

# **ACGME Nuclear Medicine RRC: the *Who*, the *What*, the *How & Why***

---

Darlene Metter MD FACR  
Chair, Nuclear Medicine RRC  
SNM: New Orleans, LA  
June 17, 2008

# Learning Objectives

---

- ❑ Understand the NM RRC organizational composition (the **Who**)
- ❑ Understand its functions (the **What & Why**)
- ❑ Understand the NM RRC program review process (the **How**)
  - to include review of the new PIF

# NM RRC: the *Who*

- ❑ 1 of 28 ACGME Review Committees
- ❑ ACGME: established in 1981
  - *Mission:* Improve health care by assessing and advancing resident education through accreditation
  - accredits > 8,000 programs

# NM RRC: the *Who*

- ❑ RRC: appointed by AMA, specialty board, national specialty org
- ❑ 6 members (6 year term)
  - AMA, ABNM, SNM
  - 1 resident member (2 year term)
  - meets May & Nov
  - fiduciary responsibilities & conflict of interest

# NM RRC: the *Who* Current Members

---

- Darlene Metter, MD (SNM) - Chair
- Leonie Gordon, MD (AMA) – Vice-Chair
- Christopher Palestro, MD (SNM)
- Harvey Zieffman, MD (ABNM)
- Anthony Parker, MD (ABNM)
- Joanna Fair, MD PhD – resident member
- Michael Graham, MD PhD - alternate

## NM RRC: the *What*

- sets training requirements with periodic review and revision (min q 5 yrs)
- evaluate and accredit programs (2007-08)
  - 55 programs
  - 166 residents/195 positions
  - site visits
  - sets program status and resurvey cycle

# NM RRC: the *What* & the ABNM

## □ *NM RRC*: (ACGME)

- set program requirements
- monitors & accredit programs

## □ *ABNM*: (ABMS)

- certifies: develops & administers the certifying exam
- issue certificates

# NM RRC: the *How*

- ❑ NM RRC assesses if a program is in *substantial compliance* with the institutional, specialty specific and & common training requirements
- ❑ *Process:*
  - a. *PIF*: PD attestation to program compliance
  - b. *Site visitor report*: verify & clarify required documents including the PIF
  - c. *Site visitor interview*: PD, faculty, DIO, residents
  - d. *ACGME resident survey*

# NM RRC: the *Why*

## □ *Accreditation Status:*

- Continued
- Initial
- Withheld
- Probationary
- Withdrawal

## □ *Accreditation Cycle:* 1 - 5 yrs

# The *PROCESS*

---

- PIF
- Site visitor report
- Site visitor interview
- ACGME resident survey

# The *PROCESS*

---

- PIF
- Site visitor report
- Site visitor interview
- ACGME resident survey

# Program Information Form (PIF)

---

- 2 components:
  - Common
  - Specialty specific

# Common PIF

---

- Accreditation info
- Participating sites
- Faculty/teaching staff
- Resident appointments
- Evaluations
- Resident duty hours: monitoring process *must* be documented

# Specialty Specific PIF

## ❑ *COMPETENCY-BASED*

### ❑ *Patient Care:*

- *gives the RC info on scope of practice*
- listing of adult and pediatric imaging and therapy cases per site
  - + listed by CPT codes

**RESIDENCY REVIEW COMMITTEE FOR NUCLEAR MEDICINE**  
 515 N State, Ste 2000, Chicago, IL 60610 • (312) 755-5000 • www.acgme.org

**SPECIALTY SPECIFIC PROGRAM INFORMATION FORM**

**I. PATIENT CARE**

**A. Adult Diagnostic Nuclear Imaging Studies**

	CPT Codes	Site #1	Site #2	Site #3	Site #4
<b>THYROID AND ENDOCRINE</b>					
1. Thyroid Uptake and Thyroid Imaging	78000-78011				
2. Thyroid Carcinoma Metastases Imaging	78015-78018				
3. Parathyroid Imaging	78070				
4. Adrenal Imaging	78075				
5. Other Endocrine	78099				
TOTALS:					
<b>HEMATOLOGIC</b>					
1. Bone Marrow Imaging	78102-78104				
2. Spleen Imaging, Platelet Survival	78185-78191				
3. WBC Localization Imaging	78192-78193				
4. Lymphatic System Imaging and Sentinel Node Imaging	78195				
TOTALS:					
<b>GASTROINTESTINAL</b>					
1. Liver and Spleen Imaging	78201-78220				
2. Hepatobiliary Imaging	78220-78223				
3. Gallium Citrate					

# Specialty Specific PIF

- ❑ *Medical Knowledge: Basic Science*
  - *gives RC info on how the program complies with the basic science requirements*
  - list basic science hours/year (lecture and lab)
  - provide recent basic science schedule
  - *diagram a typical weekly schedule*

**II. MEDICAL KNOWLEDGE**

**A. Basic Science**

1. Instruction that focuses on physical principles, computer applications instrumentation, or techniques of measurement and quantification should be listed under the subheading of BASIC SCIENCE

Basic Science	Lecture Hrs	Lab. Hrs	Total Hours per Academic Year
Physical Science and Instrumentation			
Radiation Biology & Radiation Protection			
Computer Science			
Mathematics and Statistics			
Computer Processing of Clinical Images			
Radionuclide Chemistry and Radiopharmacy			
<b>Total Basic Science Hours</b>			

2. Provide a complete Basic Science didactic schedule (conferences and lectures) for the most recent academic year. The schedule must be complete and accurate, and must provide the title/topic of each session, date, presenter name.

Title/Topic	Date	Presenter Name

3. Provide a description of the Basic Science didactic schedule by diagramming a typical weekly schedule of these conferences with a brief textual explanation.

Time	Monday	Tuesday	Wednesday	Thursday	Friday
7:00 a.m.					
8:00 a.m.					
9:00 a.m.					
10:00 a.m.					
11:00 a.m.					
12:00 p.m.					
1:00 p.m.					
2:00 p.m.					
3:00 p.m.					
4:00 p.m.					
5:00 p.m.					

# Specialty Specific PIF

- ❑ Medical Knowledge: *Clinical*
  - categorize hours/year (lecture and lab)
  - provide recent schedule (title, presenter, date, hours)
  - **diagram a typical month**
  - explain resident participation
  - *Other*: journal club, resident lecture, resident administrative conferences (i.e., QA, radiation safety)

**B. Didactic and Clinical**

Time in supervised clinical training or clinical conferences should not be included in this tabulation. Instruction that deals with biologic principles, in vivo tracer kinetics and clinical applications should be tabulated under the CLINICAL subheading.

Clinical	Lecture Hours	Lab. Hours	Total Hours per Academic Year
Nuclear Imaging			
CNS			
Cardiac			
Pulmonary			
GI			
Infection			
Endocrine			
Musculoskeletal			
Hematology/Oncology			
Renal			
PET: Technical aspects & instrumentation			
Therapy of Hyperthyroidism			
Therapy of thyroid cancer			
Therapy with radiolabeled antibodies			
Other radionuclide therapy (specify)			
In Vitro Assays (Methodology and application) GFR, Schilling Test, etc.			
In Vivo Measurement (Methodology and application) thyroid uptake, bone density, etc.			



2. Provide a description of the clinical didactic lectures and clinical case conferences listed above, by diagramming a typical monthly schedule of these conferences (a sample schedule is provided at the end of this document) with a brief textual explanation.

Time	Monday	Tuesday	Wednesday	Thursday	Friday
7:00 a.m.					
8:00 a.m.					
9:00 a.m.					
10:00 a.m.					
11:00 a.m.					
12:00 p.m.					
1:00 p.m.					
2:00 p.m.					
3:00 p.m.					
4:00 p.m.					
5:00 p.m.					
7:00 a.m.					
8:00 a.m.					
9:00 a.m.					
10:00 a.m.					
11:00 a.m.					
12:00 p.m.					
1:00 p.m.					
2:00 p.m.					
3:00 p.m.					
4:00 p.m.					

**APPENDIX B BIBLIOGRAPHY**

List no more than 10 representative publications from the past three years by members of the nuclear medicine...



**SAMPLE MONTHLY CLINICAL CONFERENCES**

Time	Monday	Tuesday	Wednesday	Thursday	Friday
7:00 a.m.					
8:00 a.m.	8-9 NM Conf. (1)*			8-9 NM Conf. (1)	
9:00 a.m.					
10:00 a.m.					
11:00 a.m.					
12:00 p.m.		12-1 Rad Onc Conf. (2)	12-1 Endo Conf. (3)		
1:00 p.m.					
2:00 p.m.					
3:00 p.m.		3-4 PET Conf. (1)			
4:00 p.m.					
5:00 p.m.					
7:00 a.m.					
8:00 a.m.	8-9 NM Conf. (1)*			8-9 NM Conf. (1)	
9:00 a.m.					
10:00 a.m.					
11:00 a.m.					
12:00 p.m.					
1:00 p.m.					
2:00 p.m.					
3:00 p.m.					
4:00 p.m.					
5:00 p.m.					
7:00 a.m.					
8:00 a.m.	8-9 NM Conf. (1)*			8-9 NM Conf. (1)	
9:00 a.m.					
10:00 a.m.					
11:00 a.m.					
12:00 p.m.			12-1 Endo Conf. (3)		12-1 Neuro Sci Conf. (3)
1:00 p.m.					
2:00 p.m.					
3:00 p.m.					
4:00 p.m.					
5:00 p.m.					
7:00 a.m.					
8:00 a.m.	8-9 NM Conf. (1)*			8-9 NM Conf. (1)	
9:00 a.m.					
10:00 a.m.					

# Specialty Specific-PIF

- ❑ Medical Knowledge: *Organization*
  - Goals & Objectives (submit example)
  - distributed to faculty: pre-rotation, annual, etc
  - describe organization of educ prog
  - explain graduated resident responsibility & supervision

# Specialty Specific-PIF

- ❑ Medical Knowledge: *In-vivo training*
  - explain didactic instruction & practical experience (including PET)
  - explain interdepartmental collaboration
  
- ❑ Medical Knowledge: *Therapy training*
  - explain didactic training: physics, radiobiology, radiation safety
  - describe resident participation and follow-up
  - explain interdepartmental collaboration

# Specialty Specific-PIF

- ❑ Medical Knowledge: *Non-imaging training*
  - RP, immunology principles, absorption, elution, dilution
  - explain interdepartmental collaboration
  
- ❑ Medical Knowledge: *Pediatrics*
  - describe the pediatric training experience

# Specialty Specific-PIF

- ❑ **Medical Knowledge: *Quality Assurance***
  - explain resident training & participation in quality management and improvement
  - RP, instrumentation, NRC, JCAHO
- ❑ **Medical Knowledge: *Research***
  - describe physical space & facilities
- ❑ ***Resident Duty Hours*: must comply**
  - describe work hrs, call, weekend, and on-call faculty supervision
  - explain how program deals with the impaired resident

# Specialty Specific-PIF

- ❑ **Practice-Based Learning & Improvement:**  
4 items
- 1) “Describe one learning activity in which residents will engage to identify strengths, deficiencies, & improvement goals: identify and perform appropriate learning activities to achieve self-identified goals (life-long learning).”
  - i.e. personal learning plans

# Specialty Specific-PIF

## □ Practice-Based Learning & Improvement:

- 2) “Describe one learning activity in which residents will engage to develop the skills needed to use information technology to locate, appraise, and assimilate evidence from scientific studies and apply it to their patient’s health problem.”

- i.e. journal club, formal lecture presentation

# Specialty Specific-PIF

## □ Practice-Based Learning & Improve:

- 3) “Give one example of a planned QI activity or project in which at least one resident will demonstrate an ability to analyze, improve & change practice or patient care. Describe planning, implementation, evaluation, and provisions of faculty support & supervision.”
  - i.e. PQI project – i.e. pt satisfaction survey (PDSA: Plan-Do-Study-Act, 2 wk cycle)

# Specialty Specific-PIF

## □ Practice-Based Learning & Improve:

- 4) “Describe how residents: a) develop teaching skills necessary to educate pts, families, students, other residents; b) teach pt, families, others; c) receive and incorporate formative evaluation feedback into daily practice.”
  - i.e. present case conferences and lectures to radiology residents or interdepartmental conference with performance evaluations; multi-source surveys/patient and families

# Specialty Specific-PIF

- ❑ **Interpersonal & Communication Skills** (3 items)
  - 1) “Describe one learning activity in which the resident will develop competence in communicating effectively with patients and families across a broad range of socioeconomic and cultural backgrounds, with physicians, other health care professionals, and health related agencies.”
    - i.e. radionuclide therapy (consent, “time out”), interdisciplinary conference presentation; health fairs

# Specialty Specific-PIF

## ❑ Interpersonal & Communication Skills:

2) “Describe one learning activity in which residents will develop their skills & habits to work effectively as a member/leader of a health care team or other professional group: identify the team members, responsibilities, how team members communicate to accomplish responsibilities.”

- i.e.. City wide mass casualty drill, QI committee, radiation safety committee

# Specialty Specific-PIF

## ❑ Interpersonal & Communication Skills:

- 3) “Explain (a) how the completion of comprehensive, timely and legible medical records will be monitored and evaluated, and (b) the mechanism that will be used for providing residents feedback on their ability to competently maintain medical records.”
  - i.e. record or report review

# Specialty Specific-PIF

## □ Professionalism (3 items)

- 1) Describe at least one learning activity, other than a lecture, by which residents will develop a commitment to carrying our professional responsibilities and an adherence to ethical principles.”
  - i.e. participation in MOC; peer review; patient confidentiality/HIPPA

# Specialty Specific-PIF

## □ Professionalism:

- 2) “How will your program promote professional behavior by the residents and faculty?”
  - i.e. modeling; multi-source feedback; encourage involvement in organized medicine; teaching activities (local, state, regional, national)
- 3) “How will lapses in these behavior be addressed?”
  - i.e. direct confrontation and evaluation

# Specialty Specific-PIF

## ☐ Systems-Based Practice (SBP) (2 items)

- 1) “Describe the learning activities through which residents will achieve competence in the elements of SBP; work effectively in various health care delivery settings and systems; coordinate patient care within the health care system; incorporate considerations of cost-containment and risk-benefit analysis in patient care; advocate for quality patient care & optimal patient care systems & work in inter-professional teams to enhance patient safety and care quality.”

- i.e. M&M; multi-disciplinary conferences; interdepartmental collaboration of patient care; billing & coding

# Specialty Specific-PIF

## ❑ Systems-Based Practice (SBP):

2) “Describe an activity that will fulfill the requirement for experiential learning in identifying system errors”

- i.e. member of a GME Internal review committee, CQIT, QA, or QRM committee (RCA)

# The *PROCESS*

---

- PIF
- Site visitor report
- Site visitor interview
- ACGME resident survey

# Site Visitor Report & Interview

---

- ❑ Verify and clarify PD responses in the PIF
- ❑ Item documentation and clarification
- ❑ Face-to-face confirmation with PD, faculty, resident, department chair, DIO, others
- ❑ Other: clarification of resident survey

# The *PROCESS*

---

- PIF
- Site visitor report
- Site visitor interview
- ACGME resident survey**

# ACGME Resident Survey

- **Purpose:** *monitor resident's clinical education with questions on their clinical and educational experience, duty hours and the competencies*
  - for site visitor interview to focus questions to verify and clarify resident survey (especially non-compliant areas)
  - i.e., if resident survey remote from site visitor report, non-compliant responses may have been corrected; misunderstood responses

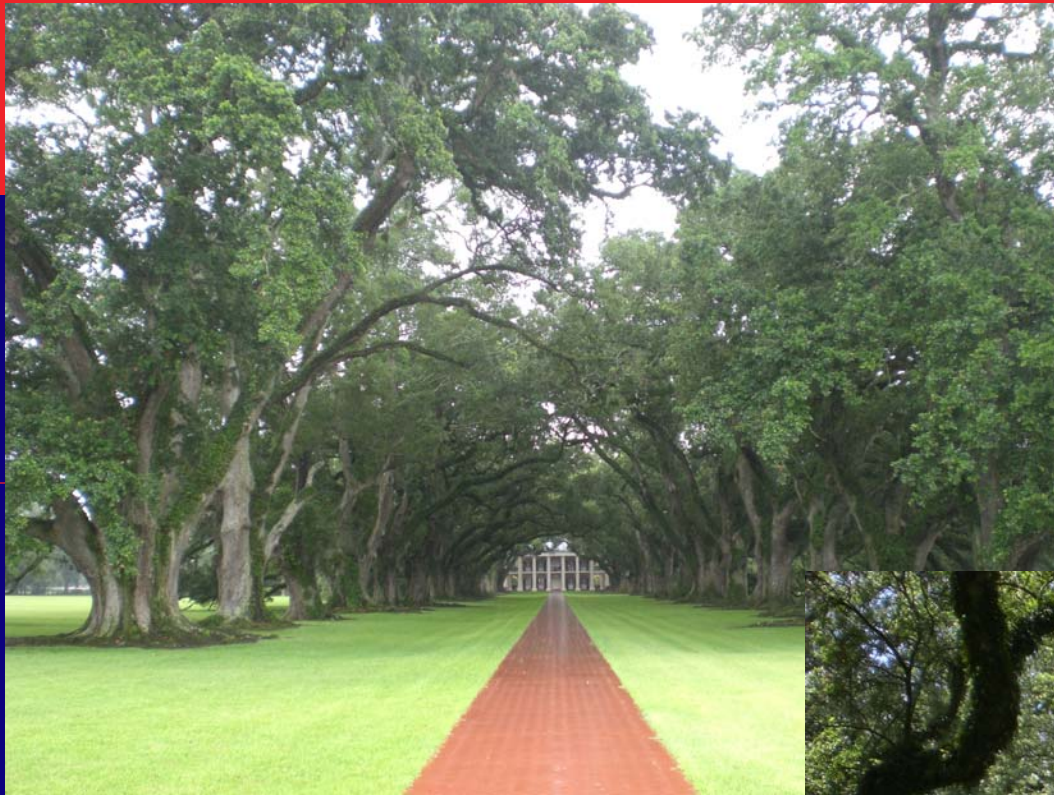
# ACGME Resident Survey

- ❑ program pre-notification, not tied to site visit
- ❑ Jan-June (over next 3 yr)
- ❑ on ACGME website; password protected
- ❑ aggregate program data; 12 min
- ❑ results available:
  - DIO and PD: all core and subspecialty with  $\geq 4$  residents, 70% compliance
  - Site visitor & RC: 70% compliance

# NM RRC Summary

---

- ❑ Reviewed the **Who**: the organizational composition
- ❑ Reviewed the **What & Why**: its functions
- ❑ Reviewed the **How**: the program review process
  - with a focused review of the new PIF



# Oak Alley Plantation