Navigating the ACGME Website

Darlene Metter, MD
Chair, NM RRC

Missy Fleming, PhD
Executive Director, NM RRC

June 15, 2009
Toronto, Canada
Learning Objectives

• Increase efficiency when searching the ACGME websites for specific information

• Improve effectiveness when submitting information through the ACGME web site
  • i.e., ADS, CPIF

• Offer on-going consultation for participant concerns about ACGME websites
  • i.e., RC FAQs, Newsletter
Session Format

• Introduction & navigation through the ACGME website (M Fleming)

• Common PIF preparation & website resources: ACGME & NM RRC (D Metter)

• Interactive navigation (attendees)

• Q & A
Pre Test

• Where do you find the resident survey?

• Where would you go to look up ACGME terminology?

• Is there a resource for the Common PIF?

• Where do you find your LON?

• Where do you find a list of your 55 “best friends?”
General Website Overview

Missy Fleming, PhD
Executive Director
Nuclear Medicine  RRC
Preparing the Common PIF: Navigating the ACGME Website

Darlene Metter, MD FACR
Chair, Nuclear Medicine RRC
Preparing Your PIF

- First step: “speak the same language”
- Review New ACGME glossary of terms
- Revised 03-19-09
  - Where do you find this?
Home

The Accreditation Council for Graduate Medical Education (ACGME) is responsible for the Accreditation of post-MD medical training programs within the United States. Accreditation is accomplished through a peer review process and is based upon established standards and guidelines.

Please note our new zip code: ACGME, 515 N. State, Suite 2000, Chicago, IL 60654 (P.O. Box zip code remains the same).

Quick Links:
- New - ACGME Resident/Fellow survey resumes January through June of 2009
- New - ACGME statement on IOM resident duty hours report
- Hospice and Palliative Medicine Deadlines Available (PDF)
- 2007 - 2008 ACGME Databook now available
- One-Year Common Program Requirements
- Involving Residents in Quality Improvement
- How to Apply for Accreditation in Seven Easy Steps

Events:
- New - 2009 ACGME Annual Educational Conference, (registration now open) March 5 - March 8, 2009 Grapevine, TX
- New - NRMP Offers Session at ACGME Annual Conference (PDF) (not included in brochure)
- ACGME Meetings
- 2009 RC Meetings
- 2010 RC Meetings
ACCREDITATION COUNCIL FOR GRADUATE MEDICAL EDUCATION

GLOSSARY OF TERMS

March 19, 2009

Continual up-dates
ACGME GLOSSARY OF TERMS

**Academic Appointment**: An appointment to a faculty category (e.g. professor, Associate Professor, Adjunct Clinical Instructor, etc.) of a degree-granting (e.g. BS, BA, MA, MD, DO, PhD, etc.) school, college, or university.

**Accreditation**: A voluntary process of evaluation and review based on published, standards and following a prescribed process, performed by a non-governmental agency of peers.

**Applicant**: An M.D. or D.O. invited to interview with a GME program.

**Assessment**: An ongoing process of gathering and interpreting information about a learner’s knowledge, skills, and/or behavior.

**At-Home Call** (see also Pager Call): A call taken from outside the assigned site.

**Categorical Resident** (also see “Graduate Year 1”): A resident who enters a program with the objective of completing the entire program.

**Certification**: A process to provide assurance to the public that a certified medical specialist has successfully completed an approved educational program and an evaluation, including an examination process designed to assess the knowledge, experience and skills requisite to the
LCME: Liaison Committee on Medical Education, which accredits programs of medical education leading to the M.D. in the United States and in collaboration with the Committee on Accreditation of Canadian Medical Schools (CACMS), in Canada.

Letter of Notification: The official communication from a Review Committee that states the action taken by the Review Committee.

Master Affiliation Agreement: A written document that addresses GME responsibilities between a sponsoring institution and a major participating site.

Medical School Affiliation: A formal relationship between a medical school and a sponsoring institution.

Moonlighting: Patient care activities external to the educational program that residents/fellows engage in at sites used by the educational program (internal moonlighting) and other healthcare sites.

Must: A term used to identify a requirement which is mandatory or done without fail. This term indicates an absolute requirement.

National Resident Matching Program (NRMP): A private, not-for-profit corporation established in 1952 to provide a uniform date of appointment to positions in graduate medical education in the United States. Five organizations sponsor the NRMP: American Board of Medical Specialties, American Medical Association, Association of American Medical Colleges, American Hospital Association, and Council of Medical Specialty Societies.

New Patient: Any patient for whom the resident/fellow has not previously provided care. An individual Review Committee may further define new patient (See Program Requirements).

Night Float: Rotation or educational experience designed to either eliminate in-house call or to assist other residents during the night. Residents assigned to night float are assigned on-site duty during evening/night shifts and are responsible for admitting or cross-covering patients until morning and do not have daytime assignments. Rotation must have an educational focus.
Scholarly Activity: An opportunity for residents/fellows and faculty to participate in research, as well as organized clinical discussions, rounds, journal clubs, and conferences. In addition, some members of the faculty should also demonstrate scholarship through one or more of the following: peer-reviewed funding; publication of original research or review articles in peer-reviewed journals or chapters in textbooks; publication or presentation of case reports or clinical series at local, regional, or national professional and scientific society meetings; or participation in national committees or educational organizations. (See Common Program Requirements)

**Shall:** (Shall must)

**Short Call:** Responsibility for admitting patients to the teaching service during the early part of the day. Residents begin call in the morning, admit patients until some designated time in the afternoon or late morning and do not stay in the hospital over night.

**Should:** A term used to designate requirements so important that their absence must be justified. A program or institution may be cited for failing to comply with a requirement that includes the term ‘should’.

**Site:** An organization providing educational experiences or educational assignments/rotations for residents/fellows.

**Major Participating Site:** A Review Committee-approved site to which all residents in at least one program rotate for a required educational experience, and for which a master affiliation agreement must be in place. To be designated as a major participating site in a two-year program, all residents must spend at least four months in a single required rotation or a combination of required rotations across both years of the program. In programs of three years or longer, all residents must spend at least six months in a single required rotation or a combination of required rotations across all years of the program. The term “major participating site” does not apply to sites providing required rotations in one year programs. (see “Master Affiliation Agreement”)
Common PR & CPIF

• Common Program Requirements (CPR):
  • Program curriculum requirements that relate to the education of all physicians

• Common Program Information Form (CPIF):
  • completed by the PD for a site visit regarding the educational program via ADS
  • addresses the program’s compliance with the CPR
A Must!

- Program Director Guide to the Common Program Requirements
  - Where do you find this?

- Format
  - Program Requirement
  - Explanation
  - Documentation
Quick Links:

- **New** - ACGME Resident/Fellow survey resumes January through June of 2009
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- Involving Residents in Quality Improvement
- How to Apply for Accreditation in Seven Easy Steps
- Program Director Guide to the Common Program Requirements
- Residency Review Committees

News:

- ACGME creates new Office of Resident Services (11/19/08)
- ACGME offers 2007-2008 issue of ACGME Data Resource Book as free online publication (11/5/08)
- Fifth Pathway Update (10/22/08)
- ACGME Board approves incorporation of streamlined common program requirements into one-year fellowship requirements (10/13/08)

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# Program Director Guide to the Common Program Requirements

## Introduction (PDF updated 1/15/09)

## Disclaimer (PDF)

### I. Institution

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### II. Program Personnel and Resources

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### III. Resident Appointments

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### IV. Educational Program

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### Program Director Guide to the Common Program Requirements

**Introduction** (PDF updated 1/15/09)

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I. Institutions
   A. Sponsoring Institution

Common Program Requirement:

One sponsoring institution must assume ultimate responsibility for the program, as described in the Institutional Requirements, and this responsibility extends to resident assignments at all participating institutions.

The sponsoring institution and the program must ensure that the program director has sufficient protected time and financial support for his or her educational and administrative responsibilities to the program.

Explanation:

Since requirements in this section are for institutions, not programs, verification by members of the ACGME field staff (site visitors) takes place at the time of each program review primarily via interviews with the Designated Institutional Official (DIO). Although program directors should be knowledgeable of these requirements, they are not responsible for providing the documentation noted in this section. Requirements cover four areas: institutional information, internal review, physical/clinical facilities, and accreditation for patient care. (See Institutional Requirements [IR].)
# Program Director Guide to the Common Program Requirements

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Common Program Requirement:

One sponsoring institution must assume ultimate responsibility for the program, as described in the Institutional Requirements, and this responsibility extends to resident assignments at all participating institutions.

The sponsoring institution and the program must ensure that the program director has sufficient protected time and financial support for his or her educational and administrative responsibilities to the program.

- **Documentation for a single program sponsoring institution:** The review of institutions that sponsor only one ACGME-accredited specialty program or one ACGME-accredited specialty program and its subspecialty program(s) is carried out as part of the review of the specialty program by the relevant Residency Review Committee. At the time the program site visit within a single program sponsoring institution, copies of major affiliation agreements should be available for site visitor review. These agreements are not reviewed as part of program site visits of a multiple program sponsoring institution.
### IV. Educational Program

**ACGME Competencies Introduction (PDF)**
- Curriculum Components
  - Explanation (PDF)
  - Documentation (PDF)
- Patient Care
  - Explanation (PDF)
  - Documentation (PDF)
- Medical Knowledge
  - Explanation (PDF)
  - Documentation (PDF)
- Practice-based Learning and Improvement
  - Explanation (PDF 1/15/09)
  - Documentation (PDF)
- Interpersonal and Communication Skills
  - Explanation (PDF)
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- Professionalism
  - Explanation (PDF)
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- Systems-based Practice
  - Explanation (PDF)
  - Documentation (PDF)
- Residents’ Scholarly Activity
  - Explanation (PDF)
  - Documentation (PDF 1/15/09)

### V. Evaluation

- Resident Formative Evaluation
  - Explanation (PDF)
  - Documentation (PDF updated 9/11/08)
- Resident Summative Evaluation
  - Explanation (PDF)
  - Documentation (PDF)

### VI. Duty Hours

- Duty Hours Principles (PDF updated 3/13/08)
V. Evaluation
   A. Resident Evaluation
      1. Formative Evaluation

      The information requested in the ADS (PIF) is shown below.

      Are residents evaluated on their performance following each learning experience?
      ( ) YES  ( ) NO
      Are these evaluations documented (in written or electronic format)?
      ( ) YES  ( ) NO

      Using the table below (add rows as needed):

      a. provide the methods of evaluation used for assessing resident competence in each of the six required ACGME competencies and,

      b. identify the evaluators for each method (e.g., If performance in patient care is evaluated at the end of a rotation using a global form completed by faculty and senior residents and also using a checklist to evaluate observed histories and physicals by the ward attending and continuity clinic preceptor; then under patient care select global assessment for a method and faculty member and senior resident for evaluators; also under patient care select direct observation for a method and attending and preceptor for evaluators.)
Examples of assessment methods:
direct observation, videotaped/recorded assessment, global assessment, simulations/models, record/chart review, standardized patient examination, multisource assessment, project assessment, patient survey, in-house written examination, in-training examination, oral exam, objective structured clinical examination, structured case discussions, anatomic or animal models, role-play or simulations, formal oral exam, practice/billing audit, review of case or procedure log, review of patient outcomes, review of drug prescribing, resident experience narrative and any other applicable assessment method.

Examples of types of evaluators:
self, program director, nurse, faculty supervisor, medical student, faculty member, attending, preceptor, allied health professional, chief resident, junior resident, resident supervisor, patient, family, peers, technicians, clerical staff, evaluation committee, consultants.
How to Access & Utilize the ADS

How many have logged onto the ADS?
Accreditation Data System

Forgot your User ID/Password or locked out? Retrieve it here.
Trying to login to the Resident / Fellow Survey? Click here.

Access to the Accreditation Data System (ADS) is secured by an encryption certificate obtained through the Verisign Corporation. We use 128-bit SSL encryption to help ensure the secure transfer of information. If you are using a less secure encryption level you may experience difficulty and should upgrade.

The data you provide us will be used by ACGME for accreditation, will be maintained confidentially, and will not be distributed for commercial use. Summary data and other information about programs, institutions, resident physicians or resident physician education which is not identifiable by person or organization may be published in a manner appropriate to further the quality of GME and consistent with ACGME policies and the law. Complete information about the use of the ADS can be found in the ACGME Terms of Use.

Please report any problems or suggestions to the webadmin@acgme.org.
PROGRAM DIRECTOR: DARLENE METTER, MD
PROGRAM: UNIVERSITY OF TEXAS HEALTH SCIENCE CENTER AT SAN ANTONIO PROGRAM [2004831085]

ANNUAL UPDATE TO BEGIN ON: September 29, 2008
ANNUAL UPDATE TO BE COMPLETED BY: October 31, 2008
ANNUAL UPDATE COMPLETED? YES
WEB ACCREDITATION DATA SYSTEM HIGHLIGHTS

Difficulties Accessing PDF documents while using internet browser Microsoft Internet Explorer - Unable to View PDF (11/24/2008)

If you are attempting to open a PDF document and the result is a blank page or a phrase referencing that “Internet Explorer cannot download,” you will need to change your browser setting.

A few documents currently available in ADS as PDF: PIF in PDF View, Resident Survey Aggregate Reports, Notification Letters, etc....

To resolve this issue, follow these steps:
1. Start Internet Explorer.
2. On the Tools menu, click Internet Options.
3. On the Advanced tab, click the Do Not Save Encrypted Pages To Disk check box.
4. Select OK
5. Close Internet Explorer, and then restart it to ensure that the browser settings take effect.

If the steps above did not resolve this issue, Uninstall/Reinstall, or Repair, your Adobe or other PDF Reader software. The Uninstall and Repair feature is available under the computers Start menu by selecting the Control Panel link and clicking Add/Remove Programs.

***Suggested Web Browsers for the Accreditation Data System (ADS)***

In order to display our content correctly, use the suggested web browsers below:
-Internet Explorer (IE) version 7, Download here
-Mozilla Firefox version 2 or higher, Download here
***Suggested Web Browsers for the Accreditation Data System (ADS)***

In order to display our content correctly, use the suggested web browsers below:
- Internet Explorer (IE) version 7, Download here
- Mozilla Firefox version 2 or higher, Download here
- Mac users, use Safari version 3, IE version 5 or any version of Mozilla Firefox

Other browsers (including IE version 6, etc) will limit our content. Please e-mail WebADS@acgme.org with questions or concerns.

***NEW*** Faculty Roster and CV Interface***

A new Faculty Roster and CV interface have been released to streamline navigation and utilization. To access these new sections select the Update Program Info menu and then click the link Update Faculty/CV. New video tutorials will be released in the upcoming weeks explaining how to better navigate the updated sections. Also, a new field has been added to the CV called “Certification Status” under the Certification Information section. Please ensure the field is updated for a site visit.

REQUESTS FOR VOLUNTARY WITHDRAWAL MUST BE DONE THROUGH ADS (2/4/2008)

According to ACGME policy, a program may request voluntary withdrawal of accreditation when a decision has been made to close the program. Beginning immediately, programs will enter requests to voluntarily withdraw accreditation using the Accreditation Data System (ADS). Review Committee staff will no longer accept letters requesting this action sent directly to them. The program director initiates the request within ADS by answering a series of questions, including the proposed effective date, the reason for program closure, and presenting a plan to place all active residents in other programs. Once submitted, the DIO is automatically sent an email requesting approval through ADS. After the DIO/GMEC approves the request, a member of the Review Committee staff is notified and places the request on the next Review Committee meeting agenda. The program director and DIO receives official notification, and the accreditation status is changed to voluntary withdrawal after the RC makes a final decision to accept the withdrawal.


In 2006 the ACGME changed its process from mailing hard copies of accreditation notification letters to posting the letters to the ACGME Accreditation Data System (ADS) as PDF files. Program Directors and Designated Institutional Officials (DIOs) were notified by email that the letters would be posted by the next...

In 2006 the ACGME changed its process from mailing hard copies of accreditation notification letters to posting the letters to the ACGME Accreditation Data System (ADS) as PDF files. Program Directors and Designated Institutional Officials (DIOs) were notified by email that the letters would be posted by the next business day. Recently, the ACGME revised the process so that Program Directors and DIOs will receive the email after the letters are available in ADS.

If the action is a proposed adverse action, a copy of the site visitor report and the procedures for proposed adverse actions are posted in ADS, along with the letter. If the action is a confirmed adverse action, the procedures for appeals for adverse actions are posted in ADS, along with the letter.

Designated Institutional Official (DIO) must initiate Program Director Changes

Effective March 22, 2007, all program director changes must be initiated by the DIO. To initiate a change in program director, the DIO must select Initiate PD Change from the menu on the left. The DIO must then click on the Request PD Change Icon for the appropriate program and is prompted to respond to several questions, including the new program director name, date and term of appointment, phone number, and PD email. The DIO must also verify that the new PD meets the required qualifications and is approved by the GMEC.

An email which provides the login information will be automatically sent to the new PD when the request is initially submitted. The program director must log into ADS to complete professional and certification information as well as other required documentation. The documentation (full or abbreviated curriculum vitae) varies by specialty, but the specific information requirements will be provided within ADS. After the request is complete and submitted, the new program director name will be posted in ADS, and the submitted materials are forwarded to the review committee staff. The next business day the new program director will receive a welcome letter containing useful information including password confirmation. The review committees generally review and approve program director changes at the next review committee meeting. The PD and the DIO will be informed of any submissions that do not meet the RC requirements.

Request for temporary and permanent resident complement changes (3/22/07)

Program Directors must submit all requests for changes through ADS. When the Program Director completes the requested information, the DIO at the sponsoring institution is notified to approve the request. Once the DIO approves the request in ADS, the information is sent to the review committee staff for
Request for temporary and permanent resident complement changes (3/22/07)

Program Directors must submit all requests for changes through ADS. When the Program Director completes the requested information, the DIO at the sponsoring institution is notified to approve the request. Once the DIO approves the request in ADS, the information is sent to the review committee staff for processing. Staff can approve many requests; however, some specialties require review and approval at the next review committee meeting. The only time the DIO does not electronically approve the increase via ADS is when a request comes at the time of the site visit. In preparing the PIF, the Program Director must complete the information about request for a complement change in the electronic PIF. The DIO signifies his/her approval of this request by signing the PIF.

Prevent timeout by periodically saving your work!

Do not leave your browser session inactive for more than 45 minutes to prevent session timeout. In order to protect the sensitive information in ADS from unauthorized viewing, ADS will time users out after 45 minutes of inactivity. If you are spending a lot of time on one screen, it is always a good idea to save your work periodically.

Collaboration with Other Professional Organizations

You may be asked by several other organizations to provide program and resident data similar to the information provided in ADS, therefore, the ACGME has created a feature in ADS that allows programs to request their completed information in file format for internal use or for submission to other organizations of your choice. Expand TOOLS/REFERENCE menu on the left-hand navigation bar, then click “Download My Data” for more information and detailed instructions.
CONTACT ADS STAFF

1. Please provide the following information:
   Your Full name:  Darlene Metter
   Your Email Address:  metter@uthscsa.edu

2. Enter your message in the box below:

   [Message box]

   send
1a. Program Information

Code: 2004831085  Name: University of Texas Health Science Center at San Antonio Program

Specialty: Nuclear medicine

Sponsoring Institution:
University of Texas School of Medicine at San Antonio

Address Line 1 (Institution Name)*:
University of TX Health Science Center San Antonio

Address Line 2*:
7703 Floyd Curl Drive, Mail Stop 7800

Address Line 3:

City*:
San Antonio

State*:
Texas

Zipcode*:
78229

Website Address:
http://www.uthscsa.edu/gme/

Scheduled Annual Update Date:
September 29, 2008

Scheduled Annual Update Due By:
October 31, 2008

Date Annual Update Completed:
September 9, 2008

1b. Program Director Information
2a. Accreditation Information

Accreditation: Continued Full Accreditation
Accredited Length of Training: 3
Accreditation Effective Date: November 7, 2003
Original Accreditation Date: September 1, 1978

Program Format:
Standard

Program Requires Prior or Additional Accredited GME Training:
YES
If Yes, Number of Prior or Additional Accredited Years Required:
1

Last Site Visit Date: May 14, 2003
Scheduled Date of Next Site Visit: November 20, 2008

Program Offers Preliminary/Other Positions:
NO

Program Requires Dedicated Research Year Beyond Accredited Program Length?
☐ Yes ☐ No

Government Affiliation:
Air Force/Army

Cancel <<save/previous step save/next step>>
4a. ACGME Approved Resident Positions

The numbers displayed in this section reflect the ACGME approved resident complement numbers. Temporary increases are not reflected in the TOTAL and are shown separately, if applicable. Only program directors can request changes in approved positions.

To officially increase/decrease the ACGME approved resident complement, select Approved Positions (under Request Changes) from the menu on the left after saving your current work in steps 1-7. The approved number does not need to adjust to accommodate an unfilled position. For many specialties, a decrease can be made without significant paperwork, however increases require additional documentation and Residency Review Committee (RRC) approval. Designated Institutional Official (DIO) approval is required for all changes.

If the approved number appears to be inaccurate, contact webads@acgme.org with a detailed description of the problem. Do not initiate a complement change request.

<table>
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<th>Total Positions</th>
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4b. ACGME Filled Positions (categorical positions only)

The numbers displayed in this section reflect the actual residents on-duty for the 2008 - 2009 academic year (as entered in the View/Update Residents section). To make changes, select View/Edit Residents (under Update Resident Info) from the left hand menu. Combined residents are NOT included in core program totals. Make sure that the status of all "unconfirmed" residents have been updated and that all new residents have been added to ADS. Click Add resident/fellow from the menu on the left to add residents. Residents that start after 8/31/2008 will be counted as off-cycle.

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<th>Year 1 Filled Positions:</th>
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<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Year 3 Filled Positions:</th>
<th>Active</th>
<th>Off-Cycle Active</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Total # of Filled Positions:</th>
<th>0</th>
</tr>
</thead>
</table>
### Step 5: Participating Site Information

Submit any additions or deletions of participating sites routinely providing a required educational experience.

All rotation sites may be entered but only required sites appear on the PIF.

The Review Committee will review any newly added sites at the time of the program’s next accreditation review and comment if there are concerns. No further action is required and the program may begin to use the newly added site.

Click “X” to remove a relationship. Click the folder to edit the months of rotation or the primary teaching site. To add new institutions, click on the “Add New Participating Site” button.

#### Content of Educational Experience: CLICK EDIT TO VIEW

<table>
<thead>
<tr>
<th>[480445] University Health System (primary teaching facility)</th>
<th>Required</th>
<th>Yes</th>
<th>N/A</th>
<th>4</th>
<th>4</th>
<th>4</th>
</tr>
</thead>
</table>

| [480277] Brooke Army Medical Center | Required | Yes | Yes | 4 | 4 | 4 |

| [480277] Brooke Army Medical Center | Required | Yes | Yes | 4 | 4 | 4 |

| [480277] Brooke Army Medical Center | Required | Yes | Yes | 4 | 4 | 4 | 12 | 20 |
The Review Committee will review any newly added sites at the time of the program’s next accreditation review and comment if there are concerns. No further action is required and the program may begin to use the newly added site.

Click “X” to remove a relationship. Click the folder to edit the months of rotation or the primary teaching site. To add new institutions, click on the “Add New Participating Site” button.

<table>
<thead>
<tr>
<th>Action</th>
<th>Institution Name</th>
<th>Rotation Type</th>
<th>Do ALL Residents Rotate Through This Site?</th>
<th>Program Letter of Agreement (PLA) between program and site?</th>
<th>Rotation Months</th>
<th>Distance to Primary Teaching Facility</th>
</tr>
</thead>
<tbody>
<tr>
<td>SAVE</td>
<td>[480445] University Health System</td>
<td>Elective</td>
<td>Yes</td>
<td>Yes</td>
<td>4</td>
<td>4</td>
</tr>
<tr>
<td>CANCEL</td>
<td>Primary Teaching Site?</td>
<td>Required</td>
<td>No</td>
<td>N/A (site under governance of sponsoring institution)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Briefly describe the content of the educational experience (addressing faculty coverage, volume/variety of clinical experience, institutional support and educational impact):

Faculty: 3 FTE Nuclear Medicine faculty provide direct supervision and are available at all times.
Volume/Variety: ~19,000/yr Nuclear Medicine procedures. Diversity of patient

Limit 800 characters

<table>
<thead>
<tr>
<th>Institution Name</th>
<th>Required</th>
<th>Yes</th>
<th>Yes</th>
<th>0</th>
<th>0.3</th>
<th>0</th>
<th>1</th>
<th>10</th>
</tr>
</thead>
<tbody>
<tr>
<td>[480002] Texas Cancer Clinic</td>
<td>Required</td>
<td>Yes</td>
<td>Yes</td>
<td>0</td>
<td>0.3</td>
<td>0</td>
<td>1</td>
<td>10</td>
</tr>
<tr>
<td>[480277] Brooke Army Medical Center</td>
<td>Required</td>
<td>Yes</td>
<td>Yes</td>
<td>4</td>
<td>4</td>
<td>4</td>
<td>12</td>
<td>20</td>
</tr>
<tr>
<td>[480287] Wilford Hall Medical Center (AETC)</td>
<td>Required</td>
<td>Yes</td>
<td>Yes</td>
<td>4</td>
<td>4</td>
<td>4</td>
<td>15</td>
<td>25</td>
</tr>
</tbody>
</table>
The Review Committee will review any newly added sites at the time of the program’s next accreditation review and comment if there are concerns. No further action is required and the program may begin to use the newly added site.

Click “X” to remove a relationship. Click the folder to edit the months of rotation or the primary teaching site. To add new institutions, click on the “Add New Participating Site” button.

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<th>Rotation Type</th>
<th>Do ALL Residents Rotate Through This Institution</th>
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</tr>
</thead>
<tbody>
<tr>
<td>SAVE</td>
<td>[480445] University Health System</td>
<td>Elective</td>
<td>Yes</td>
<td>Yes</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Primary Teaching Site?</td>
<td>Required</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Both</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Briefly describe the content of the educational experience (addressing faculty coverage, volume/variety of clinical experience, institutional support and educational impact):

Faculty: 3 FTE Nuclear Medicine faculty provide direct supervision and are available at all times.
Volume/Variety: ~19,000/yr Nuclear Medicine procedures. Diversity of patient populations.

<table>
<thead>
<tr>
<th>Institution</th>
<th>Required</th>
<th>Yes</th>
<th>Yes</th>
<th>0</th>
<th>0.3</th>
<th>0</th>
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<td>Yes</td>
<td>Yes</td>
<td>4</td>
<td>4</td>
<td>4</td>
<td>12</td>
<td>20</td>
</tr>
<tr>
<td>[480287] Wilford Hall Medical Center (AEHC)</td>
<td>Required</td>
<td>Yes</td>
<td>Yes</td>
<td>4</td>
<td>4</td>
<td>4</td>
<td>15</td>
<td>25</td>
</tr>
</tbody>
</table>
** denotes fields that must be completed before an annual update can be submitted.

**6a. Program Duty Hour Information**

Download Duty Hour Frequently Asked Questions (requires Acrobat Reader)

Excluding call from home, what was the average number of hours on duty per week per resident for the last four week rotation(s)?**

Excluding call from home, how many days per week of in-house call (excluding home call and night float) were residents assigned for the last four week rotation(s)?**

Excluding call from home, what was the longest shift (in hours) worked by any resident during the last four week rotation(s)? (This is not the maximum hours per week.)**

On average, do residents have 1 full day out of 7 free from educational and clinical responsibilities?**

(If no, explain)

Yes
Briefly describe how the faculty provides appropriate supervision of residents in patient care activities:**

The supervising faculty is always directly available while the resident is in the Nuclear Medicine clinic. If the resident is on-call, there is a back up supervising faculty who is readily accessible by telephone or pager for any questions or problems.

6b. Board Pass Rates

<table>
<thead>
<tr>
<th>Graduating Class</th>
<th># Graduating Residents</th>
<th># of Board-Eligible Graduates</th>
<th>Number of eligible graduates that took the Board exam for the first time</th>
<th>Number of eligible graduates that passed the Board exam on the first attempt</th>
<th>Data Not Yet Available</th>
</tr>
</thead>
<tbody>
<tr>
<td>2007-2008</td>
<td>3</td>
<td>3</td>
<td>3</td>
<td>3</td>
<td>100%</td>
</tr>
<tr>
<td>2006-2007</td>
<td>2</td>
<td>2</td>
<td>2</td>
<td>2</td>
<td>100%</td>
</tr>
<tr>
<td>2005-2006</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>100%</td>
</tr>
<tr>
<td>2004-2005</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>100%</td>
</tr>
<tr>
<td>2003-2004</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>100%</td>
</tr>
</tbody>
</table>

Explain the board pass rates data (OPTIONAL):
CURRENT INFORMATION

Program Information

University of Texas Health Science Center at San Antonio Program [2004831085]
University of TX Health Science Center San Antonio
7703 Floyd Curl Drive, Mail Stop 7800
San Antonio, Texas 78229

http://www.uthscsa.edu/gme/

Specialty: Nuclear Medicine
Sponsoring Institution: University of Texas School of Medicine at San Antonio [489501]
DIO Name: Lois L. Bready, MD
DIO Email: bready@uthscsa.edu

Annual Update To Begin On: September 29, 2008
Annual Update Due By: October 31, 2008
Annual Update Completed: September 9, 2009

% Residents / Fellows Who Have Completed the Survey: 100.0% (3 of 3)

DIRECTOR INFORMATION

Darlene Metter, MD
Director Nuclear Medicine Residency Program

Phone: (210) 557-5600
Fax: (210) 557-6418
Email address used within ACGME: metter@uthscsa.edu
Email address to be published on our website for contacts outside of ACGME
Director First Appointed as Program Director In This Program: July 1, 2001
Term of Appointment: Indefinite
Director First Appointed as Faculty Member In This Program: January 8, 1996

Summary Data

PARTICIPATING SITES

[480277] Brooke Army Medical Center
- Y1 Months: 4
- Y2 Months: 4
- Y3 Months: 4
- Distance to primary teaching facility:
  - Miles: 12
  - Minutes: 20
- Rotation Type: Required

Content of Educational Experience: Faculty: 3 FTE Nuclear Medicine faculty provide direct supervision and are available at all times. Volume/Variety/Distance: A major US Army referral center for Texas which houses the US Army's Burn Center and many casualties from the Iraq War. Diversity of patient population (span young military recruits to military retirees), disease (trauma, chronic diseases and oncology), and newer procedures (SPECT/CT, C-11 tracers, radiotherapy with labeled antibodies, Y-90 microspheres and radionuclide therapy in the management of painful bone disease), and >9000 Nuclear Medicine procedures and PET/CT procedures per year inclusive of >1300 PET/CT exams. The faculty are highly motivated in clinical research, meeting presentations, abstracts, and peer-review publications. Institution: Brooke Army Medical Center, US Army

[480445] University Health System
- Primary Teaching Facility
  - Y1 Months: 4
  - Y2 Months: 4
  - Y3 Months: 4
  - Rotation Type: Required

Content of Educational Experience: Faculty: 3 FTE Nuclear Medicine faculty provide direct supervision and are available at all times. Volume/Variety: ~19,000/yr Nuclear Medicine procedures. Diversity of patient population, disease processes/procedures, organ transplantation & immunocompromised/HIV patients, Level I trauma center, oncologic and thyroid diseases, and dedicated CT rotations. Institutional support: University Health Systems/UTHSCSA Education: High volume of pathology that occurs in a large county hospital and a regional referral center for South Texas. The Basic Science lectures, small animal imaging lab/research, administrative support to the educational program, and the program director are housed at UTHSCSA. The core didactic lectures central VTC and journal club teleconference bridge are located here.
### RESIDENT ADMINISTRATION - MASTER RECORD

**Program:** University of Texas Health Science Center at San Antonio Program [2004831085]

**View Academic Year:**
- Show residents that 2009-2010
- Show residents that 2008-2009
- Show residents that 2007-2008
- Show residents that 2006-2007
- Show residents that 2005-2006
- Show residents that 2004-2005
- Show residents that 2003-2004
- Show residents that 2002-2003
- Show residents that 2001-2002
- Show residents that 2000-2001
- Show residents that 1999-2000
- Show residents that 1998-1999

#### Residents that are active in program: (2008-2009)
(on duty between 9/1/2007 and 8/31/2008).

<table>
<thead>
<tr>
<th>Action</th>
<th>First Name</th>
<th>Year In Program</th>
<th>Start Date</th>
<th>Expected End Date</th>
<th>SSN</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

0 Resident(s) Found

**Active, full-time and part-time residents must be on duty in this program by August 31st of the selected year.**

#### Residents that started the program off cycle: (2008-2009)
(started program between 9/1/2008 and 6/30/2009).

<table>
<thead>
<tr>
<th>Action</th>
<th>Last Name</th>
<th>First Name</th>
<th>Year In Program</th>
<th>Start Date</th>
<th>Expected End Date</th>
<th>SSN</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

0 Resident(s) Found
**RESIDENT ADMINISTRATION - MASTER RECORD**

Program: University of Texas Health Science Center at San Antonio Program [2004831085]

**View Academic Year:** 2007 - 2008

- Show residents that completed training (3 residents)
- Show residents that left the program (0 residents)
- Show residents that were not active in the program (0 residents)
- Show residents that started the program as off cycle (0 residents)


To sort by Last Name or Year In Program click the column headers.

<table>
<thead>
<tr>
<th>Action</th>
<th>Last Name</th>
<th>First Name</th>
<th>Year In Program</th>
<th>Start Date</th>
<th>Actual End Date</th>
<th>SSN</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Anderson</td>
<td>Shane</td>
<td>2</td>
<td>7/1/2006</td>
<td>6/30/2008</td>
<td>XXX-XX-9665</td>
<td>Completed All Accredited Training (for this specialty) and promoted to practice without supervision</td>
</tr>
<tr>
<td></td>
<td>Banks</td>
<td>Kevin</td>
<td>1</td>
<td>7/12/2007</td>
<td>7/11/2008</td>
<td>XXX-XX-6521</td>
<td>Completed All Accredited Training (for this specialty) and promoted to practice without supervision</td>
</tr>
<tr>
<td></td>
<td>Tereri</td>
<td>Anthony</td>
<td>1</td>
<td>7/3/2007</td>
<td>6/30/2008</td>
<td>XXX-XX-7165</td>
<td>Completed All Accredited Training (for this specialty) and promoted to practice without supervision</td>
</tr>
</tbody>
</table>

3 Resident(s) found

**Active, full-time and part-time residents must be on duty in this program by August 31st of the selected year.**
### RESIDENT ADMINISTRATION - MASTER RECORD

Program: University of Texas Health Science Center at San Antonio Program [2004831085]

**View Academic Year:** 2007 - 2008

- Show residents that completed training: 3 residents
- Show residents that left the program: 0 residents
- Show residents that were not active in the program: 0 residents
- Show residents that started the program as off cycle: 0 residents

**2007-2008**

1. List of active residents
2. Details of active residents


To sort by Last Name or Year In Program click the column headers.

<table>
<thead>
<tr>
<th>Action</th>
<th>Last Name</th>
<th>First Name</th>
<th>Year In Program</th>
<th>Start Date</th>
<th>Actual End Date</th>
<th>SSN</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Anderson</td>
<td>Shane</td>
<td>2</td>
<td>7/1/2006</td>
<td>6/30/2008</td>
<td>XXX-XX-9658</td>
<td>Completed All Accredited Training (for this speciality) and promoted to practice without supervision</td>
</tr>
<tr>
<td></td>
<td>Banks</td>
<td>Kevin</td>
<td>1</td>
<td>7/12/2007</td>
<td>7/11/2008</td>
<td>XXX-XX-6521</td>
<td>Completed All Accredited Training (for this speciality) and promoted to practice without supervision</td>
</tr>
<tr>
<td></td>
<td>Tereri</td>
<td>Anthony</td>
<td>1</td>
<td>7/3/2007</td>
<td>6/30/2008</td>
<td>XXX-XX-7165</td>
<td>Completed All Accredited Training (for this speciality) and promoted to practice without supervision</td>
</tr>
</tbody>
</table>

3 Resident(s) found

**Active, full-time and part-time residents must be on duty in this program by August 31st of the selected year.**
VIEW INDIVIDUAL RESIDENT INFORMATION

RESIDENT INFORMATION

Shane B. Anderson
Email:
SSN: XXX-XX-9656

PROGRAM INFORMATION

Program Number: 2004331085
Program Name: University of Texas Health Science Center at San Antonio Program
Specialty: Nuclear Medicine
Status in Program: Completed All Accredited Training (for this specialty) and promoted to practice without supervision
Type of Position: Categorical
Year in Program: 2
Start Date: 7/1/2006
Completion Date (Expected): 6/30/2008
Curriculum Date (Actual): 6/30/2008
Started in Year 1 of this Program: Yes
Years of Prior US Training in ACGME Program: 3
Specialty of Prior Training: Family medicine

MEDICAL SCHOOL OF GRADUATION INFORMATION

Type of Medical School: Osteopathic Medical School
ECFMG Certificate Number:
Medical School: Kansas City Univ Of Med & Biosci, Coll Of Osteo Med, Kansas City, MO
Date of Degree: 6/2002

RESIDENT DEMOGRAPHICS

Gender: Male
Ethnicity: White, non-Hispanic
Birth Date: 4/5/1973
RESIDENT "QUICK UPDATE"

Currently, no residents have a status of "Unconfirmed"

To enter new residents, select Add New Resident.

To edit/view existing resident information, select Update Resident Information.

Return to the main Annual Update view.
Resident Complement Change Request
2004831085 - University of Texas Health Science Center at San Antonio Program

This specialty approves:
- Increases Only
- Complement by Total Only

List of documents/information that may be required to complete a permanent complement change request (Temporary increases require less documentation):
- Educational Rationale for Change. Describe the specific circumstances for the change and the provisions that will be taken to ensure adequacy of support (funding) and educational resources. The rationale must be exclusively educational and not based on specialty demands.

All Complement change requests will be electronically sent to the DIO for approval as required by the Institutional Requirements except during site visit preparation. If preparing for a scheduled site visit, the DIO must approve and sign the Program Information Form (PIF) prior to submission. DIO approval does not mean the complement request is ACGME approved. The Residency Review Committee (RRC) provides the final decision.

Throughout this process, information is saved when you move from screen to screen. You can exit the request at any time without losing your work by clicking continue. Return to complete the request by selecting Request change in Approved Positions on the left-hand menu.

Is this request a temporary or permanent change in resident complement?
- Temporary
- Permanent

continue >>
NEW PROGRAM DIRECTOR

A request to change the Program Director has not yet been initiated. Request for new Program Director must be initiated by the Designated Institutional Official (DIO). Program Directors will be notified via e-mail after the DIO has started the change process. Entry of additional information regarding educational experience and certification will then be requested of the Program Director/Coordinator.

Required Items for Submitting a Change in Program Director

Please contact your DIO to initiate your request.

DIO Contact Information:
Dr. Lois Bready
Associate Dean for Graduate Medical Education
[489501] - University of Texas School of Medicine at San Antonio
University of Texas Medical School at San Antonio
7703 Floyd Curl Drive, MS 7790
Office of the Medical Dean - GME
San Antonio, Texas 78229

Phone: (210) 567-4431
Fax: (210) 567-0153

DIO E-Mail: bready@uthscsa.edu

Coordinator: Wendy Breton
Coordinator Phone: (210) 567-0552
Coordinator E-Mail: bretonw@uthscsa.edu
**Initiating a Program Director Change in ADS**

Program Director changes are initiated at the institutional level by a DIO, and the DIO is requested to submit the following information:

- Previous director remaining in program as teaching faculty? Yes/No
- New PD already listed in ADS faculty roster (if you are not sure click ‘Yes’ to preview the faculty roster)? Yes/No
- DIO/GMEC ensures that the new program director meets the required qualifications for this role. Yes/No
- New Program Director Name
- Position Title
- Primary/Secondary Degree
- Program Director Phone and Fax Number
- PD E-mail for communication with ACGME (and DIO)
- Date first appointed as Program Director in this program
- Date first appointed as faculty member in this program
- Term of PD appointment

After the information is submitted by the DIO the new Program Director will automatically receive a notification e-mail to log into the Accreditation Data System (ADS) using the provided user ID and password. The Program Director must select ‘New Program Director’ under ‘Request Changes’ from the left-hand menu and follow the steps to complete the request.

When the new Program Director logs into ADS the message **IMPORTANT - Action Required** is displayed. The PD is prompted to complete the PD change process by submitting the following information:

- Primary Specialty Certification
On-Line CV

Information:
- Primary Specialty Certification
- Original Certification Year
- Most Recent Certification Year
- ABMS Board-Certified (Yes/No)
- The number of years newly appointed Program Director has taught in Graduate Medical Education in this specialty
- Number of hours Director spends a week in:
  - Clinical Supervision
  - Administration
  - Research
  - Didactic Teaching
- The primary institution where the Program Director is based
- Principal activity of PD devoted to Resident Education? Yes/No
- Program Director is also Chair of Department Yes/No

Program Director Online CV

<table>
<thead>
<tr>
<th>First Name:</th>
<th>MI:</th>
<th>Last Name:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Present Position:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>School Name:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Primary Degree Awarded:</td>
<td>Year Completed:</td>
<td>Secondary Degree Awarded:</td>
</tr>
<tr>
<td>Graduate Medical Education Program Name:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Specialty/Field:</td>
<td>Date From:</td>
<td>To:</td>
</tr>
<tr>
<td>Graduate Medical Education Program Name:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Specialty/Field:</td>
<td>Date From:</td>
<td>To:</td>
</tr>
</tbody>
</table>

Unknown Zone
<table>
<thead>
<tr>
<th>Action</th>
<th>Institution Name</th>
<th>Rotation Type</th>
<th>Do ALL Residents Rotate Through This Institution</th>
<th>Program Letter of Agreement (PLA) between program and site?</th>
<th>Rotation Months</th>
<th>Distance to Primary Teaching Facility</th>
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</thead>
<tbody>
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<td>![ ]</td>
<td>[480445] University Health System (primary teaching facility)</td>
<td>Required</td>
<td>Yes</td>
<td>N/A (site under governance of sponsoring institution)</td>
<td>Y1: 4, Y2: 4, Y3: 4</td>
<td>Miles: 0, Minutes: 0</td>
</tr>
<tr>
<td>![ ]</td>
<td>[480002] Texas Cancer Clinic</td>
<td>Required</td>
<td>Yes</td>
<td>Yes</td>
<td>0.3</td>
<td>0</td>
</tr>
<tr>
<td>![ ]</td>
<td>[480277] Brooke Army Medical Center</td>
<td>Required</td>
<td>Yes</td>
<td>Yes</td>
<td>4</td>
<td>4</td>
</tr>
<tr>
<td>![ ]</td>
<td>[480237] Wilford Hall Medical Center (AETC)</td>
<td>Required</td>
<td>Yes</td>
<td>Yes</td>
<td>4</td>
<td>4</td>
</tr>
</tbody>
</table>

Content of Educational Experience: CLICK EDIT TO VIEW

4 participating sites found.
* denotes a required field.

Add New Participating Site

If the total number of rotation months per year does not equate to 12 months (for all sites combined) provide an explanation:
Up until 2008 a resident would rotate at each site for 4 months: Brooke Army Medical Center, University Health System, Wilford Hall Medical Center.

With the new training requirement (beginning in 07/07) requiring a one month experience or equivalent in radiation oncology/oncology, 1 of the 4 weeks is devoted to the Proton Therapy Clinic during the University Health System.
<table>
<thead>
<tr>
<th>Action</th>
<th>Institution Name</th>
<th>Rotation Type</th>
<th>Do ALL Residents Rotate Through This Institution</th>
<th>Program Letter of Agreement (PLA) between program and site?</th>
<th>Rotation Months</th>
<th>Distance to Primary Teaching Facility</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>[480445] University Health System (primary teaching facility)</td>
<td>Required</td>
<td>Yes</td>
<td>N/A (site under governance of sponsoring institution)</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td></td>
<td>[480002] Texas Cancer Clinic</td>
<td>Required</td>
<td>Yes</td>
<td></td>
<td>0</td>
<td>0.3 0 1 10</td>
</tr>
<tr>
<td></td>
<td>[480277] Brooke Army Medical Center</td>
<td>Required</td>
<td>Yes</td>
<td></td>
<td>4</td>
<td>4 4 4 20</td>
</tr>
<tr>
<td></td>
<td>[480237] Wilford Hall Medical Center (AETC)</td>
<td>Required</td>
<td>Yes</td>
<td></td>
<td>4</td>
<td>4 4 4 25</td>
</tr>
</tbody>
</table>

Content of Educational Experience: CLICK EDIT TO VIEW

4 participating sites found.

Notes a required field.

Add New Participating Site

If the total number of rotation months per year does not equate to 12 months (for all sites combined) provide an explanation:

Up until 2008 a resident would rotate at each site for 4 months: Brooke Army Medical Center, University Health System, Wilford Hall Medical Center.

With the new training requirement (beginning in 07/07) requiring a one month experience or equivalent in radiation oncology/oncology, 1 of the 4 weeks is reserved at the Tumor Center Clinic during the University Health System.
Requires DIO approval

Instructions for Voluntary Withdrawal (VW) of Accreditation:
A program director may request voluntary withdrawal of a program's accreditation (due to merger, loss of resources, having no residents or fellows enrolled in the program for several years, the specialty or subspecialty is no longer being accredited, or for other reasons). Requests must be submitted through the Accreditation Data System and must be approved by the Designated Institutional Official and Graduate Medical Education Committee.

To initiate a request for withdrawal, state the proposed effective date, the plan for placement of residents/fellows in the program so the sponsoring institution may fulfill its responsibility by allowing residents/fellows to complete their residency program or facilitate their enrollment in another ACGME-accredited program.

Site Visit Scheduled:
No

Reason for requesting Voluntary Withdrawal:

If "Other", please specify:

Effective Date for Voluntary Withdrawal of Accreditation (programs generally close at the end of an academic year (6/30/2008):
(click icon to choose effective date)

Describe your plan to allow residents/fellows on duty to complete their program or facilitate their enrollment in another ACGME accredited program so they can obtain full credit for their education: (1,000 characters maximum)
Reason for requesting Voluntary Withdrawal:

If "Other", please specify:

Effective Date for Voluntary Withdrawal of Accreditation (programs generally close at the end of an academic year (6/30/2008):
(click icon to choose effective date)

06 / 30 / Select A Year

Describe your plan to allow residents/fellows on duty to complete their program or facilitate their enrollment in another ACCME accredited program so they can obtain full credit for their education:
(1,000 characters maximum)

Submit for DIO/GMEC Approval
PROGRAM: [2004831085] University of Texas Health Science Center at San Antonio Program
START DATE: NOT SCHEDULED
END DATE: NOT SCHEDULED

Your program will be notified on the day of your Resident Survey Start Date. The official notification email will contain detailed information and will be sent to the program director and coordinator listed in ADS. Programs are responsible for notifying residents/fellows to complete the survey on-line.

** Please note that web access to the Resident Survey will not be available to your residents/fellows before the start date shown above. You may see a blank copy of the survey at our public website: https://www.acgme.org/acwebsite/resident_survey/res_index.asp
Guide to the ACGME Resident / Fellow Survey Data Summary Report

To access the report:

For program directors / program coordinators:
Log in to your ADS account and find the “Resident / Fellow Survey” heading on the left-hand menu. Click “Aggregate Summary Report.” The report PDF file will then load. You may get a message that “secured and unsecured items are on this page”. Click “Yes” to continue.

For DIOs:
Log in to your ADS account and find the “Program and Resident Information” heading on the left-hand menu. Click on “View and Update Sponsored Program’s Information” and look under the “Resident / Fellow Survey Report” column. If the column contains a date and the word “Complete” a report is available. Click the date and the report PDF file will then load. You may get a message that “secured and unsecured items are on this page”. Click “Yes” to continue.

If the report is too small, you may enlarge it by clicking on the + symbol (the Zoom In symbol) on the upper right-hand side of the page.

If you get a message that the survey will be available after a certain date, this means that residents / fellows are still completing the survey. Please check back after the date indicated.

If you get the message that 70% response is required, this means that 70% of the program's residents / fellows did not complete the survey. In that case, no data are available to the program or to the program's sponsor.

More than one report for your program may be available. Use the “lookup” button at the top to see multiple administrations. The survey format changed in January of 2007; this guide is for that current version. You may find a guide for the 2004 - 2006 survey at: http://www.acgme.org/acWebsite/ads/rs_rep_faqguidelines.pdf

The report itself:

The first section of the report, shown below, contains the program’s 10-digit number, name, when residents / fellows responded to the questions, how many residents / fellows the ACGME has on file for the program, and
## Resident Survey Data, 2004 - 2006, National Normative Data, by Specialty

### Nuclear Medicine

<table>
<thead>
<tr>
<th>Content Area</th>
<th>Question</th>
<th>Residents Surveyed: 80</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Faculty Responsibility</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Core faculty teach and supervise in ways that facilitate learning</td>
<td>0.0%  8.8%  10.0%  32.5%  48.8%</td>
<td></td>
</tr>
<tr>
<td>Core faculty demonstrate a strong interest in the quality of residents' education</td>
<td>2.5% 10.6%  8.8%  36.3% 42.5%</td>
<td></td>
</tr>
<tr>
<td>Written Evaluations</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Residents evaluate the faculty through confidential written evaluations</td>
<td>15.0% 13.8% 21.3% 23.8% 26.3%</td>
<td></td>
</tr>
<tr>
<td>Program distributes a written statement of educational goals to residents</td>
<td>11.3% 16.3% 43.8% 17.5% 11.3%</td>
<td></td>
</tr>
<tr>
<td>Program communicates the results of written evaluations of performance to residents</td>
<td>8.8% 5.0% 22.5% 46.3% 17.5%</td>
<td></td>
</tr>
<tr>
<td>Written Evaluations</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Performance evaluations accessible to residents</td>
<td>12.5% 15.0% 16.3% 46.3% 10.0%</td>
<td></td>
</tr>
<tr>
<td>Performance evaluations helpful to residents in improving competence and performance</td>
<td>11.3% 20.0% 23.8% 32.5% 12.5%</td>
<td></td>
</tr>
<tr>
<td>Resident Well-being</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Program responds fairly to resident complaints</td>
<td>7.5% 16.3% 23.9% 59.0% 2.5%</td>
<td></td>
</tr>
<tr>
<td>Program emphasizes practices that ensure patient safety</td>
<td>1.3% 1.3% 11.3% 86.3% 0.0%</td>
<td></td>
</tr>
<tr>
<td>Residents perform services (start IVs, transport patients, do routine blood tests that should be done by medical staff)</td>
<td>72.5% 15.0% 1.3% 8.8% 2.8%</td>
<td></td>
</tr>
</tbody>
</table>
### Resident Survey Tutorials

(please make sure audio is turned up/on)

<table>
<thead>
<tr>
<th>Tutorial Name</th>
<th>Flash Version</th>
<th>Windows Media Player Version</th>
</tr>
</thead>
<tbody>
<tr>
<td>Resident Survey Overview</td>
<td>Flash Version</td>
<td>Windows Media Player</td>
</tr>
<tr>
<td>Aggregate Report Difficulties</td>
<td>Flash Version</td>
<td>Windows Media Player</td>
</tr>
</tbody>
</table>
Frequently Asked Questions about the ACGME Resident Survey

(November 2008)

The following are a set of responses to frequently asked questions (FAQs) about the ACGME Resident Survey:

- What is the Resident Survey?
- What do programs need to do?
- Why can’t a resident/fellow access the survey? - Troubleshooting & Helpful Information
- Duty Hour Question Guide for Residents

If after reviewing this information you have questions about the survey, or its administration, please contact your ADS representative or e-mail us at ResSurvey@acgme.org
2004831085 - University of Texas Health Science Center at San Antonio Program
Nuclear Medicine

Progress Report and Proposed Adverse Action responses will not be handled electronically. For these communications, signed hard copies must be mailed to the RRC.

Citations: (0 citations found)
Meeting Date: (Last Updated: )

Please provide a brief update on each previous citation(s) and how they have been addressed, if applicable.

Please provide a brief update explaining any major changes not described above to the training program since the last site visit (for example, changes in program format, resident complement, program leadership, or participating sites). Please limit your response to 8,000 characters.

1) New Interim Chairman for the department of Radiology at UTHSCSA effective May 1, 2008
   Michael J. McCarthy, M.D.
2) New Chairman for Department of Radiology at Brooks Army Medical Center Yong Bradley, M.D. Fall of 2007.
3) New Associate Program Director for Wilford Hall Medical Center is John Sundell, M.D. effective August 2008.
4) New Associate Program Director for Brooke Army Medical Center is Won Song, M.D. effective July 2006.
5) Change in teaching faculty; Brooke Army Medical Center 1 faculty left, 2 new faculty.
   Wilford Hall Medical Center 1 faculty left, 1 new faculty.
6) Change of rotation experience: The Wilford Hall Medical Center Rotation will be changing due to the 2005 military reorganization (Defense Base Closure and Realignment Commission-BRAC). The majority of oncologic imaging and certain outpatient elective exams will be sent to Brooke Army Medical Center (approximately decreasing procedure volume by 1/3); one radiopharmacist will be shared between the two military sites (instead of the current two radiopharmacists), and a decrease in nuclear medicine physician staffing at
Please complete the following information (required information):
Step 1: Program Address/Director Information
Step 2: Accreditation Information
Step 3: Program Coordinator Information
Step 4: ACGME Approved/Filled Resident Positions
Step 5: Participating Site Information
Step 6: Duty Hour Information/Board Pass Rates (if applicable)
Step 7: Save changes

Step 5: Participating Site Information
Submit any additions or deletions of participating sites routinely providing a required educational experience.

All rotation sites may be entered but only required sites appear on the PIF.

The Review Committee will review any newly added sites at the time of the program’s next accreditation review and comment if there are concerns. No further action is required and the program may begin to use the newly added site.

Click “X” to remove a relationship. Click the folder to edit the months of rotation or the primary teaching site. To add new institutions, click on the “Add New Participating Site” button.

<table>
<thead>
<tr>
<th>Action</th>
<th>Institution Name</th>
<th>Rotation Type</th>
<th>Do ALL Residents Rotate Through This Institution</th>
<th>Program Letter of Agreement (PLA) between program and site?</th>
<th>Rotation Months</th>
<th>Distance to Primary Teaching Facility</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>[480445] University Health System (primary teaching facility)</td>
<td>Required</td>
<td>Yes</td>
<td>N/A (site under governance of sponsoring)</td>
<td>4</td>
<td>-</td>
</tr>
<tr>
<td>Name</td>
<td>Title</td>
<td>Degree</td>
<td>Specialty(ies)</td>
<td>Base Institution</td>
<td>Yrs/Spec</td>
<td>Display Faculty on PIF</td>
</tr>
<tr>
<td>-----------------</td>
<td>---------------------------</td>
<td>--------</td>
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<td>--------------------------</td>
<td>----------</td>
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</tr>
<tr>
<td>Metter, Darlene</td>
<td>Program Director</td>
<td>MD</td>
<td>Radiology, Diagnostic, Nuclear</td>
<td>University Health System</td>
<td>12</td>
<td>✓</td>
</tr>
<tr>
<td>Blumhardt, Ralph</td>
<td>Vice Chairman</td>
<td>MD</td>
<td>Nuclear Medicine</td>
<td>University Health System</td>
<td>30</td>
<td>✓</td>
</tr>
<tr>
<td>Phillips, Willem</td>
<td>Professor</td>
<td>MD</td>
<td>Nuclear Medicine, Family</td>
<td>University Health System</td>
<td>20</td>
<td>✓</td>
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<tr>
<td>Bradley, Yong</td>
<td>Chair of Radiology at BAMC</td>
<td>MD</td>
<td>Nuclear Medicine, Radiology-Di...</td>
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<td>✓</td>
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<tr>
<td>Song, Won S</td>
<td>Associate Program Director</td>
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<td>Nuclear Medicine, Radiology-Di...</td>
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<td>Sundell, John A</td>
<td>Associate Program Director</td>
<td>MD</td>
<td>Nuclear Medicine, Radiology-Di...</td>
<td>Wilford Hall Medical Center</td>
<td>4</td>
<td>✓</td>
</tr>
</tbody>
</table>
**Evaluation**

1. Are residents evaluated on their performance following each learning experience?:
   - Yes ☐ No ☐

2. Are these evaluations documented (in written or electronic format)?:
   - Yes ☐ No ☐

3. Using the tool below (Add new assessment method):
   - Identify the evaluators for each method (e.g., if performance in patient care is evaluated at the end of a rotation using a global form completed by faculty and senior residents and also using a checklist to evaluate observed histories and physicals by the ward attending and continuity clinic preceptor, then under patient care select global assessment for a method and faculty member and senior resident for evaluators and care. Then add patient care again as a competency and select direct observation for a method and attending and preceptor as the evaluators).

<table>
<thead>
<tr>
<th>Competency</th>
<th>Assessment Method</th>
<th>Evaluators</th>
</tr>
</thead>
<tbody>
<tr>
<td>Interpersonal &amp; Communication Skills</td>
<td>Direct Observation</td>
<td>Allied Health Professional, Attending, Chief Resident, Evaluation Committee, Families, Nurse, Peers, Residents, Self</td>
</tr>
<tr>
<td>Interpersonal &amp; Communication Skills</td>
<td>Multisource Assessment</td>
<td>Allied Health Professional, Attending, Chief Resident, Evaluation Committee, Families, Nurse, Peers, Residents, Self</td>
</tr>
</tbody>
</table>
1. Are residents evaluated on their performance following each learning experience?
   - Yes  ☑️ No

2. Are these evaluations documented (in written or electronic format)?
   - Yes  ☑️ No

3. Using the tool below (Add new assessment method):
   a. Provide the methods of evaluation used for assessing resident competence in each of the six required ACGME competencies
   b. Identify the evaluators for each method (e.g., if performance in patient care is evaluated at the end of a rotation using a global form completed by faculty and senior residents and also using a checklist to evaluate observed histories and physicals by the ward attending and continuity clinic preceptor, then under patient care select global assessment for a method and faculty member and senior resident for evaluators and care, then add patient care again as a competency and select direct observation for a method and attending and preceptor as the evaluators).

<table>
<thead>
<tr>
<th>Edit</th>
<th>Delete</th>
<th>Competency</th>
<th>Assessment Method</th>
<th>Evaluators</th>
</tr>
</thead>
<tbody>
<tr>
<td><img src="edit_icon" alt="Edit" /></td>
<td><img src="delete_icon" alt="Delete" /></td>
<td>Interpersonal &amp; Communication Skills</td>
<td>Direct observation</td>
<td>Allied Health Professional</td>
</tr>
<tr>
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<td>Interpersonal &amp; Communication Skills</td>
<td>Multisource assessment</td>
<td>Allied Health Professional</td>
</tr>
<tr>
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<td>Multisource assessment</td>
<td>Attending</td>
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<td>Multisource assessment</td>
<td>Chief Resident</td>
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<td>Multisource assessment</td>
<td>New Evaluators</td>
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<tr>
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<td>Interpersonal &amp; Communication Skills</td>
<td>Multisource assessment</td>
<td>New Evaluators</td>
</tr>
<tr>
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<td><img src="delete_icon" alt="Delete" /></td>
<td>Interpersonal &amp; Communication Skills</td>
<td>Multisource assessment</td>
<td>New Evaluators</td>
</tr>
</tbody>
</table>
4. Describe other key assessment methods used but not available in the drop down list. (Limit 4,000 characters)

Review completion of a Radiation Safety Passport to document a log of certain radiation safety procedures. Review and assess a patient follow-up report format that the residents submit as a Practice-Based Learning and Improvement exercise. 4-6 patient-focused follow-ups are investigated as to the impact of a Nuclear Medicine study that the resident had participated in. The resident then reflects on a learning point he/she has gained from such a review.

809 characters.

5. Describe how evaluators are educated to use the assessment methods listed above so that residents are evaluated fairly and consistently. (Limit 4,000 characters)

All teaching faculty are recent prior resident graduates from this program and most have been evaluated by similar assessment tools. The evaluation process, however, is reviewed in late June when the residents, program directors, and available faculty convene for an annual meeting. One of the items is a basic review of the evaluation forms which are also available in their Resident Manual. This manual is annually revised and distributed to all residents and clinical faculty. Written self-explanatory assessment scales are also

765 characters.

6. Describe how residents are informed of the performance criteria on which they will be evaluated. (Limit 4,000 characters)

An annual updated Nuclear Medicine resident manual is distributed to the residents and clinical teaching faculty at the beginning of the academic year. The manual includes the goals and objectives and the evaluation assessment tools (samples provided in the manual) which are
6. Describe how residents are informed of the performance criteria on which they will be evaluated. (Limit 4,000 characters)

An annual updated Nuclear Medicine resident manual is distributed to the residents and clinical teaching faculty at the beginning of the academic year. The manual includes the goals and objectives and the evaluation assessment tools (samples provided in the manual) which are reviewed at the beginning of the year. These are reviewed with the residents at the beginning of the academic year.

Faculty at each site provide a written confirmation: 1) receipt of the manual,

7. Describe the system to ensure that faculty complete written evaluations of residents in a timely manner following each rotation or educational experience? (Limit 4,000 characters)

There are several rotation evaluations. The institutional rotation evaluation is electronic and is in a global assessment format, New Innovations. Notifications are sent by email to the respective faculty with a follow up reminder(s) by the program co-ordinator if these are not completed in a timely manner.

Multisource surveys are another evaluation process and generated by the site specific PD and the resident (i.e., resident for the rotation).

8. Describe the process used to complete and document written semiannual resident evaluations, including the mechanism for reviewing results (e.g., who meets with the residents and how the results are documented in resident files? (Limit 4,000 characters)

The program director meets with each resident on a semi-annual basis at UI/UCH. This is usually a 45-60 minute session which reviews: all resident written evaluations received up to the review date; the maintenance of required resident case logs, review of their personal learning plans, research project, radiation safety passport, participation in a GME internal review, reminder of their billing and coding rotation, QA/practice-based learning and improvement project, current study habits, future plans, and any concerns or program
9. Describe the system used by the residents to provide annual confidential written evaluations of the teaching faculty (have examples and forms available for review by site visitor). (Limit 4,000 characters)

Confidential and written evaluations of the teaching faculty are obtained. Due to the very small number of residents in the program, an electronic faculty evaluation is sent not only to the Nuclear Medicine residents, but to the radiology residents currently on the Nuclear Medicine service. These evaluations are compiled by the program co-ordinator and an electronic summary is sent to the individual faculty with an email confirmation from the faculty of receipt. A summary of faculty evaluations are annually reviewed by the program co-ordinator.

10. Describe the program's (or Department's, if applicable) system for evaluating and providing feedback to the teaching faculty. (Limit 4,000 characters)

On an annual basis the clinical faculty and course director for the Basic Science/ Physics lectures are confidentially reviewed by the residents as discussed above. The compiled evaluation is typed by the program co-ordinator and emailed to the individual faculty. Faculty then email confirmation of evaluation receipt to the program co-ordinator.

The program director reviews a summary of all faculty evaluations.

11. Describe the approach used for program evaluation. (Limit 4,000 characters)

There are five methods to assess for program evaluation:
1) Performance on the American Board of Nuclear Medicine (ABNM) certification exam. This program has had a 100% first attempt pass rate for the last 12 years.
2) Performance on the ABNM annual In-Training exam (ITE). This program is ranked 12th out of the 35 programs in the country on academic performance on the 2003 ITE.
3) Alumni surveys are completed by program graduates > 3 years from completion of training.
4) Faculty evaluations are completed by program faculty quarterly.
5) Resident surveys are completed by all residents on their experience.
lack of research and financial experience during their training. The following action plans have thus been/are being developed as follows:

RESEARCH: The program has since implemented a minimum of 2 weeks research/year with a requirement for scholarly activities. Peer review publications or national/regional/state presentations are also

12. Describe one example of how the program used the aggregated results of residents’ performance and/or other program evaluation results to improve the program (have the written plan of action available for review by the site visitor) (Limit 4,000 characters)

The annual resident and program directors meeting identifies resident and/or faculty concerns regarding the program training experience. One issue that was brought up during the 2008 meeting centered on the required one month experience in radiation oncology/ oncology. The concern was the need to revise the rotation experience. The planned interdisciplinary oncology conferences did not suffice in the oncology experience and the result was a limited direct oncology exposure. The radiation oncology experience, however, was adequate

13. Describe the improvement efforts not described above currently undertaken in the program based on feedback from the ACGME resident survey? What improvements, if any, has the program undertaken to address potential issues identified by the most recent ACGME resident survey summary report. (Limit 4,000 characters)

Please review your survey summary.

The most recent ACGME Resident Survey in Nuclear Medicine is from 2004-2006. This survey identified areas of non-compliance by >10%:
1) "Faculty demonstrated a strong interest in the quality of residents' education." Not a problem with our program with good outcome performance on standardized exams, collaborative resident/faculty research projects, and mentorship in leadership and educational positions in Nuclear Medicine.;
2) "Resident evaluated the faculty through confidential written
PIF PREVIEW OPTIONS

1. Set Faculty Sort Order:
   Use this feature to sort faculty appearing on your PIF (Faculty Roster and CVs). You may also hide faculty so that they do not appear on your PIF.

2. Participating Site Sort Order (excludes elective sites):
   - [489501] - University of Texas School of Medicine at San Antonio (Sponsor)
   - [480445] - University Health System (Primary Teaching Site)
   - [48D002] - Texas Cancer Clinic
   - [480277] - Brooke Army Medical Center
   - [480287] - Wilford Hall Medical Center (AETC)

   Edit Participating Sites Sort Order
   Choose the sort order of the participating sites listed on your printed version of the PIF. This may affect your data in the specialty specific portion of your PIF.

3. Type of PIF to View
   Preview/Edit PIF
   Instructions
   This view displays the final print format of the PIF with 'edit' links to the data entry screens so you may update your data. DO NOT SUBMIT THE PREVIEW/EDIT VIEW TO THE SITE VISITOR.

   View Printer Friendly Version (HTML)
   This view displays the final PIF. Depending on your browser, you will need to use the Page Setup feature to either set the margins to .25 (left,right,top bottom) or 'shrink to fit page width'. Also use Page Setup to center the page numbers on the footer of the document.

   View Printer Friendly Version (PDF)
   This view displays the final PIF. Page numbering will automatically
Program Notification Letters and Other RRC Correspondance
Citations From Most Recent Status Decision

The Respond to Citations feature is shown for your convenience in preparation for electronic response to citations. **You are not currently required to respond to citations unless a change in resident complement is requested (for some specialties) or if you are preparing for a site visit.** For one year subspecialties which will not begin using the common PIF this year, the ‘Response to Citations’ in ADS remains optional. Most of the subspecialty PIFs request this information in Part II of the PIF, you may copy and paste responses from ADS to the Word document for Part II of the PIF.

**Progress Report and Proposed Adverse Action** responses will not be handled electronically. For those communications, signed hard copies must be mailed to the RRC.

<table>
<thead>
<tr>
<th>View Notification Letters</th>
<th>Respond To Citations</th>
<th>Program Code</th>
<th>Specialty</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>2004931085</td>
<td>Nuclear medicine</td>
</tr>
</tbody>
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2004831085 - University of Texas Health Science Center at San Antonio Program
Nuclear Medicine

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3) New Associate Program Director for Wilford Hall Medical Center is John Sundell, M.D. effective August 2008.
4) New Associate Program Director for Brooke Army Medical Center is Won Song, M.D. effective July 2006.
5) Change in teaching faculty; Brooke Army Medical Center 1 faculty left, 2 new faculty. Wilford Hall Medical Center 1 faculty left, 1 new faculty.
6) Change of rotation experience: The Wilford Hall Medical Center Rotation will be changing due to the 2005 military reorganization (Defense Base Closure and Realignment Commission-BRAC). The majority of oncologic imaging and certain outpatient elective exams will be sent to Brooke Army Medical Center (approximately decreasing procedure volume by 1/3); one radiopharmacist will be shared between the two military sites (instead of the current two radiopharmacists), and a decrease in nuclear medicine physician staffing at
Site Visitor Evaluation

This feature is only available for programs with site visits on or after January 1st, 2009. No Site Visitor Evaluation is available at this time.
Competency and Assessment Glossary

Competencies

1. **Patient Care** - Gather data; order diagnostic tests; interpret data; make decisions; perform procedures; manage patient therapies; work with others to provide patient-focused care.
2. **Focused or Direct Observation and Evaluation** - Fund of knowledge; active use of knowledge to solve medical problems.
3. **Practice-Based Learning & Improvement** - Analyze practice performance and carry out needed improvements; locate and apply scientific evidence to the care of patients; critically appraise the scientific literature; use the computer to support learning and patient care; facilitate the learning of other health care professionals.
4. **Interpersonal & Communication Skills** - Develop a therapeutic relationship with patients and their families; use verbal and non-verbal skills to communicate effectively with patients and their families; work effectively as a team member or leader.
5. **Professionalism** - Demonstrate integrity and honesty; accept responsibility; act in the best interest of the patient; demonstrate sensitivity to patients' ethnicity, age, and disabilities.
6. **Systems-Based Practice** - Demonstrate awareness of interdependencies in the health care system that affect quality of care; provide cost-effective care; advocate for quality patient care; work with hospital management and interdisciplinary teams to improve patient care.

Assessment Methods

1. **Anatomic or animal models** - Form of low-tech simulation; performance of procedures using non-computerized 3-dimensional anatomic models that replicate properties of human anatomical structures is observed and assessed concurrently (direct observation). May be used to identify learning gaps and to provide evidence of improvement.
2. **Direct observation** - Assessor watches a clinical encounter and assesses performance (same day) using a rating tool specific for the type of encounter (e.g., procedure, physical exam, patient interview, etc.). Direct observation is used as part of other assessment methods, e.g., simulations and OSCEs. Examples of rating tools are communication checklists (e.g. SEQUE), technical/procedure skills forms (e.g. OSATS, DOPS), clinical encounter forms (e.g., mini CEX).
3. **Formal oral examination** - Form of informal mini-oral exam; may consist of a small set of predetermined questions and is commonly conducted as part of a resident's case presentation to the faculty supervisor or mentor. See Oral examination (informal).
4. **Global assessment** - Rating of overall functioning of resident during a specified time period on a continuum from low to high (specific rating anchors vary) across one or more performance domains; performance descriptors may vary across a single word to multiple sentences. Alternate name for this method is global performance rating. A Global assessment is not specific enough to be gradeable.

Done
Interactive Session

(your turn)
Updated FAQs
Updated FAQs

How often are the FAQs updated?
Updated FAQs

Semi-annual: Summer, Winter
(after each RRC meeting)
Updated FAQs

Where do you find the NM RRC FAQs?
Accreditation Council for Graduate Medical Education

- Allergy & Immunology
- Anesthesiology
- Colon & Rectal Surgery
- Dermatology
- Emergency Medicine
- Family Medicine
- GME Information
- GME Resident/Fellow survey resumes through June of 2009
- Human Resources
- Innovation (CI)
- Institutional Review
- Meetings & Workshops
- Newsroom
- Outcome Project
- Review Committees
- Resident Duty Hours
- Resident Services
- Review & Comment
- Search Programs/Sponsorship
- Site Visit
- ACGME Databook now available
- Diagnostic Radiology
- Radiation Oncology
- Surgery
- Thoracic Surgery
- Urology
- Transitional Year
- Program Director Guide to the Common Program

ACGME Glossary of Terms | Search | Site Map | Application Support | Legal | Contact Us

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New zip code: ACGME, 515 N. State, Suite 2000, Chicago, IL 60654 (P.O. Box zip code

Events:

- **New** - 2009 ACGME Annual Educational Conference (registration now open)
  March 5 - March 8, 2009
  Grapevine, TX

- **New** - NRMP Offers Session at ACGME Annual Conference (PDF)
  (not included in brochure)

- ACGME Meetings
- 2009 RC Meetings
- 2010 RC Meetings
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Free Adobe Acrobat Reader
Where do you find information on the NM RRC current activities?
Current Activities

• Semiannual Newsletters after each RRC meeting (May, Nov)
  • notify NMPD of major issues discussed at the recent RRC meeting
• Semiannual FAQ updates after each RRC meeting
  • addressing concerns raised by NMPD in the most recent 6 months
Accreditation Council for Graduate Medical Education

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- Outcome Project
- Review Committees
- Resident Duty Hours
- Resident Services
- Review & Comment
- Search Programs/Sponsor
- Site Visit

Program Directors & Coordinators | DIOs | Public

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Nuclear Medicine RRC Newsletter

- January 2009
- Summer 2008
- Summer 2007
- Winter 2005

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Revising the Nuclear Medicine Program Requirements

At the November 2008 meeting, the RRC reviewed, revised, and reorganized the Nuclear Medicine Program Requirements. The impetus for redesigning the requirements was to decrease the burden on programs and faculty, to make it more relevant to the current practice of nuclear medicine, and to further quantify and operationally define the RRC criteria for minimum residency accreditation standards. More information on the progress of this revision will be announced through the weekly ACGME e-Communication as it is available.

RRC Welcomes New Resident Member

Joanna Fair, MD is our new resident member. Dr. Fair earned her BA in chemistry from Rice University, a PhD in chemical physics from the Uni-
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Accreditation Council for Graduate Medical Education

Recent PD Questions
Post Test

- Where do you find the resident survey?
- Where would you go to look up ACGME terminology?
- Is there a resource for the CPIF?
- Where do you find your LON?
- Where do you find a list of your 55 “best friends?”
NM RRC Members

- Darlene Metter, MD FACR, Chair (SNM)
- Leonie Gordon, MD, Vice-Chair (AMA)
- Christopher Palestro, MD (SNM)
- Harvey Ziessman, MD (ABNM)
- J Anthony Parker, MD PhD (ABNM)
- Joanna Fair, MD PhD (resident)
- Michael Graham, PhD MD (alternate)
Contact Information

You can reach Missy Fleming PhD by phone or email at:

312-755-5403
mfleming@acgme.org

Nuclear Medicine Website:
Your Questions

THANK YOU