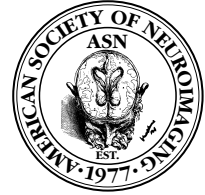


AMERICAN SOCIETY OF NEUROIMAGING NEWSLETTER

EDITOR: Charles H. Tegeler, MD



July 2001

President's Address John B. Chawluk, MD



It is intimidating to look back at the list of neuroimaging giants that have led this organization, beginning with Dr. William Oldendorf in the late 1970's and most recently Dr. Charles Tegeler. I owe special thanks to my friend and mentor, Jack Greenberg, and also to Drs. Prockop and McKinney for their wise counsel, support and friendship. Jim Toole and Joe Masdeu were major influences in emphasizing the educational and certification roles of the ASN; John Mazziotta taught me how attention to detail can help structure a successful Annual Meeting. He was also my major ally in pushing for a Las Vegas meeting (there was quite a bit of opposition to a meeting in "Sin City", but the Society's dark side gained the upper hand in this battle) and we are all very pleased with the outcome. In his first Presidential report in 1999, Dr. Tegeler used the "millennia" acronym to emphasize the role and mission of the ASN. I would like to select just a few of the "millennia" letters in order to share with you my views on those areas where the ASN will be active over the next few years, and what struggles confront us all.

Chuck's millennia "M" stood for membership. My first ASN job was

as Membership Committee Chair in the late 1980's. At that time we saw a tremendous growth in ASN membership, due not as you may expect to my brilliance as Membership Chair, but mainly to the personal efforts of Drs. McKinney and Prockop in recruiting their residents and fellows into the Society. There are two ways that the ASN can increase membership. The most immediate method is for all of us as individual members to actively encourage our professional colleagues and students to join the ASN. Give them membership applications; fill out the applications for them if you have to, even hold their hands as they write out their dues checks! If each of us would bring in one new member, our membership rolls would double!

The more long-term approach to increasing membership, and the only way we will retain membership, is to create a Society that meets a critical need of practicing neurologists, which brings us to Chuck Tegeler's second millennia "N": New Mindset for Neurologists. There are more exciting prospects for changing the general neurologist's perception of neuroimaging than at any time since I have been an ASN member. The American Academy of Neurology has designated a task force and commission to review issues of subspecialization in neurology. The ASN is well represented on these committees, and is in a position to advocate for full recognition of the subspecialty of neuroimaging, with the AAN directly supporting us in our educational, certification, and

practice efforts.

The AAN has also requested residency training core curricula in the various subspecialties. Rob Bakshi has done a tremendous job in drafting this curriculum and guiding it through appropriate academy channels. Joe Masdeu has spearheaded the movement for residency training in neuroimaging within the Association of University Professors of Neurology (AUPN). As a result, last fall the AUPN adopted the following resolution: "residents in neurology must have adequate experience in neuroimaging that assures proficiency in magnetic resonance imaging, computerized tomography, and neurosonology...[furthermore] program directors have responsibility to document this aspect of training." The ASN can only grow and prosper if the seeds are planted at the residency level. It is exciting to see this cultivation finally taking place.

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ASN-MRI/CT RECOGNIZED

Effective 2001, the Credentialing Board of the University of Alabama at Birmingham Hospitals and Clinics officially recognizes the ASN MRI/CT Certification Examination toward credentialing of neurologists for privileges to interpret neuroimaging studies.

ICAMRL Releases New Accreditation Process For MR Facilities

Tamara Sloper, Intersocietal Accreditation Commission

Beginning July 2, 2001, all providers of magnetic resonance imaging, including neurologists, cardiologists, orthopaedic surgeons and radiologists, will have a method for demonstrating the quality of care provided by their facilities. In a commitment to quality patient care, the Intersocietal Commission for the Accreditation of Magnetic Resonance Laboratories (ICAMRL) has been developed by the Intersocietal Accreditation Commission. This new program will offer the magnetic resonance community with an alternative to the program currently available through the American College of Radiology.

The ICAMRL Board of Directors first met in February of 2000 and has

since worked to develop the foundation of the accreditation program: the Essentials and Standards and corresponding Accreditation Application. Each specialty represented on the Board of Directors, including neurologists Jack O. Greenberg, MD, and Richard Kasdan, MD, representatives of the ASN, has contributed to the development of these documents. In addition, the ICAMRL sought input from the magnetic resonance industry through the National Electrical Manufacturers Association, particularly in the area of quality assurance/quality assessment.

It is the philosophy of the Intersocietal Accreditation Commission that a single specialty should not set the standards for interpretation, performance,

indications and equipment but rather all specialties should work together to develop standards and accreditation processes that will ultimately benefit the patient.

The Accreditation Process

The purpose of the ICAMRL is to provide a mechanism for the accreditation of facilities that perform quality magnetic resonance testing. The process is designed to serve facilities as an educational tool as well as a peer review process. Through the accreditation process, facilities assess every aspect of their daily operation and its impact on the quality of magnetic resonance services provided to patients. While completing the application for accreditation, facilities often identify and correct potential problems,

Congratulations to 2001 Examinees

Our congratulations to those who passed the Certification Examinations on January 27:

MRI/CT

Khurram Bashir, MD
Everton Edmondson, MD
Elaine Feraru, MD
Nancy Futrell, MD
Andrew P. Gasecki, MD
Thomas Giancarlo, DO

G. Joseph Herr, MD
Ardeshir Khademi-Kermanshahi, MD
Eshan Kibria, DO
Robert Knowlton, MD
Chris LaGanke, MD
Paul Caudill Miller, MD

Eric T. Moser, MD
Pramod Sethi, MD
Kirit C. Shah, MD
Selden Spencer, MD
Geoffrey E. Starr, MD
Maya Stamboliyska, MD

Neurosonology

John C. Andrefsky, MD
Steven Benedict, MD
W. Scott Burgin, MD
Morgan Campbell, MD
Guy Couture, MD
Katherine Daru, MD
Cornelia Drees, MD
Robert C. Finley, MD

David Greer, MD
Srinath Kadimi, MD
Saadat U. Khan, MD
Boris J. Lehata, MD
Li-Ming Lien, MD
David F. Moore, MD, PhD
Michael Moussouttas, MD
Richard B. Nieman, MD

Nicholas Okon, MD
Igor Ougorets, MD
Ian B. Ross, MD
Fernando Santiago, MD
Stephan Schule, MD
Pramod Sethi, MD
Gary Starkman, MD
Teng-Yeow Tan, MD

Congratulations to 2001 Award Recipients Presented Friday, January 26, 2001

2001 William H. Oldendorf Award

David F. Moore, MD, PhD
"Selective Arterial Distribution of Cerebral
Hyperperfusion in Fabry Disease"

2001 William M. McKinney Award

Li-Ming Lien, MD
"Comparison of Transcranial Color-Coded and Magnetic
Resonance Angiography in Acute Ischemic Stroke"

ICAMRL *Continued from page 2*
revising policies and procedures and validating their quality assurance programs. Because accreditation is renewed every three years, a long term commitment to quality and self-assessment is developed and maintained. Facilities may use ICAMRL accreditation as the foundation to create and achieve realistic quality care goals.

An Essentials and Standards document for each area of magnetic resonance imaging in which accreditation is offered, body (pelvis, abdomen, chest and/or breast), cardiovascular, musculoskeletal and neurological, has been developed. Facilities can apply in any one or all of these areas, depending on the types and numbers of procedures they perform. Each detailed Essentials and Standards document defines the key components of quality magnetic resonance imaging including indications, techniques and components of examination performance, procedure volumes and quality assurance, both technical and interpretive. In addition, a document entitled “Magnetic Resonance Imaging Operations—Organization” details the administrative and operational functions of the facility including personnel, both medical and technical, supervision, support services, physical facilities, examination interpretation, report and records, safety and quality assurance (system and facility performance). The corresponding Accreditation Application is completed by facility staff and requires information on all aspects of the MR facility operation as well as the submission of actual case studies for review.

The ICAMRL accreditation program places emphasis on the evaluation of the final product produced by the MR facility: the magnetic resonance examination and its report. In particular, the case studies are crucial

to the determination of compliance with the Essentials and Standards and are the basis for the judgment of the quality of work that the facility is performing. When applying for ICAMRL accreditation, facilities choose the areas in which to apply (i.e.: body, cardiovascular, musculoskeletal, neurological) based on the numbers and types of MR procedures they are performing. The case studies to be submitted by the applicant facilities vary based on upon the areas of accreditation they are seeking. For example, a facility seeking accreditation in musculoskeletal is required to submit three cases per magnet, one knee, one shoulder and either a wrist, ankle, foot, elbow or TMJ. For example, a facility seeking accreditation in neurological is required to submit three cases per magnet, one abnormal brain, either multiple sclerosis or tumor, one normal spine and one spine with herniated disc.

From a customer service standpoint, the ICAMRL will follow the reputation already established by the Intersocietal Accreditation Commission for offering a user-friendly, economical accreditation process. The cost of the ICAMRL program begins with a \$200 fee to purchase the Accreditation Materials, the Essentials and Standards and corresponding Accreditation Application. The ICAMRL application process consists of a single application that is submitted with an application fee of \$1500 for a single magnet and \$1000 for additional magnets at the same or multiple locations. There are specific criteria that must be met for multiple site and mobile operations to be eligible to submit a single application.

Getting Started

As the first step in participating in the accreditation process, facilities obtain the Accreditation Materials. The basic information brochure includes an order form for the materials and can be obtained by contacting the ICAMRL at 410-872-0100 or on the ICAMRL Web site at www.icamrl.org.

To assist facilities with the process of completing their applications for accreditation, the ICAMRL will soon begin presenting free Getting Started workshops in various locations throughout the country. Physicians and technologists are encouraged to attend these workshops to receive information that will help alleviate concerns and any preconceived notions about the accreditation process, to learn helpful hints for the best way to facilitate completion of the accreditation application and to obtain detailed guidance on preparing case studies for submission, among many other topics. The schedule for these Getting Started workshops will be published on the ICAMRL Web site.

The Intersocietal Accreditation Commission is pleased to have been selected to provide accreditation for magnetic resonance facilities through the creation of the ICAMRL and we are assured that the magnetic resonance community and ultimately the patient will be well served by this new accreditation process.

ICAMRL

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Columbia, Maryland 21045
410-872-0100
410-872-0030 (fax)
www.icamrl.org

Presidents Address

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Dr. Tegeler's first millennia "L" was "Lab accreditation and physician certification". The ASN has created certification examinations that are paradigms in this area. ASN certification carries very little clout, however, if such certification is not valued by hospital credentialing committees, organizations that credential MRI and Ultrasound laboratories, and the third party payors that control the health care purse strings. Jack Greenberg, Richard Kasdan, Frank Hussey and others have worked very hard in collaboration with the Intersocietal Accreditation Commission to create the Intersocietal Commission for the Accreditation of Magnetic Resonance Laboratories (ICAMRL) that is discussed in further detail elsewhere in this newsletter.

Part of that long journey will involve the establishment of a respected formal board certification process in neuroimaging. The American Board of Neuroimaging was incorporated several years ago through the efforts of the ASN. We are now ready to move forward with fulfilling the Board's mission. If we are able to attain its goal, we can anticipate that all qualified neurologists will finally be able to freely practice the subspecialty of neuroimaging. We will be able to be appropriately and fairly reimbursed for our neuroimaging efforts, and more importantly, we will witness an improvement in the quality and cost-effectiveness of care provided to patients with neurologic disease.

It would be naïve to anticipate all of these prospects coming to fruition in my two years as ASN President. Unfortunately, as history teaches us, we may never realize these long-sought goals. I do pledge, however, to do everything I can to steer the ASN train in the directions I have outlined. In 1977 our first President,

Bill Oldendorf, referring to the then new techniques of X-Ray computed tomography, said, "We must embrace these new techniques. If we don't get on board, we will be left at the station". A quarter of a century later I am happy to report that neurology is finally getting on board and the train is finally leaving the station. For the sake of all of us, let's hope we're riding a bullet train!

ANNOUNCING THE AMERICAN SOCIETY OF NEUROIMAGING EDUCATION FOUNDATION

Due to a generous contribution from Dr. Leon Prockop, the ASN is pleased to announce the formation of an educational foundation. The Foundation, which will fund the John and Sophie Prockop Memorial Lectureship each year at the Annual Meeting, will provide a vehicle for tax-deductible contributions to the Society for the advancement of neuroimaging educational pursuits. If you are interested in making a donation to the Foundation, please contact the ASN Executive Office at 952-545-6291 for details.

CHANGING OF THE GUARD

This is the last newsletter that will be published with the expert assistance of our Associate Executive Director, Theresa Gutoski. We all join in congratulating Theresa on her nuptials in June. She will be joining her husband Steve in other professional pursuits. Theresa officially left the ASN on June 29th. We know Theresa will be successful in her future endeavors, and can't thank her enough for her tireless efforts on behalf of our society. We'll miss you, Theresa!

The good news--Theresa's shoes will be admirably filled by Renee Molstad who joins us from her position with the American Neurological Association. Welcome aboard, Renee!

ASN OFFICERS AND BOARD OF DIRECTORS OFFICERS:

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A Tribute to Ilydio Polachini

Jack O. Greenberg, M.D.



Ilydio Polachini, M.D., died suddenly, June 29, 2001 while on vacation with his wife Bea. He was the Medical Director of

Neuroimaging at Kalamazoo Neurologic Institute since 1989. Ilydio was a leader in MR Imaging for 15 years and was Past President of the American Society of Neuroimaging. He was active at the American Academy of Neurology for 20 years, having served as chairman of the neuroimaging course for 5 years. He appeared on many programs as an expert in various areas of imaging including MRA, spectroscopy, stroke and spine disease. In addition he has published widely in the field, including two chapters in a successful textbook of neuroimaging.

He devised many protocols for the Phillips Company and helped in the development of their MRA Program. He spoke to groups all over the world, including the Brazilian Radiologic Society and other societies in Europe and North and South America. He visited his family in Brazil frequently and was able to send images from Kalamazoo by satellite to his home in Rio Preto, Brazil where he read the studies just after they were done in Kalamazoo.

He was a graduate of Rio De Janeiro State University of Medical Sciences and completed residencies at the Dent Neurological Institute in Buffalo, NY and at the State University of New York. In 1983, he won the Oldendorf Award for his work on White Matter. For the past 3 years, he has written the neuroimaging questions for the American Board of Psychiatry and Neurology.

Ilydio was a great and loyal friend. We spoke on the telephone every week. We often traded jokes, and he had an endearing way of laughing most heartily after he delivered one of his own. He was a gifted and passionate teacher and was always available to explain the intricacies and mystery of the computer.

We gave seminars together with Rob Bakshi all over the country and everyone was amazed at his depth and breadth of knowledge of physics. He could look at a poor MRI Study and tell the technologists that they did not need a new machine; instead he could devise protocols and give suggestions that would make the study beautiful. He understood his machine like nobody else. Some of the country's top neuroradiologists would express their amazement at his abilities in the technical field. Little did they know that the only formal physics training he had was a night class at Western Michigan State College. He took this course while he directed the Kalamazoo Neuroimaging Institute with his dear friend, Dr. Azzam Kanaan. Together, they built a cutting edge operation with eight scanners servicing the southern half of Michigan.

He was very generous. He recently insisted that I obtain cable modem so I could tap into his huge database in Michigan for interesting cases. He also set up an MRI Center in his home town, Rio Preto, Brazil and taught the physicians how to read and over read them. Recently, he participated as faculty in a course in spectroscopy for his friend and mentor, Brian Ross. The participants, all radiologists, voted Ilydio as the best teacher.

He leaves behind a lovely young wife, Bea, 3 wonderful children, and devoted parents and siblings. We are all diminished by his untimely death

at the age of 48. A giant has left the stage, but thank god we were there to see and touch him.

SEMINARS IN NEUROIMAGING

The American Society of Neuroimaging (ASN) is sponsoring seminars in neuroimaging, primarily MRI. These are intensive courses for practitioners and trainees who would like to update their knowledge of the role of MRI in neurology, improve their interpretation skills, and for those preparing for the MRI/CT Certification Examination administered by the ASN at the Annual Meetings. Category 1 CME credits are also available. Topics include physics, diffusion-perfusion imaging, spectroscopy, stroke, infection, MS, tumors, toxic-metabolic diseases, pediatrics, degenerative diseases, and case studies.

The seminars can be any length from one to five days. The faculty will come to your area and provide this service over weekends or evenings as desired.

Dr. Jack Greenberg and Dr. Rohit Bakshi will provide the instruction. Other faculty may be added (e.g. neurosonology) as requested.

For information, contact the American Society of Neuroimaging; 5841 Cedar Lake Road, Suite 204; Minneapolis, MN 55416; Phone (952) 545-6291, Fax (952) 545-6073



**Mark your calendars
25th Anniversary Meeting
March 7-10, 2002
Westin Innisbrook Resort
Tampa Bay, Florida**

The preliminary program/call for abstracts was mailed to all members recently. Please visit the ASN website, www.asnweb.org for up-to-date information or another copy of the abstract form. You may also contact the ASN Executive Office with any questions.

American Society of Neuroimaging
Newsletter

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