AMERICAN BOARD OF NUCLEAR MEDICINE INFORMATION, POLICIES, AND PROCEDURES, 1976

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HISTORY AND STRUCTURE

The American Board of Nuclear Medicine (ABNM) is the first Conjoint Board to be established under provisions of the "Essentials for Approval of Examining Boards and Medical Specialties" of the American Board of Medical Specialties. As such, it is a Conjoint Board of the American Board of Internal Medicine, the American Board of Pathology, and the American Board of Radiology, and it is also sponsored by the Society of Nuclear Medicine.

On the recommendation of the Liaison Committee for Specialty Boards, the American Board of Medical Specialties and the Council on Medical Education of the American Medical Association approved the application of the proponents of the ABNM on June 19, 1971. The Board was formally incorporated on July 28, 1971, and its first organizational meeting was held on October 23, 1971.

The Board was established to set educational standards and to evaluate the competence of individuals in nuclear medicine. It has responsibility for establishing requirements for certification, for conducting examinations leading to certification in nuclear medicine, and for issuing certificates to those who fulfill its requirements.

The Board consists of 12 members, 3 of whom are appointed by the American Board of Internal Medicine, 3 by the American Board of Pathology, 3 by the American Board of Radiology, and 3 by the Society of Nuclear Medicine. Each member of the Board, unless elected to fill an unexpired term, serves for a term of 3 years but may be nominated and elected for a second term. The officers of the Board are a Chairman, a Vice Chairman, a Secretary, and a Treasurer. The terms of office are one year, and officers may be re-elected.

The Board has certified 2,070 individuals on the basis of the first four examinations, given in 1972, 1973, 1974, and 1975.

DEFINITION OF SPECIALTY

Nuclear Medicine is defined as that specialty of the practice of medicine dealing with the diagnostic, therapeutic (exclusive of sealed radiation sources), and investigative use of radionuclides.

PURPOSES OF THE BOARD

The primary purpose of the Board, and therefore its most essential function, is the protection of the public interest through the establishment and maintenance of standards of training, education, and qualification of physicians rendering care in nuclear medicine to the people of the United States. The Board contributes to the improvement of health care in the United States and carries out this purpose by (A) establishing requirements of graduate training related to examinations given by the Board; (B) influencing the standards required of hospitals and institutions that provide such graduate training; (C) aiding in the assessment and accreditation of programs in hospitals and institutions providing graduate training; (D) assessing the credentials of candidates for the examinations of the Board; (E) conducting an examination process to determine the competence of candidates for certification and recertification by the Board; (F) granting and issuing certificates in nuclear medicine to voluntary applicants who have been found qualified by the Board; and (G) maintaining a registry of holders of such certificates to serve the medical and lay public by preparing and furnishing lists of practitioners who have been certified by the Board.

SIGNIFICANCE OF CERTIFICATION

Certification in nuclear medicine by the American Board of Nuclear Medicine certifies that the diplomate is qualified to practice as a specialist in all aspects of clinical and laboratory nuclear medicine, including, but not limited to, radiobioassay, in vitro and in vivo measurements, nuclear imaging, and

therapy with unsealed radionuclides. The certificate does not confer on any person legal qualifications, privileges, or license to practice medicine or the specialty of nuclear medicine. The Board does not purport to interfere with or limit the professional activities of any licensed physician.

REQUIREMENTS FOR CERTIFICATION IN NUCLEAR MEDICINE

General requirements for each candidate. Assurance that the applicant represents himself to be a specialist in nuclear medicine.

General professional education. Graduation from a medical school approved by the Council on Medical Education of the American Medical Association or from a school of osteopathy. If the applicant is a graduate of a medical school outside the United States or Canada, he must be screened with approval by an agency designated by the Executive Committee.

Preparatory post-doctoral training. Each sponsoring Board shall specify a preparatory post-doctoral training program, one of which must be successfully completed before a candidate can enter an approved residency for special training in nuclear medicine. The remaining one year of required post-doctoral, non-nuclear medicine training may be interspersed with the two years of nuclear medicine training. Preparatory programs are:

1. Internal Medicine: Completion of at least two years of general internal medicine (with approval of the director of the second year of training and with twenty-four months of primary patient care responsibility) in programs approved by the Council on Medical Education of the American Medical Association. The American Board of Internal Medicine recommends three years of training in general internal medicine, and the achievement of the diplomate certificate or qualifying certificate of the American Board of Internal Medicine.
2. Pathology: Completion of two years of training in an approved residency program in either anatomic or clinical pathology.
3. Radiology: Completion of two years of training in an approved training program in radiology and allied sciences.
4. Completion of a preliminary educational program in a medical specialty area other than the three designated above which is acceptable to one of the sponsoring boards and the American Board of Nuclear Medicine.

Special post-doctoral training. After completion of the preparatory post-doctoral training programs, there shall be a two-year formal residency training program in nuclear medicine in a nuclear medicine residency training program recognized and approved by the American Board of Nuclear Medicine and the Council on Medical Education of the American Medical Association as competent to provide a satisfactory training in nuclear medicine. This period of special training shall be as the American Board of Nuclear Medicine shall determine from time to time.

The two-year formal residency training program in nuclear medicine must include:

1. A minimum of eighteen months of training in clinical nuclear medicine, which will include, but not be limited to, radiobioassay, in vitro and in vivo measurements, nuclear imaging, and therapy with unsealed radionuclides.
2. Training in allied sciences which must include: medical nuclear physics, radiation biology, radiation protection, instrumentation, radiopharmaceutical chemistry, statistics; and may also include pathology, physiology, electronics, and other basic sciences associated with nuclear medicine. The time spent in training in allied sciences may be spaced throughout the period of training in nuclear medicine in a manner that does not exceed six complete months of training or may be incorporated in whole or in part in the period of preliminary training.

Patient care responsibility. Candidates for certification in nuclear medicine will have the equivalent of at least two years training in which the primary emphasis is on the patient and his clinical problems. This minimum period may be spaced throughout the entire post-doctoral training but should be of sufficient duration for the trainee to become knowledgeable in the aspects of clinical medicine relevant to nuclear medicine, including patient care.

Alternative training requirements (to remain in effect for a period of five years after the Board is established, i.e., through 1976.)

1. An internship and ten years experience in nuclear medicine.
2. An internship, one year approved residency training in internal medicine, pathology, or radiology, and five years experience in nuclear medicine.
3. Certification by an American specialty board with one year training in nuclear medicine or three years experience in nuclear medicine.
4. An internship plus one year of residency and two years training in nuclear medicine.

Canadian training. Physicians who satisfactorily complete training in nuclear medicine programs approved by the Royal College of Physicians and Surgeons of Canada or the Professional Corporation of Physicians of Quebec are eligible for admission to ABNM certifying examination.

APPROVED RESIDENCY TRAINING PROGRAMS

Lists of approved residency training programs in nuclear medicine can be found in the *Directory of Approved Internships and Residencies*, published annually by the American Medical Association, or by contacting: Secretary, Residency Review Committee for Nuclear Medicine, American Medical Association, 535 North Dearborn Street, Chicago, Illinois 60611. A list of currently approved residency training programs in nuclear medicine is attached.

SCOPE OF EXAMINATION

The examination is developed in collaboration with the National Board of Medical Examiners. It consists of an objective type examination in a morning and an afternoon session. The examination evaluates the applicants' knowledge and competence in the management of patients in the area of clinical nuclear medicine, including, but not limited to, radiobioassay, in vitro and in vivo measurements, nuclear imaging and therapy with unsealed radionuclides. Also included is an evaluation of the candidates' knowledge in the related sciences of medical nuclear physics, radiation biology, radiation protection, instrumentation, radiopharmaceutical chemistry, statistics; and may also include pathology, physiology, electronics, and other basic sciences associated with nuclear medicine.

APPLICATIONS

Applicants who wish to be examined by the Board must complete, sign, and file with the Board office an application on the official form together with the supporting data required by the application. The application must include two photographs of the applicant, signed on the side, and a check for $400 to cover the examination fee. The applicant must arrange to have two sponsor forms returned directly to the ABNM office to be included with this application. The deadline for receipt of applications for the September 18, 1976, examinations is June 1, 1976.

Before final action on applications, officers of the Board and members of the Board are not authorized to estimate the eligibility of applicants, who are requested not to discuss or write for opinions regarding the status of their applications. The Board decides on eligibility to take the examination only by approving or disapproving individual applications, and accordingly has no "Board Eligible" category.

Inquiries concerning the applicability of previous training and experience should be sent to the Board office. A copy of the Board's response to these inquiries should be forwarded with any subsequent examination application.

RELEASE OF INFORMATION

Upon request and with the approval of the Board Chairman, the Board releases information on diplomates to Federal and State licensing bodies, and to educational and professional organizations for specific, limited, and appropriate professional use. An authorization for release of this information is a part of the examination application form. No other information is released on individual applicants, examinees, or on individuals failing an examination.

FEES

The examination fee is $400, a check for which must accompany the application. If the applicant is rejected by the Board, or withdraws prior to August 2, 1976, the application processing fee of $50 will be retained by the Board. If the applicant withdraws after August 2, 1976, the entire examination fee will be retained by the Board.

POLICY ON RE-EXAMINATION

Applicants who fail the examination are eligible for re-examination. Applicants who qualify for the 1976 examination by fulfilling one of the alternative training requirements, but who fail or who withdraw for a valid reason may take a subsequent examination. An examination fee must accompany each completed application for re-examination.

RECERTIFICATION

The first voluntary recertification examination in nuclear medicine is planned for 1978. The examination will be based on a syllabus prepared by the American College of Nuclear Medicine, the American College of Nuclear Physicians, and the Society of Nuclear Medicine. The ABNM will never rescind initial certificates unless a date of expiration is a condition of the original certificate. No certificate issued to date contains an expiration date.

SUMMARY OF 1976 REGISTRATION DATA

Application period: January 1, 1976, through June 1, 1976
Examination date: September 18, 1976.
Fee: $400

Deadline for cancellation: August 2, 1976
Processing fee in case of cancellation before August 2, 1976: $50
Letters of admission and sample questions mailed: July 15, 1976

Address examination inquiries to:
American Board of Nuclear Medicine
475 Park Avenue South
New York, New York 10016
Telephone: 212-889-0717

RESIDENCY TRAINING PROGRAMS IN NUCLEAR MEDICINE (DECEMBER, 1975)

ALABAMA

Birmingham

University of Alabama Medical Center
Veterans Administration Hospital
University of Alabama Hospitals and Clinics
Birmingham, Alabama
Director: W. Newlon Tauxe, M.D.

ARIZONA

Tucson

University of Arizona Affiliated Hospitals
University Hospital
Veterans Administration Hospital
Tucson, Arizona
Director: Dennis Patton, M.D.

ARKANSAS

Little Rock

University of Arkansas Medical Center
University Hospital
Veterans Administration Consolidated Hospital
Little Rock, Arkansas
Director: Charles M. Boyd, M.D.

CALIFORNIA

Davis

University of California (Davis) Affiliated Hospitals
University of California (Davis)
Sacramento Medical Center
Davis, California
Director: Gerald L. DeNardo, M.D.

Los Angeles

University of California (Los Angeles) Hospital
Los Angeles, California
Director: Leslie R. Bennett, M.D.

Veterans Administration (Sepulveda)
Los Angeles, California
Director: Marvin B. Cohen, M.D.

Veterans Administration Center—Wadsworth Hospital
Los Angeles, California
Director: William H. Blahd, M.D.

San Diego

University of California (San Diego) Affiliated Hospitals
University of California, San Diego—University Hospital
Veterans Administration Hospital
San Diego, California
Director: William L. Ashburn, M.D.

San Francisco

Letterman Army Medical Center
San Francisco, California
Director: Ralph Blumhardt, M.D.

University of California Program
H. C. Moffitt—University of California Hospitals
San Francisco, California
Director: Paul B. Hoffer, M.D.

Stanford

Stanford University Affiliated Hospitals
Stanford University Hospital
Veterans Administration Hospital (Palo Alto)
Stanford, California
Director: Joseph P. Kriss, M.D.

COLORADO

Denver

University of Colorado Affiliated Hospitals
Veterans Administration Hospital
University of Colorado Medical Center
Denver, Colorado
Director: Peter M. Ronai, M.B., Ph.D., M.R.A.C.P.

CONNECTICUT

Farmington

University of Connecticut Affiliated Hospitals
University Hospital (Farmington)
Hartford Hospital
Veterans Administration Hospital (Newington)
Farmington, Connecticut
Director: Richard P. Spencer, M.D., Ph.D.

New Haven

Yale–New Haven Medical Center
Hospital of St. Raphael
Yale–New Haven Hospital
New Haven, Connecticut
Director: Alexander Gottschalk, M.D.

DISTRICT OF COLUMBIA

Georgetown University Hospital
Washington, D.C.
Director: John C. Harbert, M.D.

George Washington University Affiliated Hospitals
Washington Hospital Center
George Washington University Hospital
Veterans Administration Hospital
Washington, D.C.
Directors: Richard C. Reba, M.D., Vijay M. Varma, M.D.

Walter Reed Army Medical Center
Washington, D.C.
Director: Merrill C. Johnson, M.D.

ILLINOIS

Chicago

McGaw Medical Center of Northwestern University
Children's Memorial Hospital
Veterans Administration Research Hospital
Northwestern Memorial Hospital
Chicago, Illinois
Director: James L. Quinn III, M.D.