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How Do I Measure Up? UCNS Certification Process Provides Valuable Information for Candidates

Matthew E. Fink, MD
Weill Cornell Medicine

Physicians who pursue certification in their field of medicine have an opportunity to achieve a recognized measure of expertise in their specialty. Through the certification examination process, physicians can get a clear picture of how their expertise compares to others and determine if their level of proficiency meets the certification standards defined by experts in their field.

Each subspecialty's initial and recertification examinations are developed by a committee of 10 experts identified by the subspecialty's sponsoring organizations. The committees, under the guidance of a professional psychometrician, write the questions and answers for their respective examinations and set the pass point that will serve as the minimum measure of expertise to qualify for certification. Pass rates vary by subspecialty. There has been an average overall pass rate of 95 percent for UCNS-fellowship trained physicians and 75 percent for non-fellowship trained physicians. In the future, pass rates by subspecialty will be posted on UCNS website. Above and beyond the ultimate pass or fail outcome of certification examinations, there is valuable information to be gained from the process.

"After each examination, all UCNS certification candidates receive a results letter showing their areas of knowledge strength and weakness for each of the primary examination content areas. This provides physicians an opportunity to tailor continuing medical education towards improving knowledge in areas of identified weakness," says Matthew E. Fink, MD, Chair, UCNS Certification Council. Results letters also show the examination's minimum passing scaled score, the candidate's scaled score, a breakdown of the content area success for the candidate, and the mean success for all candidates taking that particular examination. Today there are over 2,700 UCNS-certified diplomates in the nine UCNS-recognized subspecialties.

So We Have a Taxonomy Code—Now What?

Last year, the UCNS announced that a taxonomy code for Neurocritical Care was granted by the National Uniform Claim Committee (NUCC). Achieving this distinction, Neurocritical Care joins two other UCNS subspecialties, Behavioral Neurology & Neuropsychiatry and Diagnostic Neuroimaging, as being recognized in the NUCC Health Care Provider Taxonomy code set. Receiving a taxonomy code is an important first step to receive reimbursement of subspecialty services. The next critical step is for physicians in the subspecialty to register at the National Plan and Provider Enumeration System (NPPES), the single source for National Provider Identifiers (NPI) and associated taxonomy codes.

David Stumpf, MD, PhD, professor emeritus of neurology at the Feinberg School of Medicine at Northwestern University, Chicago, Illinois, emphasized the importance of physicians using the code, now that it exists. Stumpf said, "I used to utilize these codes in evaluating provider networks at UnitedHealth Group. It's important to expose these codes in any way possible. NPPES is the reference source used and I've been amazed at how few physicians keep this up to date." In a recent survey conducted by the American Academy of Neurology's Critical Care and Emergency Neurology Section, only 55 percent of section member respondents indicated they were aware that a Neurocritical Care code was available.

Reflections on My First Ten Months

Brenda Riggott
UCNS Executive Director

UCNS Chair Ralph Józefowicz, MD, recently interviewed UCNS Executive Director Brenda Riggott to learn more about her first year with UCNS and what her vision is for the future of UCNS.

Q: I introduced you briefly in the last newsletter, which came out just as you began working with UCNS in November 2016. How do you think your background has prepared you to work with an organization as unique as UCNS?

A: Over the course of my career I have had diverse opportunities that provided a solid base for my role as Executive Director of the UCNS. My love for working in a medically related field began early in my career as the administrator for medical practices. My career path then moved into nonprofit-organization management and marketing where I honed transferrable skills and experience that have been very relevant to my work at the UCNS. Immediately prior to working at the UCNS, I was at the American Association of Neuromuscular & Electrodiagnostic Medicine, a subspecialty association, where I served in numerous roles over the course of a decade, including marketing its certification program, managing corporate relations, and implementing research initiatives associated with their foundation. It has been very helpful coming into this job with some familiarity about the field of neurology, medical subspecialties, and non-American Board of Medical Specialties (ABMS) certification programs.

Q: After working with UCNS for ten months, is it what you expected?

A: I can honestly say that working at the UCNS has exceeded my expectations. There is tremendous expertise and support on the Board of Directors, Councils, and committees, and the staff is outstanding. It is exciting and professionally challenging in a most positive way to work in a new environment with new opportunities, and still have threads of familiarity, both in the work with a non-ABMS certifying body, and in the relationships with volunteers that I previously established.

Q: What are your main goals as you enter into your second year with UCNS?

A: It is hard to believe that I'm only months away from a year at the UCNS. In my first year, I have concentrated on learning about the organization and the many details associated with the accreditation and certification processes. In the upcoming year, I look forward to working with the Board of Directors and staff to move the organization forward with the foundational knowledge I've gained. We are undertaking a dive into the data we now have from the accredited programs, and after a decade of certifying subspecialties, we are better able to analyze the trends that will facilitate data-driven decisions for the organization. Upcoming surveys of our stakeholder groups, including the Board, diplomates, and training programs, will provide us with additional information and feedback, and we will close the communication loop by sharing the relevant outcomes with our stakeholders. In 2018, my goals are to continue developing strong working relationships with our stakeholders and increase awareness of UCNS certification and accreditation as a measure of physician expertise and quality medical training for subspecialties that are emerging in the field of neurology.

Q: What do you see as UCNS' main strengths and opportunities?

A: I believe as an organization, the UCNS's strengths include a strong organizational commitment to the development and oversight of UCNS certification and accreditation standards. This happens through the involvement of stakeholder experts at every stage of development. We have the access to valuable data to evaluate our programs and determine trends in the subspecialty fields to strengthen UCNS. The partnership and commitment of AAN to nurturing emerging neurologic subspecialties is a strength for the UCNS, as is the credibility and continued involvement of the other founding parent organizations. There are opportunities to increase our outreach to the new emerging neurologic subspecialties that are seeing growth to the point that they want to formally establish standards for their field and have the assistance and oversight that UCNS can provide to that process. By initiating a proactive approach to marketing, we can create more value for certification through recognition by payers, states, and the neurologic community. Overall, with the commitment and leadership of the Board and volunteers, along with an experienced and knowledgeable staff, the organization has the strength to move forward into a successful future.

Board Leadership Highlight

*Louis B. Nabors, III, MD
University of Alabama
at Birmingham*

Louis B. Nabors, III, MD, is a professor of neurology at the University of Alabama at Birmingham (UAB), where he is also the Director for the UAB Division of Neuro-oncology, Vice Chair of Research, and Program Director of UAB's UCNS-accredited Neuro-oncology fellowship program. Dr. Nabors is a UCNS diplomate in the subspecialties of Neuro-oncology and Neuroimaging. Dr. Nabors first joined the UCNS Board of Directors as a non-voting subspecialty member in 2015, and became a voting member in April 2016, representing the Neuro-oncology subspecialty.

Q: Why did you choose to practice medicine and go into the field of neurology?

A: I had always had an interest in science from a young age. My undergraduate degree was in engineering and during that time I worked at a local hospital first as an orderly (term no longer in use) and an EMT, which sparked an interest in medicine. During medical school, I was particularly drawn to the neurosciences by the professors at the University of Tennessee, Memphis Department of Neurobiology, and became engaged in laboratory research with Dr. Ranney Mize, with whom I later did a Howard Hughes Medical Student Research Fellowship. Dr. Mize was my early mentor and instilled in me an interest in the neurosciences.

Q: Not only are you a UCNS Board member, but you are also program director of an accredited program and a dually certified diplomate in Neuro-oncology and Neuroimaging. As someone familiar with UCNS through all of these roles, how do you think UCNS has benefited the field of neurology?

A: UCNS is a tremendous benefit to neurology with particular importance to neurological subspecialties. It is clearly essential and required to have a formalized method of oversight, educational milestone clarification, and competence assessment. Neurological subdisciplines such as neuro-oncology would not exist without this support from the UCNS.

Q: How do you think UCNS has benefited Neuro-oncology in particular?

A: Neuro-oncology has benefited directly by UCNS with the establishment of a fellowship program accreditation process and certification for eligible candidates, such as those completing the fellowship or being grandfathered. I would state this is required and essential for neurologists completing the neuro-oncology fellowship track and I am really quite pleased to see the number of medical oncologists, neurosurgeons, and radiation oncologists who have made the effort to complete the certification process through UCNS.

Q: As a UCNS leader and ambassador, what do you see as the impact of UCNS recognition on emerging subspecialties and how do you see your role in fostering the continued growth of UCNS and its subspecialties?

A: The recognition and acceptance of subspecialties by patients, providers, and payers requires and will increasingly be driven by having a formalized oversight process that provides an accepted process for training program accreditation and physician certification. UCNS recognition, which adheres to the highest standards of accreditation and certification, provides emerging subspecialties the formalized process for meeting and adhering to this goal.

Share Your News With Us and Share Our News With Others

UCNS wants to promote the accomplishments of its diplomates and program faculty. If you have news you would like to include in our newsletter, please send it to acarpenter@ucns.org.

UCNS encourages you to share your UCNS newsletter with colleagues, residents, and fellows. Forward a copy of the newsletter to colleagues or we are happy to add names to our newsletter email distribution list. UCNS newsletters are distributed twice annually and brief electronic news updates are sent intermittently throughout the year. Simply email us at ucns@ucns.org to request inclusion on our news distribution list. UCNS does not sell or rent our distribution list.

UCNS Volunteer Recognition

The expertise and dedication of many volunteers provide the leadership and oversight of UCNS and its certification and accreditation programs. Members of the Board of Directors are nominated by the parent and sponsoring organizations of UNCS. Accreditation and Certification Council Members are nominated by the parent organizations. Examination Committee members are nominated by their subspecialty's sponsoring organization(s).

Welcome New Board and Council Volunteers

- Alexander Dromerick, MD, Board of Directors, representing the Neural Repair and Rehabilitation subspecialty
- Eric Sorenson, MD, Accreditation Council, representing the American Neurological Association
- Christopher Oakley, MD, Accreditation Council representing the Child Neurology Society
- James Owens, MD, PhD, Accreditation Council, representing the Professors of Child Neurology
- Bruce Cohen, MD, Certification Council, representing the Child Neurology Society
- Alireza Minagar, MD, Certification Council, representing the Association of University Professors of Neurology

Thank You Outgoing Board and Council Volunteers

- Mindy Aisen, MD, Board of Directors, representing the Neural Repair and Rehabilitation subspecialty
- Lori Schuh, MD, Accreditation Council Chair, representing the American Academy of Neurology
- Bruce Cohen, MD, Accreditation Council, representing the Child Neurology Society
- Philip Pearl, MD, Accreditation Council, representing the Professors of Child Neurology

Thank You 2017 Examination Committee Members

Clinical Neuromuscular Pathology

- P. James B. Dyck, MD, Chair
- Yadollah Harati, MD, Vice Chair
- Steven Lovitt, MD
- Zarife Sahenk, MD, PhD
- Andrea M. Corse, MD
- Praful Kelkar, MD
- Alan Pestronk, MD
- Duygu Selcen, MD
- Justin Yuan-Ping Kwan, MD, PhD

Neuro-oncology

- Nina Paleologos, MD, Chair
- Tom Mikkelsen, MD, Vice Chair
- Kurt A. Jaeckle, MD
- Frank S. Lieberman, MD
- Jeffrey C. Allen, MD
- Minesh P. Mehta, MD
- Edward J. Dropcho, MD
- Howard Colman, MD
- John W. Henson, MD
- Lynne P. Taylor, MD

Neurocritical Care

- Michael Souter, MD, Chair
- J. Javier Provencio, MD, Vice Chair
- Paul A. Nyquist, MD, MPH
- Neeraj Badjatia, MD, MSc
- Perry A. Ball, MD
- Christos Lazaridis, MD
- John Terry, MD
- Richard R. Riker, MD
- Susanne Muehlschlegel, MD, MPH
- Edward Manno, MD

Neuroimaging

- Joseph Masdeu, MD, PhD, Chair
- Marc Malkoff, MD, Vice Chair
- John Chawluk, MD
- David Liebeskind, MD
- Patrick M. Capone, MD, PhD
- Joshua Peter Klein, MD, PhD
- John Y. Choi, MD, MPH
- Neeraj Dubey, MD
- Rebecca M. Sugg, MD

Certification News

Practice Track Eligibility Extended

With a recent policy update, UCNS-recognized subspecialties now have an opportunity to extend the practice track eligibility period for their subspecialty certification. The practice track, often referred to as "grandfathering," allows a pathway for physicians who have practiced in the subspecialty to qualify for the certification examination after meeting a defined set of criteria. This eligibility track also provides a period of growth for subspecialty training programs until the time the number of UCNS-accredited fellowship trained physicians has grown to a level that sustains the subspecialty's future. Following the expiration of the practice track, only UCNS-fellowship trained physicians and physicians using the Faculty Diplomate pathway are eligible to apply for certification.

All UCNS subspecialties may request an extension to the expiration of their practice tracks if the extension request fulfills the following:

1. Extension is formally requested by the subspecialty's sponsoring organization(s) after expiration of the application period for the final examination offered during the practice track,

2. Number of examinations does not exceed more than nine practice track examinations,

3. Request includes rationale for granting the extension, including data to support the request.

Specific policy information regarding the extension of a practice track may be found in UCNS Certification Policy 3.08.A.9.

An extension to the practice track eligibility period was requested and granted for Headache Medicine and Neuroimaging certification. The practice track for Headache Medicine has been extended to include the 2018 and 2020 certification examinations. The Neuroimaging practice track eligibility pathway is available through the 2019 certification examination.

2018 Neurocritical Care Recertification Examination Added

Neurocritical Care diplomates who certified in 2008 will now have the option to recertify in 2018. UCNS is adding a 2018 recertification examination option for diplomates who are due for recertification in 2018 or who fail their 2017 recertification examination and wish to minimize the potential lapse in certification. There will <u>not</u> be an initial certification examination offered for Neurocritical Care in 2018. At this time, initial certification examinations are being offered in 2017, 2019, and in future odd numbered years. The 2018 recertification applications will be available beginning in April 2018 and the examination will take place the week of December 3-7, 2018. Contact Todd Bulson at tbulson@ucns.org or (612) 928-6067 with questions.

2018 Examination Schedule

Subspecialty	Applications Available	Application Deadline	Late Application Deadline ($500 late fee)	Examination Dates
Headache Medicine: Initial and Recertification	January 1	April 2	April 16	October 8-12
Autonomic Disorders: Initial Certification	February 1	May 1	May 15	November 5-9
Behavioral Neurology & Neuropsychiatry: Initial and Recertification	February 1	May 1	May 15	November 12-16
Neurocritical Care: Recertification Only	April 1	July 2	July 16	December 3-7
Neuroimaging: Initial and Recertification	May 1	August 1	August 15	January 29-February 1, 2019
Neuro-oncology: Initial and Recertification	October 1	January 2, 2019	January 16, 2019	August 12-16, 2019
Clinical Neuromuscular Pathology: Initial Certification	November 1	February 1, 2019	February 15, 2019	September 16-20, 2019

Diplomate Highlight

Fallon Schloemer, DO
Medical College of
Wisconsin

Fallon Schloemer, DO, is an assistant professor, Neuroscience Clinic Medical Director, and associate program director of the neurology residency program at the Medical College of Wisconsin. Dr. Schloemer completed her neurology residency at the Medical College of Wisconsin, followed by a Headache Medicine fellowship. Dr. Schloemer is a 2016 UCNS Headache Medicine diplomate.

Q: Why did you choose to practice medicine and go into the field of Headache Medicine?

A: I think my passion for medicine started as a little girl when I attended work with my mom at the nursing home. There, I took to the residents and really enjoyed spending time with them. This further influenced my decision to become a Certified Nursing Assistant throughout college, which I feel ultimately made me want to pursue a career in medicine. I always thought I would go into family practice after medical school, however, that changed after my first neurology class. I was fascinated with the field and ultimately pursued neurology as a career. In residency, I grew to love my headache patients. As a migraineur myself, I can empathize with them. And a lot of migraine management involves patient education and counseling, which is a very important piece to healing and something I really enjoy.

Q: How has UCNS certification benefitted you?

A: UCNS certification has benefited me on several levels. I was the first fellow in Headache Medicine at our institution and the fellowship allowed me to sit for the Headache board exam. Here I am recognized as one of four headache specialists. With the expertise and guidance from our fellowship director and section head, Dr. Frederick Freitag, we have created a multidisciplinary headache program that attracts patients from all over Wisconsin.

Q: Why is certification important for physicians who are subspecializing in this area of medicine?

A: The certification sets you apart as being the expert in that respective subspecialty and a consultant for your colleagues. And ultimately, I think it improves patient satisfaction.

Q: What new treatments are there in Headache Medicine that you are most excited about?

A: What I love about Headache Medicine is that there are several treatment modalities that can help our patients. Not only does headache management involve pharmacotherapy, but there are many nonpharmacological treatment options that can be of benefit. A hot topic now for headache treatment is neuromodulation with devices such as Cefaly, SpringTMS, and gammaCore.

So We Have a Taxonomy Code—Now What?
Continued from page 1

According to Section Chair W. David Freeman, MD, "It is important that more physicians are aware that these codes are in place and used." Complete survey results were presented during the 15th Annual Neurocritical Care Society Meeting, which was held October 10-13, 2017, in Waikoloa, Hawaii.

It is essential that billing departments use relevant taxonomy codes when submitting claims. Stumpf added, "The X12N-847 electronic billing schema has multiple places for NPI and NUCC codes, so physicians are not restricted to one set of NPI-NUCC codes. While many payers don't presently look too deeply for multiple codes, I think this will change as we more carefully evaluate teams and their roles. The elements they typically use are billing, rendering, admitting and referring NPIs, and associated NUCC taxonomy codes." Physicians practicing in any of the three UCNS subspecialties that have taxonomy codes should register at the NPPES using the codes listed below:

Subspecialty	Three Axis Ontology	NUCC Code
Neurocritical Care	Allopathic & Osteopathic Physicians/Psychiatry & Neurology/Neurocritical Care	2084A2900X
Behavioral Neurology & Neuropsychiatry	Allopathic & Osteopathic Physicians/Psychiatry & Neurology/ Behavioral Neurology & Neuropsychiatry	2084B0040X
Neuroimaging	Allopathic & Osteopathic Physicians/Psychiatry & Neurology/Diagnostic Neuroimaging	2084D0003X

Accreditation News

Annual Reports Provide Valuable Program Insights

Beginning in 2017, all UCNS-accredited training programs must now submit annual reports. Utilizing the Accreditation Interface (AI) online platform, programs are able to submit all information and updates relating to their fellowships. The implementation of annual reporting is an important achievement as it serves multiple roles for programs and UCNS, including:

1. Enabling programs to consistently maintain their program information, making cyclical reaccreditation reviews less cumbersome;

2. Ensuring UCNS has the most up-to-date information about accredited programs;

3. Allowing UCNS to reserve site visits only for exceptional circumstances; and

4. Facilitating development of important outcomes and benchmarking measurements, which will be shared with programs.

According to Amanda Carpenter, Senior Manager, Accreditation, "Overall, program feedback has been positive. We've received some good suggestions to improve the process and we look forward to working with programs to continually improve the reporting process going forward." UCNS will be reaching out to all program directors and program coordinators for more feedback about UCNS accreditation and the transition to the AI and annual reporting system. Any questions about an upcoming review may be directed to Amanda Carpenter at acarpenter@ucns.org or (612) 928-6065.

UCNS Subspecialties Define Program Milestones

The UCNS Accreditation Council, comprised of experts appointed by the five UCNS parent organizations, is guiding the process for the development of the UCNS Common Milestones for UCNS-accredited training programs. Modeled after the Accreditation Council for Graduate Medical Education's (ACGME) format, the Accreditation Council has completed a draft of the UCNS Common Milestones. Comments received during the 2017 comment period are currently under review.

The Patient Care and Medical Knowledge milestones are created by work groups of members appointed by the sponsoring organization(s) of each UCNS subspecialty. Headache Medicine piloted the process and work groups for Behavioral Neurology & Neuropsychiatry, Neurocritical Care, and Neuro-oncology subspecialties are in development. Lori Schuh, MD, Accreditation Council Chair and former ACGME Residency Review Committee Member, and ACGME designated institution official for Spectrum Health, helped develop the UCNS Common Milestones. According to Schuh, the UCNS milestones will aid programs in ensuring standardization in the evaluation of a fellow's progression through a program. Schuh said, "UCNS Milestones enable programs to follow a system with which they are already familiar to demonstrate the fellows meet required competence for graduation. The biggest advantage of milestones is identifying underperformance and correcting it far more quickly than in the past. UCNS is confident that the milestones developed for its subspecialties will be user-friendly for all programs."

UCNS Accreditation—A Measure of Educational Excellence

Applications are now being accepted until December 1, 2017, from programs seeking accreditation in any of the nine UCNS-recognized neurologic subspecialty areas. Accreditation is a voluntary process of evaluation and peer-review based on UCNS accreditation standards. Programs that attain accreditation status offer the core curriculum established by the subspecialty and meet the required quality standards established by UCNS. Residents seeking fellowships in UCNS subspecialty areas know that the UCNS training programs offer the training defined by experts in that specialty, with oversight of the UCNS Accreditation Council. Fellows graduating from UCNS-accredited training programs meet the training eligibility requirements for certification in their respective UCNS-recognized subspecialty, creating a strong career path for fellow graduates.

Accreditation applications are accepted throughout the year with spring and fall review deadlines. New applications received by the December 1 deadline will be reviewed for approval in the spring of 2018. The next deadline for program applications will be June 1, 2018, for a fall 2018 application review.

To begin the accreditation application process, programs must first request access to the online application. An application processing fee is required at the time of application submission. The current fee structure is:

- Initial Application Fee: $2,000

- Annual Fee: $1,500 (required of all UCNS-accredited programs)

- Reaccreditation Application Fee: $1,000 (typically every 3-5 years)

Additional information and training program requirements are available on the UCNS website or by contacting Amanda Carpenter at acarpenter@ucns.org or at (612) 928-6065.

Program Director Highlight
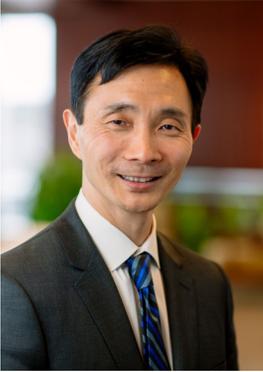
Joon Uhm, MD
Mayo Clinic, Rochester

Joon Uhm, MD, is an associate professor of neurology and Chair, Section of Neuro-oncology, department of neurology, at the Mayo Clinic in Rochester, MN. Dr. Uhm completed a neurology residency at the Montreal Neurological Institution, McGill University, and a fellowship at the University of Texas, MD Anderson Cancer Center. Dr. Uhm in a UCNS Neuro-oncology diplomate and program director of Mayo's UCNS-accredited Neuro-oncology fellowship training program in Rochester.

Q: Why did you choose to practice medicine and go into the field of Neuro-oncology?

A: Like all in our profession, we enter medicine so that we may have the privilege of helping others. That aspiration combined with my interest in biology, and in particular, the neurosciences, led me to enter medicine with the goals of becoming a neurologist. Initially, I was quite interested in the field of multiple sclerosis (MS) and neuro-immunology, but my career goals changed to neuro-oncology as a result of a summer student project during my 2nd year of medical school at McGill University in Montreal. I was working on a MS project, but my supervisor asked if I would help a PhD student whose thesis project focused on glioma biology. That summer "side project" not only introduced me to neuro-oncology, but completely turned my career objective to that direction. Then, following neurology residency in Montreal, I did my fellowship training with superb mentors at MD Anderson Cancer Center and then joined Mayo Clinic as faculty. To combine neurosciences/neurology and oncology for me has turned out to be the ideal-fit career for me.

Q: Why did you decide to seek UCNS accreditation for your program?

A: UCNS accreditation presents so many benefits for not only our trainees and fellowship program, but for our profession as a whole. In addition to providing accreditation for our fellowship, I feel that the UCNS has evolved into being a significant driving force that led to the Neuro-oncology Fellowship Match for future trainees. As programs became UCNS-accredited one-by-one, a critical point was reached when the logical progression/extension of the nidus created by UCNS was to formalize a match program for training. My colleagues and I at Mayo Clinic were unanimous in our enthusiasm to become a part of this evolution and growth. I will also say that the process of putting together the UCNS accreditation application also helped to improve our program. We have always been proud of our program's strengths, but the process of writing the application led to identification of areas where we could further improve. I'm convinced the application process itself led to an improved program for Mayo Clinic!

Q: What do you think attracts fellows to your program?

A: Practice, Education, Research... these are the three "shield" components that make up the Mayo Clinic logo and philosophy. Being a very large, multidisciplinary, tertiary referral center, we have immense resources for all three aspects. Whether it be for medical school, residency, or fellowship, candidates are drawn to Mayo with assurance that they'll receive superb training given the breadth of mentors in clinic and research. This theme extrapolates to Neuro-oncology. With a very busy brain tumor clinic, fellows gain tremendous exposure to the entire spectrum of Neuro-oncology practice. Equally important is the quality of mentors/educators. I know that when I joined the Mayo faculty a long time ago, I was so impressed (and intimidated!) by the incredible quality of teaching. When candidates interview for our program, I believe that the quality and dedication to education is the primary draw attracting fellows to our program. Once here, the large number of clinical and basic research opportunities give ample opportunity to help develop their careers. Moreover, what is very exciting is how our fellowship program – similar to our clinical and research programs in Neuro-oncology – is moving towards a three-site wide (Mayo Clinic Rochester, Arizona, and Florida) integrated program that tremendously expands opportunities and list of mentors for our fellows.

Q: What is your current research?

A: As a full-time clinician, my most important and primary role is that of patient care and therefore, in turn, to impart the best clinical education to our fellows. Dovetailing with clinical care are clinical trial responsibilities. Perhaps the area of research that I enjoy most is the area of education. We're always looking for better ways of educating our trainees. A good example of this is Mayo Clinic's "Ask Mayo Expert" practice guidelines. Members of our group work across the three Mayo sites to formulate interactive, web-based algorithms for all facets of neuro-oncology, such as approach to glioblastoma, low grade glioma, and recurrent glioma treatment guidelines, but also flow diagrams that help guide diagnostic approach to the "mass on spine or brain MRI." Such models are showing to be novel instruments to education as they are so much more patient-based than simply having the fellow read a stack of journal articles. I'm convinced that innovations such as these will not only enhance education of our fellows/residents, but will serve as future of CMEs of the future!

UCNS Accredits 16 New Fellowship Programs

Congratulations to the 16 fellowship training programs that recently earned UCNS accreditation. UCNS-accredited training programs meet the standards and program requirements set by the UCNS and subspecialty experts. There are currently 187 fellowship training programs that meet the measure of educational excellence required to become accredited through the UCNS.

Newly accredited programs and fellowship directors are:

Autonomic Disorders	
University of Texas Southwestern	Steven Vernino, MD, PhD
Behavioral Neurology & Neuropsychiatry	
Drexel University College of Medicine	G. Peter Gliebus, MD
Geriatric Neurology	
Barrow Neurological Institution	Marwan Sabbagh, MD
Headache Medicine	
Children's Hospital of Philadelphia	Christina Szperka, MD
Hartford HealthCare Headache Center	Brian Grosberg, MD
New York University	Mia Minen, MD, MPH
University of Arizona	Wendi Kulin, MD, MS
University of Rochester Medical Center	Raissa Villanueva, MD, MPH
Neurocritical Care	
Beth Israel Deaconess Medical Center	Myles Boone, MD
Boston Medical Center	Courtney Takahashi, MD
University of Florida	Katharina Busl, MD
University of Massachusetts	Raphael Carandang, MD
University of Rochester Medical Center	Debra Roberts, MD, PhD
University of Texas Medical Branch, Galveston	Alok Dabi, MD
Neuro-oncology	
Mayo Clinic, Rochester	Joon Uhm, MD
University of Pittsburgh Medical Center	Jan Drappatz, MD

Program Changes Require Approval

Planning changes to faculty, number of approved fellows, curriculum, or the addition or deletion of a sponsoring, primary, or participating institution at your UCNS-accredited fellowship? UCNS-accredited programs must receive approval of the change to maintain accreditation. "Accreditation is granted based on each program's application information. Program changes that happen after accreditation is granted need to be requested, reviewed, and approved in a timely manner to ensure the revised program remains in compliance with the standards," stated Amanda Carpenter, Senior Manager, Accreditation. The program change request procedure and templates are available on each subspecialty accreditation page at UCNS.org.

Common Program Requirements Undergo Review

In addition to drafting the common and subspecialty-specific milestones, UCNS is working on revising the Common Program Requirements. As required by the UCNS Policies, program requirements are reviewed every five years. Following review by the Accreditation Council and Board of Directors, the Common Program Requirements will be sent for a comment period to all UCNS stakeholders. Following implementation of the revisions, UCNS will work with each subspecialty to implement the revisions to the Common Program Requirements and to review the subspecialty-specific requirements.

Frequently Asked Questions

Becky Swanson is the UCNS Executive Assistant. Diplomates, applicants, and programs calling with general inquiries will usually start by talking with her. If you have a question you would like answered in this section, email her at bswanson@ucns.org.

Q: I am applying for recertification. Do I need to submit all of my Continuing Medical Education (CME) credits at the time I apply?

A: No; however, UCNS will not release your examination results to you until you have demonstrated that you have fully met the CME requirements prior to the expiration date of your current certificate.

Q: I want to complete a UCNS-accredited fellowship so I can become UCNS-certified. What do I need to know?

A: To enroll in a UCNS-accredited fellowship, there are certain requirements that must be met. Eligible fellows must:

*Becky Swanson
UCNS Executive
Assistant*

1. Possess a current valid and unrestricted license to practice medicine in the United States, Canada, or its territories;

2. Be a graduate of a residency program in neurology or other specialty or specialties as defined by the subspecialty that is accredited by the ACGME or Royal College of Physicians and Surgeons of Canada (RCPSC); and

3. Be board certified or eligible for certification in a primary ABMS board or RCPSC specialty.

Please refer to the subspecialty's Program Requirements on the UCNS website under Accreditation for more information.

Staff

UCNS staff is available Monday through Friday to answer your questions regarding subspecialty recognition, accreditation, and certification.

Subspecialty Recognition Inquiries
Brenda Riggott, Executive Director, (612) 928-6106 *briggott@ucns.org*

Certification Inquiries
Todd Bulson, Senior Manager, Certification, (612) 928-6067 *tbulson@ucns.org*

Accreditation Inquiries
Amanda Carpenter, Senior Manager, Accreditation, (612) 928-6065 *acarpenter@ucns.org*

General UCNS Inquiries
Becky Swanson, Executive Assistant, (612) 928-6050 *bswanson@ucns.org*

The mission of the United Council for Neurologic Subspecialties is to provide for accreditation and certification with the goal of enhancing the quality of training for physicians in neurologic subspecialties and the quality of patient care.

The UCNS is sponsored by five parent organizations:

- American Academy of Neurology
  www.aan.com

- American Neurological Association
  www.aneuroa.org

- Association of University Professors of Neurology
  www.aupn.org

- Child Neurology Society
  www.childneurologysociety.org

- Professors of Child Neurology, see also
  www.childneurologysociety.org

SUBMIT STORY IDEAS

Any news or story ideas for UCNS readers?

We would like to hear from you. Submit feedback regarding this issue and/or story ideas for future issues to UCNS.