Welcome back to the ASC Cytopathology Program Directors Communicator. In this issue, we highlight the Strategies in Cytopathology Education (SCE) session at the ASC 64th Annual Scientific Meeting; provide an update in ACGME requirements for Program Directors; and feature the newest Cell Talks winners. Lastly, Dr. Zubair Baloch discusses his perspectives on the use of social media in resident and fellow education.

Editorial Comment

Rachel Factor, MD

Strategies in Cytopathology Education

Roseann Wu, MD, MPH, Christina Kong, MD, Jennifer Sauter, MD, and Paul Staats, MD

The reviews are in! Participants of the most recent “Strategies in Cytopathology Education (SCE)” described it as an “excellent session” with “great ideas” and “unique and different tools” geared toward cytopathology program directors. Held in November 2016 at the ASC Annual Meeting in New Orleans, SCE was an informative and thought-provoking event, with a focus on supporting cytopathology fellows and approaching Systems-Based Practice (SBP) Milestones.

The first portion, entitled “Giving Your Fellows Wings” was facilitated by Dr. Steve Long, MD, Director of Anatomic Pathology at Stanford University. He used a case-based approach, supplying examples from his many years of experience in both private practice and academia, to stimulate discussion of how to help your fellow navigate the transition from training to “the real world”. This presentation provided practical tips for fellowship program directors and anyone who mentors residents or fellows. Here is just a sample of the topics discussed: elements a fellow should consider when selecting a job; working around weaknesses in a CV; appropriate versus inappropriate questions and behaviors during interviews; applying from lesser known programs; and providing recommendations for fellows with weaknesses. The audience offered insightful comments and actively engaged in group discussion surrounding these challenges.

The second half focused on “Innovative Approaches to Teaching Systems-Based Practice Milestones.” Program Directors continue to express concerns over how to effectively teach and evaluate residents using certain Milestones, especially the Systems-Based Practice (SBP) Milestones on personnel, budgeting, quality improvement, risk management, and safety. This session featured a panel of speakers discussing innovative approaches to teaching, with particular emphasis on these Milestones. Dr. Paul Staats, Chair of the ASC Cytopathology Program Directors Committee (CPDC) and Director of the Cytopathology Fellowship at University of Maryland Medical Center, presented the results of the CPDC surveys on systems-based practice and gave an update on new ACGME program requirements. (Continued on page 2)
Strategies in Cytopathology Education (continued)

Dr. Roseann Wu, Assistant Professor at the University of Pennsylvania Health Systems, discussed leveraging a variety of innovative resources and technologies in SBP education, ranging from Cell Talks to a communications checklist to online flashcards. Dr. Edmund Cibas, Cytopathology Fellowship Director at Brigham and Women’s Hospital, reviewed the fellow portfolio as a tool for documenting and evaluating SBP milestone achievement. Finally, Dr. Michael Henry, Director of Cytopathology at Mayo Clinic, discussed the Mayo Clinic’s administrative and regulatory training program that provides fellows with laboratory management experience.

Turnout was high, with over 70 attendees. This session was free of charge for all ASC Meeting attendees in 2016 and will be included with the overall meeting registration again this year, so we hope to see even more of you in 2017!

If you missed the Strategies in Cytopathology Education Session, the handouts are available at the ASC Program Directors’ Website: https://www.cytopathology.org/cytopathology-fellowship-programs/

The 2017-2018 Series Begins in April!

April 25, 2017
Urine Cytology: Diagnostic Criteria, Correlation with Biopsy and an Emphasis on Ancillary Studies
Jordan P. Reynolds, MD

May 23, 2017
Breast Cytology: Common Entities and Diagnostic Challenges
Uma Krishnamurti, MD, PhD

June 27, 2017
The Cell Block, the Empowerment of Cytology in Precision Medicine
Melissa L. Randolph, BS, SCT (ASCP)

July 25, 2017
Patterns and Pitfalls of Common and Uncommon Entities of the Endocervix
Blythe Gorman, MD

What’s New in ACGME Requirements
Paul Staats, MD

Greetings fellow Cytopathology Program Directors! As a Program Director, I often find myself struggling to keep track of the latest changes from the ACGME. At the 2016 Strategies in Cytopathology Education (SCE) Session at the ASC Annual Meeting, I debuted an “Updates for Cytopathology Program Directors” segment, which I plan to make an annual part of the SCE. I hope a recap here in the ASC Communicator may be helpful for those of you who could not attend the session. By the way, the SCE session is now free with ASC Annual Meeting registration, so I hope you will join us in person for SCE 2017.

Incoming Fellow Milestone Verification: The ACGME implemented a requirement for an “Educational Hand-off” from core residency programs to fellowships, effective 7/1/2016. The specific language is:

III.A.2.a) Fellowship programs must receive verification of each entering fellow’s level of competency in the required field using ACGME or CanMEDS Milestones assessments from the core residency program.

Residency Milestone reports for fellows are available only after they have entered the fellowship program and are entered into the ACGME ADS system. The intention is for fellowship program directors to tailor the training of each fellow to the strengths and weaknesses identified on the residency Milestones.

Cytopathology Program Requirement Updates: An updated version of the Cytopathology fellowship requirements goes into effect 7/1/2017. The new document can be found on the ACGME website (https://www.acgme.org/Specialties/Program-Requirements-and-FAQs-and-Applications/pfcatid/18/Pathology). Most of the changes are minor: a few items have been changed from detail to core, and there are several minor wording changes. There is an explicit statement that evaluation of the fellow must occur at least semi-annually, which was already a requirement for Clinical Competency Committee Meetings. (Continued on page 3)
What’s New in ACGME Requirements (continued)

Changes that may be more significant to programs include:

**Faculty:** ACGME now requires a program have at least 2 faculty members with cytopathology board certification or acceptable qualifications:

II.B.1.a) In addition to the program director, the faculty must include at least one core faculty member with demonstrated expertise in cytopathology with either cytopathology certification by the ABP or possess qualifications judged acceptable to the Review Committee.  

**Systems-based practice:** Significant additions were made to section IV.A.2.f, which now reads in part:

Fellows must demonstrate the ability to:

- Work effectively in a variety of health care delivery settings and systems relevant to pathology;  
  (Outcome)
- Incorporate cost considerations and risk-benefit analysis in patient and population-based care;  
  (Outcome)
- Participate in identifying system errors and implementing potential systems solutions; and  
  (Outcome)
- Advocate for quality patient care and optimal patient care systems.  
  (Outcome)

**Curriculum Organization:** The following paragraph was added to section IV.A.3.a:

Fellows clinical training must include: Supervision of trainees and/or laboratory personnel, and graded responsibility, including independent diagnoses and decision making  

(Core)

While each program must determine what, if any, changes to the program are required to demonstrate compliance with these requirements, some brief thoughts on these changes are included in the handout from the second half of SCE 2016, available on the program directors’ website: [https://www.cytopathology.org/cytopathology-fellowship-programs/](https://www.cytopathology.org/cytopathology-fellowship-programs/)

**Common Program Requirements Section VI: Professionalism, Personal Responsibility, and Patient Safety; Transitions of Care, Alertness Management/Fatigue Mitigation; Supervision of Residents; and Clinical Responsibilities in areas of Teamwork and Resident Duty Hours:**

Major revisions have been proposed to this section of the common program requirements. Public comments were solicited beginning in November and the comment period closed December 19. The draft language can be found here: [http://www.acgme.org/What-We-Do/Accreditation/Review-and-Comment](http://www.acgme.org/What-We-Do/Accreditation/Review-and-Comment). Revisions based on public comments are underway, and we can expect to see these changes in the next iteration of the fellowship program requirements.

As the ACGME requirements for cytopathology fellowship programs continue their never-ending process of change, we will continue to try to keep you informed and up to date, through the annual Strategies in Cytology Education session and regular issues of the Communicator. I hope you will also feel free to use the Program Directors Listserv to share your questions and your creative approaches to fellow education with each other.  

(Up Next: Cell Talks on Page 4)
Cell Talks News

Drs. Roxanne Florence, Matthew Rosenbaum, Jennifer Sauter, Roseann Wu, and Paul Staats

Cell Talks Awardees

A new round of Cell Talks has been selected for production. These Cell Talks proposals were judged to be the best among a very strong group of submissions received before the December 2016 deadline. The next submission deadline is May 5, 2017, so encourage your trainees to apply. Congratulations to the winners, and thank you to everyone who submitted!

December 12, 2017
Fine Needle Aspiration and Biopsy in the Management of Ovarian Cancer Including Potential Pitfalls
Michael Deavers, MD
Donna M. Coffey, MD

January 23, 2018
Endobronchial Ultrasound-guided Transbronchial Needle Aspiration: Challenges & Pitfalls
Sara E. Monaco, MD

February 27, 2018
Practical Approach to Cervical Squamous and Glandular Lesions
Krisztina Z. Hanley, MD

March 27, 2018
Pancreaticobiliary Cytology — Problem Cases
Judy Pang, MD

Hiring and Firing: Laws and Good Practice
Daniel Lubin, MD
AP/CP Pathology Resident
Hospital of the University of Pennsylvania
Philadelphia, PA
Mentor: Roseann Wu, MD, MPH

Cytology Proficiency Testing
Margaret Holmes, MD
Cytopathology Fellow
MedStar Georgetown University Hospital
Washington, DC
Mentor: Mary Sidawy, MD

How to Manage Different Personalities
Aileen Grace P. Arriola, MD
Surgical Pathology Fellow
Hospital of the University of Pennsylvania
Philadelphia, PA
Mentor: Roseann Wu, MD, MPH

Critical Values in Cytopathology
Sharon Song, MD
Pathology Resident
Hospital of the University of Pennsylvania
Philadelphia, PA
Mentor: Roseann Wu, MD, MPH

Have you heard about Cell Talks?

*Cell Talks were developed by the Cytopathology Program Directors Committee CPDC) of the ASC to aid residents and cytopathology fellows achieve and document progress through selected ACGME Cytopathology Milestones.

*Completion of these modules can help program directors and clinical competency committee members decide at which level a resident or fellow should be scored on individual milestones. (continued on page 5)
**Cell Talks News (continued)**

**What exactly are Cell Talks?**
- Bite-sized, online didactic modules approximately 15 minutes in length.
- Cover a variety of topics that go beyond medical knowledge and are difficult to learn at the microscope, related to professionalism, cultural competency, cytopathology lab management, etc.
- Directly links the subject matter to a specific portion of a milestone(s).
- Can be used to complement or supplement an existing cytopathology curriculum.
- Each Cell Talk is followed by 3-5 review questions.

**How can I get involved?**
- Encourage a resident or fellow (along with a faculty mentor) to submit a Cell Talk!
- The submission process including suggested topics and a template to use is available at [www.cytopathology.org/celltalks](http://www.cytopathology.org/celltalks).
- The CPDC provides feedback on submitted presentations and chooses the winners twice a year.
- Applications are due in early December and early May.
- Winners receive production support for recording their Cell Talk and a $125 monetary award.
- Crafting a submission may fulfill scholarly activity requirements.

**What else should I know?**
- Access to previously recorded Cell Talks is free to ASC members!
- Currently, 13 Cell Talks are available online (see sidebar).
- The CPDC welcomes feedback on the Cell Talks program.

**Old Dog, New Tricks - Utilizing Social Media to Communicate Information and Education: A Personal Perspective**

**Zubair W. Baloch, MD, PhD Professor of Pathology & Laboratory Medicine**

University of Pennsylvania Medical Center, Perelman School of Medicine

Over the past decade, we have encountered a dramatic increase in the use of social media to share and disseminate information. To name a few platforms, Facebook, Twitter, and Instagram are used by more than 1.19 billion users of multiple demographic groups worldwide every month, to interact and share information.\(^{(1,2)}\) Given this popularity, many healthcare professionals, including practicing physicians and academic clinicians, have utilized social media as a versatile platform to promote medical education and information sharing.\(^{(3-5)}\) Compelling reasons include increasing demands for interactive learning by the so-called “Millennial” generation of trainees, restrictive trainee duty hours that may limit participation in conferences and educational sessions, increasing complexity of content requiring visual props, easily searchable and stored content, and above all, the vast majority of health professional trainees and students utilize social media as their primary source of information.\(^{(4,6,7)}\)

As students of pathology, we are very much familiar with the concept of “A Picture is Worth a Thousand Words”. A cytologic preparation and/or a hematoxylin and eosin (H&E) slide represents an untold story that molds into a physical form with our diagnosis, leading to the best available management for patients we serve. Today, these pathology images are not limited to textbooks and atlases but take center stage in many social media websites dedicated to pathology education. **(Continued on page 6)**
Perspectives on Social Media and Education (continued)

Therefore, it is not a secret that social media offers a novel medium for the teachers of pathology to keep our contemporary learners educated and informed of developments in the field. In a recent study, Bergl and colleagues reported that regular Twitter feeds by internal medicine chief residents can strengthen a residency program’s educational mission. In this study, the authors tweeted about morning report conferences, summarizing key features of the cases and sharing pertinent literature and even radiographs.

As an academician, my personal experience with social media, specifically Twitter, commenced at the 2016 USCAP meeting in Seattle. I soon learned how to highlight and share the educational offerings in real-time, post the so-called “pearls of pathology” from various talks, and enjoy the social interactions among many participants attending the meeting. Since then, I have used this platform to “tweet” what I find interesting and educational during a pathology conference or an interesting case with anonymized illustrations during my daily sign-out. Social media activity by those practicing academic pathology can be helpful in creating an attractive presence of a pathology training program, to enhance engagement of the current and future trainees. The posts could include key facts about the program, the breadth of educational offerings, and faculty expertise.

Social media, while having significant potential for serving as an educational and communication tool, also requires a thorough understanding of the delicate balance between social media postings, privacy, and professionalism. It is recommended that each pathology training program develop a policy to govern and manage social media presence and educational efforts. This will be helpful to ensure the integrity of content and acceptability of communications. In addition, one must be cognizant that a social media presence can be time consuming and interfere with daily clinical and administrative duties.

References: