President’s Message

With summer now behind us, the APC can look back on July’s highly successful 2016 Annual Meeting in sunny San Diego. The theme encapsulated by the meeting’s title—“Crafting the Vision to Lead”—played out in scintillating, forward-looking sessions on such vital topics as healthcare reform, leadership development, innovations in training, and the latest advances in precision optics, capped off with a dazzling presentation by forensic pathologist Dr. Bennet Omalu (University of California Davis). A total of 383 leaders in academic Pathology registered to attend. There were lively meetings of each of our Sections and Committees, as you'll read throughout this newsletter.

Returning again to the Rancho Bernardo Inn, with its intimate sylvan setting, attendees packed the conference rooms and outdoor receptions, but also made good use of the many sites for small-group meetings, dining, networking, and quiet conversation it afforded. Our decision to leave one late afternoon/evening unscheduled seems to have been well received. It was especially gratifying to be joined by 21 sponsoring companies and organizations (an all-time high!), including our two Diamond Sponsors, Corista and Inspirata. The enthusiastic participation by these sponsors enlivens the meeting and is one more sure sign that APC's summer meeting is recognized now as the premier gathering of the leaders of academic Pathology.

Drs. Dani Zander (University of Cincinnati) and Lydia Howell (UC Davis) earned a special shout-out for launching the first-ever Pathology Leadership Academy (PLA), which was held in conjunction with the summer meeting this year. 56 rising faculty stars from APC member departments around the country came to the PLA for an intensive day-long pre-session that introduced them to the nuances of departmental leadership and helped prepare them for their own futures at the forefront of academic Pathology.

Midway through the summer meeting, I was honored to take over the gavel from Dr. Don Karcher (The George Washington University) to begin my own two-year term as President of the APC. Over the past eight years on APC Council, I’ve watched a succession of gifted leaders expand the APC’s missions and vision, and enhance its visibility in the landscape of our profession. Their efforts helped reinvent the APC as the vibrant organization it is today, and make me feel all the more humbled that you’ve elected me to represent you today, and make me feel all the more humbled that you've elected me to represent you in this role. Dr. Karcher, in particular, can be proud of his legacy, which included leading the highly successful Advocacy Committee in its formative years and cementing APC’s ties to our University, planning is already underway for our 2017 meeting in Washington, DC, which will celebrate the 50th anniversary of the founding of the APC. And more than 70 members joined us online on September 8th to learn about the use of next generation sequencing-based diagnostic tests in academic labs, in the first of our planned “Leaders Learning Series” of webinars hosted by the APC. It’s going to be an exciting year.

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President’s Message (continued)  

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many partner organizations, most notably the College of American Pathologists. But the future depends on all of us. In the coming years, APC will continue to rely on each and every one of its members for the wisdom and energy that will propel it forward into its second half-century. The creativity, collegiality, and dedication of our members have always been the keys to APC’s success. I take comfort in that fact as I contemplate trying to fill the shoes of Dr. Karcher and of my other distinguished predecessors as President of this extraordinary organization.

Sincerely,
Tris Parslow, MD, PhD  
APC President

Academic Pathology Report
By James Crawford, MD, PhD, Editor-in-Chief

The official journal of the APC is aiming to carve out a new space in Pathology scholarship, giving voice to the challenges of leading academic departments of Pathology, and celebrating successes and innovations in the missions of education, research, and the clinical practice of academic Pathology. The first 21 months of journal existence (January 2015 to September 2016) have seen the following:

- 2015 (Jan-Dec): 41 submissions, 17 published (41% acceptance rate; 84% acceptance rate for submissions that were “in scope” for the journal)
- 2016 (Jan-Sep): 22 submissions – all but 2 “in scope,” 14 published/in-press out of 17 decisions (82% acceptance rate)

The striking acceptance rate for submissions that are “in scope” for the journal reflects both the opportunity for this form of original scholarship, and the fact that submitting authors are indeed achieving success in their efforts to advance the interests of academic Pathology.

Educational scholarship has been a particularly strong theme in the 34 papers published or in-press. This theme is outside the primary scope of other Pathology journals, which publish comparatively few or no educational scholarship articles. At the very least, there is both need and opportunity for scholarship in this realm–both at the graduate (GME) and undergraduate (UME) levels. But Academic Pathology can play a key role in meeting this need. So far this year, 5 of the 13 Academic Pathology papers published or in-press are educational scholarship.

Nine other published/in-press papers to date address the topics of faculty development, best practices, clinical practice, workforce, and population health. We have published 4 “OpEds” – important essays from distinguished senior members of our academic Pathology community or from industry observers, on the topics of mentorship, black males in Pathology, the physician-scientist pathway in Pathology, and Pathology as a career.

Collectively, the portfolio of published papers to date can help set a course for the strengthening of academic Pathology in these changing times. Innovations, best practices, and creative initiatives at our member institutions and beyond are already occurring. Academic Pathology is an ideal instrument for disseminating knowledge in this arena, and empowering colleagues within the APC and well beyond to succeed in the many missions that we serve.

The most critical early milestone for this journal is achieving indexing, with PubMed Central and other indexing agencies. The ticker tape is as follows:

- 30 “original reports” (not OpEds) must be published (not in-press) for the journal application to be submitted for indexing.
- As of August 31, 2016, 27 published or in-press articles qualify.
- Sufficient articles have been submitted that, if deemed meritorious, will put us past the requisite 30 original reports.

We thus are hopeful that an application for full indexing of this journal can be submitted in the 4th quarter of 2016. Sage Publishing have a strong record of achieving index status for their new journals.

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Academic Pathology is a peer-reviewed open access journal sponsored by the Association of Pathology Chairs, established to give voice to the challenges and innovations in education, research, practice, and leadership of academic pathology departments. Articles published in Academic Pathology have the potential to inform, influence and impact the broader field of pathology, as well as the global community of health care providers, educators, and researchers.

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Research Committee Report

By Daniel Remick, MD – Committee Chair

The research session at the APC 2016 Annual Meeting was titled “You Won’t Believe Your Eyes – 21st Century Optics in Pathology.” The topic for the session was selected to provide both an overview of the basics of microscopy as well as insights into the latest advances. Dr. Richard Levenson (University of California, Davis) introduced the basics of microscopy, both new and old. In this opening talk, Dr. Levenson presented some of the newer, relatively low-cost alternatives to traditional microscopy. Dr. Alison North, Senior Director of the Bioimaging Research Center (The Rockefeller University), followed with the presentation “From Super-Resolution through Whole Embryo Imaging: Taking Advantage of Commercially Available Systems.” This was a fascinating presentation that covered a range of techniques that may be performed with purchasable, although at a relatively steep price, equipment. Dr. Yicong Wu, Staff Scientist, National Institute of Biomedical Imaging and Bioengineering, Section on High Resolution Optical Imaging (NIH), was the final speaker. His presentation “High Speed Imaging at and Beyond the Diffraction Limit” further expanded the boundaries of what can be done with current and emerging optical technologies. The session was very well attended and there were numerous questions during the panel discussion at the end.

The Research Committee also presented a pre-meeting Biorepository Management Workshop that featured vignettes from faculty of seven APC member departments. The presenters were selected from excellent submissions received through a general call for speakers sent over the APC email list, which demonstrated a high level of activity and interest by Pathology departments in biobanking and related issues.

The Research Committee is continuing to closely follow the physician scientist workforce issues within Pathology. Dr. Brian Smith, Chair of Laboratory Medicine (Yale University), attended a workshop at NIH about the physician-scientist pathway. This workshop took place during the APC Annual Meeting. Pathology was specifically asked to participate because of the American Board of Pathology’s initiative in creating a sanctioned physician-scientist pathway. This physician-scientist workforce issue will be closely followed by the Research Committee in the coming months.

Practice & Management Committee Report

By Robert Mrak, MD, PhD – Committee Chair

At the APC Annual Meeting in July, the Practice and Management (P&M) Committee discussed results from the annual survey of Pathology departmental salaries and workloads. Dr. Barbara Ducatman (WVU) and Dr. Tristram Parslow (Emory) have prepared a manuscript based on these findings, which is currently in press in Academic Pathology. Major findings include the following: (i) differences in reported productivity data from different surveys (Medical Group Management Association and Vizient-AAMC Faculty Practice Solutions Center) are largely attributable to differences in the definition of “full-time faculty,” and whether or not RVU data are normalized for clinical effort; and (ii) different indices of clinical workload (work RVUs, clinical effort allocation, and annual days on service) show poor correlation with one another. Our APC survey comprises a larger data set than do either of the other two surveys.

For the upcoming year, the Committee will refine the APC survey. In particular, we will include a question about individual faculty years in service, and a request for data about specific subspecialty practitioners.

In addition, the Committee is beginning to explore methods for benchmarking Clinical Pathology effort, for measuring value-added activities, as well as how to collect and analyze information on how various faculty and departmental incentive plans work.
Graduate Medical Education Committee Report
By Karen Kaul, MD, PhD – Committee Chair

The Graduate Medical Education Committee (GMEC) met during the July APC meeting in San Diego to discuss ongoing activities related to residency and fellowship training.

Updates on a number of ACGME-related activities were discussed. A letter from APC and PRODS to the ACGME was sent this spring, requesting that PhD clinical faculty be counted as core faculty for residency and fellowship programs. This would ensure that these faculty members are recognized, their CVs are uploaded to the ACGME WebAds system, their scholarly activity is recorded, and they are included in the annual ACGME faculty surveys. Since PhD faculty make up approximately a quarter of our teaching faculty in many programs, their input and data is important in the assessment of our teaching programs. The letter was received and discussed at the June ACGME Council meeting of RRC chairs, with support broadly voiced, in particular from Medical Genetics and Genomics and also Radiation Oncology, both of which also include PhD clinical faculty members. A recommendation was made by this group to move forward for further discussion at the fall ACGME Board meeting. Thanks to Drs. Don Karcher (The George Washington University) and Charles Timmons (UT Southwestern) for co-authoring the letter, and also to Drs. Robin Lorenz (University of Alabama at Birmingham) and Dani Zander (University of Cincinnati) for helpful data.

The ACGME Pathology RRC will be adding 2 members to its roster. Current nominating bodies include the AMA and the American Board of Pathology (ABP). The ABP has suggested that these new nominations come from APC/PRODS, and have voiced their approval to ACGME on this change. The other current appointing body, AMA, must vote their approval as well, expected sometime this fall. Once approved, the mechanism of selection/appointment will need to be determined by APC/PRODS.

Also discussed was a nearer-term project to develop a unit (perhaps a teleconference) on professionalism, addressing issues and problems related to fellowship recruiting and acceptance, with the goal to target both trainees and fellowship program directors. This might be used to introduce the Code of Conduct being developed by FDAHC.

A lengthy discussion of issues related to professionalism took place during July’s Committee meeting, and the Committee would like to thank Dr. Ron Domen (Penn State University) for joining us for this discussion. In particular, the need for tools to facilitate teaching of professionalism in residency programs was discussed. A plan for partnering with PRODS to develop such tools or a curriculum along the lines of PIER or TRIG was suggested, and will be developed further in the coming months. We welcome all members interested in participating!

Advocacy Committee Report
By John Tomaszewski, MD – Committee Chair

APC Annual Meeting: The Association of Pathology Chairs’ Advocacy Committee (APCAC) hosted a Joint Chairs/PDAS Advocacy Session at the annual meeting in July, entitled “The Changing Reimbursement Environment for Pathology and Laboratory Medicine: Charting Your Course to Getting Paid through a Sea of Acronyms – PAMA, MACRA, MIPS, APMs.” The session keynote was given by Dr. Steve Black-Schaffer (Massachusetts General Hospital), who offered an outstanding summary of the dramatic changes which are evolving in health care economics and reimbursement. As usual, Dr. Black-Schaffer’s remarks were erudite and they crystallized the salient features of this enormously complex topic. Targeted follow-up commentaries were given by Dr. Stan Hamilton (MD Anderson Cancer Center), who is a member of the PAMA advisory council; Dr. Charles Hill (Emory University, and President of the Association for Molecular Pathology), and Dr. David Lewin (Medical University of South Carolina, and President of the American Society for Clinical Pathology). The panelists led an informative discussion on the complex interactions between

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Leadership Development & Diversity Committee Report
By Lydia Howell, MD – Committee Chair

The Leadership Development and Diversity (LD&D) Committee is thriving in its first year as an official standing committee of the APC. The Committee featured several events at the annual meeting in San Diego to meet its goal of growing leaders and enhancing diversity in academic Pathology.

Pathology Leadership Academy (PLA): This new 1.5 day pre-meeting course attracted 56 outstanding participants, from 19 different states, who hold a variety of leadership positions in their departments. More than half of the participants were assistant and associate professors. Evaluations were almost exclusively in the outstanding to excellent range. Participants particularly enjoyed the session on conflict management and the opportunity to gain perspective on leadership from current chairs and senior fellows. PLA co-directors Dani Zander (UC Cincinnati) and Lydia Howell (UC Davis) will be exploring opportunities to offer the course again next year. You can read more about the PLA on pp. 22-23.

Diversity and Inclusion Leadership Program (DIPLP): At the annual meeting, the first two graduating DIPLP fellows presented posters on their diversity projects and received certificates of completion during the Awards Luncheon. We extend our congratulations to Dr. Melina Flanagan (West Virginia University) and Dr. Ann Sutton (East Carolina University), and to their mentors and program founders Dr. Barbara Ducatman (WWU) and Dr. Peter Kragel (ECU). We also thank Drs. Flanagan and Sutton for their pioneering spirit as the first to participate and their important role in helping to shape this program. The second class of fellows, Dr. Gissou Azabdaftari (Roswell Park Cancer Center) and Dr. Diana Cardona (Duke University), are entering the second year of their DIPLP experience. The LD&D Committee solicited input on the fellows’ experience and will be reviewing the findings along with new ideas to enhance the program. Opportunities for enhancement currently under consideration include partnering with a diversity certificate program, linking to the Pathology Leadership Academy, and expanding the monthly teleconferences into a webinar series, among other options. New fellows were not enrolled for 2016-17; enrollment will resume following the Committee’s review of the pilot experience and discussion of the new ideas and options.

Patricia Thomas Lecture in Diversity and Inclusion: Dr. David Acosta, Associate Vice Chancellor for Diversity and Inclusion at UC Davis, and Chair Emeritus of the AAMC’s Group on Diversity and Inclusion, provided an insightful lecture entitled “Bridge Over Troubled Water: Crossing the Cultural Divide to Enhance Faculty Diversity.”

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Academic Pathology Report (continued)

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Once Academic Pathology has been indexed, all previously published articles will be indexed retroactively.

As Editor-in-Chief, I now strongly encourage you to publicize this journal to your colleagues—especially Pathology faculty and residents who likely have already made important contributions to the success of your departments. Academic Pathology is precisely the journal that can bring their creative successes forward to a worldwide community, in realms that extend beyond traditional scholarship in clinical, translational, and basic science. This journal will also help bring recognition to your departments, for leadership that you are already providing.

A final comment is in order. Faculty Development is “in scope” for this journal, as a topic in and of itself. But it is precisely through the publication of original peer-review scholarship in the broader portfolio of advancing academic Pathology, that faculty development can be achieved. Academic Pathology now constitutes a mechanism for bringing such broad creativity forward.

For more information or to join the LD&D Committee, email LD&D Chair Lydia Howell at lphowell@ucdavis.edu.

Academic Pathology is an open access journal; APC members receive a discount on the article processing fee. Take advantage of this discount and submit today! mc.manuscriptcentral.com/apc.
Advocacy Committee Report (continued)

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MACRA and PAMA and how it is certain to change the face of the economics of Pathology practice in the near future. There was a spirited Q&A session which extended to the last minute of the session (and a little beyond!).

The Advocacy Committee recognizes that advocacy issues evolve throughout the year and it seeks to quickly adjust to the environment; the Committee especially welcomes input on newly-evolving advocacy developments from all APC members. The Advocacy Committee has identified the issues listed below as some of our priorities for 2017.

Medicare Access and CHIP Reauthorization Act (MACRA) of 2015: MACRA repealed the sustainable growth act. Under MACRA, physicians choose between two “pay for performance” models. The more advanced model is the alternative payment model (APM), which is for physicians participating in patient-centered medical homes, accountable care organizations, and Medicare shared-savings programs. The less advanced model is the Merit-Based Incentive Payment System (MIPS). MIPS will assign physicians, including pathologists, either an annual financial incentive or penalty, based on compliance with MIPS. MACRA begins January 1, 2017. The College of American Pathologists (CAP) estimates that the MIPS program will have a $1.5 billion overall impact on the Pathology specialty beginning in 2019.

MACRA quality metrics are designed for patient-facing specialties, and do not fit well with the practice of Pathology and Laboratory Medicine. For most physicians, 50% of MIPS performance will be related to quality and will replace PQRS; 25% will relate to advancing care information and will replace Electronic Health Record (EHR) meaningful use; 15% will be clinical practice improvement; and 10% will be linked to resource use (replaces value based payment modifiers).

Pathologists will not face reporting requirements for advancing care information and resource use and these categories will be redistributed. The Centers for Medicare & Medicaid Services (CMS) has stated it will allow pathologists to use CAP’s eight quality reporting measures for 2017. For clinical practice improvement, CAP has recommended activities such as population management, patient safety and practice assessment, and hospital antimicrobial susceptibility reports be considered for Pathology. MACRA also allows specialties to create models for their own Physician Focused Payment Models. CAP is working to develop a Pathology-focused model to submit to CMS for review later this year.

Protecting Access to Medicare Act of 2014 (PAMA): Section 216 of PAMA, which adds Section 1834A to the Social Security Act, seeks to reform reimbursement rate setting under Medicare’s Clinical Laboratory Fee Schedule (CLFS). Laboratories will be required to report to CMS the payment rates paid by each private payer for tests during the previous twelve months. PAMA requires Medicare CLFS payments to be the weighted median of private payer payments. There are five areas of this law which will be of interest to the APC members: (1) reporting of private payer rates and volumes; (2) Medicare payment rate development; (3) coding; (4) coverage; and (5) steps involved in the overall implementation of the new law.

Both clinical diagnostic laboratory tests (CDLTs) and advanced diagnostic laboratory tests (ADLTs) must be reported. PAMA ADLTs are defined as analysis of RNA, DNA, or proteins combined with a unique algorithm. Under PAMA, the initial payment rate for ADLTs is set at the actual list charge until private payer rates are established. CMS will use G-codes to meet PAMA’s requirement of unique codes for FDA-cleared or FDA-approved ADLTs and CDLTs.

The interplay of data collection and reporting, price calculation, and CLFS payment will determine the eventual structure of PAMA. PAMA gives CMS authority to consolidate claims processing and/or coverage policies for laboratory tests to between one and four Medicare Administrative Contractors. The cumulative reduction in the CLFS by 2023 is anticipated to be a maximal of 55%.

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Advocacy Committee Report (continued)
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**Local Coverage Determination:** CMS uses Medicare Administrative Contractors (MACs), which are private insurers that process Medicare claims within specified geographic areas. MACs manage local payment coverage determinations (LCDs) that are not under national coverage determination (NCD). NCDs and LCDs are not arrived at by equivalent processes. Reimbursement decisions for new tests, such as modern molecular testing, are often impacted by LCDs. Decisions about what services are covered under LCDs are made at the level of the MAC carrier advisory committee and not always done with full vetting by the clinical laboratory community. HR5721, Local Coverage Determination Clarification Act of 2016, is a proposed bill which amends title XVIII (Medicare) of the Social Security Act to revise the process by which MACs issue and reconsider LCDs. This bill seeks to clarify CMS’s role in oversight of local coverage determinations by MACs.

**Lab Developed Tests (LDTs):** Academic medical center clinical laboratories are often heavily involved in the development of new and innovative clinical testing. LDTs are of particular interest to these labs. In October 2014, the U.S. Food and Drug Administration (FDA) released draft guidance on its proposed oversight of LDTs: the FDA continues its interest in regulating LDTs. APCs positions regarding LDTs are:
1) the technological and clinical innovations that are intrinsic parts of development of LDTs should remain unhindered;
2) the quality and reliability of LDTs should be maintained at the highest levels possible; and
3) LDTs and other life-saving laboratory diagnostics should continue to be made widely available in a timely fashion for patient use.

To date, the FDA has not finalized the draft guidance. APC continues to be actively engaged in the state and national discussions on regulating LDTs. A few updates deserve mentioning.

The House Energy and Commerce Committee looked at the regulation of diagnostic tests and laboratory operations through a series of hearings and requests for information. The House Appropriations Committee included report language in the FY 2017 Department of Agriculture appropriations legislation directing the FDA to “suspend further efforts to finalize the LDT guidance and continue working with Congress to pass legislation that addresses a new pathway for regulation of LDTs in a transparent manner.”

On April 6, 2016, academic Chairs of several New York Pathology programs met, by phone, with officials of the New York State Department of Health Clinical Laboratory Evaluation Program (CLEP). The meeting was quite productive. CLEP offered that the experience of a laboratory with the technology and with the platforms on which an LDT would be built is an important factor in considering the risk level of the LDT and the level of necessary oversight.

On September 20, 2016, Dr. Don Karcher (GWU & Immediate Past President of APC) attended a meeting of the AAMC with representatives of the FDA. The AAMC’s position as of June 2016 is: “we share our members’ concerns that the FDA’s regulation of LDTs as proposed would interfere with delivering innovative, cutting-edge medical care, negatively impact patients, or mire the development of critical new tests in a costly and laborious process.”

LD&D Committee Report (continued)
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lively panel discussion followed, which included Drs. Acosta, Bennet Omalu (UC Davis), Amyn Rojiani (Augusta U), and Ann Thor (UC Denver).

Women’s networking event: The LD&D Committee hosted its first women’s networking event this July. Women chairs, program directors, and course directors all enjoyed the opportunity to meet, mingle, and learn from each other. We look forward to continuing this event at APC’s Annual Meetings.

Future plans: LD&D will be updating resources on its webpage, and re-surveying Chairs to assess impact and emerging needs for leadership and diversity. DILP fellow enrollment will resume following review of the pilot experience.
The Senior Fellows (SF) Ad Hoc Committee met at the APC Annual Meeting in July to review the SF activities, the major projects of the past year, and plans for the coming year.

The “Life After the Pathology Chair” project has been led by David Bailey and Fred Sanfilippo, who gave an overview at their Discussion Group at the APC Annual Meeting, followed by Workgroup presentations from Mary Lipscomb, Fred Gorstein, and David Wilkinson. The Discussion Group was well attended by many SFs and Chairs who provided very active and valuable discussion. A manuscript summarizing the project and information obtained from the Workgroups and Discussion Group meeting has been accepted for publication in Academic Pathology. It appears that the subject of transitioning from the Chair has stimulated a lot of interest, since all three of the Chairs’ regional meetings this fall have sessions on this topic.

The Senior Fellows were very well-represented at the Annual Meeting with 15 attendees. The Pathology Leadership Academy (PLA) prior to the APC Meeting included 8 SFs who participated in the discussions and at a “Senior Fellow Advisory” luncheon. The “Ask the Senior Fellows” Forum at the APC Meeting on Tuesday afternoon was well-attended by SFs, Chairs, and PLA participants. The 1-on-1 Senior Fellow consult program for the Annual Meeting was implemented by formal registration prior to the meeting, and many more Chairs signed up during the meeting. More than 20 individual consult sessions were held, involving at least 9 different SFs. Some Chairs asked that their consultation be kept confidential, so it is not clear how many Chairs had multiple consults.

Mary Lipscomb, with Max Buja, David Wilkinson, Fred Sanfilippo, and especially Jen Norman, have finalized the SF “inventory” and made it available on the APC website to Chairs and others seeking SFs for advice and/or as speakers. SFs were contacted to update the inventory list, especially regarding their specific interests in advisory activities and expertise in speaker’s topics. The updated information is contained in a spreadsheet known as the “Senior Fellows Matrix,” which is now available on the APC website. Plans are underway to have a link and introductory paragraph about the SF “Consult Service” and “Speakers Bureau” more easily accessible on the APC website with instructions for using the listing, and with a link to background information for each SF that was provided on their SF application form. The SF consultant/advising activities will be expanded to include other APC members in addition to the Chairs (i.e., PRODS, PDAS, UMEDS, and GMEAS members).

Fred Gorstein and Ron Weinstein are leading the Speakers Bureau program. They plan to consolidate the various areas of interest and expertise that are already listed on the Senior Fellows Matrix into general categories to make it easier for Chairs and others to identify appropriate speakers. It is notable that several SFs already have been invited to speak at regional Chairs’ meetings.

Other ongoing projects include evaluating the value and impact of the Senior Fellows to the APC and its members (including the Senior Fellow members), and extending the recent inventory and assessment of “Senior Fellow”-type groups to additional organizations. Several ideas for new projects and Discussion Group topics for the next year were proposed, including: “Life After the Chair II (Lessons Learned);” “Transitioning to the Chair,” possibly with a pre-meeting workshop for new Chairs; and “Survival Strategies for Chairs.”

Drs. Bailey, Lipscomb, Gorstein, Wilkinson, and Sanfilippo’s manuscript, “Life After Being A Pathology Department Chair: Issues and Opportunities,” is currently in press. Once published, the article will be available on the Academic Pathology website, apc.sagepub.com.
Fellowship Directors’ Ad Hoc Committee Report
By Peter Kragel, MD, PhD – FDAHC Chair

From November 2015 through February 2016, FDAHC surveyed Pathology fellowship program directors. The survey gathered useful data on funding, faculty, and fellows’ experience.

Executive Summary:
- Number of fellowship slots has increased over the last 5 years.
- Roughly half of fellowship slots are funded through the GME office, with the remainder funded by department funds, grants, or by another institution.
- Roughly 80% of fellowships include “independent diagnosis” but only about 30% have “independent sign out.”
- About 10% of fellowships have 1 or no full-time faculty certified in the subspecialty (about 5% of fellowships included in the survey do not have subspecialty boards).
- About 75% of fellowship directors do not know their institution’s GME funding status (above the cap or not).
- 40% had unfilled fellowship positions over the last 5 years; half of these vacancies were due to an accepted candidate withdrawing, and 10% of those withdrawals occurred within 3 months of matriculation.
- 20% stated that there were insufficient funds in the department to fill all fellowship slots.
- 30% stated they had “management flexibility” and could move salary support from an unfilled fellowship slot to another position.
- Only about 30% of programs said that most of their fellow positions were filled by their own residents.
- Only about 15% of fellowship directors felt that they were at risk of losing fellowship positions.

Comments Included:
- “The failure to institute a match remains the concern I would most like to see the chairs address.”
- “we are not in favor of a matching system”
- “we are totally against participating in a match program”
- “I am against a match for fellowship. There are no reason[s] for putting residents in the position of more expenses at this time of their training.”
- “I am opposed to a match because it will create a lot more work for us”
- “WE NEED A PATHOLOGY FELLOWSHIP MATCH”

Undergraduate Medical Education Committee Report
By Jen Norman, MEd, for Michael Prystowsky, MD, PhD – Committee Chair

The focus of APC’s Undergraduate Medical Education Committee (UMEC) continues to be the Pathology Competencies for Medical Education (PCME). UMEC has been working very closely with the UMEDS Council to develop cases to complement these learning objectives.

APC staff has been coordinating with SAGE Publishing (the publishers of Academic Pathology) to establish a venue for publishing educational cases. An introduction to the PCME, along with an index of objectives and sample educational cases, will be published in Academic Pathology in early 2017. Because Academic Pathology is an open-access journal, the cases will be globally accessible, and case authors will have published, citable credit for their valuable contributions to this important educational initiative. APC is planning a webinar in the “Leaders Learning Series” (date TBA) to walk APC members through the PCME and provide instructions on how to submit educational cases for publication.

While we move forward with the journal initiative, the Competencies are still available at umeds.stanford.edu. 
Pathology Workforce Summit Follow-Up
By Donald Karcher, MD, APC Immediate Past-President

The Pathology Workforce Summit, held in December of 2013 and co-sponsored by the APC, was an unprecedented gathering of representatives of 26 Pathology and medical education organizations in the US and Canada. Summit participants reached consensus on several issues related to the current and future workforce of pathologists and other members of the clinical laboratory team and agreed to pursue a series of follow-up activities.

One of the major activities has been study of the effectiveness of the current pathology residency curriculum and development of a proposal for improving how pathology residents are prepared for the modern practice of pathology. A task force administered by CAP, which includes representatives of the APC, CAP, ASCP, USCAP, ACGME, and American Board of Pathology (ABP), was formed in 2014 and has been hard at work since then. The task force designed and conducted two different surveys, one of new-in-practice (NP) pathologists and the other of employers of NP pathologists, to assess the perception of each group regarding how effectively residency training prepared the young pathologists for their particular practice settings. Each of the surveys queried participants about training and performance in 48 different areas of Pathology practice. The NP survey was conducted by the ABP, as part of the maintenance-of-certification (MOC) process for the NP pathologists, and has so far been given twice, in 2014 and 2015. The employer survey was conducted by the CAP and done in early 2016. The findings from these surveys have shown a high level of concordance between the 2014 and 2015 NP cohorts (which, because of the biennial nature of MOC reporting requirements, were different), and between the NP respondents and employers of pathologists. The surveys have identified areas in which young pathologists would likely benefit from more training; examples include molecular pathology, informatics, and laboratory management. The surveys have also highlighted a few areas in which the amount of training received by Pathology residents could safely be decreased during residency, with more intensive training in these areas reserved only for those trainees who pursue related subspecialty training and practice. The survey results were presented by Dr. Rebecca Johnson (CEO of the ABP) in May 2016, at a Physician Workforce Research Conference sponsored by the AAMC. Task force members are currently working on a manuscript summarizing the survey findings to date, and are beginning to develop formal recommendations based on these findings for improving residency training. The APC also sponsored a workshop and forum focused on these issues on September 27th, at the 2016 CAP annual meeting in Las Vegas.

Another follow-up activity from the Workforce Summit was formation of a second task force, this one to study the current state of training and certification of PhDs for work in the clinical laboratory. Co-chaired by Drs. Dani Zander (U Cincinnati) and Robin Lorenz (UAB), this task force first enlisted the help of multiple organizations involved in training and certifying PhD clinical laboratorians. The group then gathered data on the number of PhDs who have received training and/or certification of this type, and is currently collating these data. A third follow-up from the Workforce Summit, internal to APC, was the formation of the Pipeline Subcommittee of the APC Advocacy Committee. This subcommittee, led by Dr. Wes Naritoku (USC), has been actively exploring ways to increase the number and quality of applicants for training in Pathology.

We will continue to keep APC members apprised of these and other Workforce Summit follow-up activities in future issues of Paths to Progress.

Regional meetings for Chairs and Administrators occur annually in the fall. These meetings are organized locally, and are NOT affiliated with APC or any of its member sections. Further information is available at www.apcprods.org/meetings-regional.
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• Credit towards the American Board of Pathology (ABP) Maintenance of Certification (MOC) Component I Patient Safety Course (PSC) requirement
• Best practices in patient safety developed by pathologists for pathologists

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“Excellent review of patient safety, critical to daily practice of pathology and effective patient care”
– Course participant

“It really highlights our activities in pathology that help add value to patient safety and explains how pathology fits into the wider scheme of institutional patient care.”
– Course participant
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ENROLL TODAY! ascp.org/UPI
UMEDS Section News
By Moshe Sadofsky, MD, PhD – Section Chair

In my inaugural report as section chair, I must first thank Immediate Past Chair of UMEDS Council, Dr. Jim Williams (WVU). I turn to him whenever I have a question or need help in this new role. This has already occurred as I took a long trip this summer, just as an urgent item of business needed quick approval. Thanks Jim!

Thanks also to everyone who contributed to making the UMEDS portion of the annual meeting inspiring, information-filled, and successful in its role as a vehicle for bonding and communication. This is a never-ending process, which benefits everyone involved!

This year’s UMEDS program was a great success. Our pre-meeting workshop featured presentations on competencies for course directors, online resources, and the LCME experience. Jim Crawford, Editor-in-Chief of Academic Pathology, provided valuable guidance on what must be done differently in educational scholarship (especially when compared to more traditional, research-based scholarship). More on Academic Pathology can be found on page 2 - we are all encouraged to submit to the journal, which has carved out a new space for scholarly writing in the academic specialty of Pathology.

On the first full day of the annual meeting, UMEDS posters were displayed in the main hall; this year’s theme was “Marketing the Value of Pathology in the Practice of Medicine.” Drs. Rebecca Wilcox and Jill Miller (University of Vermont) won the annual CAP-sponsored best poster award for their poster “Multidisciplinary Tumor Board: A Ready Made Tool for Competencies, Professionalism and Capturing Medical Student Interest in Pathology.”

The UMEDS-specific programming this July included special guest speaker Donna Waechter (LCME/AAMC), who presented on self-directed learning, in a ninety-minute session focused on that topic. Two of our plenary sessions featured multiple UMEDS member speakers; speakers were chosen based on outstanding abstract submissions on the two topics, “Marketing the Value of Pathology in the Practice of Medicine” (inspired by, and featuring the authors of, similarly impressive posters) and “What’s New in Pathology Education?” Overall, 14 UMEDS members had the opportunity to speak on a national stage by responding to the call to showcase initiatives at their institutions. During the UMEDS business meeting, UTRIG was approved as a UMEDS working group (see report on page 19).

During the annual meeting, UMEDS attendees also participated in joint sessions with the other APC member sections (Chairs, PRODS,)

(continued on page 23)

GMEAS Section News
By Amy Motta – Section Chair

APC’s GMEAS section had a very successful APC summer meeting. Thank you to Past Chair Betsy McDonald (UNC Chapel Hill), and all of the 2015-2016 GMEAS Council, for creating an outstanding program!

With this year’s theme “Crafting the Vision to Lead” in mind, GMEAS invited guest speaker Amy Day, MBA, Director of Graduate Medical Education at the University of California, San Francisco. Amy, a former program coordinator, gave an inspiring and motivational talk on coordinator professional development and “leading from where you sit” to a standing-room-only crowd.

Erin Schwantner from the ACGME spoke about common areas for improvement (AFIs) that programs receive from the RRC, and how to avoid them. Donald Sandlin (University of Arkansas for Medical Sciences) conducted a personality test on the GMEAS members, discussed the traits of the “melancholic,” “phlegmatic,” “choleric,” and “sanguine” personality types, identified where each coordinator fit into these descriptions, and discussed tips for working with people of different temperaments. Amy Bourgeois (University of Vermont) encouraged coordinators to review how the Milestones are evaluated

(continued on page 20)
The first half of the calendar year is always the busiest for PRODS, and 2016 was no exception.

As if the excitement of Match Day 2016 was not enough, it coincided with the Spring lunch meeting of the PRODS (in conjunction with the USCAP annual meeting, which was in Seattle this year). Anticipating that the PRODS would be a bit distracted that day by the release of Match results and the initiation of the SOAP, our program was scaled back from previous years. After a warm and welcoming introduction by Dr. David Kaminsky, CEO of USCAP, we took advantage of the presence of residents at the national meeting to have representatives from the resident wings of the AAMC, CAP, ASCP, and USCAP brief us on their activities. Dr. Rebecca Johnson, CEO of the ABP, also updated us on Board activities, including the upcoming first exams to be given at the testing center in Tucson. And finally, Dr. Bruce Alexander, our elder statesman and member of the National Residency Matching Program (NRMP) Board of Directors, gave us some preliminary Match data and shocked us all with the news that he soon would be stepping down as a program director. Thankfully, he remains on the NRMP Board and continues to be active on the expanded “PRODS Council Plus” group, which includes former as well as current members of the PRODS Council. We appreciate his continued involvement in PRODS-related activities.

July 12th through 15th found the PRODS back at the beautiful Rancho Bernardo Inn for the APC Annual Meeting. This year’s program was supplemented by a variety of pre-meeting events; including a leadership skills development workshop on Tuesday morning, for PRODS and GMEAS, presented by ASCP.

Tuesday afternoon was again devoted to the new PRODS “Boot Camp,” this year including the new coordinators of the GMEAS, led by GMEAS Chair Betsy McDonald (University of North Carolina), who gave one of the introductory talks to present the coordinator viewpoint to the Boot Camp. I think we managed to convey that the program director and the program coordinator must work as a team. Dr. Mark Sobel, Executive Director of the Intersociety Council for Pathology Information (ICPI), briefed new PRODS and GMEAS on the varied resources that ICPI has to offer, while also apprising us of exciting new developments such as the conversion of the Pathology Training Directory to an online-only resource with a new emphasis on including fellowships among the listings. An introduction to the ABP was given by Dr. Rebecca Johnson, and an introduction to the ACGME and the Pathology Review Committee (RC) was given by Cheryl Gross, Executive Director, and Dr. James Stubbs, Chair, both of the Pathology RC. The session closed with presentations by the representatives of the four resident organizations: AAMC Organization of Resident Representatives, ASCP Resident Council, USCAP Resident Advisory Committee, and CAP Resident Forum.

The official PRODS program commenced on Wednesday morning, with the joint Chairs/PRODS/UMEDS/PDAS session, “Strategies to Prepare Visionary Faculty for Future Leadership.” Presentations included Dr. Kevin Grigsby (AAMC) on keeping faculty engaged and building a strong workplace culture; Dr. Debra Leonard (University of Vermont) on what Chairs can do to develop faculty leaders; and our own former Vice-Chair of PRODS Council, Dr. Lisa Dixon, now DIO at the University of Florida in Gainesville, who shared her insights on the institutional perspective on graduate medical education.

The first of the PRODS plenary sessions followed, which I opened with a presentation of the results of an opinion poll of PRODS on a variety of GME issues, followed by Dr. Rebecca Johnson, who presented data from the ABP’s survey of new-in-training pathologists participating in maintenance of certification, an important first step in an effort to align Pathology training with the actual needs of the eventual workplace and responsibilities of our graduates. The session continued with data from the NRMP, presented by Dr. Scott Anderson (on behalf of Dr. Bruce Alexander, who was not able to be present); and concluded with Dr. Karen Frank, Chair of the ASCP Resident In-Service Examination Committee.

(continued on page 27)
TRIG & UTRIG Report
By Richard Haspel, MD, PhD & Rebecca Wilcox, MD

Updates regarding the Training Residents in Genomics (TRIG) Working Group and Undergraduate Training in Genomics (UTRIG) Working Group were provided at the recent APC Annual Meeting.

The TRIG Chair, Dr. Richard Haspel, reviewed TRIG progress at a PRODS Plenary Session. TRIG has been involved with 18 international workshops and, to allow local implementation of training, developed a workshop Instructor Handbook and Toolkit that has been downloaded over 400 times from the TRIG website.

There have been 7 TRIG-related publications. Most recently, an article in The Journal of Graduate Medical Education highlighted the TRIG workshops as an “innovative approach.” TRIG materials have also been adapted to other specialties leading to workshops at the American Heart Association and American Academy of Neurology Annual Meetings.

Upcoming workshops include sessions at the 2016 ASCP, ASHG, and CAP Annual Meetings, and the 2017 ACMG Annual Meeting. In 2010, a survey of PRODS members indicated that only approximately 30% of programs offered training in genomic medicine.

Since that time, TRIG has been using the ASCP Resident In-Service Exam (RISE) data to assess resident genomics education. Of the almost 2,500 residents surveyed using the 2016 RISE, approximately 70% reported some genomics training during training. To help improve this number further, online modules have been developed and are being tested at 8 residency programs: Beth Israel Deaconess Medical Center; NorthShore; Yale; Vanderbilt; Houston Methodist Hospital; Baylor, Scott and White; University of Vermont; and Johns Hopkins. The online modules provide a virtual workshop experience including simulated use of online genomics tools. Preliminary results are promising. For the 8 residents who completed a pre- and post-module test, the average score improved from 36% to 65% (p=0.006). We welcome additional study sites (continued on page 20)

PhD Data Task Force Report
By Robin Lorenz, MD, PhD, and Dani Zander, MD – Task Force Co-Chairs

Recognizing the significant component of the Pathology and Laboratory Medicine workforce represented by individuals with PhD degrees, the PhD Data Task Force was formed after the 2013 Pathology Workforce Summit to collect data on the programs providing the training for these PhD scientists and the numbers of recent graduates pursuing careers in Pathology and Laboratory Medicine. The Task Force has been administered by APC and includes Pathology organization representatives from ACLPS, ACS, AMP, API, ASC, ASCP, and ASIP, as well as certifying organization representatives from ABMLI/ASM, ABCC/AACC, ABHI/ASHI, and CAP/LAP. The Task Force has collected certification and training data that has been presented and discussed at APC events, most recently at the 2016 annual meeting. To help further distribute knowledge about these career pathways, the PhD Data Task Force is pleased to announce that the XVIIth Annual Workshop on Graduate Education in Pathology will focus on the PhD Clinical Laboratory Scientist Workforce. It will be held on Saturday, April 22, 2017 from 11:45AM – 1:45PM at Experimental Biology 2017 (Chicago, IL) and will feature a presentation of the data collected by the Task Force, as well as discussions that will focus on specific clinical areas in which PhD scientists significantly contribute to the clinical laboratory workforce. Subspecialty presentations will focus on PhD employment in Clinical Chemistry and Molecular Diagnostics (speaker – Dr. Greg Tsongalis, Dartmouth), Medical Microbiology and Laboratory Immunology (speaker – Dr. Amanda Harrington, University of Illinois at Chicago), and Histocompatibility and Immunogenetics (speaker – Michael Gautreaux, Wake Forest). Open discussion will follow to allow for questions and input from the audience. ◊
GMEAS Section News (continued)

(continued from page 17)

in their programs and make adjustments to fill gaps now that we have operated under Milestones for several Clinical Competency Committee (CCC) cycles. The College of American Pathologists (CAP) sponsored a much appreciated dinner for GMEAS members at the Bernardo Winery. During resident management system break-out sessions for New Innovations, MedHub, and E*Value, GMEAS attendees had a chance to connect with other coordinators and compare best practices.

At the GMEAS business meeting, members voted to approve changes to the GMEAS Operating Procedures proposed by the GMEAS Council and GMEAS Nominating Committee. These proposed changes extend the terms of office from one year to two years for the Past Chair, Chair, Chair-Elect, Secretary, and Secretary-Elect positions. The changes were approved unanimously! This exciting extension to Council member terms will allow for greater stability in the management and execution of GMEAS Council initiatives.

Congratulations to the newly-elected GMEAS Council members! We’re happy to welcome Secretary-Elect Carol Hollstein (Loma Linda University) and Members-at-Large Amy Bourgeois (University of Vermont) and Chelle Kozy (Orlando Health) as they begin their first terms on GMEAS Council. The Council will be working on the following projects: the creation of a GMEAS Coordinator Award, compiling a history of GMEAS, coordinator mentoring, coordinator fact sheet, and planning the 2017 meeting. If you have ideas for the meeting or would like to present in July 2017, please contact GMEAS Council Chair Amy Motta at Amy.L.Motta@hitchcock.org, or Chair-Elect LeeTanya Marion-Murray at LeeTanya.Marion-Murray@cshs.org.

Join us in Washington, DC, for APC’s 2017 annual meeting! GMEAS sessions will include speakers from ERAS, Donna Stivers from ICPI (we will finally be able to put a face to the name!), and Erin from the ACGME.

As we get deeper into recruiting season for residency programs, remember to take time for yourself and laugh every day! ☯

TRIG/UTRIG Report (continued)

(continued from page 19)

to help provide solid data on module utility. We are also planning to release the modules, free of charge, on the TRIG website.

UTRIG is a new UMEDS working group with the goal of leveraging the TRIG model to medical student education. An update was provided at the UMEDS Business Meeting. Following the TRIG collaborative approach, this committee is currently made up of twelve member representatives from ACMG, AMP, APHMG, ASCP, ASIP, IPI, and NSGC (other organizational representatives are welcome). The initial plan is for a survey-based approach to identify components from TRIG, the University of Vermont Molecular Biology curriculum, and other sources that can be adapted to medical students. On Friday, July 15th, there was a joint TRIG/UTRIG conference call and face-to-face meeting. The main topic of discussion was renewal of the approximately $1.3 million, 5-year NCI R25 grant that helped fund the output of the TRIG Working Group. The renewal will include updating TRIG materials, but also developing medical student resources through UTRIG. The TRIG and UTRIG contributing organizations have been asked to write letters of support. To help obtain supporting data for the renewal, surveys were sent to PRODS and UMEDS members to gauge utility of current and planned genomics curricula and access to potential medical student participants through courses, Pathology rotations, and post-sophomore fellowships. The survey data are currently being reviewed. ☯

Recent TRIG publication:
When choosing a lab accreditation body, you need to make an important decision. Are you interested in crossing items off a list or is your lab more concerned with how its vital work affects patient care?

Every Joint Commission standard, and every process ties back to assuring safe and high quality patient care. With the lab a key component in both testing and diagnosis, we uniquely provide tools and resources to help your lab team concentrate on the processes that are most important to your most important people – your patients. Our standards are not prescriptive, giving your laboratory the flexibility to lay down processes and systems that make the best sense for your laboratory.

With over 30 years of experience surveying laboratories and providing best practices, an educative survey process performed by laboratorians and pathologists and tools to help you achieve and maintain accreditation, we're committed to quality for both your lab and your patients.

Contact us at qualitylabs@jointcommission.org for our complimentary resource guide for laboratory settings.
This July saw the launch of APC’s first Pathology Leadership Academy, set in the historic Hotel Del Coronado in San Diego. 56 pathologists and laboratorians from 43 academic Pathology and Laboratory Medicine departments in 19 states enrolled in this 1.5-day event, which was developed in response to an earlier APC member survey that supported a strong need for such a program. The final program covered key leadership topics (both general and Pathology-specific), with lectures and interactive sessions provided by APC members and outside speakers.

In addition, participants enjoyed the opportunities to meet and talk with speakers and APC Council members at a special dinner at Vigilucci’s, as well as during breakfasts and lunches. The event program was designed by Co-Directors Dani Zander (UC Cincinnati) and Lydia Howell (UC Davis), in collaboration with a creative and enthusiastic Steering Committee (Michael Clare-Salzler, Stan Cohen, Barbara Ducatman, Gregory Freund, Fred Gorstein, Ralph Green, Merce Jorda, Debra Leonard, Kandice Marchant, Priscilla Markwood, Shahla Masood, Michael Prystowsky, Aymn Rojiani, Meena Singh, Greg Threatte, and John Tomaszewski) with additional input from other members of APC Council and the LD&D Committee. Following the Leadership Academy, many attendees also took advantage of the opportunity to continue their leadership education at the “main” APC annual meeting.

Judging from the course evaluations, participants were highly satisfied with the experience. Some thoughts expressed by participants included the following:
• “Wonderful and inspiring program. It allowed opportunities for introspection”
• “Truly unique in that we heard from numerous chairmen how they deal with real world issues”
• “Very good advice; these are topics we never get training on”
• “I’ve never attended a conference where I hung on each word of each lecture, and each lecture was better than the next”
• “Wonderful opportunities to talk to people with lots of experience, committed to mentorship”
• “Emeritus faculty was so great. I liked the mix of current and retrospective”
• “This is an excellent initiative by APC to develop future leadership in Pathology”

In sum, this leadership educational experience was a great success, and plans are underway to continue APC’s offerings in the realm of leadership education in the future.

The PLA is sponsored by APC’s Leadership Development & Diversity Committee. Learn more about the LD&D Committee on page 7 of Paths to Progress and at www.apcprods.org/ldd.
APC’s Inaugural Pathology Leadership Academy

UMEDS Section News (continued)

(continued from page 17)

PDAS, & GMEAS). The joint discussion groups were well-attended and productive—particularly the UME-themed groups “Strategies for Maximizing Early Medical Student Exposure to Pathology” (Group #3), and “Leadership Opportunities in Pathology Education in the Era of Integrated Curricula: Creating Horizontal Pathology Threads and Implementing Entrustable Professional Activities (EPAs)” (Group #10).

All five program tracks attended the APC annual awards luncheon, during which Dr. Richard Conran received the Michele Raible Distinguished Teaching Award. Dr. Conran is currently the Chair at Eastern Virginia Medical School; from 2009 to 2014, while a UMEDS member at the Uniformed Services University of the Health Sciences, he held various seats on UMEDS Council—including UMEDS Council Chair.

It’s not too early to propose ideas for our July 2017 meeting in Washington, DC! Please email your suggestions to me at moshe.sadofsky@einstein.yu.edu.

I am personally in the throes of curriculum reform in my medical school. As so many of you already experience, I am losing my own stand-alone Pathology course for the benefits envisioned by the movement toward integrated and reduced classroom lecture hours. This is a rich topic for discussion and a serious one for educators across the spectrum: Do students succeed in learning more when the faculty teaches less? Does this apply to all students? Can you teach students to be “self-directed,” and if so, can you do so at this stage in their education?

We have a real responsibility to our students and our profession to answer these questions, and apply what we know as best we can. Toward that end, I hope we continue the excellent process of compiling shared resources, including the UMEDS- and UME Committee-developed Pathology Competencies for Medical Education (PCME) and its associated objectives and cases. We will always be our own most important resource! ◊
PDAS Section News
By Martin Lawlor – Section Chair

The APC annual meeting held at the Rancho Bernardo Inn this past July was outstanding! We had a great turnout from the PDAS with a lot of new faces joining us.

PDAS members had a unique opportunity to participate with Chairs in a pre-meeting Skills Assessment Workshop put on by ASCP on Tuesday afternoon. There were also several great discussions and presentations that occurred throughout the week. We’d like to thank all of those who presented: Robert Challender (U Penn), Kelley Suskie (UAMS), John Baci (Boston Children’s), and Brian Rudolph (Pitt) who led the roundtable discussion on managing an academic Pathology practice and the challenges that come with different structures; John Baci did double duty and also gave a great presentation about mentoring; Dr. Paul Taylor-Smith and Josh Yelen (both from U Miami) presented on the importance of outreach laboratory work for an academic Pathology practice; Christine Baker (U Mich) who presented Pathology LEAN facilities design; and Anna Lurz (SUNY Buffalo), who presented on Part A. The meeting was wrapped up with Beth Hansell’s (MUSC) “Hot Topics” session.

At the Awards Luncheon, Kellie Suskie was presented with the 2016 Distinguished Service Award in Pathology Department Administration. Kelley is a valuable member of the PDAS community. She has served continuously on PDAS Council since 2011 in various roles, and currently holds the Immediate Past Chair seat. Kelley served as PDAS Council Chair from 2013 to 2015.

As we begin planning for another year, please consider submitting nominations for the 2017 PDAS Distinguished Service Award. Nominations must be submitted no later than December 31, 2016; go to www.apcprods.org/awards for details on the nomination process.

We are very excited that planning for APC’s 50th Annual Meeting has started! The 2017 meeting will take place July 25th – 28th at the OMNI Shoreham Hotel in Washington, DC. Please forward any meeting topics you would like to see addressed to your regional representative. We hope you will be able to join us for this memorable and exciting meeting!

PDAS Regional Representatives (2016–2017)

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The Association of Pathology Chairs (APC) welcomes partners, exhibitors, and attendees to our 50th Anniversary Annual Meeting in Washington, DC - the city where APC’s first meeting was held in 1967. Be a part of these special events, featuring thematic programming on Pathology and Population Health. Don’t miss this once-yearly opportunity to network with academic Pathology’s leaders in an intimate setting for exchanging ideas and information on current and cutting edge topics in practice management, medical education, and research.

Early application discount of $500 available through December 31st. For more information, go to: www.apcprods.org/meetings-2017-exhibits

Meeting registration will open in November. Stay tuned for updates at: www.apcprods.org/meetings-2017
PRODS Section News (continued)

(continued from page 18)

presenting results from the RISE exams—including our first look at data from the RISE-First, taken by incoming Pathology residents.

The Awards Luncheon on Wednesday honored (among others) Dr. Gayle Winters (Brigham & Women's Hospital), former PRODS Council Chair, who received the GME Distinguished Teaching Award.

The second PRODS plenary session followed, featuring updates from Dr. Wesley Naritoku (University of Southern California) on the activities of the Pipeline Subcommittee, with special emphasis on post-sophomore fellowships; Dr. Rebecca Johnson on the ABP; Dr. Peter Kragel (East Carolina University) on the Fellowship Directors Ad Hoc Committee; and Dr. Trevor MacPherson (University of Pittsburgh) on the Informatics Working Group and the PIER Curriculum. Wednesday afternoon concluded with the joint discussion groups: eleven outstanding, provocative, and timely topics. I wanted to attend all of them.

Thursday began with one of my personal favorite events: the breakfast for new PRODS, hosted by PRODS Council. That informal discussion could have gone on all morning. However, the third and fourth PRODS plenary sessions continued, as we heard updates from the ACGME and the Pathology Review Committee from Cheryl Gross and Dr. James Stubb. Our third speaker, Dr. Laura Edgar, Executive Director of the ACGME Milestones Project, unfortunately was not able to make it to the meeting at the last minute, so we were not able to get that update on the Milestones.

A special guest speaker on Thursday was Dr. Siang-Hui Lai, from the Pathology residency program at Singapore General Hospital, who described his experience as a program director in Singapore and his program's involvement with ACGME-International. Dr. Rich Haspel (Beth Israel Deaconess Medical Center) showed us the continuing success of the Training Residents in Genomics (TRIG) program and its working group. We also had a special presentation by a trainee, Dr. Robert Seifert (University of South Florida), who demonstrated a modular mobile-based molecular genomics teaching tool that he and his fellow residents developed. Finally, the session concluded with a presentation by Dr. Robert Hoffman (Vanderbilt University), filling in for Dr. Greg Davis, updating the PRODS on the ongoing discussions and data-gathering by the Autopsy Working Group.

The business meeting that followed featured summaries from five of the discussion groups from the previous Wednesday afternoon’s sessions, as well as a lively open discussion of a variety of topics on the minds of the PRODS. Meeting attendees were given Thursday afternoon off for relaxation by the meeting organizers; PRODS enjoyed a variety of activities, including wine and olive oil tastings, lawn games, and shuttles to various San Diego attractions.

We reconvened in a joint session with Chairs and UMEDS on Friday morning, where Dr. Robin Lorenz (University of Alabama at Birmingham) spoke on developing the physician-scientist pathway, Dr. Jeffrey Golden (Brigham & Women’s Hospital) described the integrated UME program at Harvard, and Dr. Michael Laposata (University of Texas Medical Branch) gave a refreshingly patient-centered view of the Institute of Medicine’s Report on Diagnostic Error.

Finally, the group was electrified by Dr. Bennet Omalu (University of California, Davis), whose inspirational talk put his crusading work describing chronic traumatic encephalopathy into a strikingly personal context. It was good that the meeting adjourned then; his would have been a hard act for any speaker to follow.

Planning has already begun for next year’s spring and summer meetings, in San Antonio, TX, and Washington, DC, respectively. However, I can’t conclude this report without thanking Priscilla Markwood, Jen Norman, and all of the APC staff who make all of our meetings possible, and who have helped the PRODS function so smoothly throughout the past year. Thank you all! ☺
APC Executive Office Report

By Jen Noman, MEd – Manager, Member Services & Education

When the previous issue of Paths to Progress was released, APC was in the final stages of a substantial overhaul of our website. Our revamped website has been active for several months now, and we’ve received lots of positive feedback from members. The new site is mobile-responsive, meaning the site content automatically adjusts itself to fit the size of your screen. Our member database is integrated into the site, allowing members to access APC’s members-only content (e.g. the interactive member directory, webinar recordings, and more) using a single APC login.

As stated in a previous issue, the one caveat to these upgrades is that there are known problems when using Internet Explorer (IE) to access APC content; these issues are limited to those using IE, which is widely considered to be an outdated browser. Because of IE’s incompatibility issues, members should access our online content from modern browsers whenever possible. Modern browser options include Mozilla Firefox, Google Chrome, Safari, and any browser on a tablet or mobile phone.

APC had another successful Annual Meeting in 2016. The meeting app proved even more popular than it was last year, with nearly 70% of meeting attendees totaling over 4,400 in-app “taps” (clicks) and over 200 hours of active app use during the meeting. Some presenters successfully made use of more advanced app features such as live audience polling. All presentations have been posted as PDF attachments within the program listings of the mobile event app. The CME period has now ended, and all attendees who (1) paid the $100.00 CME fee, and (2) submitted a complete CME evaluation form, have received their credits from APC. If you did not receive your CME certificate, or have any questions about your credits, please contact me at jnorman@apcprods.org or 301-634-7881.

APC has changed the timeline for the 2016-2017 APC Membership Directory (PDF version). In past years, many departments only informed us of their staff changes for the current academic year after the directory was distributed in the fall. We are now encouraging Chairs and administrators to update their departments’ member listings while renewing their memberships for 2017 (the dues renewal period is open from October to December). We expect this workflow change to decrease the number of outdated listings in our next PDF directory (publication planned for January 2017).

While the PDF directory is a useful “snapshot” of APC membership, the online directory is a more practical day-to-day resource. The “live” online / searchable member directory can be accessed via the “Quick Links” section of the APC website. The online directory features multiple search parameters and sorting options, and results are displayed in real time—i.e. once a new employee is added to APC’s member roster, her name will appear in the interactive search results.

The APC office is relocating! Effective January 1, 2017, APC will join many other non-profit organizations as a tenant of the Community Service Building in Wilmington, DE (www.csbcorp.org); our new office will be located next-door to the American Society of Cytopathology (ASC). All email addresses and email list services (“listservs”) will remain the same; these will not be impacted by the move. Our current phone numbers will remain active, too; new phone numbers, once active, will be published in staff email signatures and on the APC website.

As always, any concerns regarding member services can be directed to me at jnorman@apcprods.org or 301-634-7881. ◊