

Molecular Imaging Curriculum Development

The Accreditation Council for Graduate Medical Education requires a regular 5-year review and revision (if needed) of specialty-specific curriculum requirements. In July 2007, new nuclear medicine training requirements went into effect. In anticipation of the next curriculum review, the SNM Molecular Imaging Center of Excellence (MICoE) Education Task Force began development of an expanded curriculum that incorporates more training on molecular and cellular biology and includes molecular imaging agents and technologies that are not radioisotope based.

The growing number of both radioactive and non-radioactive tracers is making personalized medicine and targeted molecular therapy a reality that will eventually transform much of medical practice. To integrate this expanded view of our specialty, a new curriculum must be designed that covers the molecular imaging techniques and technologies that have not been part of the traditional nuclear medicine curriculum. To that end, the MICoE

Education Task Force submitted proposed curriculum revisions to the Nuclear Medicine Residency Review Committee last November.

Creating a new curriculum is a multiyear process, and input from the directors of nuclear medicine training programs is crucial to the development, passage, and practical implementation of this curriculum.

The MICoE Education Task Force is currently surveying nuclear medicine program directors (NMPDs) to get specific feedback on the proposed curriculum. One survey has already been completed, and another is open for input on the NMPD community Web page (log-in on the SNM site is required to access the NMPD community page, <http://interactive.snm.org/index.cfm?PageID=5867>). To ensure that the curriculum proposal is properly and practically designed, we are



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MAINTENANCE OF CERTIFICATION

MOC, ABNM, and the Public Trust

The public has become increasingly concerned about the state of health care in this country. The publication of the Institute of Medicine (IOM) report *To Err is Human* in 2000 was followed by an increasing public demand to improve patient safety. This report estimated that “as many as 98,000 people die in any given year from medical errors that occur in hospitals. . . more than die from motor vehicle accidents, breast cancer, or AIDS—3 causes that receive far more public attention.” A subsequent IOM report, *Crossing the Quality Chasm*, outlined the characteristics of a high-quality health care system. These characteristics included health care that is safe, effective, patient centered, timely, efficient, and equitable. What role do boards and maintenance of certification (MOC) have in this quality improvement movement?

The American Board of Nuclear Medicine (ABNM) is 1 of 24 primary boards organized under the umbrella of the American Board of Medical Specialties (ABMS; www.abms.org/About_ABMS/member_boards.aspx). MOC was con-

ceived by the ABMS in 2000 as a way to address the public’s concerns about quality in health care. Given the increasingly rapid rate of change in health care coupled with the public’s increasing knowledge, all ABMS boards agreed that it was no longer credible to suggest that a once-in-a-lifetime exam is a marker of quality.

Even periodic exams could not be used as markers for quality, because exams measure only cognitive knowledge and not the other competencies (Patient Care, Interpersonal and Communication Skills, Professionalism, Systems-Based Practice, and Practice-Based Learning and Improvement) required to be a quality physician (www.abms.org/Maintenance_of_Certification/MOC_competencies.aspx). In contrast, MOC could encompass these 6 competencies.



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going into Canada, and he said they don't check for that. . . I said to the guy that had the handheld detector, 'I'm sorry. If I had known this, I'd have gone to dinner the next day.' He said, 'No. It might take 30 days before you don't set it off.'"

After being detained for more than an hour, the Durans were released

along with their passports. On February 22, Duran returned to the cardiology offices to tell physicians and staff about his experiences at the border. According to the *News-Herald* report, a sign is now in place at the offices "informing patients of what could happen if they travel after certain tests."

Duran reflected on the experience, noting that his law enforcement background probably helped and that individuals who become agitated or anxious when detained might not fare as well in similar situations. "I'm assuming they could hold you for a whole lot longer," he said.

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urging every program director to respond to this survey now. This input is vital if we are to properly train the molecular imaging physicians of the future.

A special session for NMPDs will be offered at the 2008 SNM Annual Meeting in New Orleans, LA, on Sunday, June 15, from 11:30 AM to 12:30 PM. Program directors are invited to join the MI Education Task Force after this session for lunch from 12:30 to 2:00 PM to continue the discussion.

These meetings will offer another opportunity for NMPDs and other interested individuals to provide feedback on the curriculum.

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It is appropriate for boards to take leadership in addressing the public's concerns about the quality of health care. The ABNM mission statement states: "The Board establishes the standards for training, initial certification, and maintenance of certification for physicians rendering nuclear medicine services, thereby helping patients obtain high-quality health care." Boards are expected to act in the best interest of the public. The primacy of the public's interest and the autonomy to act in the public's interest are necessary to maintain the public's trust. Without that trust, the profession would not be allowed to self-regulate. Many physicians do not keep in mind this important distinction when thinking about boards and their specialty societies. In contrast to

boards, specialty societies act in the best interest of their members. The members of the society elect their leadership and determine the policies of their society. For boards, the agenda is largely set in response to the needs of the public.

Note: At the SNM Annual Meeting in New Orleans, LA, the following continuing education sessions on MOC will be offered: "MOC Overview and New Developments," June 14, 4:30–6:00 PM; and "MOC Practice Performance Assessment," June 16, 4:30–6:00 PM. For details, see the SNM Online Meeting Planner at www.snm.org/am. Click on "Attendees."

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