Happy 2015! The ASC Cytopathology Program Directors Committee (CPDC) would like to take this opportunity to welcome our membership back to the Program Directors (PD) Communicator again. In this issue, we will discuss the result of a survey on Rapid On Site Evaluation (ROSE) that provides the Program Directors to “benchmark” their training programs with national norms. We will also discuss the implementation of Cytopathology Milestones and Clinical Competency Committee by highlighting the training provided by our Committee at the ASC 62nd Annual Scientific Meeting last November for the Cytopathology Fellowship Program Directors during the Strategies in Cytopathology Education session. Many useful handouts and links are listed on the ASC Web site’s Cytopathology Fellowship Programs’ web page. Some of the educational products developed by this Committee are also highlighted.

Marilyn M Bui, MD, PhD and Leslie G Dodd, MD

Cytopathology PD ROSE Survey Result

Last fall the ASC CPDC surveyed its membership through the Listserv pertaining to trainee (fellows and residents) participation in Rapid On site Evaluation (ROSE) interpretations of fine needle aspiration procedures. This was to establish information on the extent of trainee participation in ROSE, survey Program Directors on the impact of ROSE on trainee education, and to gather information on barriers to ROSE interpretation by trainees as well as some potential "best practices" regarding trainee education and experience when going on site.

The Committee would like to thank the 49 respondents who took time out of their schedules to answer this survey. For the compete survey results, please see https://www.surveymonkey.com/results/SM-LM8PRGKV/.

Some highlights:

- Most places offer ROSE using a team of individuals, including a cytopathology fellow, cytotechnologist, and attending cytopathologist, less commonly a resident.
- Fellows are always involved in ROSE, and participate in all components.
- 93% of programs allow fellows to do independent ROSE assessments. It is an even split between being allowed to only render "adequate" versus a "specific diagnosis."
- The greatest barriers to fellows not doing independent ROSE are:
  1. Cytopathologist perceived need for more trainee oversight (17%)
  2. Billing and revenue for the department (13%)
- Cytotechnologists are involved in ROSE in 90% of programs, and are involved in most components, although less frequently in rendering a ROSE interpretation, communicating with the clinician, and doing the paperwork than fellows do.
Cytotechnologists involved in ROSE largely have a positive effect on Fellowship Programs, either freeing fellows up or providing additional supervision.

Cytotechnologists can independently render ROSE interpretations at 66% of programs; although they are almost exclusively restricted to "adequate/not adequate" interpretations.

Only 34% of institutions will bill a technical component for cytotech interpreted ROSE assessments.

Single greatest barriers to teaching ROSE:
1. Billing and revenue generation for the department/hospital (24%)
2. Too much volume leading to limited time for teaching (12%)
3. Time pressure during cases to render interpretation quickly for clinical care (12%)

The CPDC would again like to thank those participants for contributing their time and expertise to this survey. The Committee members were particularly pleased with the enthusiastic responses for fellows' independent involvement in ROSE, despite some perceived barriers to the practice. We hope that this information is useful to all individuals involved in the Graduate Medical Education (fellows, residents, coordinators, program directors, teaching faculty and departmental/institutional leadership).

Leslie G Dodd, MD

Strategies in Cytopathology Education

CPDC planned two SCE sessions for the ASC Annual Scientific Meeting. One session focused on the final version of the Cytopathology Milestones along with strategies for incorporating the Milestones into the assessment of the cytopathology fellows. The other session was focused on the Clinical Competency Committee (CCC) with information such as what is required in a CCC, suggestions for efficiency and planning, and an interactive mock CCC exercise to provide participants a virtual experience of running a CCC. Please go to the Cytopathology Fellowship page on the ASC Web site to access this educational information.

CPDC also planned the annual Career Session for cytopathology fellows and other trainees in conjunction with the CELL Resource Committee. The handout can be accessed on the Cytopathology Fellowship page of the ASC Web site.

CPDC developed Problem-based Learning Program for Cytopathology Education is available for purchase through the ASC Web site for $200 for all 7 learner-centered case studies.

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