June 30, 2006

Russell Ritenhour, PhD
President, AAPM

SUBJ: Liaison Report from AAPM Councilor to the ACR

Dear Dr. Ritenhour:

Pursuant to my appointment as AAPM liaison to the ACR, I am reporting on the Annual Meeting of the Council of the American College of Radiology, held in Washington, D.C., May 20-25, 2006. The purpose of this report is to inform you and the AAPM board of the activities of the ACR, highlighting issues that for which the Board should consider action.

In general, the meeting and the proposed resolutions were not controversial from a physics standpoint. The ACR is quite concerned about the rampant self-referral. This was also one of the themes of lobbying efforts on Capitol Hill.

There is one proposal that I wish to transmit to you and the board. Since you were present at the impromptu meeting with the NRC staff person, you are already aware of the issue. It is that: the AAPM should immediately file a request for PRM (Proposed Rule Making) to NRC to correct the problem that current Board-certified medical physicists cannot be accepted as RSOs or Authorized Medical Physicists on NRC licenses under new rules. Lynn Fairobent has details.

One item that came up after the meeting is a request for the AAPM to be represented in ACR's efforts in the "Pay for Performance" initiative. You, and Angela, and I have received those. I recommend that AAPM establish as much presence as possible in the formative stages of this endeavor. This may be the next JCAHO-sized opportunity to further establish the role of medical physics in patient care.

Please feel free to contact me if you have any questions, or if I may be of further service.

With warm personal regards,

David L. Vassy, M.S.
AAPM Liaison to ACR-2006
Gibbs Cancer Center—SRHS
101 East Wood Street
Spartanburg, S.C. 29303
dvassy@srhs.com

cc: Angela Keyser, Executive Director, AAPM

2006 Report of Liaison to ACR to AAPM President and Board-D.Vassy
Date: May 31, 2006

Recommended ACTION ITEM for AAPM from this year’s meeting.
1. AAPM should immediately file a request for PRM (Proposed Rule Making) to NRC to correct the problem that current Board-certified medical physicists cannot be accepted as RSOs or Authorized Medical Physicists on NRC licenses under new rules. Lynn Fairobent has details.

REPORT

The annual meeting of the ACR Council, now called the “Annual Meeting and Chapter Leadership Conference (AMCLC)” was held in Washington, D.C., May 20-25, 2006. This is the fourth of several annual meetings to be held in DC to facilitate lobbying efforts with members of Congress.

The meeting was preceded by an ACR-sponsored Categorical Course in 3-D Imaging and day-long Supervised Case Review on Cardiac CT. At the same time, various Boards and Committees of the ACR met in preparation for the upcoming Council meeting, which began on Sunday, May 21. The ACR Council is composed of elected representatives from each of the ACR’s chapters, as well as appointed representatives from most societies that have any connection with the practice of diagnostic or therapeutic radiology. Approximately 500 Councilors were present.

The AMCLC meeting itself began Sunday with meetings of various “caucuses”. These are various constituency groups formed either by geographical interests, such as the “Southern”, or “Snowbelt” Caucuses, or specialty caucuses, such as the Radiation Oncology (CARROS), Nuclear Medicine, or Medical Physics Caucuses. The Medical Physics Caucus met at 10:30 on Sunday morning. Attendees included:

Rick Morin, Commissioner of Medical Physics, Board of Chancellors, Fellow
Jim Hevesi, Vice-Chair, Commission on Medical Physics, Fellow
Nick Detorie, Chair, Committee on Standards, Councilor-at-large, Fellow
Geoff Ibbott, Council Steering Committee, Fellow
Melissa Martin, Member, Government Relations Committee, Councilor-at-large, Fellow
Jim Galvin, Liaison from ACMP—Councilor
Mahadevappa. Mahesh, member of ACR
Dave Vassy, Councilor from AAPM, Fellow
Jerry White, Chair, Committee on Economics, Councilor-at-large
Wayne Wiatrowski, Councilor from Texas ACR Chapter
Gloria Romanelli, ACR Staff
Will Creech, ACR Staff

Angela Kayser, AAPM’s Executive Director also attended the Sunday caucus. Lynne Fairobent, AAPM’s Legislative and Regulatory Affairs Manager attended the
At Rick Morin’s direction, each Councilor had previously received and reviewed the agenda items such as resolutions, proposed bylaw changes, and draft standards. Some 62 resolutions were reviewed and discussed. From these, the caucus elected to attempt to change four by presenting these changes to the Reference Committees on Council floor on Monday. The table at the end of this report summarizes the issues discussed. At the conclusion, on behalf of the caucus, Jim Hevesi presented Rick Morin with a plaque and a gift for Rick’s six highly successful years as Chairman of the Commission on Medical Physics. Rick’s contribution to medical physics within the College cannot be overstated. He has brought much respect and credibility to medical physics in the “house of Radiology”.

Sunday’s program continued with the Council receiving standing reports, beginning with the reports of the Chair, Dr. Jim Borgstede, of the Executive Director, Dr. Harvey Neiman, and other officers. These reports will be available on the ACR web site. There are no items regarding medical physics to report from these reports.

Following presentations from the candidates for various ACR offices, outgoing ACR President Milton Guiberteau, M.D., addressed the Council. With truly inspirational words he used the history of radiology to remind members of the difference between a profession and a trade. The very definition of “profession” directs us to seek the best for others and to care for patients responsibly and ethically, despite marketplace pressures.

The Sunday concluded with the Awards and Honors Convocation. 3 Gold Medalists, 3 Honorary Fellows, and some 68 new Fellows were inducted. These two AAPM members were inducted into fellowship:

Keith Strauss, M.S.
Cheng-Shie Wuu, PhD

More detail on the honorary fellows and Gold Medalists is available on the ACR Website.

On Monday morning at 7:30, several members of the Medical Physics Caucus, including AAPM President Russell Ritenour met with Greg Hatchett, Staff for Materials Programs to NRC Commissioner Jackzo. Lynne Fairobent, arranged this meeting to discuss how to correct the “current grandfathering” provision for 10 CFR Part 35, Authorized Medical Physicists and Radiation Safety Officer. Discussions continue between the NRC and the American Board of Radiology and American Board of Medical Physics to recognize their certification processes under the new training and experience requirements. At this time, neither medical physics board has been granted recognized status. Based on the discussions today, it was decided that an administrative solution was not possible and that AAPM would take the lead to draft a Petition for Rulemaking that proposing a regulatory solution to this situation that would be shared with the American College of Radiology and the American College of Medical Physics. This is time critical and needs to be submitted no later mid-June for Commission consideration. (As a side-note, Commissioner Jackzo will be speaking at the AAPM meeting in Orlando,
accompanied by Mr. Hatchett. He perhaps could be reminded how positive it would be if he announced resolution of the problem at the meeting.)

On Monday morning, the Council voted on officers. The newly elected officers are:

President            Jim Borgstede, M.D.
Vice-President       Charlie Williams, M.D.
Board of Chancellors--Physics    Jim Hevesi, PhD
Board of Chancellors—Pediatrics Don Frush, M.D.
Board of Chancellors—Rad. Onc.  Cassandra Foens, M.D.
Council Steering Committee Kenneth Chin, M.D., Thomas Fletcher, M.D., Bill Warren, M.D.

The Moreton Lecture was given by Mark McClellan, MD, PhD, Director of the Center for Medicare and Medicaid Services. He stated repeatedly CMS’ desire to promote quality. Interestingly, he mentioned the CMS was considering reimbursing at higher rates those facilities that maintain more-electronic medical records and develop ways to share electronic medical records regionally between healthcare facilities and between facilities and private-practice offices.

Following Dr. McClellan, Dr. Bruce Hillman reported on research via ACRIN. The ACR manages 54 M$ in clinical trials via RTOG and ACRIN. These trials currently have enrolled 80,000 subjects. Some current studies are:

ACRIN 6652--National Lung Cancer Screening, evaluating CT as a lung cancer screening tool
ACRIN 6657—Contrast enhanced MRI for evaluating therapeutic success in breast CA
NOPR –National Oncology PET Registry—700 registered sites.

Over 130 institutions are qualified to participate in ACRIN trials. Approximately 80% of theses are academic institutions.

During lunch Drs. Gerald Dodd and Thomas Fletcher reviewed the plight of financing academic radiology. Noting the difference between salaries of private-practice and academic radiology, they proposed that all radiologists “tithe” 1% of their income to support academic radiology.

On Tuesday, following a special session on “The Future of Breast Imaging”, the Council continued to discuss, debate and vote on various resolutions. A list of resolutions pertinent to Medical Physics is included at the end of this report.

On Wednesday, the ACR physician and physics members, guided by the ACR staff and consultants, descended upon Capitol Hill. Each state chapter was scheduled to meet with their congressmen, senators, or staff. The primary message was support for proposals to encourage quality of x-ray facilities through proper credentialing of the imaging-service providers. This is embodied on a new initiative called Pay-for-Performance (P4P). Following the meeting, the ACR solicited the AAPM to provide a
laison to this effort, as there is an upcoming meeting on this topic August 24-26. Angela Kayser and Russ Ritenhour are pursuing this at present. In my opinion, getting physics input into this process may be as significant as our early presence in the formative stages of JCAHO guidelines, which mandated physics evaluations of equipment. I think there is an opportunity to get active physics involvement in routine imaging and therapy processes, over and above an annual “equipment check”. This would indicate a facility’s commitment to quality performance.

As of the date of this report, there have been no other ACR activities on which to report.

As a personal note, I think the medical physics community should be proud of the influence we have within this powerful, effective organization of over 25,000 physicians.

Respectfully Submitted,

David L. Vassy, M.S.
AAPM Liaison to ACR-2006
dvassysrhs.com

<table>
<thead>
<tr>
<th>Res #</th>
<th>Brief Title</th>
<th>Issue</th>
<th>Commenter</th>
<th>Outcome</th>
</tr>
</thead>
<tbody>
<tr>
<td>10</td>
<td>Performing Cardiac CTA</td>
<td>Modernize slice thickness specs</td>
<td>Morin</td>
<td>Ref Com and Council accepted change</td>
</tr>
<tr>
<td>14</td>
<td>Diagnostic CT</td>
<td>Delete service Engineer as QA supervisor</td>
<td>Ibbott</td>
<td>Ref Com and Council accepted change</td>
</tr>
<tr>
<td>17</td>
<td>Radiation Safety in Guidelines</td>
<td>Add “imaging”, Dose vs. dosage, include “staff in safety”, include manual as well as built-in dose reduction techniques</td>
<td>Martin</td>
<td>Ref Com and Council accepted change</td>
</tr>
<tr>
<td>20</td>
<td>Breast Conversation Therapy in Managing Invasive Breast CA (Collaborative)</td>
<td>Remove vendor reference, remove 2D as standard dosimetry, etc.</td>
<td>White</td>
<td>Ref Com and Council accepted change</td>
</tr>
<tr>
<td>21</td>
<td>Managing DCIS</td>
<td>Same</td>
<td>White</td>
<td>Ref Com and Council accepted change</td>
</tr>
<tr>
<td>(Collaborative)</td>
<td>Accreditation Task Force</td>
<td>If passed, add physicist to Task Force</td>
<td>Hevesi</td>
<td></td>
</tr>
<tr>
<td>-----------------</td>
<td>--------------------------</td>
<td>----------------------------------------</td>
<td>--------</td>
<td></td>
</tr>
<tr>
<td>62</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>