

Curriculum Development Update

The field of medicine is continually changing, and in order to assure that training is current, all programs are required to undergo review and, if necessary, revision at least once every 5 y. Currently, the Nuclear Medicine Residency Review Committee (RRC) of the Accreditation Council for Graduate Medical Education (ACGME) is revising the program requirements for nuclear medicine.

It is important to recognize that the RRC does not perform curriculum revision and development in a vacuum; it is a multilayered process. The RRC reviews and revises the program requirements, after which the proposed revision is made available for a 45-d public comment period. The RRC reviews these comments and prepares an impact statement that is then submitted to various requirement development committees within the ACGME, with a final submission for approval by the ACGME Board of Directors.

Comments on molecular imaging in resident education were submitted by both the Molecular Imaging Center of Excellence (MICOE) Education Task force and the SNM Academic Council during the recently concluded public comment period for the proposed revision of the nuclear medicine program requirements. The goal of the nuclear medicine residency program is to graduate residents who are proficient in all areas of clinical nuclear medicine and who can function independently as nuclear medicine consultants. Currently, the RRC is in the process of reviewing all public comments, including those pertaining to molecular imaging, with these goals in mind. The target date for implementation of the revised training requirements is July 2011.

SNM Mid-Winter Meeting Educational Program

The MICOE is cosponsoring 3 continuing education sessions at the SNM Educational Symposium, one of the SNM Conjoint Midwinter Meetings being held in Albuquerque, NM, January 27 through February 2. “Advances in MI of the Brain” will be cosponsored with the SNM Brain Imaging Council on Saturday, January 30, in the afternoon. That evening, the SNM Academic Council and the MICOE are cosponsoring “Challenges and Issues in Teaching and Learning Molecular Imaging.” Sunday morning, the MICOE and the SNM Cardiovascular Council are collaborating on “Contributions of Molecular Imaging to Management of Heart Failure.” For more information on these and other educational offerings at the Conjoint Meetings, visit www.snm.org/mwm.

As one of the conjoint meetings, the MICOE is also sponsoring the Nanomedicine and Molecular Imaging Summit, January 31 through February 1. This summit will explore the potential impact of nanotechnology on medical imaging in sessions on nanomaterials, risk management, regulatory considerations, diagnosis and treatment, and drug development. A full agenda is available at www.snm.org/mwm/nano.



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for ^{18}F -FDG PET for initial staging of some patients with cervical cancer. Previously, patients needing PET for initial staging of cervical cancer were covered only under the CMS coverage-with-evidence-development policy. The November 10 decision derives in part from data collected by the National Oncologic PET Registry (NOPR)—a comprehensive study to assess the value of ^{18}F -FDG PET for initial diagnosis, staging, and treatment of many common types of cancer.

In a statement issued on November 12, SNM regulatory experts noted that “It is the opinion of the SNM that claims for initial staging of cervical cancer can be submitted without any need for administrative delay. Cervical cancer initial staging (PI modifier) was already covered and only had to be done under NOPR if CT or MR imaging was not done first or if done and showed evidence of extrapelvic metastatic disease. Hence, we believe that...any claim

submitted with CPT codes 78811–16, PI modifier, and ICD-9 code 180.0–180.9 should be paid. In the unlikely event that FDG PET was performed for diagnosis of cervical cancer, for claims date of service November 10, 2009, or after, the claim would have to be submitted with HCPCS code G0235 (and would not be paid for this now noncovered service).”

Proposed Decision on Na^{18}F PET in Bone Metastases

On November 30, CMS issued a proposed decision memo for Na^{18}F PET in identification of bone metastasis of cancer. In June, CMS opened a reconsideration of Section 220.6 of the National Coverage Determinations Manual to review evidence on this indication. The proposed decision memo states that “evidence is not sufficient to determine that the results of Na^{18}F PET imaging to identify bone

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