

Accreditation and Designation Statement

This activity has been planned and implemented in accordance with the Essential Areas and Policies of the Accreditation Council for Continuing Medical Education (ACCME) through the joint sponsorship of the Radiological Society of North America (RSNA) and the Society of Chairmen of Academic Radiology Departments (SCARD). The RSNA is accredited by the ACCME to provide continuing medical education for physicians.

The RSNA designates this educational activity for a maximum of 7.5 category 1 credits toward the AMA Physician's Recognition Award. Each physician should claim only those credits that he/she actually spent in the educational activity.

Evaluation

In compliance with the ACCME requirements, you must record your attendance and evaluate the sessions you attend in order to receive category 1 CME credit.

The evaluation instrument is supplied to you at registration in a booklet format. The session evaluations appear in chronologic order. Please write your name and address in the space provided, and complete the evaluations for the sessions you attend. At the end of the meeting, submit this completed evaluation booklet to the SCARD registration desk. A record of the CME credit earned at this meeting will be mailed to you six to eight weeks after the meeting.

Content Codes

To better help the participants of this CME activity organize their CME records, two-letter content codes have been indicated throughout the program. The content code for all sessions has been designated as HP (Health Policy/Management/Informatics).

Target Audience


This two-day course is designed for newly appointed chairs (less than two years), for senior faculty who aspire to become chair of an academic radiology department, and for junior faculty curious to know more about what a chair's responsibilities encompass.

Learning Objectives

The overall learning objectives for this program are: understand the strategic imperatives affecting the position of radiology chair; become familiar with methodologies and principles affecting the capturing, retention, and expansion of clinical income; learn about the impress of new regulations on the chair's freedom of action and attention to departmental protection; and gain insight into the stratagems for program and faculty development.

Disclosure Statements

RSNA, as an accredited provider of continuing medical education, must obtain signed disclosure statements from faculty at the SCARD Fall Meeting and New and Prospective Chair Orientation programs. Disclosures for presenters, who have or have had an affiliation or financial relationship with companies or organizations about whose products or services they are reporting (within the previous 12 months or at the time the research was conducted), are included at the end of the session description. A star indicates the presenters had nothing to disclose. A triangle indicates disclosure information was unavailable at press time.

 This icon indicates discussion of uses not approved by the FDA. The RSNA and SCARD recognize that at scientific meetings faculty may discuss the application of some devices, materials, or pharmaceuticals that are not FDA approved. In keeping with the highest standards of professional integrity and ethics, RSNA and SCARD require that faculty fully disclose to their audience that there will be discussion of the unlabeled use of a commercial product, device, or pharmaceutical that has not been approved for such purpose by the FDA.

Financial and FDA off-label disclosure information submitted after the printing of the SCARD Fall Meeting program will be available onsite. A list of those authors failing to submit signed disclosure statements prior to the meeting will also be available onsite.

7:00 AM – 5:00 PM **Registration**
Location: Silverado East Foyer

1:00 PM – 2:00 PM **Leadership**
AMA PRA Category 1 Credit: 1.0, Content Code: HP

Stephen R. Baker, MD★

Learning Objectives: Acquaint the prospective or new chair with strategic goals common to all leaders of academic radiology departments. Describe the dynamics of the devolution of responsibility among chairs of radiology, medical directors, and deans.

2:00 PM – 2:45 PM **Contracting**
AMA PRA Category 1 Credit: 0.75, Content Code: HP

Ronald L. Arenson, MD★

Learning Objectives: Learn about billing organizations and medical group structures. Study relationships with medical centers, including joint ventures. Consider patient mix implications for billing and contracting.

2:45 PM – 3:00 PM **Break** (in meeting room)

3:00 PM – 3:45 PM **Compensation Plan**
AMA PRA Category 1 Credit: 0.75, Content Code: HP

Ronald L. Arenson, MD★

Learning Objectives: Determine what constitutes a good compensation plan. Learn what types of incentives are important and meaningful. Balance recruitment needs and retention needs, determine fairness. Determine if on-call work should receive additional remuneration.

3:45 PM – 5:00 PM **Challenges to a Leader: Eight Case Studies**
AMA PRA Category 1 Credit: 1.25, Content Code: HP

Stephen R. Baker, MD★

Learning Objectives: To offer a mechanism for interactive discussions on a case-based format of issues pertinent to leadership by a radiology chairman. To raise issues through such discussions about human resources and equipment resources pertinent to a chairman. To reinforce through didactic exchange salient features important for leaders to acknowledge, if not accept, with respect to motivating and managing faculty.

7:00 AM – 5:00 PM

Registration

Location: Silverado East Foyer

1:00 PM – 2:00 PM

Statesmanship in Radiology

AMA PRA Category 1 Credit: 1.0, Content Code: HP

A. Van Moore Jr, MD★

Learning Objectives: Describe the leadership role of radiology in the House of Medicine. Identify ways to prove and improve the value that radiologists add to patient care. Discuss the mentoring of residents to become well-trained physicians and future leaders.

Abstract: A friend made an observation to me once, "In a boarding house, when the amount of food on the table becomes scarce, table manners are often disregarded."

As a specialty within the House of Medicine we are facing increasingly difficult times. With the spiraling cost of medicine, especially "high tech" medicine, the burden to the country, our patients, is becoming oppressive. As the leaders in "high tech", we are in part helping to drive that spiral and our specialty has benefited enormously. Many in the House of Medicine are filling what was a more of a traditional role in medicine when I entered medical school. The vast majority of physicians are in primary care. These physicians have also suffered the most when it comes to slashes in reimbursement. The shrinking reimbursement pie is presenting challenges to all, some more than others, and because of our success the collegiality that we have enjoyed in the past is being strained.

Assuming leadership in radiology in my view is more than just keeping the home fires burning. Certainly that is important. It also means that you assume the position of flying at the front of the "V" as the lead goose, setting the direction for all as we interface with the world around us.

As leaders in radiology we need to solidly organize under one roof as a specialty united. Division will lead to fragmentation and disorder. There must be a clear beacon on the horizon in order for our specialty to succeed. Times are critical.

As leaders we need to develop new leaders and develop them early. In the academic community we certainly need to train good radiologists. But we also need to begin their training as leaders as well. Residents need to be educated in the challenges ahead and early on be challenged to get involved in helping to preserve our specialty.

As leaders we need to be working hard to develop metrics to show the value that we add to patient care. We also need to work hard in improving the value that we do add to patient care. Our residents need to have these principles engrained in their training. One area to address is in QA. When residents go to a practice, the first questions they need to ask is what sort of QA program do you have in place? They need to understand that if they are not showing that they are adding

value and are not constantly looking for ways to prove they are adding value, they are going to be relegated to purveyors of piecework.

And the last point that I make in this summary, though by no means is it the last point that needs to be addressed, is that as leaders we need to put a face on radiology that commands the respect of our medical colleagues. We need to be tough in our principles in the defense of our specialty and respectful of the points of view of our colleagues. We need to address the constructive criticism of our specialty since these comments are pointing out and highlighting our weaknesses. We live in a changing world where change is the only constant. The medical practice environment is at times changing so fast that we are having a difficult time keeping up with the solutions. It is imperative that we address the need to change and change in constructive ways that best ensure the survival of our specialty. A point to remember, survival is not mandatory.

2:00 PM – 2:45 PM

Faculty Discipline

AMA PRA Category 1 Credit: 0.75, Content Code: HP

Stephen R. Baker, MD★

Learning Objectives: Describe the limitations of the chair's range of action with respect to non-renewal and firing of employees. Present the various state and federal regulations with respect to employee rights. Offer a tactical guide for the removal of inept or recalcitrant faculty.

2:45 PM – 3:00 PM

Break (in meeting room)

3:00 PM – 3:30 PM

How Do We Motivate Junior Faculty?

AMA PRA Category 1 Credit: 0.5, Content Code: HP

Steven E. Seltzer, MD★

Learning Objectives: By attending this session, registrants will learn: Basic principles of motivation for professionals. Options for developing specific motivational programs for junior faculty. Ways to evaluate the effectiveness of such programs.

3:30 PM – 4:10 PM

How Do We Motivate Senior Faculty?

AMA PRA Category 1 Credit: 0.75, Content Code: HP

James H. Thrall, MD★

Learning Objectives: Review a summary of special issues facing senior faculty. Learn the do's and don'ts of managing senior faculty. Learn about factors that inhibit effective management. Compare different management philosophies.

4:10 PM – 5:00 PM

Questions and Answers

AMA PRA Category 1 Credit: 0.75, Content Code: HP

Ronald L. Arenson, MD★

Stephen R. Baker, MD★

A. Van Moore Jr, MD★

Steven E. Seltzer, MD★

James H. Thrall, MD★

Faculty List

Ronald L. Arenson, MD

University of California San Francisco
San Francisco, CA

Stephen R. Baker, MD

UMDNJ-New Jersey Medical School
Newark, NJ

A. Van Moore Jr, MD

Carolinas Medical Center
Charlotte, NC

Steven E. Seltzer, MD

Brigham & Women's Hospital
Boston, MA

James H. Thrall, MD

Massachusetts General Hospital
Boston, MA

Participant List

NOTES
