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### UCNS Chair

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For more information about  
the UCNS, visit the UCNS website  
at [www.ucns.org](http://www.ucns.org).

## MISSION STATEMENT

*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 neurological subspecialties and the quality of patient care.*

## Paul Vespa, MD, Elected UCNS Chair

The UCNS Board of Directors has elected Paul M. Vespa, MD, its new chair for a two-year term, succeeding Leslie A. Morrison, MD, who completed her second term as chair.

Certified by UCNS in Neurocritical Care, Vespa has been a member of the UCNS board since October 2007. He is in academic practice at UCLA as an associate professor. Vespa attended Ohio State University as an undergraduate and medical student. After graduation, he trained in neurology at the University of Virginia and received fellowship training at UCLA.

"It is with great pleasure that I start my term as the new chair of the UCNS. I want to first thank Dr. Leslie Morrison for her sage and tireless leadership of the Board for the past several years and for her mentorship and advice during our transition period."

In a recent statement, Morrison welcomed Vespa to the leadership position and surveyed the organization's accomplishments during her tenure as the second chair in UCNS's history. "It has been a privilege to lead the UCNS in our remarkable growth and progress over the past four years. With our cadre of high-level neurologists and staff members on exam teams, councils, and the Board of Directors,

the UCNS has become a recognized force in subspecialty certification and accreditation.

We have attracted international attention and have become a buzz among neurology residents making critical decisions about their career directions. Our accomplishments include eight subspecialty members, over 600 diplomates, and over 60 accredited programs. I have great confidence in Dr. Vespa's ability to bring the UCNS into the next decade with the goal of improving care for patients with neurological diseases."

According to Vespa, the UCNS has achieved its essential goals and has earned considerable respect since its inception in 2003. "Like most novel ventures born out of the needs and desires of a constituency, the UCNS represents a unique opportunity to forge our best ideas and shape or reshape our expectations, ideals, and practices involving physician certification and training program accreditation," he said. "While the



Paul M. Vespa, MD

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## UCNS Neurocritical Care Receives Recognition

The subspecialty of Neurocritical Care and the United Council for Neurologic Subspecialties have been recognized by an influential business consortium, the Leapfrog Group.

The Leapfrog Group's recommendations for ICU physician staffing now require neurointensivists to manage or co-manage patients in a neuro ICU. Neurointensivists are classified as those who have graduated from UCNS-accredited Neurocritical Care fellowship programs or those who have passed the UCNS Neurocritical Care certification examination. Leapfrog recommendations, which have been endorsed by the National Quality Forum, must be met for hospitals to compete for many health care contracts.

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Jose I. Suarez, MD



Michael N. Diring, MD

## Important Dates

### October 23, 2009:

UCNS Board of Directors meeting

### November 13, 2009:

Accreditation Council meeting

### December 31, 2009:

Accreditation application deadline for spring 2010 review

## Letter from the Chair



As I assume the responsibilities of chair of the UCNS Board of Directors, I want to acknowledge with gratitude the leadership of Leslie A. Morrison, MD, who has stepped down after serving as chair since 2005. Dr. Morrison served with a strong and steady hand during a period of significant challenges and growth for the UCNS. As many of you know, since our founding in 2003, the UCNS has welcomed eight subspecialty members, accredited 63 training programs nationwide, and certified 661 diplomates in their subspecialties. These accomplishments would not have been possible without Dr. Morrison's leadership. Fortunately, she will continue serving on the UCNS Board while devoting more time to new administrative duties at the University of New Mexico.

There have been other leadership transitions since the fall. Lisa M. DeAngelis, MD, has been elected vice president of the American Academy of Neurology and did not stand for re-election to the UCNS Board of Directors. Alan G. Finkel, MD, completed his term as representative on the board of the Headache Medicine subspecialty. Lawrence S. Honig, MD, was elected to serve a two-year term as a board member representing the Geriatric Neurology subspecialty. The term on the Certification Council of James J. Corbett, MD, ended in 2008, and he was replaced by Gretchen E. Tietjen, MD. The Certification Council terms of John B. Bodensteiner, MD, and José Biller, MD, ended in May. Dr. Biller had served with distinction as chair of that council for many years. They were replaced by Laurence E. Walsh, MD, and Peter Donofrio, MD. Gregory Gruener, MD, has been chosen to succeed Dr. Biller as Certification Council chair. Finally, Ezgi Tiryaki, MD, was appointed in November 2008 to fill a vacant Accreditation Council seat and the terms of Gerald S. Golden, MD, and Wendy Peltier, MD, ended in May. Dr. Golden has been replaced by Vinodh Narayanan, MD. We thank all of the retiring board and council members for their unstinting support of the UCNS over the years.

I recently reviewed the first draft of the 2008 audit. While it is not final, I feel safe in reporting that the year ended with better-than-expected results. 2009 will not be as strong, due in part to lower revenue associated with the economic downturn. Nevertheless, with the strong support of our parent organizations, the UCNS is positioned to move forward with confidence. I look forward to working with the board and staff on several innovative initiatives in the year ahead.



Paul M. Vespa, MD  
Chair, United Council for Neurologic Subspecialties

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## Certification News

### 2009 Certification Examination Schedules

| Subspecialty        | Application Deadline | Examination Date    | Location    |
|---------------------|----------------------|---------------------|-------------|
| Neuroimaging        | August 15, 2008      | February 2–6, 2009  | Pearson Vue |
| Neuro-Oncology      | January 15, 2009     | July 13–17, 2009    | Pearson Vue |
| Autonomic Disorders | July 15, 2009        | December 7–11, 2009 | Pearson Vue |
| Geriatric Neurology | July 15, 2009        | December 7–11, 2009 | Pearson Vue |

### 2010 Certification Examination Schedules

| Subspecialty                           | Application Deadline | Examination Date     | Location    |
|--|----------------------|----------------------|-------------|
| Headache Medicine                      | April 15, 2010       | October 11–15, 2010  | Pearson Vue |
| Behavioral Neurology & Neuropsychiatry | May 15, 2010         | November 8–12, 2010  | Pearson Vue |
| Neurocritical Care                     | July 15, 2010        | December 13–17, 2010 | Pearson Vue |
| Clinical Neuromuscular Pathology       | TBD                  | December 2010        | TBD         |

## Autonomic Disorders, Geriatric Neurology Prepare Exams for Subspecialists

The UCNS will offer two new examinations in December for Autonomic Disorders and Geriatric Neurology. The exams aim to help distinguish the subspecialties and offer opportunities to standardize training.

“The development of a certification examination in Autonomic Disorders has set the standard for this growing neurologic subspecialty,” said William P. Cheshire, MD, FAAN, Autonomic Disorders Examination Committee member. “It formally recognizes physicians who have attained special knowledge and expertise in disorders of the autonomic nervous system.”

“With the advent of the new certification examination, there is now a narrower definition for geriatric neurologists,” said Anil K. Nair, MD, chair of the Geriatric Neurology Examination Committee. “Geriatric neurologists frequently care for patients who are often frail, require an interdisciplinary team approach, and are receiving long-term care services in the home, community, or nursing home. A specialty will go a long way in defining such care as different from routine neurological care.”

### Rigorous Examination Process Ensures Quality

The rigorous UCNS examination process ensures the integrity of certification once awarded. Once an examination committee has been established, it can take up to 18 months to review content guidelines and core curriculum, discuss any relevant evidence-based data, and train participants in writing questions that will elicit the desired demonstration of knowledge. Exam committees typically meet on several occasions to discuss the clarity and content of each item and 200 questions are then selected for the exam.

Such was the case for the Neurocritical Care subspecialty, which recently completed its examination process. “It made me realize how much we have to learn and master to become neurointensivists,” said Jose I. Suarez, MD, vice chair of the subspecialty’s exam committee. “In particular, I learned that in order to deliver great neurocritical care one must have a solid knowledge of general critical care complemented by a firm foundation on brain function and pathology.” UCNS Neurocritical Care accreditation and certification is now recognized by the Leapfrog Group, a voluntary program

that recognizes and rewards advances in health care safety, quality, and customer value. “The inclusion of neurointensivists as members of the critical care physician pool has had a tremendous impact for Neurocritical Care,” said Suarez.



William P. Cheshire,  
MD, FAAN

Anil K. Nair, MD

Nair and Cheshire have similar thoughts about the process. “The new certification examination will go a long way in differentiating a subset of neurologists who are better trained to address the specific issues among elderly,” said Nair. “With upcoming pay-for-performance rules, sub-specialization may become another means of proving and measuring higher performance (as is currently done in the VA system).”

### Exams Offer Subspecialists Springboard to Flourish

Both Cheshire and Nair encourage their subspecialty colleagues to commit to taking the exams.

“This is an exciting time to enter the field of Autonomic Neurology because this is expanding territory for neurologists,” said Cheshire. “Significant advances are being made in our understanding of the molecular basis of autonomic disorders. I feel confident that the work of the UCNS will raise the standard of practice and enhance the care of patients with autonomic disorders for years to come.”

Nair concurred. “I strongly encourage all neurologists who are currently eligible (using the practice track) to take the Geriatric Neurology exam in the five-year window before the practice-based criteria closes.”

For more information, visit [www.ucns.org](http://www.ucns.org), or contact Todd Bulson at [tbulson@ucns.org](mailto:tbulson@ucns.org) or (651) 695-2813.

## Paul Vespa, MD, Elected UCNS Chair

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UCNS has originated from the traditional pillars of organized medicine, it has been unique in many respects and fosters many ideals about medical education and practice that represent the modern landscape of medicine extending toward the future.”

Vespa outlines these ideals:

1. The goal of the UCNS mission is to enhance medical care for patients with neurological disease.
2. The UCNS envisions providing certification to those physicians who demonstrate the highest level of quality and proficiency.
3. The UCNS promotes certification of physicians across the spectrum of medical specialties.
4. The UCNS seeks to accredit training programs that facilitate education of the highest quality.

Vespa foresees tackling a number of strategic initiatives over the coming years to strengthen and elevate the organization. “First, the UCNS will conduct a public awareness campaign to enhance visibility among relevant societies, credentialing agencies, hospitals, government agencies, and academic centers. Our organization is committed to being transparent to important policy stakeholders. Second, we will pursue opportunities to enhance our financial operations to ensure the ability to develop and administer certification and accreditation. Third, we will increase the number diplomates from neurology and other medical specialties.

“My hope,” concluded Vespa, “is to continue the outstanding work of my predecessors and to enhance the image and impact of the UCNS.”

## Accreditation News

### UCNS Accredits New Programs

Congratulations to the following programs that received accreditation from the UCNS beginning July 1, 2010. Newly accredited programs and fellowship directors are:

| Headache Medicine                               |                              |
|---|------------------------------|
| Loyola University                               | Rima M. Dafer, MD, MPH       |
| Neurocritical Care                              |                              |
| Medical University of South Carolina            | Angela N. Hays, MD           |
| Mount Sinai Medical Center                      | Jennifer Frontera, MD        |
| Oregon Health and Science University            | Anish Bhardwaj, MD           |
| Stanford University Medical Center              | Christine A. Wijman, MD, PhD |
| Thomas Jefferson University Hospital            | Monisha Kumar, MD            |
| University of California San Francisco          | Wade S. Smith, MD, PhD       |
| University of Michigan                          | Teresa L. Jacobs, MD         |
| University of Pennsylvania                      | Joshua M. Levine, MD         |
| University of Texas Southwestern Medical Center | Christiana E. Hall, MD, MS   |
| University of Utah                              | Elaine J. Skalabrin, MD      |
| University of Virginia                          | Bart R. Nathan, MD           |
| Neuroimaging                                    |                              |
| SUNY Buffalo                                    | Eric C. Lindzen, MD, PhD     |
| Winchester Medical Center                       | Patrick M. Capone, MD, PhD   |
| Neuro-oncology                                  |                              |
| University of Rochester Medical Center          | Steven R. Goldman, MD, PhD   |

### Program Changes

If you are planning changes in faculty, curriculum, or resources in your UCNS-accredited fellowship, please contact the Accreditation Council. The program change procedure and template letter are available for your convenience on your subspecialty accreditation page at [www.ucns.org](http://www.ucns.org).

### Checklist for Success

Assembling review materials is a critical part of gaining and maintaining accreditation, but how do you know if your submission will meet expectations? In our next issue, look for the article *Checklist for Success* for insights from the Accreditation Council on how to build a strong PIF for your next review.

## UCNS Neurocritical Care Receives Group Recognition

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"This recognition is a testament to the rigorous standards for training programs and exams developed by the UCNS and the Neurocritical Care subspecialty," said UCNS Chair Paul M. Vespa, MD. "UCNS Neurocritical Care graduated fellows and diplomates are regarded as vital to high quality and safe critical care."

The recognition is the result of several years of efforts by members of the AAN and the Neurocritical Care Society, which was one of the sponsors of the UCNS Neurocritical Care subspecialty, including Thomas P. Bleck, MD; Michael N. Diringer, MD; Marek A. Mirski, MD, PhD; and Wendy Wright, MD, a graduate of the AAN Donald M. Palatucci Advocacy Leadership Forum.

"Neurointensivists have long struggled for recognition by fellow neurologists, neurosurgeons, and other intensivists," Diringer said. "The development of a formal training and certification process are a big step forward in achieving recognition. In addition, it served to help define for the Leapfrog Group the essential role neurointensivists play in critical care of patients with nervous system insults. The official inclusion of neurointensivist in the Leapfrog definition of an intensivist is an important step forward to wider acceptance of their role."

Jose I. Suarez, MD, Vice Chair of the UCNS Neurocritical Care Exam Committee, said, "The inclusion of neurointensivists as members of the critical care physician pool has had a tremendous impact for neurocritical care. This recognition, along with the UCNS accreditation and certification process, legitimizes our field as a true subspecialty of critical care."

UNITED COUNCIL  
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- Association of University Professors of Neurology,  
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- Child Neurology Society  
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### 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 the UCNS Executive Office.