

## Continuously Improving PET Utilization

In a Newsline Leadership Update column in September 2008, we introduced the SNM PET Center of Excellence (PET CoE). We explained how the center of excellence was established to bring together clinicians, scientists, technologists, and industry leaders to promote the development and utilization of PET and PET/CT in the detection and management of disease. We also described the creation of the PET Utilization Task Force (PET UTF) in November 2007 to address concerns regarding a continuing decrease in PET/CT utilization.

Although these imaging modalities offer patients major benefits—such as earlier diagnosis, accurate staging and localization, and precise treatment and monitoring of disease—we found that not many referring physicians were prescribing PET scans on a regular basis. This is surprising in light of increasing evidence that many patients have an increased chance for better outcomes as a direct result of undergoing a PET/CT scan. It is therefore essential that both referring and interpreting physicians are educated about the potential of PET/CT imaging.

With this in mind, the PET UTF, which comprises 37 volunteers from industry, hospitals, and educational forums, convened more than a year ago to identify 4 discrete areas of importance to practitioners and establish the following working groups to address them. Since then, these working groups have made significant progress.

The **Practice Guidelines** working group, cochaired by George Segall, MD, and James Fletcher, MD, finalized a comprehensive summary of currently existing guidelines for PET/CT in oncology, cardiology, and neurology, which will be available on the PET CoE/SNM Web site as a quick reference for physicians and administrators. The group is developing an online library of “PET/CT Applications in Oncology” PowerPoint presentations and is also creating quality measures for evaluation of pulmonary nodules.

The **Referring Physicians** working group, cochaired by Homer Macapinlac, MD, and Patrick Peller, MD, successfully completed a survey designed to identify the needs of referring physicians and developed an action plan to meet those needs. Results of the survey revealed that the most important factors influencing PET/CT referrals are the quality of PET/CT imaging and the ability of reports to answer clinical questions. The most important factor impeding PET/CT referrals is the lack of, or incomplete, insurance coverage. The group is currently developing educational brochures to educate referring physicians.

The **Research** working group, cochaired by Michael Graham, PhD, MD, and David Mankoff, MD, PhD, developed a cost-effectiveness analysis e-library that is now available on the PET CoE Web site and is planning a cost-effectiveness model of PET/CT usage in patients with recurrent colorectal cancer.

The **Nuclear Medicine Physicians and Radiologists** working group, chaired by Eric Rohren, MD, PhD, created reporting guidelines for PET/CT and is turning attention to the need for national PET educational activities, including a program to educate nuclear medicine physicians and radiologists in the interpretation of PET/CT.

More recently, the PET UTF broadened its scope to include 2 additional working groups. The **Reimbursement** working group, cochaired by Paul Shreve, MD, and Terri Blomker, CNMT, MBA, was established to address current and evolving PET/CT coverage problems for common and generally approved indications. The group has completed a physician reimbursement survey and is currently identifying barriers to education and developing other outreach tools.

The **Message Integration/Outreach** working group, cochaired by Dominique Delbeke, MD, PhD, and Ron Petrocelli, MD, will partner with liaison organizations to promote programs and educational opportunities created by the PET UTF and develop a plan to disseminate these products.

In addition to the working groups, the newly created online PET CoE Resource Center houses the PET electronic library, cross-imaging atlas resources, PET references comprising all PET research papers published during the previous week, a quarterly newsletter, and Clinical Oncology Practice Guidelines from the National Comprehensive Cancer Network.

The PET CoE also recently launched the PET e-community—a venue designed to provide a forum for the exchange of ideas, research discussions, updates on hot topics, and any additional information members may feel is important to share with others in the field. These resources



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are just the first step in making the PET CoE the complete resource for referring and interpreting physicians, nuclear medicine physicians, and technologists in the area of PET and PET/CT.

On a final note: We recently launched the PET CoE internship program. This 2-y program will identify young professionals for leadership positions within SNM and train them in the structure, governance, and operations of the organization. The program will prepare these individuals for responsibility as well as ensure that effective leadership will continue to advance the mission and goals of the society.

The PET CoE is diligently providing an indispensable supply of PET- and PET/CT-related information and resources. Scientists, physicians, technologists, and health care professionals are encouraged to join the PET CoE and become involved in the many and evolving projects to advance molecular imaging and therapy.

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