

2018 annual report



ABR

AMERICAN BOARD
OF RADIOLOGY

TABLE OF CONTENTS

- 1 Message from ABR President Brent J. Wagner
- 2 Message from ABR Executive Director Valerie P. Jackson
- 3 Thank You to Our Volunteers
- 4 Volunteer Serves Profession, World
- 6 ABR Boards of Governors and Trustees
- 8 ABR Accomplishments
- 10 Diagnostic Radiology
- 12 Interventional/Diagnostic Radiology
- 14 Medical Physics
- 16 Radiation Oncology
- 18 Certification Statistics
- 19 Exam Statistics
- 20 Social Media

ABR MISSION

To certify that our diplomates demonstrate the requisite knowledge, skill, and understanding of their disciplines to the benefit of patients.

THANK YOU, RADIOLOGY, LTD.

The ABR appreciates the cooperation provided by Radiology, Ltd., a Tucson-based practice. Several photos in this report were shot at a Radiology, Ltd. facility, and include its radiologists and staff.

PHOTOS

Many of the photos in this report were taken by Dago Esquer. Others were provided by Joshua Nickerson and the Society for Interventional Radiology.

PRESIDENT'S MESSAGE



The release of the American Board of Medical Specialties' Vision for the Future Commission Report earlier this year represented the product of an in-depth and candid discussion among medical specialty boards and various stakeholders across the nation. Although continuing board certification, or Maintenance of Certification, is relatively new to radiology, it has been part of some medical specialties for more than 30 years. Complaints regarding continuing certification from within the medical community have been vocal and largely aimed at programmatic requirements, rather than the intent of the boards. As a result, much of the criticism has lost sight of the reasons members of the profession formed the boards early in the last century: to allow qualified physicians to distinguish themselves as specialists on the basis of training and testing and, by extension, serve as advocates for patient safety and well-being.

The ABR has taken significant steps in recent years to make requirements less onerous and more relevant. Specifically, the lifelong learning requirement was amended in 2012 to allow any enduring material (e.g., journal articles that offer CME) to provide credit for self-assessment. The improvement in medical practice requirement was amended in 2015 to include activities that are inherent in most practices (including, but not limited to, OPPE, MQSA, departmental peer review, participation in prospective chart rounds, or submission of data to a national registry) to satisfy this component of MOC; this was intended to recognize practice-related efforts in which ABR diplomates are already engaged. Most importantly, the ABR recently transitioned from the requirement for a periodic in-person exam to an Online Longitudinal Assessment (OLA), detailed elsewhere in this report.

The ABR strives to develop continuing certification programs that are balanced: not only reasonable and relevant to the diplomates, but also sufficiently rigorous to be credible to the public. As a not-for-profit, the ABR collects fees to cover the expenses of administering the programs. Reserves are maintained to cover unexpected capital expenses, but fees are set as closely as possible to approximate administrative expenses. The board has a fiduciary responsibility to follow applicable laws for not-for-profits; additionally, board members challenge management (and each other) to maintain fees at the lowest possible level while providing high-reliability exams.

Brent J. Wagner, MD, *President*

EXECUTIVE DIRECTOR'S MESSAGE



When those of us at the ABR say, “We hear you. We are you,” we are making a promise. Those two short sentences are a vow we make to our diplomates to work together to ensure the public receives the best possible care.

Sometimes, that involves changing the way we tailor our assessments. Listening to our diplomates and adjusting based on their needs is the most important part of the equation.

A great example of that partnership is our Online Longitudinal

Assessment (OLA), the new way to satisfy Part 3 of Maintenance of Certification.

OLA replaces the traditional 10-year exam, which had become a point of concern for many diplomates. Travel and time away from work to take the exam were issues, as were uncertainties involved with preparing for such an extensive exam and a lack of immediate feedback on answers. OLA addresses all those worries. The work put into developing it was thorough and was accomplished with the assistance of our outstanding diplomates.

Before the OLA prelaunch started for diagnostic radiology and its subspecialties in December 2018, ABR staff and volunteers spent approximately three years developing the system. More than 1,200 diplomates from all four specialties shared their knowledge during the process, serving as pilot participants who tested all elements of the product. OLA is a direct result of those volunteers' assistance.

As with all our exams, content was developed by volunteer subject matter experts in the field. That approach has proven to be the best way to partner with our diplomates to produce an assessment that best illustrates what diplomates should know. In fact, OLA questions are meant to represent “walking-around knowledge,” something best provided by those who work in radiology every day.

OLA will begin for interventional radiology, radiation oncology, and medical physics diplomates in January 2020. Just as we did for diagnostic radiology, we will offer a prelaunch to allow those diplomates time to gain familiarity with the system. Diplomates will receive updates notifying them before the prelaunch period begins.

At the ABR, we always welcome and value diplomate concerns and suggestions. While we are continually making improvements, we are happy that OLA is an improved Part 3 option for diplomates. We will continue to listen and partner with the thousands of dedicated radiology diplomates.

Valerie P. Jackson, MD, *Executive Director*

THANK YOU TO OUR ABR VOLUNTEERS!

The ABR relies heavily on its volunteers. As is the case with other medical boards, volunteer efforts enable us to meet our mission and serve the public and profession in the most effective and efficient ways possible.

Last year, volunteers contributed more than 70,000 hours to the ABR. They served as board members, oral examiners, representatives on standard-setting committees, self-assessment module reviewers, and members of initial certification and Maintenance of Certification advisory committees.

More than 1,500 subject matter experts participated in the Online Longitudinal Assessment (OLA) pilot or developed questions for the exam. When OLA was introduced to diagnostic radiology diplomates in January 2019, we were confident the assessment was fair and relevant because of volunteer efforts.

The men and women in radiology volunteer because they want to advance their profession. All the work they do for us is performed on their own time. Thanks to their assistance, we can continue to diligently serve radiology professionals and the public.

Learn more about volunteering for the ABR by visiting www.theabr.org, selecting a specialty, and clicking on the volunteer link.

Our mission is to certify that our diplomates demonstrate the requisite knowledge, skill, and understanding of their disciplines to the benefit of patients.



DIPLOMATE BRINGS A WORLD VIEW TO HIS VOLUNTEER WORK

Joshua P. Nickerson, MD, is constantly in search of ways to improve the field of radiology, and his efforts stretch beyond his position at Oregon Health Sciences University in Portland. A diagnostic radiologist with a subspecialty in neuroradiology, he has traveled the world to better his profession and improve patient outcomes.

“I have been fortunate to be able to travel outside the U.S. a few times on behalf of academic radiology, and these have been tremendously rewarding and eye-opening experiences,” he said. “On the one hand, it has made me more appreciative of how fortunate I have been to train and practice here in the U.S. On the other hand, it has been humbling to see what talented and dedicated radiologists in places like Africa and the Middle East are able to accomplish for their patients, at times with limited resources and support.

“In some cases, seeing the vast discrepancy between what is considered minimum competency to practice safely has, beyond a doubt, opened my eyes to the necessity of a common standard of practice and an impartial body to uphold that standard.”

Inspired by this experience, Dr. Nickerson became an ABR volunteer in 2016. For the past two years, he has served on the Maintenance of Certification Advisory Committee during development and testing of Online Longitudinal Assessment (OLA).



“I know the ABR, along with all the medical boards, is a necessary part of a self-regulating profession, and I would always rather be part of a solution than a passive recipient of decisions made when I could have had input but didn’t step forward,” he said. “The best part of volunteering has been getting to know others who do the same. Many come from different parts of the country and different types of practice, and they bring different goals or concerns to the process. I enjoy seeing the variety of perspectives.”

Dr. Nickerson has found participation on the MOC Advisory Committee to be rewarding.

“The ABR leadership seemed genuinely engaged during our meetings and was quick to respond to our suggestions, critiques, and observations,” he said. “Members of the board eagerly sought out feedback during these sessions and took careful note of even the most minor adjustments brought by the committee members.”

One of Dr. Nickerson’s greatest radiology mentors once opened and closed one of her presentations to a large audience with the statement, “I love being a radiologist!” That same mentor instilled in him a passion for education and a desire to be a leader for change.

“While those long-term goals drive me on a large scale, what is perhaps more embodied by her statement and what puts the spring in my step when going to work every day is the satisfaction of using the most advanced technology in our field to make a diagnosis,” he said. “After more than a decade, I am still in awe when I stop to consider MR images. The ability to place someone in a magnetic field, generate some radio waves, and as a result see the inner workings of the brain down to the millimeter would have seemed like powerful magic only a few generations ago. I have no doubt that in coming decades we will see similar advances that today we would classify as science fiction. This is what excites me for the career ahead.”

ABR

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RADIOLOGY

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New York, NY



Brian J. Davis, MD, PhD
Rochester, MN



Patricia H. Hardenbergh, MD
Edwards, CO



Andrea K. Ng, MD, MPH
Boston, MA

INTERVENTIONAL RADIOLOGY/ DIAGNOSTIC RADIOLOGY



Anne M. Covey, MD
New York, NY



M. Victoria Marx, MD
Los Angeles, CA



James B. Spies, MD, MPH
Washington, D.C.

MEDICAL PHYSICS



Jerry D. Allison, PhD
Nuclear Medical Physics
Augusta, GA



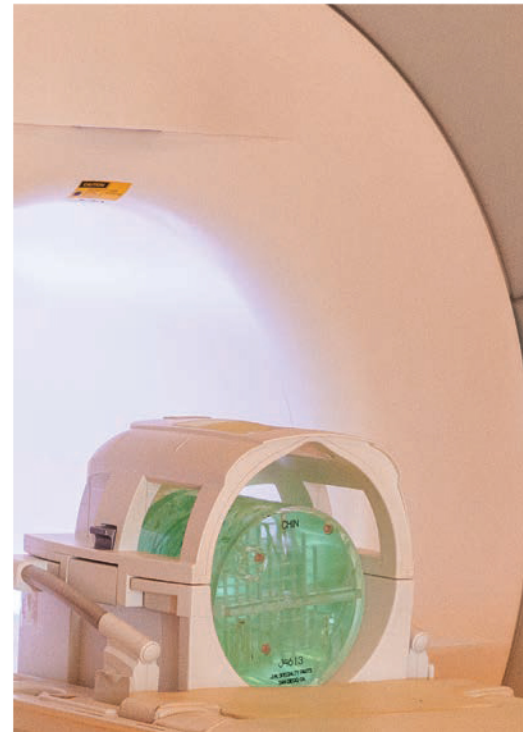
Kalpana M. Kanal, PhD
Diagnostic Medical Physics
Seattle, WA



Matthew B. Podgorsak, PhD
Therapeutic Medical Physics
Buffalo, NY

ACCOMPLISHMENTS

- 9,605 participants engaged in initial certification and 29,505 in Maintenance of Certification.
- 1,267 volunteers contributed 70,625 hours.
- 93.8 percent of candidates and diplomates reported satisfaction with ABR interactions.
- Started Online Longitudinal Assessment (OLA) as the way to satisfy Part 3 of Maintenance of Certification for diplomates certified in diagnostic radiology and its subspecialties.
- Issued 2,177 new certificates.
- Certification services advisors answered more than 9,000 calls and 10,000 emails.
- Administered 32 exams.
- Joined social media by introducing Facebook and Twitter pages.
- Gave talks at regional and national meetings describing OLA for Maintenance of Certification Part 3.



DIAGNOSTIC RADIOLOGY

“Board certification assures our patients that they are receiving the best, most up-to-date, and safest care. I put a lot of stock in it. The ABR’s commitment to patients is one of the reasons I’m proud to be on its Board of Governors.”

Cheri L. Canon, MD

*Professor and Witten-Stanley Endowed Chair of Radiology
The University of Alabama at Birmingham
Birmingham, Alabama*



ACCOMPLISHMENTS

- Launched Online Longitudinal Assessment (OLA) with excellent diplomate feedback.
- Worked to further increase the diversity of committees, including geographic location, practice type, and other demographic considerations.
- Conducted two administrations of the Core Exam, two administrations of the Certifying Exam, and three subspecialty exams.
- Awarded 1,173 new diagnostic radiology specialty certificates and 307 new subspecialty certificates.



“Board Certification tells my patients that I meet an external and objective assessment, ensuring I am competent to provide them with medical care. It helps people trust me.”

M. Victoria Marx, MD
*Professor of Clinical Radiology; Vice Chair for Education;
Director, Residency Training Program*
Keck Medicine
The University of Southern California
Los Angeles, California



ACCOMPLISHMENTS

- Gave exams to 13 percent more candidates than in 2017.
- Continued offering the Transition Pathway to IR/DR certification for diplomates who have never been certified through the subspecialty (CAQ) process and are more than 10 years out of fellowship. The deadline for applying is February 28, 2020.



MEDICAL PHYSICS

“My primary role is to assure the safe and effective treatment of every patient who comes through our doors, and I feel a tremendous sense of responsibility to our patients and our staff. Board certification serves not only as an independent validation that I’m appropriately knowledgeable and skilled to fulfill this responsibility, but also that I’m continually working to improve those capabilities through Maintenance of Certification and continuous quality improvement.”

Jay W. Burmeister, PhD

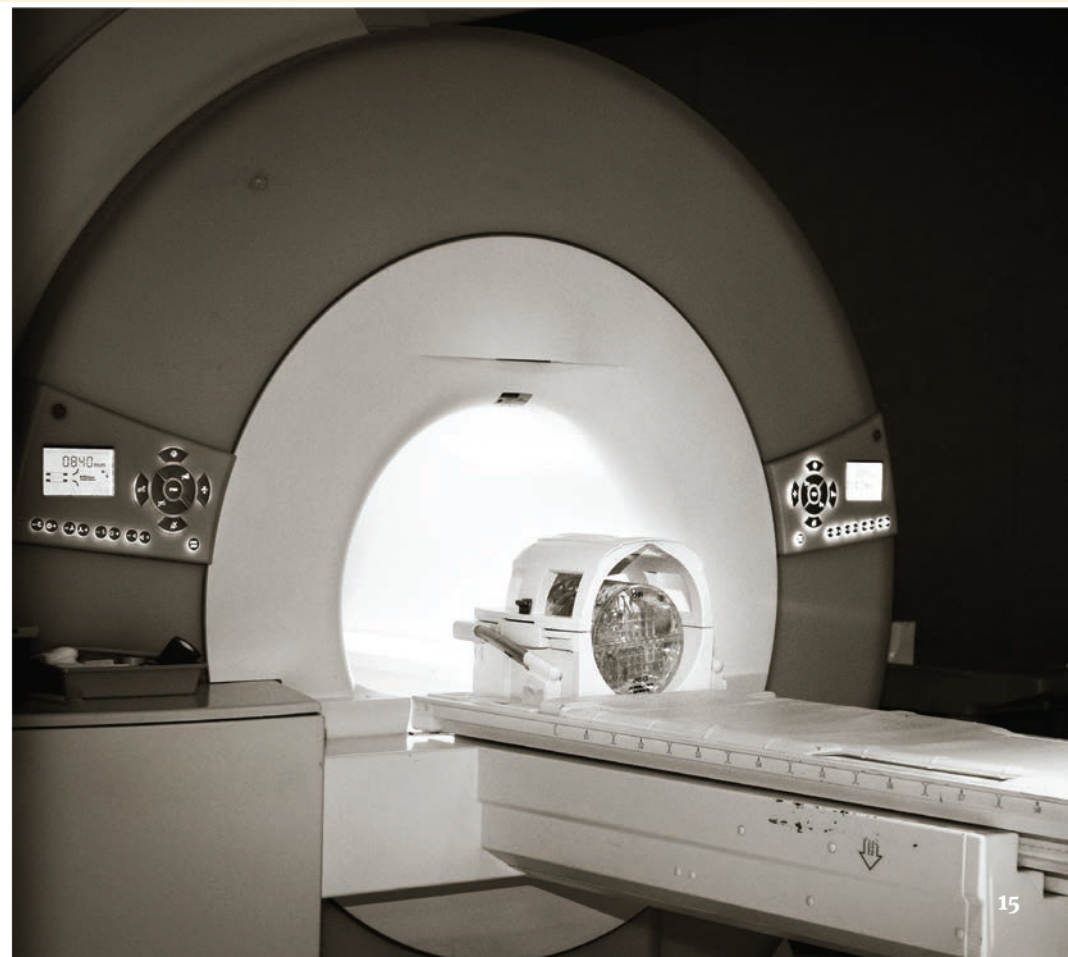
*Chief of Physics, Karmanos Cancer Center
Professor, Department of Oncology*

Wayne State University School of Medicine
Karmanos Cancer Institute
Detroit, Michigan



ACCOMPLISHMENTS

- Finalized first set of items for Online Longitudinal Assessment (OLA).
- Conducted the last and largest medical physics certifying Oral Exam in Louisville.
- Started providing each medical physics examinee with a performance breakdown by category for the Part 1 and Part 2 medical physics exams.
- Worked with DR, IR/DR, and RO to develop the physics content of their certifying processes.
- Updated the therapeutic medical physics Part 3 exam blueprint and re-categorized all existing questions.
- Three newly formed ABR medical physics committees (45 new volunteers) each developed hundreds of questions for OLA use in their respective disciplines (diagnostic, nuclear, and therapeutic medical physics).



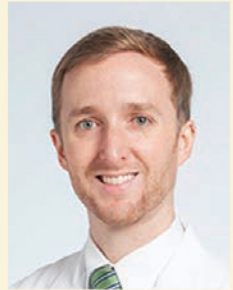
RADIATION ONCOLOGY

“Board certification helps ensure all of our patients are receiving quality, evidence-based radiation therapy services. When we evaluate physician candidates, board certification is a key metric we use to ensure that our patients are going to receive the outstanding care we want to provide.”

Matthew C. Ward, MD

Radiation Oncologist

Southeast Radiation Oncology
Charlotte, North Carolina



RADIATION ONCOLOGY ORAL GYN COMMITTEE

ACCOMPLISHMENTS

- Online Longitudinal Assessment (OLA) committees were formed and began writing exam items.
- Administered the last Oral Exam in Louisville.
- Worked with various stakeholder groups to develop core curricula and study guides for physics and radiation and cancer biology.
- Re-activated the Initial Certification Advisory Committee.



CERTIFICATION STATISTICS

CERTIFICATIONS BY DECADE

| 1934-1939 ¹ | 1940-1949 | 1950-1959 | 1960-1969 | 1970-1979 | 1980-1989 | 1990-1999 | 2000-2009 | 2010-2018 | TOTAL |
|------------------------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|--------|
| 1,413 | 1,844 | 3,303 | 4,175 | 9,318 | 10,083 | 12,391 | 12,994 | 17,588 | 73,109 |

¹ Founded in 1934.

SPECIALTY CERTIFICATES ISSUED 2009-2018

| YEAR | 2009 | 2010 | 2011 | 2012 | 2013 | 2014 | 2015 | 2016 | 2017 | 2018 | TOTAL |
|---|--------------|--------------|--------------|--------------|--------------|------------------------|--------------|--------------|--------------|--------------|----------------|
| Diagnostic Radiology | 1,233 | 1,239 | 1,257 | 1,328 | 1,334 | 125 ¹ | 1,092 | 1,273 | 1,160 | 1,173 | 11,214 |
| Interventional/ Diagnostic Radiology | — | — | — | — | — | — | — | — | 256 | 312 | 568 |
| Medical Physics | 204 | 204 | 315 | 263 | 266 | 279 | 248 | 242 | 217 | 215 | 2,453 |
| Therapeutic ² | [169] | [181] | [263] | [232] | [213] | [217] | [211] | [196] | [155] | [166] | [2,003] |
| Diagnostic ² | [28] | [22] | [41] | [29] | [45] | [54] | [30] | [41] | [52] | [43] | [385] |
| Nuclear ² | [7] | [1] | [11] | [2] | [8] | [8] | [7] | [5] | [10] | [6] | [65] |
| Radiation Oncology | 166 | 139 | 148 | 155 | 170 | 164 | 154 | 196 | 194 | 170 | 1,656 |
| TOTAL | 1,603 | 1,582 | 1,720 | 1,746 | 1,770 | 568¹ | 1,494 | 1,711 | 1,827 | 1,870 | 15,891 |

¹ Because of the transition from the diagnostic radiology (DR) Oral Exam to the DR Certifying Exam, only those who took and passed a DR Oral Exam were certified in 2014. The first DR Certifying Exam was administered in October 2015.

² Specific specialty of medical physics

SUBSPECIALTY CERTIFICATES ISSUED 2009-2018

| YEAR | 2009 | 2010 | 2011 | 2012 | 2013 | 2014 | 2015 | 2016 | 2017 | 2018 | TOTAL |
|--|------------|------------|----------------|------------|------------|------------|------------|------------|------------|------------|--------------|
| Neuroradiology | 158 | 167 | 185 | 197 | 189 | 158 | 170 | 149 | 211 | 248 | 1,832 |
| Nuclear Radiology | 2 | 5 | 7 | 7 | 13 | 11 | 10 | 2 | 5 | 6 | 68 |
| Pediatric Radiology | 41 | 40 | 53 | 59 | 60 | 57 | 81 | 65 | 74 | 52 | 582 |
| Vascular & Interventional Radiology ¹ | 103 | 98 | 117 | 133 | 150 | 177 | 103 | 177 | — | — | 1,058 |
| Hospice & Palliative Medicine ² | — | 11 | — | 42 | — | 5 | — | 2 | — | — | 60 |
| Pain Medicine ³ | — | — | 1 ⁴ | — | — | — | — | 1 | 1 | 1 | 4 |
| TOTAL | 304 | 321 | 363 | 438 | 412 | 408 | 364 | 396 | 291 | 307 | 3,604 |

¹ No longer issued; replaced by IR/DR in 2017.

² Certification administered by the American Board of Internal Medicine beginning in 2008; exams offered every other year.

³ Certification administered by the American Board of Anesthesiology beginning in 2016; exams offered every year.

⁴ Diplomate was originally certified by the American Board of Physical Medicine and Rehabilitation and transferred to the ABR.

INITIAL EXAM STATISTICS

Average pass rates for residents taking the exam for the first time (2016–2018*)

| | Average Count | Average Pass Rate |
|---------------------------------------|---------------|-------------------|
| Diagnostic Radiology Core Exam | 1,171 | 90% |
| Medical Physics Part 1 Clinical Exam | 444 | 68% |
| Medical Physics Part 1 General Exam | 391 | 62% |
| Medical Physics Part 2 Exam | 112 | 85% |
| Medical Physics Part 3 (Oral) Exam | 227 | 62% |
| Radiation Oncology Biology Exam | 171 | 86% |
| Radiation Oncology Clinical Exam | 181 | 92% |
| Radiation Oncology Oral Exam | 183 | 90% |
| Radiation Oncology Physics Exam | 171 | 85% |
| Neuroradiology Subspecialty Exam | 202 | 87% |
| Nuclear Radiology Subspecialty Exam | 5 | 89% |
| Pediatric Radiology Subspecialty Exam | 61 | 99% |

* Medical Physics Part 1 and Part 2 data are from 2015–2017.



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ABR ON SOCIAL MEDIA



Last year was significant in the ways we communicate with our diplomates and candidates. In the fall, we introduced our Facebook and Twitter pages to keep our candidates and diplomates informed and to encourage interaction.

The results are already showing. Hundreds of people are following us to get the latest information about the ABR and to share their opinions. One of the many values of social media is the opportunities it offers for productive conversation. That's why we're all in.

Social media complements the many other ways we communicate with radiology professionals. We produce our *Volunteer Bulletin* as well as *The BEAM*, which is emailed to all our diplomates. Our website is packed with information related to certification in all our radiology disciplines. In early 2019, we introduced a blog, which can be found in the news section of our site. We also send e-blasts, and meet face to face with diplomates and candidates at conferences and meetings. We're constantly looking for new ways to distribute information.

Please follow us on Facebook, Twitter and Instagram (added in 2019) by searching for the American Board of Radiology. We look forward to talking with and listening to you.



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