our patients expect us to know this and we hope that by participating in CertLink we continue to uphold the high standards of ABNM certification. We believe medical knowledge changes with time and participating in CertLink demonstrates your personal and public commitment to maintaining the standards of our specialty and providing high-quality care. We believe that all ABNM diplomates should be successful in CertLink.

















Message from the Communications Chair

Esma A. Akin, M.D., Communications Chair

The ABNM communicates with 3577 active and 1114 retired diplomates. Keeping in touch is challenging when people are overwhelmed with daily information received from multiple sources. The ABNM tries to keep communications to a minimum, and to keep messages clear and concise.

Some of the regular communications received by diplomates include:

- Tracers semi annual newsletter
- MOC dues invoices annual with quarterly email reminders if not paid
- Request for support annual

Diplomates also receive notices of new initiatives such as CertLink™, the longitudinal learning and assessment pilot program that was launched in January 2018. Diplomates who participate in CertLink get guarterly notices of new questions, as well as monthly reminders when questions have not been answered. Participants get periodic surveys to provide feedback that the ABNM uses to improve the program. Participants in 2018 will also receive a one-time registration fee notice in the last quarter of the year.

Diplomates with time-limited certificates who are not participating in CertLink receive annual notices beginning two years prior to the expiration date of their certificates with information on how to register for the Maintenance of Certification examination.

Nuclear Medicine residency program directors receive information about the In-training examination given to residents in January, and information about the certification examination given in October. These notices are also sent directly to residents and other qualifying individuals.

The ABNM also sends important messages directly to all diplomates, such as changes the NRC Advisory Committee on the Medical Use of Isotopes is considering in regards to the current NRC requirements for 700 hours of supervised training and experience for Authorized Users (AUs) of radioactive materials under 10 CFR 35.390 (see Message from the Executive Director in this issue of Tracers).

The ABNM publishes a quarterly article in the Journal of Nuclear Medicine Newsline that helps keep diplomates up to date. The ABNM also updates its website with useful information.

Diplomates are asked to uptake their contact information at least once a year by going to the ABNM website and logging into My Profile (https://www.abnm.org/account/profile/login). Diplomates have the option of opting out of all ABNM correspondence by checking a box.

The ABNM answers many emails from diplomates and other individuals sent to abnm@abnm.org, and answers daily phone calls (314.367.2225). Feel free to contact the ABNM anytime we can help.













Message from the MOC Committee Chair Update on CertLink Longitudinal Assessment Pilot Program

Ruth Lim, M.D., MOC Committee Chair

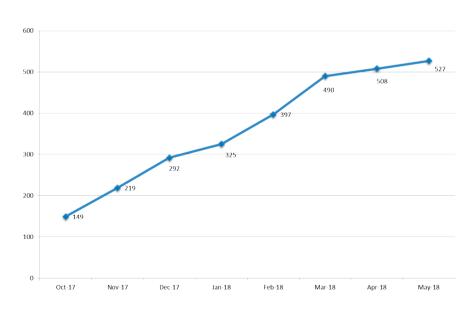
After a successful soft launch of our CertLink™ longitudinal assessment pilot program, the ABNM announced its full launch in April 2018. CertLink, developed for the ABMS Member Boards, periodically delivers high-quality, image-rich nuclear medicine questions with detailed

explanations and references directly to enrolled ABNM Diplomates. Longitudinal assessment with CertLink is being evaluated as an alternative to the proctored, secure MOC examination that is required of ABNM time-limited certificate holders every 10 years. CertLink is also a practical, easy-to-use tool for lifetime certificate holders to keep current and test their knowledge. The CertLink pilot program will continue for a total of 4 years.

ABNM Diplomates enrolled in CertLink have agreed to participate in surveys administered by the ABMS. The survey results obtained at the conclusion of the soft launch have provided valuable insight into the learning preferences of our ABNM Diplomates, including relevance of questions to their practice, quality of questions/images, user interface, and electronic device preferences. These survey results enable the ABNM to continue to refine and improve the longitudinal assessment experience of our Diplomates. This is what some of our Diplomates have to say thus far about CertLink:

"It is less stressful than regular MOC exam.... the information obtained immediately after taking the question is much more retained than taking many questions and not knowing what you got right.... I believe it will have a better impact on patient care."

CertLink Cumulative Number of Enrollees



"I think CertLink is a great tool for MOC as well as learning...For the most part the questions have been a good reflection of clinical practice.... I find myself looking forward to the questions."

"Explanations are clear and concise. I also utilize the references provided for additional information."

"...answering questions correctly reinforces the feeling that you are still 'running with the pack' instead of drifting away on your own out in private practice....getting questions wrong or answering with less confidence is a nice [way] to confront yourself with areas of weakness."

"Refreshed my memory on child abuse presentation on bone scans, typical ureterocele and MAG3.... Love it. A much better way of learning."

Eligible Diplomates can register for CertLink by visiting the <u>CertLink homepage</u>. Additional information regarding ABNM's CertLink program can be found on the <u>Frequently Asked Questions</u> page on the ABNM website.

- Diplomates with time-limited certificates expiring in 2022 or 2023 must enroll by December 1, 2018 to become eligible for a waiver for the MOC exam.
- Diplomates with time-limited certificates expiring after 2023 have no specific enrollment deadline yet but are encouraged to begin participating as soon as possible. The enrollment deadline for these diplomates will be announced during 2019.
- Diplomates with time limited certificates that expire prior 2022 who have not enrolled in Certlink will need to take the MOC exam.
- Diplomates with lifetime certificates may enroll at any time.

There is no difference in cost between participating in CertLink versus taking the MOC examination for Diplomates who are currently participating in MOC. During the pilot period, CertLink is being offered as an alternative to the MOC examination. You may take the MOC examination instead of participating in CertLink. If you are not currently participating in MOC and would like to enroll in CertLink, please visit the <u>FAQs</u> page. All Diplomates are encouraged to participate in CertLink, regardless of certificate expiry date or current MOC status.

For a preview of the CertLink experience, this series of short videos introduced by Dr. Leonie Gordon provides a detailed overview of the CertLink platform, from how to create a support ticket to answering assessment questions. The ABNM would like to thank all of our CertLink participants for their support in this exciting pilot program!









SNMMI Newsline: ABNM Support for **Research During Training**

George M. Segall, M.D., Executive Director, ABNM

Reprinted with permission J Nucl Med 2018 59:16N

Three years of nuclear medicine training in an Accreditation Council for Graduate Medical Education (ACGME) – accredited residency program has been the traditional pathway leading to American Board of Nuclear Medicine (ABNM) certification. However, an increasing number of residents are combining nuclear medicine training with other specialty training, most commonly diagnostic radiology. The ABNM supports all pathways leading to dual certification by the ABNM and another member board of the American Board of Medical Specialties (ABMS). These pathways have been described previously in The Journal of Nuclear Medicine (1).

Combined training leading to dual certification results in highly skilled clinicians who are well prepared for practice that includes hybrid imaging (SPECT/CT, PET/CT, and PET/ MR), molecular imaging, and theragnostics. Combined training requires 1 year of preparatory clinical training (internship), plus a minimum of 4–5 years of residency training. This training is often followed by another year of subspecialty fellowship training. These training pathways have a strong clinical emphasis because of the formidable amount of knowledge and skills that must be acquired. Very little time is dedicated for research. Without young professionals trained in research, the United States will fall behind the rest of the world in making discoveries and developing new technologies that will advance nuclear medicine and molecular imaging. The ABNM is considering establishing a new research pathway to meet this challenge.

The ABMS includes 24 member boards. Ten of those boards currently support and encourage research during residency training. The training models differ but generally require that at least 25% of training time be spent in research. The American Board of Radiology (ABR) Holman Research Pathway in Radiation Oncology is an instructive model. Residents in this pathway must have 1 year of preparatory clinical training (PGY-1), which includes at least 9 months of direct patient care. During the next 4 years (PGY2-5), residents must have 27 months of clinical training, including 350 simulations, instead of the usual 36 months and 450 simulations. During these 4 years they are given 18–21 months of research time, with 20% of this time devoted to clinical training.

The ABNM is reviewing the research training models of other ABMS member boards and is developing a model for trainees who are primarily interested in an academic career in nuclear medicine and molecular imaging. One possibility is to give physicians with a doctorate degree (PhD or equivalent) in the physical or biological sciences 1 year of training credit, so that they may be eligible for ABNM certification with 2 years of nuclear medicine residency training. Another possibility, for physicians without a doctorate degree, would be to increase the amount of research time currently permitted during 3 years of ACGME accredited residency training from 6 months to 12 months, or to 18 months with 30% of this time devoted to clinical training. The number of trainees interested in a research pathway and the number of ACGME accredited nuclear medicine programs capable of offering this pathway are likely to be

small, but the ABNM believes that the number of trainees and programs interested in a research pathway would make it viable.

One of the challenges in developing a research pathway during nuclear medicine residency training is securing funding for trainees. The ABNM will work with the ACGME Nuclear Medicine Review Committee to develop a research pathway that would be an approved option for accredited programs, which could permit funding through the usual mechanisms. Other funding possibilities are available. The National Institutes of Health offer a funding opportunity called Stimulating Access to Research in Residency (R38). The program provides support to institutions for up to 2 years of research conducted by resident/ investigators in structured programs for clinician/investigators with defined program milestones. The overall goal of the program is to provide clinicians with in-depth research experiences early in their careers, in order to recruit, retain, and accelerate the independence of a pool of clinician/investigators with both clinical and research experience necessary to perform basic, clinical, and/or translational research. Further information is available at https://grants..nih.gov/grants/guide/rfa-files/RFA-HL-18-023.html (2).

The mission of the ABNM is to serve the public through assurance of high-quality patient care by establishing standards of training, initial certification, and continuing competence of physicians providing nuclear medicine diagnostic and therapeutic services. Support for a research pathway is an expansion of the mission, which will ensure that young professionals trained in the United States continue to make new discoveries and technological advances that will advance the specialty and ultimately benefit patients.

REFERENCES

- 1. Segall GM, Grady EE, Fair JR, Ghesani MV, Gordon L. Nuclear medicine training in the United States. J Nucl Med. 2017;58:1733–1734.
- 2. National Institutes of Health. Overview information. Stimulating Access to Research in Residency (StARR). (R38). Part One. Available at: https://grants.nih.gov/grants/guide/rfa-files/RFA-HI-18-023.html.







www.abnm.org

Dear CertLink Participant:

We are pleased that you are participating in the American Board of Nuclear Medicine's CertLink™ Pilot Program. As a reminder, **you must be current with all MOC requirements** in order to continue in the CertLink program. Please login to your ABNM profile at www.abnm.org and confirm **that you have completed all MOC parts as outlined below**:

Edit Contact Info

UPDATE CONTACT INFORMATION - Update all parts of My Profile including your contact information at least once a year.

Invoices

PAY ANNUAL MOC INVOICE - On the My Profile section click "Invoice". Here you will see a list of invoices. To pay your MOC invoice click on the invoice ID number. You will be given the option to pay by credit card or check

MOC - Part 1

PROFESSIONALISM AND PROFESSIONAL STANDING - Annually, verify your NRC authorized user status, medical license(s), and current work experience. ABNM's Policy on professionalism is described in a separate document. Currently, professional standing is documented by an unrestricted medical license.

MOC - Part 2

LIFELONG LEARNING AND SELF-ASSESSMENT -The ABNM has made it easier for diplomates to fulfill this requirements and has added a checkbox to the My Profile page on the ABNM website that allows diplomates to attest they meet the requirements.

MOC - Part 3

ASSESSMENT OF KNOWLEDGE, JUDGMENT AND SKILLS - You are currently enrolled in CertLink. During the pilot period, CertLink is being offered as an alternative to the MOC examination.

MOC - Part 4

IMPROVEMENT IN MEDICAL PRACTICE -The ABNM has also made it easier for diplomates to fulfill this requirements by adding a checkbox to the My Profile page and allowing diplomates to attest they meet the requirements

The deadline for updating your profile and bringing all components of your profile current is November 30, 2018. If you have any questions, please contact the ABNM office via email at certlink@abnm.org



