

Paths to Progress

President's Message

APC at the Crossroads – Who We Are, What We've Been Up To, and Where We're Headed

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As I begin my term as APC President, I must first say what an honor it is to lead this incredible organization. I follow in the footsteps of many great leaders who have helped bring the APC to a position of prominence in the academic and greater Pathology communities. I will do my best to fill those footsteps and keep the APC and academic Pathology moving forward. I'd like to thank Ann Thor for her leadership as President over the past two years. Ann led us through a period of great challenge and change and always kept us focused on the important issues and the right goals, including the creation of this new newsletter format. Likewise, I'd like to thank Peter Jensen for his great service as a member of the APC Council for the past seven years, the last two as Past President.

The APC has evolved quite dramatically over the years, from a small group of enlightened department chairs to a vibrant organization of chairs and other key constituencies within academic Pathology departments in the US and Canada. Through the efforts of our members and various

committees and sections, the APC is now a more active, engaged, and forward-looking organization than at any time in our history. We should all be proud to see the APC take its rightful place among the major Pathology organizations in the country. In our unique role as the academic leader of the Pathology community, we have in many ways become the indispensable Pathology organization, working in partnership with many other like-minded organizations on the major issues of the day.

The past academic year has been a busy and productive period for the APC, culminating with our annual meeting in Boston in July. The following are some of the highlights of the past year.

New APC Mission, Vision, and Strategic Plan

The APC Council started working on a new APC Mission, Vision, and Strategic Plan during the 2013 annual meeting, and received feedback from members throughout the past academic year. The final document was approved during the APC business

meeting at the 2014 annual meeting. Our mission statement emphasizes what we're all about as an organization: "The APC represents and leads the academic Pathology community, promoting excellence in healthcare education, practice and research"; and our vision statement reinforces our focus on excellence in all we do. The new APC Strategic Plan for 2014-2020 has three central themes: 1) to maximize the opportunities of and contributions by components of the APC, 2) to promote the Pathology community and academic medicine, and 3) to lead and serve pathologists. Through this process, multiple Strategic Priorities for 2014 were also adopted. Numbering nearly twenty, these priorities represent the focus of resource allocation in the current academic year. The APC Mission, Vision, and Strategy statement and Strategic Priorities for 2014 can be found at tinyurl.com/APCmission.

APC Committees and Sections

(continued on page 2)

President's Message (continued)

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Each of the APC's committees and sections continued to achieve great things during the past year. It's through these groups that the real work of the APC is done. Reports from each group are included elsewhere in *Paths to Progress* and I encourage you to read about their various initiatives and accomplishments.

Regional Meetings

The regional meetings are great venues for learning, discussing current issues in an intimate setting, and networking with colleagues and friends. The department chairs responsible for organizing these regional meetings deserve the gratitude of the entire APC membership. Upcoming meetings of each group—in Bermuda; Savannah, Georgia; and Kauai, Hawaii, respectively—are planned for this month and next. Further details on these meetings can be found in this issue of *Paths to Progress*.

Pathology Roundtable

The Pathology Roundtable is completing its second year of successful work on behalf of the Pathology community. Now with a total membership of twelve Pathology organizations (ABP, ACLPS, ADASP, AMP, APC, API, ASC, ASCP, ASIP, CAP, NAME, and USCAP), the Roundtable has proven to be a useful forum for discussion of many issues important to the future of Pathology and Laboratory Medicine. Topics as diverse as payment policy, clinical informatics, Pathology workforce, and training of physician-scientists in Pathology have been discussed and formed the basis for important follow-up activities. The Pathology

Roundtable has been ably served from its inception by Dani Zander as Moderator and Priscilla Markwood as Secretary. Dan Remick, representing ASIP, has now taken over as Roundtable Moderator and Mark Sobel, as ICPI's executive officer, will assume the role of Roundtable Secretariat. Please read Dani's report on the Pathology Roundtable on page 21 of *Paths to Progress* for more details.

Pathology Workforce

Some of the greatest challenges currently facing the Pathology community have to do with ensuring an adequate supply of appropriately trained pathologists and other laboratory professionals to meet the future needs of patients and the emerging value-based health care system. The Pathology Workforce Summit, co-sponsored by the APC, CAP, ASCP, and USCAP, and held in December 2013, brought together twenty-four Pathology and other medical organizations to intensively discuss these issues. A common statement of problems and recommendations was generated and has led to several follow-up activities. Task forces of multiple stakeholder association representatives have been working on multiple problems and issues identified at the Summit. One task force is developing surveys of new-in-practice pathologists and employers of pathologists designed to gauge how well Pathology residency and fellowship training currently prepares trainees for the real world of Pathology practice. The results of these surveys will be used by the ABP, ACGME, and PRODS to modernize the

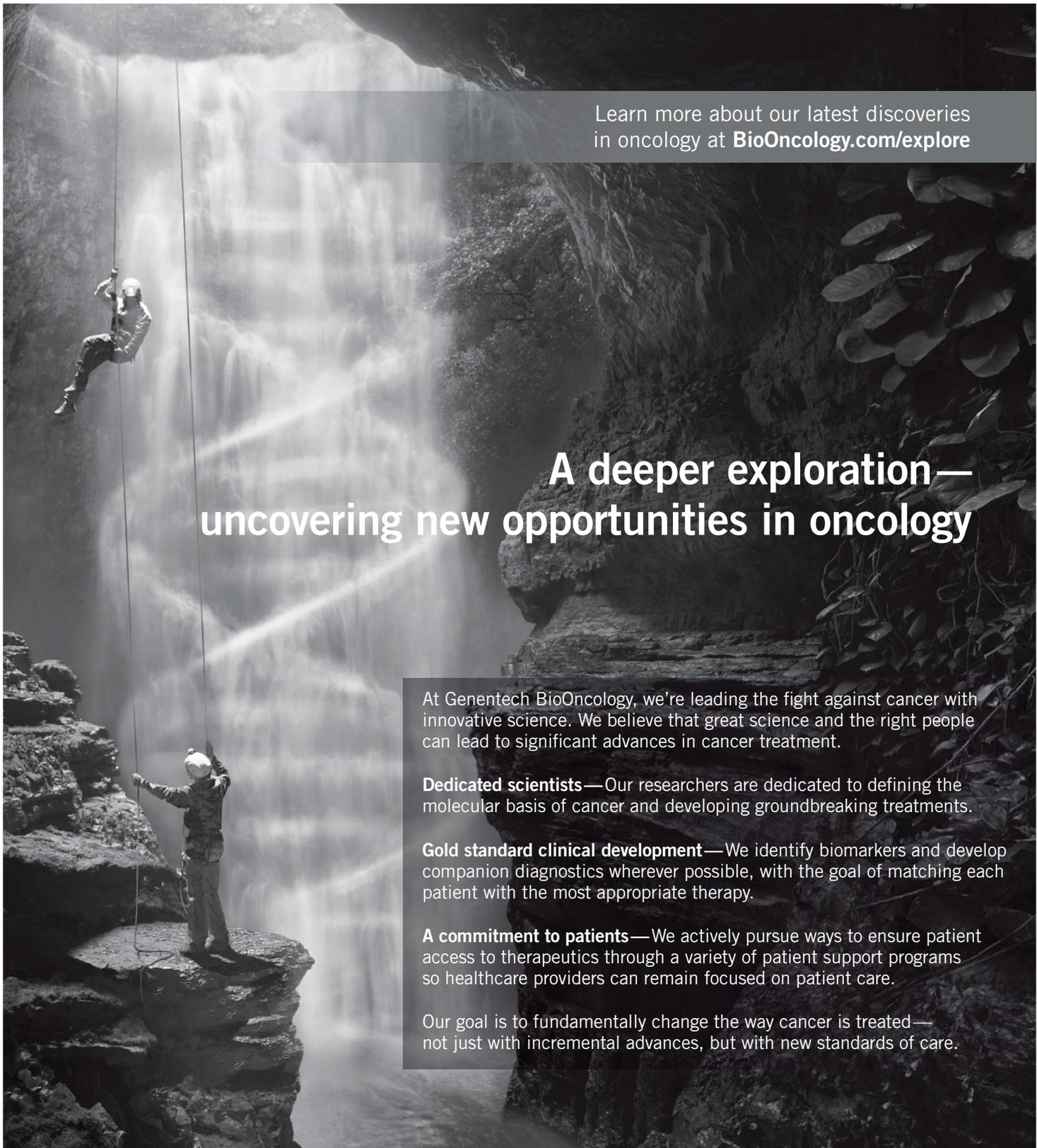
Pathology residency curriculum and our current system of fellowship training. Another task force is investigating data sources on the supply and demand of PhD's in the Pathology health care team, with an eye toward modeling greater future involvement and the skill sets needed. In response to recent challenges in recruiting the "best and brightest" into Pathology careers, a Pipeline Subcommittee of the APC Advocacy Committee has been formed to address this key area. Finally, to study and prevent the possible "leakage" of traditionally Pathology-specific clinical services to other specialties, the Pathology Roundtable has formed the Pathology Scope of Practice Task Force. Further news regarding these timely issues and Workforce Summit follow-up activities will appear in future editions of *Paths to Progress*.

New APC Journal – Academic Pathology

In June, we proudly announced the launch of a new APC-sponsored journal - *Academic Pathology*. This new Open Access publication, published by SAGE Publications, will be a venue for original articles, reviews, and commentaries pertaining to the core missions of the APC. The journal aims to showcase the essential nature of Pathology in clinical practice, medical education, and translational and outcomes research. Jim Crawford has been selected by the APC Council as the founding Editor-in-Chief of *Academic Pathology*.

(continued on page 5)

Academic Pathology, APC's new Open Access publication, will be a venue for original articles, reviews, and commentaries pertaining to the core missions of the APC.



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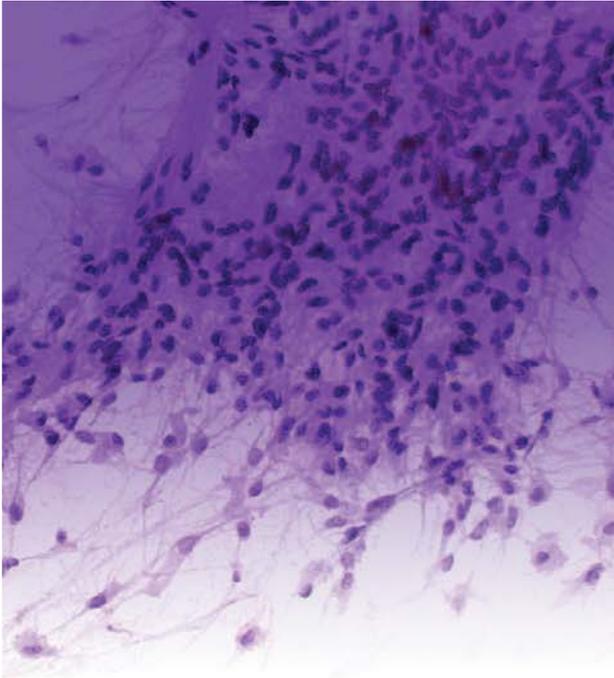
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President's Message (continued)

(continued from page 2)

Jim is currently in the process of putting together the editorial team, including Associate Editors, Senior Advisors, and the Editorial Board. We expect the first manuscripts to be submitted in October 2014.

New Informatics Curriculum for Pathology Residents

In recognition of the vital importance of informatics in Pathology practice and all of medicine, a consortium made up of the APC, API, and CAP is in the final stages of developing a new consensus informatics curriculum for use by Pathology residency programs. Slated for alpha test launch in October, this new curriculum, called "Pathology Informatics Essentials for Residents", or PIER, was first announced at the APC annual meeting in July. Please see my article on the details of PIER on page 18 of *Paths to Progress*.

Physician-Scientist Pathway in Pathology Residency

For many years, the academic Pathology community has been looking for ways to recruit and train more physician-scientists to pursue research-oriented academic careers in Pathology. Development of an ABP-sanctioned physician-scientist pathway in Pathology residency, similar to pathways in internal medicine and pediatrics, is thought by many to be an important means to this end. With the support of the APC Council, our Research Committee has extensively

studied such a pathway and developed a set of guidelines for its development. These guidelines were presented to the ABP for consideration at its retreat in August, and the Board has now approved a physician-scientist training pathway for Pathology. The ABP will release a formal position statement regarding this pathway in the coming weeks. The Research Committee, under the leadership of its past and present Chairs Brian Smith and Dan Remick, as well as Dani Zander, Robin Lorenz of ACLPS, Mark Sobel of ASIP, Becky Johnson, ABP CEO, and Sharon Weiss, ABP President, deserve much of the credit for this important development.

APC History Project and Our Upcoming 50th Anniversary

As the APC approaches its 50th year, a volunteer group made up of Fred Gorstein, Mary (Lipscomb) Lyons, and Fran Pitlick spent several months pouring over the APC archives and putting together a comprehensive history of our organization from its beginnings in the 1960s up to the present. My thanks go out to Fred, Mary, and Fran for this wonderful accomplishment. A narrative of the APC's history is now available for viewing at tinyurl.com/apc-1965-2013. I encourage you to take a look at our past and the many people and events that have made us what we are today. In recognition of the upcoming 50th anniversary of the first meeting and formal adoption of the Constitution and Bylaws of the APC in 1967, special events are currently being planned for

2017. Watch for more news about our upcoming anniversary in future editions of *Paths to Progress*.

APC Elections

The APC conducted elections earlier this year to choose a new President-Elect, Secretary-Treasurer, and Chair of our Research Committee. Tris Parslow, Allan Tucker, and Dan Remick were the winners, respectively, and assumed their new roles at the annual meeting in July. We're clearly in good hands with new leaders of this caliber to continue the work of the APC.

In Conclusion

As you can see, the APC has been fully engaged in a number of important initiatives over the past academic year, and we've announced some exciting new developments in recent weeks. We remain an organization on the move and at the crossroads of the Pathology and academic medicine communities. My thanks to every APC chair and section member for your energy, ideas, and dedication to excellence in academic Pathology. Also, a big thank you to Priscilla Markwood and her staff, for all they do to keep us focused, organized, and on track. I look forward to working with each of you and the APC administrative team in the coming academic year.

Sincerely,



Don Karcher
APC President



APC's first meeting and formal adoption of a Constitution and Bylaws took place in 1967.

Annual Meeting Report

Record attendance and a scintillating agenda

By Tristram Parslow, MD – President-Elect



Was it the visionary theme, the stellar lineup of speakers, the beautiful waterfront location, or the chance to spend four glorious days with friends and colleagues in Boston?

Whatever the reason, this year's APC Annual Meeting drew record attendance. In all, more than 450 registrants from academic Pathology departments across North America flocked to the Seaport Boston Hotel and World Trade Center to take part in what has become the premier annual meeting of its kind.

Under this year's overarching theme of "Academic Pathology by 2020—Where Are We Headed and How Do We Get There?", plenary sessions for the chairs focused on the emerging trends in Pathology education and residency training, on Pathology's value proposition in new practice models, and on the skills and

workforce needs of our specialty in the future. Distinguished keynote speakers in the Advocacy session—including Drs. Mark McClellan of the Brookings Institution, Gary Gottlieb of Partners Healthcare, and Bryan Loy of Humana—challenged the audience to reflect on the value of Pathology from the governmental, health system, and private payers' perspectives. An unquestionable highlight of the meeting was the stirring presentation on leadership development and diversity given by Dr. Joan Reede, Harvard's Dean for Diversity and Community Partnership, before a packed auditorium on Thursday afternoon. The concluding session on Friday morning illuminated such forward-looking topics as innovative educational technologies, the emerging discipline of computational

Pathology, opportunities for pathologists in health-services research, and the remarkable power of Pathology coursework to inspire students in grades K-12. This year's meeting will also be remembered for the historic, long-awaited endorsement by the chairs of a formal physician-scientist pathway for Pathology residency. Even the Red Sox helped elevate spirits, rewarding attendees and their guests with a 5-4 win over the White Sox at Fenway Park on Wednesday evening.

Planning is already well underway for next year's meeting, which will be held at the stunning Rancho Bernardo Inn in San Diego, California, on July 15-17, 2015. Mark your calendars, plan to attend, and watch www.apcprods.org for details.

Does your department have a new staff member to enroll in an APC Section?

Chairs and PDAS members can complete APC's Additional Member Form at

apcprods.org/members/new.

Research Committee Report

American Board of Pathology Approves Concept of Sanctioned Physician Scientist Pathway

By Daniel Remick, MD – Committee Chair

On August 6, 2014, the American Board of Pathology (ABP) approved in concept the creation of a physician scientist pathway leading to Board certification. The Board will issue a formal announcement in the near future.

Background: There has been active discussion about the creation of an ABP-sanctioned

physician scientist pathway similar to that available in several other disciplines. The primary goal of this pathway would be to increase the number of pathologists who are physician scientists. An initial proposal was sent to the ABP in the fall of 2013 by several organizations supporting this pathway. In June 2014 a survey was sent through the APC listserv about

the desirability of creating this pathway. While 81% were in favor of creating the pathway, legitimate concerns were raised by several chairs, especially those who have successfully trained the majority of current physician scientists. The issues were actively discussed at the July APC meeting. On the basis of this discussion a new proposal was drafted by Dan Remick,

Research Committee Report (continued)

David Louis, Steve Galli, Jeff Golden and Bill Muller. In a follow up survey, over 90% of the chairs approved this new proposal. The proposal was also accepted by the program directors.

At the summer retreat for the ABP, presentations were made concerning this pathway. As the chair of the Research Committee for the APC, I presented the evidence that this pathway would be good for our discipline. George Lister, MD, pediatrician from Yale University, presented information about the American Board of Pediatrics physician scientist pathway and the lessons that they learned. David Louis, MD, from Massachusetts General Hospital, discussed some of the important issues that need to be considered to create a successful physician scientist pathway in Pathology. It should be noted that the proposed language for the pathway has been endorsed by over 90% of the chairs who responded to the survey. These presentations, and documents sent in advance, allowed the Trustees to vote in an informed manner.



Next Steps:

- Create a name for the pathway. Suggested names include:
 - POPPS – Path Of Pathology Physician Scientists
 - PPSP – Pathology Physician Scientist Pathway
 - PIRT – Pathologist in Residency Research Training
 - PSTP – Pathologist-Scientist Training Program (similar to MSTP)
- Formalize the final language for the policy. As the chair of the APC Research Committee, I volunteered to serve as the point person to solicit and co-ordinate input on the final language. Input will specifically be sought from the Research Committee of APC with specific attention to the seven programs currently training the majority of the physician scientists in Pathology. While the APC has offered to help with the language, the ABP has the final authority on the parameters of the pathway.
- Create a registry of physician-scientist pathway candidates. When trainees apply to take their boards they will be asked if they were in the physician scientist pathway. The registry will allow the Board to track success of the pathway. Success will be defined by
 - Early phase – board pass rates
 - Later phase – successful academic careers (i.e. academic appointments including but not limited to grant funding and scholarly activity).

The proposed language for the physician scientist pathway can be viewed at: apcprods.org/documents/MDPhD.pdf

Key points for the creation of a sanctioned physician scientist pathway:

- There has been a decline in the number of MD\PhD students selecting Pathology as a career.
- The main goal is to increase the number of physician scientists in Pathology.
- The proposal allows Pathology departments with active research programs the ability to market a career in Pathology as a physician scientist.
- Medium sized programs may be able to more successfully compete with other disciplines.
- 60% of chairs report difficulty finding physician scientists to recruit to their department, creating this sanctioned pathway will help grow the number of candidates.
- Dermatology, neurology, radiology, and radiation oncology recently approved physician scientist training pathways and have increased the number of MD\PhD students entering their fields.
- Half of Pathology departments have MD\PhD students completing their thesis work in Pathology.
- Internal medicine and pediatrics have successfully offered this pathway for years.
- Chairs overwhelmingly (>90%) support the pathway, including those who currently train the majority of physician scientists.
- The current proposal allows for flexibility so that trainees may design their own course of study.
- Similar to fellowships, the pathway would be available but not required.
- More than a third of the chairs indicate that they have a source to pay for this pathway.
- 63% of chairs said they would offer this pathway in their residency training program.

Leadership Development & Diversity Ad Hoc Committee Report

By Ann Thor, MD – Committee Co-Chair



Underrepresented in medicine means those racial and ethnic populations that are underrepresented in the medical profession relative to their numbers in the general population.

– AAMC



The LDD Session at the 2014 APC Meeting was held Thursday afternoon, and featured plenary speaker Joan Reede, MD, MS, MPG, MBA, Dean for Diversity and Community Partnership, Harvard Medical School, as the plenary speaker. We strongly encourage you to view/listen to her presentation webinar if you missed it! Dr. Reede's presentation can be viewed at vimeo.com/100954427.

Dr. Reede emphasized that diversity needs to be embedded in the very framework of our institutions in order to be successful. Inclusion and diversity should not be an add-on, or an afterthought. Consideration and integration of diversity will allow us to realize our values, address complex problems, and enhance viability. She introduced us to the concept of a diversity toolbox, which includes diverse perspectives, interpretations, heuristics, and predictive models. Dr. Reede emphasized that in order to succeed, diversity programs must show continuity, consistency, collaboration, creativity, communication, consideration and commitment. Her talk was so well received, that the discussion did not end with her lecture. She and many of our members moved into the atrium to continue the discussion.

Dr. Peter Kragel, Chair of Pathology at East Carolina

University and member of the APC Council, introduced a new fellowship in Diversity & Inclusion Program (DIP) approved by a Council vote at their January meeting. The DIP curriculum will include: discussions of topics relevant to leadership development and diversity, a focused literature review, didactic and interactive sessions, and the development of institutional fellow specific projects. This year two APC member departments, West Virginia University and East Carolina University, volunteered to pilot the program. Sponsors and fellows will develop their project in 2014, perform their project 2015-16, and report the outcomes at the APC meeting in July of 2016. Dr. Kragel introduced the first two DIP Fellows, Melinda Flanagan, MD, from West Virginia University, and Ann Sutton, MD, from East Carolina University.

The LDD Committee is seeking names of outstanding speakers for the 2015 meeting in San Diego. We will also be discussing a proposed Boot Camp for new Pathology Department Chairs, to occur prior to next year's meeting.

Pathology faculty specific data from the AAMC Faculty Forward Survey has shown that somewhat fewer women are satisfied with their annual compensation than males. For example, amongst men, 14% are very satisfied, and 44% are satisfied; amongst women

faculty, 8% are very satisfied and 41% are satisfied. Dr. Lydia Howell's manuscript, entitled "Gender Differences in Workplace Satisfaction and Engagement of Academic Pathologist: Opportunities to Enhance Faculty Diversity," has been accepted for publication in *Archives of Pathology & Laboratory Medicine*.

One of the important breakout sessions at this year's APC meeting was a meeting of APC Senior Fellows. There was a strong and unanimous view expressed that it was important to maintain participation for past APC Chairs who wanted to continue their relationship with the APC. In addition to providing an opportunity for wise counsel from experienced former Chairs of Departments of Pathology, this will also allow for greater age diversity amongst our members. Senior fellow members Dr. Fred Gorstein and Dr. Mary Lyons spearheaded the APC History Project last year, which has been posted on the APC website. Additionally, Dr. Ronald Weinstein, University of Arizona, presented "Repurposing general Pathology Coursework as K-12 medical science curriculum: the next revolution in health literacy education" and Dr. Fred Sanfilippo, Emory University, presented "The emerging significance of Pathology in health services and outcomes research" as part of our Friday Chairs program.

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Graduate Medical Education Committee Report

By Peter Kragel, MD – Committee Chair

The Graduate Medical Education Committee (GMEC) met during the July 2014 APC Annual Meeting in Boston. The committee reviewed ACGME residency standard revisions, including requirements for shared directorship when the sitting director is not boarded in both Anatomic and Clinical Pathology, and scholarly activity and board pass rate requirements.

It was noted that the percentage board pass rate could suffer with decreasing numbers of U.S. graduates, the pressure to take those with higher USMLE scores to assure high pass rates, and the potential for having to go to the shallow end of the applicant pool if programs are incentivized to maintain significant numbers of our own graduates.

There was discussion around changing rotation evaluations to more directly crosswalk to Pathology milestones. It was felt that this would make it easier for the competency

committee to perform its evaluation.

How training programs assess clinical competency was discussed. Compiling a list of "entrustable professional activities" was suggested. These activities help to translate competencies into specific clinical practices by defining tasks that are entrusted to the trainee to be performed without supervision. Conducting and documenting formal peer review as is done under the purview of the medical staff for clinical faculty was also discussed.

Promoting medical student interest in Pathology was addressed. Committee members noted the importance of pathologists' involvement in case-based learning and tumor boards, so that students see pathologists interact as physicians. It was also mentioned that students see some of us as "odd people" and other clinicians often give negative feedback if a student says he or she is going into

Pathology. Role models were seen as critical, as was getting residents involved with the medical students.

The fellowship application process and a position paper on professionalism in the fellowship application process generated by the Fellowship Directors Ad Hoc Committee (FDAHC) related to this process were reviewed. There were several anecdotal stories about residents being "black balled" for renegeing on fellowship agreements. The committee endorsed the FDAHC position paper, which appears on page 16.

The GMEC Chair has also been involved in developing a program to promote innovation in Pathology resident education, the Pipeline Subcommittee, a joint CAP/APC lab utilization pilot project, the PhD task force, the MD Workforce Task Force, and the Diversity & Inclusion Pilot Program. These activities are described in more detail in related reports in this issue.



Advocacy Committee Report

By John Tomaszewski, MD – Committee Chair

The APC Advocacy Committee (APCAC) has identified several priority topics to follow for 2014-15. The committee recognizes that advocacy issues evolve throughout the year and seeks to quickly adjust to the environment. APCAC welcomes input on newly evolving advocacy developments from all APC members.

Value Proposition Work:

The value proposition in Pathology and Laboratory Medicine is to maximize overall healthcare quality and minimize overall healthcare cost. At the most recent APC meeting in July 2014, the Advocacy Committee focused its discussions on "advocating for the value of Pathology." Speakers Mark McClellan, MD, PhD, Director, Health Care Innovation and Value Initiative,

The Brookings Institution; Gary Gottlieb, MD, MBA, President and Chief Executive Officer, Partners HealthCare; and Bryan Loy, MD, MBA, Market Medical Officer, Humana, respectively, gave national, academic, and payor perspectives on how to evolve Pathology practice into an overall risk environment and to compete for budgetary recognition. The community of laboratory diagnosticians was

Are you a chair interested in joining an APC Committee?

Contact the Committee Chair, or the APC Office at info@apcprods.org!

Advocacy Committee Report (continued)



Did you know? The Advocacy Committee represents all five sections of APC. For more information on the committee, email John Tomaszewski at john toma@buffalo.edu.

challenged to enunciate the value proposition of a diagnosis. The APCAC will be working to respond to this challenge in the current academic year.

NIH Funding: Research funding for biomedical science has been under great pressures. The status of NIH funding has a direct impact on APC members. The Senate Appropriations Committee has released a draft version of the report accompanying the bill which provides funding to the National Institutes of Health, the FY 2015 Labor, Health and Human Services, and Education Appropriations Bill. The Senate bill provides \$30,459.2 million, an increase of \$605.7 million or 2.0 percent above current funding. This modest 2% increase is good news for the agency which had been facing a much smaller budget increase proposal of \$211 million by the administration. However, if the appropriations for NIH had kept up with biomedical inflation over the last decade, NIH's appropriation would have totaled \$37,000 million in 2013. APCAC tracks the status of national research funding, keeps members informed of current developments, and takes every opportunity to partner with other societies to advocate for improvement in research funding in medicine.

Scope of Practice: New molecular and imaging technologies will require credentialing qualifications within health systems. These credentials should be mapped to the unique qualifications of pathologists. APCAC tracks and informs members of ACGME qualification requirements which may impact on local institutional appointments for

the practice of Pathology and Laboratory Medicine.

Pathology Workforce: The follow-on work resulting from the intersociety Workforce Summit of 2013 continues. The projected decrease in the pathologist workforce, coupled with the anticipated reductions in GME funding to train new pathologists, forecast a future with fewer board-certified pathologists and laboratory professionals.

An MD survey task force is working on a "new-to-practice" survey. This group is trying to gather data that might allow for the creation of a novel information feedback cycle connecting the skill sets which are truly needed in practice with what is taught in training. A PhD Task Force is working on identifying resources to collect data on the future needs for doctoral level clinical lab scientists. A "pipeline" subcommittee has been formed to address issues which can enhance the interest of medical students in Pathology as a career. The APCAC works closely with all of these groups.

Regulatory Affairs and Payment: Protecting Access to Medicare Act (PAMA) of 2014 Section 216 of PAMA will significantly revise the payment system for clinical laboratory tests paid on the Clinical Laboratory Fee Schedule (CLFS) by requiring new reporting of private payer payments and setting rates based on the weighted median payment for each test. From the viewpoint of academic laboratory practices, there are several points under PAMA which need clarification.

Reporting requirements: who has to report?

Advanced diagnostic

laboratory tests: the CAP urges CMS to narrowly apply this new category.

HCPCS coding: CMS should use HCPCS Level I (CPT) codes whenever possible in implementing the new coding requirements.

Expert advisory panel: who will constitute this panel?

Local coverage decision: CMS should encourage the development and sharing of best practices by its contractors, while adhering to the regulatory processes established in response to the Benefits Improvement and Protection Act of 2000.

Complexity of reporting: there is a concern about the ability of academic health systems to comply with reporting requirements.

APCAC will be working with the major Pathology societies to answer these and other questions about PAMA.

Friends of Pathology

Award: The APCAC makes recommendations to the APC on candidates for the "Friends of Pathology" award. This award is given to individuals or groups outside of Pathology who have supported the advancement of our specialty. The APCAC welcomes suggestions for this award from all APC members.

The Advocacy Committee meets by phone conference on a monthly basis to receive updates on recent activities related to these and many other issues, and to coordinate plans for APC responses or collaboration with other organizations on evolving advocacy matters. For information, email John Tomaszewski (john toma@buffalo.edu).



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Pipeline Subcommittee Report

By Wes Naritoku, MD, PhD – Subcommittee Chair

In the 2013 match cycle, there were 19 unmatched positions among all of the Pathology residency training programs in the United States. In the following year, there were 51 unmatched PGY1 Pathology residency positions across the nation. This disturbing recruitment trend comes in the face of an anticipated shortage of pathologists in the United States that begins this year, achieves a nadir around 2021, and is anticipated to last beyond 2030, according to a 2013 projection by the College of American Pathologists. By the conclusion of Match Week 2014, there was a flurry of e-mails circulating on the PRODS listserv, which voiced serious concerns by many program directors about the lack-luster interest in Pathology by U.S. medical graduates. The e-mails were compiled into one document and circulated on the UMEDS listserv. Some of the problem with recruiting highly qualified medical students to Pathology has been attributed to misleading, biased statements that appear on a popular medical student website. Others blame the dramatic cuts in Medicare reimbursement as contributing to the low interest in Pathology. In addition, there is concern about recruiting physician scientists in Pathology.

As a result of the traffic on the PRODS listserv, the Pipeline Subcommittee of the Association of Pathology Chairs Advocacy Committee was formed. The members of the Pipeline Subcommittee include Drs. C. Bruce Alexander, Rich Conran, Ron

Domen, Margaret Grimes, Don Karcher (APC President), Peter Kragel (GME Committee Chair), Wes Naritoku (Pipeline Subcommittee Chair), Mike Prystowsky (UME Committee Chair), John Tomaszewski (Advocacy Committee Chair), Jim Williams (UMEDS Section Chair), Gayle Winters (PRODS Section Chair) and Nadeem Zafar. The Pipeline Subcommittee (PS) has had two conference calls, with a third conference call scheduled to take place this month. The following represent key discussion points brought up during the conference calls.

1. Create an information sheet on how to start and run a Pathology Medical Student Interest Group.

2. Review ICPI's "Pathology as a Career" booklet for comprehensiveness that includes new/hot areas, such as molecular diagnostics and information.

3. Re-visit post-sophomore fellowships (PSF) as a tool to recruit top-notch medical students to Pathology residency, which would likely require the establishment of robust "program requirements" for those PSF that will meet the Board's expectations to give 1 year credit toward residency and board eligibility.

4. Gather best-case information on medical schools having good/great experiences with teaching Pathology in the integrated curriculum.

5. Gather best-case information on medical schools with the highest rates of producing medical students that match in Pathology.

6. Collect ideas on best practices in understanding

and building relationships with medical school committees.

7. Look for opportunities to collaborate with other organizations (e.g., National Science Teachers Association) on outreach into middle schools, high schools and colleges.

8. Develop an FAQ that refutes the misleading biased comments on the future of practice payment and career opportunities for distribution to resident groups and posting on association websites.

9. Two additional ideas as a product of the PRODS/UMEDS Boot Camp Session at the APC 2014 Annual Meeting, which may fall under the purview of this Subcommittee and thus need further discussion, are: collecting and archiving resident "on-boarding" materials on the APC website, and establishing a working group to formally develop "boot camp" materials.

10. During the Advocacy Committee meeting at the APC Annual Meeting, the Committee recommended creating a video "story" of Pathology that can be used for general advocacy and recruitment.

It is imperative for us to maintain a steady flow of excellent medical student candidates to enter the pipeline to ensure the survival of our specialty, thereby ensuring the high quality of future patient care in the United States. If the CAP projections of Pathology shortages are accurate, we must act now to generate interest among our highly talented medical students to pursue a career in Pathology; if we wait until the shortage is apparent to the public, it will be too late.



The anticipated shortage of pathologists in the United States begins this year, achieves a nadir around 2021, and is anticipated to last beyond 2030.

Fellowship Directors *Ad Hoc* Committee Report

By Peter Kragel, MD – Committee Chair



The Fellowship Directors Ad Hoc Committee met during the Association of Pathology Chairs 2014 Annual Meeting. The major item of business involved a presentation by Tim Losch, Director, and Dennis Thomatos, General Manager, both of The San Francisco (SF) Match.

The SF Match has provided fellowship matching services for approximately 40 years. Their flexibility related to timelines and required participation makes them an alternative to the National Resident Matching Program that the committee felt worth considering. The committee members, who are subspecialty representatives appointed by relevant subspecialty organizations, determined to bring the information on the SF Match to their sponsor organizations for consideration.

The committee also discussed fellowship milestones, the clinical informatics fellowship, and professionalism in the present fellowship application process. In regard to the latter

discussion, the committee endorsed the following statement:

In the present tight pathology job market, many residents are completing more than one fellowship, creating applicant pools where training in more than one fellowship is an important consideration in establishing a competitive edge.

As fellowships become highly desirable and competitive, many programs have required that the resident commit early in residency training, often before exposure to all areas of pathology, and before a definite decision on pathology subspecialty could reasonably be expected. Thus, after completing this fellowship the resident may want or need to pursue an additional fellowship and may even apply to different subspecialty areas at the same time.

It is understandable that a resident early in his or her training may be unsure of what pathology subspecialty to pursue, or may need to remain in a certain geographic location, or may feel that competition and market forces have increased the demand

and competitiveness of some fellowships to the point where multiple applications in more than one subspecialty area are a necessity.

Resident applicants are encouraged to be transparent in the application process, and provide assurance that, if a fellowship is offered and accepted, the resident will promptly withdraw his or her outstanding applications from consideration. Residency program directors and faculty should counsel residents on the need for open communication and professionalism in this regard.

When fellowship directors are aware that an applicant is applying to fellowships outside of their particular specialty, every effort should be made to assess the applicant's motivation, career goals, and ability to succeed in the fellowship training program, and such applicants should be afforded full and unbiased consideration. Fellowship directors should not put undue pressure on applicants to immediately accept an employment offer, and should afford applicants reasonable time to consider their options.

Are you a chair interested in joining an APC Committee?

Contact the Committee Chair, or the APC Office at info@apcprods.org!

Practice & Management Committee Report

By Barbara Ducatman, MD – Committee Chair

The Practice and Management Committee (P&MC) met at the APC 2014 Annual Meeting in Boston and discussed several areas of focus for the next year. The results of last year's survey were presented and were felt to contain much useful information for chairs and administrators. Last year's survey collected data on individual faculty members (de-identified as to program and individual) and

demonstrated interesting differences in effort allocation for educational and administrative duties. The committee decided to include compensation data on this year's survey and to also design a smaller survey targeted to not only the "how much," but also the "how to" of compensation for Pathology faculty. This would hopefully help design a toolkit using practices from various

institutions and would cover a wide range of institutional types. The P&MC is hard at work and continues to have monthly meetings (first Friday of the month at 10 a.m. Eastern Time). We invite all interested chairs to participate, particularly in the fall when we are designing the new survey. We will be holding a webinar for administrators (and any interested chairs) to explain the upcoming survey. Please look for details!

Undergraduate Medical Education Committee Report

By Jen Norman, MEd, for Michael Prystowsky, MD, PhD – Committee Chair

The APC 2014 Annual Meeting once again featured strong UME content in the UMEDS program.

The principal project of the UME Committee and the UMEDS Section continues to be the Pathology Competencies for Medical Education. The three main competency areas are disease mechanisms, organ system Pathology, and

diagnostic medicine. The competency editors were Mike Borowitz, Rich Conran and Mike Prystowsky, respectively. Thanks to the significant efforts of Dr. Don Regula, APC and UMEDS members can log in to umeds.stanford.edu and submit feedback. We strongly encourage all members to submit comments, suggestions, and especially to submit cases. Cases and

feedback can also be emailed to info@apcprods.org for review by the editors.

Thanks to all participants who completed the APC survey on the evolution of Pathology education in medical schools—we had a very robust response! UMEDS Council and Dr. Prystowsky are reviewing the data, and will share the results in a future communication.



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(* denotes change from 2013–2014)

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PIER – Pathology Informatics Essentials for Residents

A Consensus Curriculum for Now and the Future

By Donald Karcher MD – APC President



In the era of high-level information management in medicine, and with the widespread adoption of the electronic health record (EHR), informatics has become a key element in Pathology practice and the practice of medicine in general. Of course, informatics isn't new to Pathology. Pathologists and the clinical laboratory have been at the forefront of computerization and clinical information management for decades. Unfortunately, this doesn't necessarily guarantee that we do a uniformly good job of preparing the next generation of pathologists to use the tools of informatics effectively in their future practice. To address this problem, the APC has partnered with the Association for Pathology Informatics (API) and the College of American Pathologists (CAP) to develop a consensus curriculum in informatics for use in Pathology residency programs.

Development of this new curriculum was announced at the APC 2014 annual meeting. Called "Pathology Informatics Essentials for Residents," or PIER, the new curriculum is just that: a tool to help residency programs teach Pathology residents the essential informatics knowledge and skills they will need to practice Pathology. This is not a curriculum designed only for subspecialty training in informatics; rather, it's intended to teach what every practicing pathologist needs to know about Pathology informatics.

The curriculum was developed

through a unique partnership between the APC, API, and CAP, with nearly twenty acknowledged national experts in Pathology informatics from the three organizations participating. These experts were enlisted to construct the curriculum framework and content, and to identify relevant training resources for program directors and residents to use. Led by Drs. Walter Henricks of the Cleveland Clinic, and Liron Pantanowitz from the University of Pittsburgh, and with extensive representation by the APC and PRODS, this expert group has developed what can rightly be called a consensus curriculum—one that can be embraced by the entire Pathology informatics and residency training communities.

PIER provides training guidelines, implementation strategies, and up-to-date resource options to help program directors establish an effective informatics curriculum in their program. It was developed with sufficient flexibility to be useable by the full gamut of residency programs, from large programs with extensive in-house informatics expertise, to smaller programs with essentially no internal resources. The curriculum was designed specifically to help residents achieve the ACGME informatics Milestone SBP7.

The new curriculum was discussed in detail during two sessions at the APC annual meeting in July and was very well received by those in attendance. In the short time

since its announcement, PIER has already generated considerable "buzz"—both within the Pathology community, and in industry trade publications such as [Health IT News](#), [Health Informatics](#), and [Health Data Management](#). We look forward to introducing PIER to attendees at the APC regional meetings this fall.

The initial release of PIER (Release 0), a robust prototype, was featured at the APC annual meeting and is currently available on the APC website (at apcprods.org/PIER) for demonstration purposes only. The first fully-developed version, PIER Release 1.0, is set to be finalized around October 1; it will be posted on the APC website and available for all programs to use, free of charge. This version will be formally alpha tested by a select group of residency programs beginning this fall. These programs were chosen from more than 30 programs that expressed an interest during and following the APC annual meeting. The alpha test programs will put PIER through its paces and will serve as a resource to other programs, as well as provide feedback for future development of PIER. All programs, including those not serving as alpha test sites, can start using PIER as soon as it's completed in October.

I encourage you to check out PIER, if you haven't already done so, and to support implementation of this important new curriculum in your department. As always, we welcome your questions and feedback.

"It's intended to teach what every practicing pathologist needs to know about Pathology informatics."



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Pathology Roundtable Report

By Dani Zander, MD – Councilor-at-Large

The Pathology Roundtable held its second face-to-face meeting in July, during APC's annual meeting. Taking part were representatives from its 12 member organizations (ABP, ACLPS, ADASP, AMP, APC, API, ASC, ASCP, ASIP, CAP, NAME, USCAP). Pathology Workforce Summit planning was a primary focus for discussion by the group. Members of the MD Task Force and the PhD Task Force updated the Roundtable about initiatives going forward, obtaining input from the group. Two new task forces have recently emerged from Roundtable discussions. The first focuses on the scope of

practice, and was created to learn more about Pathology and Laboratory Medicine practices engaged in by other medical specialties. Graduate medical education in autopsy Pathology is the focus of the second task force, which will assess current practices and future directions over the course of the next year. Two additional telephone conferences were held in January, March, and May of 2014, in which workforce planning, payment and regulatory issues, and the physician-scientist training track were discussed, and collaborations created or advanced. The Pathology Roundtable has continued to serve as a forum for

vetting of new ideas, collaborative planning, and advancement of initiatives of importance to our profession. At the end of the face-to-face meeting, a new Moderator (Daniel Remick, MD) and Secretary (Mark Sobel, MD PhD) were welcomed, signaling transition of Roundtable leadership and management to ASIP and ICPI. I want to extend our deepest thanks to the first Secretary (Priscilla Markwood) for her outstanding contributions to the launching of our Roundtable.



Does your department have a new staff member to enroll in an APC Section?

Chairs and PDAS members can complete APC's Additional Member Form at apcprods.org/members/new.

PRODS Section News

By Gayle Winters, MD – Section Chair

APC/PRODS met from July 8-11, 2014 in Boston where many of us cheered on the Red Sox (before they sank to the bottom of the AL East)—they even pulled out a win for us!

Milestones remained an important topic of PRODS sessions—residency milestones are in effect now and fellowship milestones go into effect July 2015. We heard three excellent talks about relating milestones to evaluations from Drs. Kristin Fiebelkorn (University of Texas, San Antonio), Miriam Post (University of Colorado), and Deborah Chute (Cleveland Clinic). It's

important to remember that evaluations are one part of assessing milestones and while it may be appropriate to "map" elements on evaluation forms to particular milestones, milestones were not designed to become and/or replace evaluation forms. Dr. Theresa McLoud, Radiology Residency Program Director for Massachusetts General Hospital, gave us a practical viewpoint since radiology was part of Phase 1 which implemented milestones in July 2014. Laura Edgar from the ACGME then divided us all into mock clinical competency

committees (CCC) and had us actually use milestones to assess fictional residents. This was an extremely eye-opening and practical exercise. It pointed out issues such as (1) how difficult it is to assess someone nobody in the group knows well, only going by what's recorded on paper; (2) additional information that may be valuable to the CCC—that in a real situation, you'd probably seek out; (3) differences in assessment by CCC members ("easy" graders vs. "hard" graders); (4) how you are going to handle the CCC member with a different

(continued on page 23)

UMEDS Section News

By H. James Williams, MD – Section Chair



Meeting presentations can be viewed by logging in at: apc.memberclicks.net/2014-meeting-presentations

Always a stimulating and invigorating experience, the APC meeting in Boston this July was a great success with a fantastic agenda for UMEDS orchestrated by Dr. Margret Magid. This year's recipient of the Michele Raible

Distinguished Teaching Award, Dr. Roger W. Geiss, led the opening UMEDS Course Directors Workshop along with Dr. Charles Hitchcock. A joint session of PRODS and UMEDS focused on Pathology Boot Camps to develop strategies to transition graduating medical students into the first year of Pathology Residency; a lively and informative discussion was had with representatives from USMLE/NBME with updates on

the examination processes; and the UMEDS Plenary Sessions addressed concerns regarding the incorporation of Pathology into integrated curricula and innovations in Pathology education.

Ongoing projects include:

1.) Pathology Learning Objectives Project led by Dr. Michael Prystowsky which can be viewed at apcprods.org/UME/Competencies/. With thanks to the work of Dr. Donald Regula, comments and/or suggested Case Examples for the objectives can be submitted at umed.stanford.edu.

2.) The Pipeline Subcommittee is composed of Chairs, PRODS,

and UMEDS members devoted to attracting highly qualified medical students to a career in Pathology.

3.) A new APC online journal, Academic Pathology, is accepting manuscripts for publication this fall with Dr. Jim Crawford as Editor-in-Chief.

Planning is underway for the APC 2015 Annual Meeting next July in San Diego for which ideas are welcomed and can be submitted to Dr. H. James Williams, UMEDS Chair, at hjwilliams@hsc.wvu.edu. Pathology is and must continue to be the foundation of medicine. If God made anything more fun than Pathology, He kept it to Himself!

PDAS Section News

By Kelley Suskie – Section Chair

The Pathology Department Administrators Section (PDAS) accomplished academic nirvana in Boston at the 2014 Association of Pathology Chairs Annual Meeting. PDAS had over 60 attendees. The program focused on the APC overall theme: "Academic Pathology by 2020 – Where Are We Headed and How Do We Get There Together?" This year PDAS Council offered special programming for our new and first-time attendees. We had over 20 first timers in attendance. The PDAS programming opened with our popular session of best practices: we were provided insight into real life problems such as laboratory reorganization, workforce reengineering, and a staffing strategic motivation.

The first PDAS Distinguished Service Award was presented

during the 2014 APC Awards Lunch. The inaugural recipient was Harry Pukay Martin. In Harry's PDAS Distinguished Service Award nomination, it was noted that "it is hard to recall an APC meeting in which [Harry] did not actively participate by organizing, presenting (sometimes multiple times), joining panel discussions, etc. [His] presentations often had a financial planning focus and were always informative, relevant, and well-received. Even though [Harry] has retired, he still stays in touch with many PDAS and remains a wonderful resource for advice and feedback."

Since retirement, Harry has not slowed down—he continues to give his time and talents by serving as the Executive Director of United We Stand, LLC, and as a Board

Member of the Healthy Worthington Resource Center and Food Bank. The inaugural PDAS Distinguished Service Award recipient is recognized by the APC and PDAS groups, and his significant contributions have helped to make PDAS the well-respected, positive platform that it is today. Please join me in congratulating Harry Pukay-Martin as the 2014 PDAS Distinguished Service Award recipient.

Nominations are being accepted through the end of December for the 2015 PDAS Distinguished Service Award. Consideration will be given to PDAS Council Leaders (past and present) who demonstrate significant contributions to PDAS and administration of academic Pathology. Please send your nominations to Priscilla Markwood at pmarkwood@apcprods.org.



Harry Pukay Martin and Kelley Suskie at the APC 2014 Annual Meeting

PRODS Section News (continued)

(continued from page 21)

viewpoint than the rest of the CCC (think about that one!), etc. During the open forum for alpha and beta test sites, it came to light that once a resident is accepted into a fellowship, that trainee's milestones (from residency) will be available to the fellowship director. Similar to the issue of having to identify individual residents to the ACGME when reporting milestones, having residency milestones available to fellowship directors did not sit well with PRODS since milestones are supposed to be formative (not summative) assessments.

Orientation sessions and "boot camp" for new program directors (including the basics of the ACGME and ABP) have been part of the summer program for years and continue to be valuable—essential for "new" PRODS but often informative for "old" PRODS as well. It's really important if you are a new program director—or if you will be handing the program director duties to a colleague—for the new program director to attend one of these sessions.

Although it may be hard to believe, there are other things happening besides milestones. A number of important topics are under discussion in various forms of working groups/committees:

1. Pipeline Subcommittee (Chair: Wes Naritoku) – attracting medical students to Pathology. In view of the

recently declining numbers of U.S. medical students going into Pathology residency, how do we reach out to students who may no longer have a defined Pathology course in medical school and dispel any myths about Pathology as a career?

2. Autopsy Training Working Group (Co-Chairs Greg Davis and Gayle Winters) – the issue of fifty autopsies and resident competency. Residents in many programs are having difficulty reaching fifty autopsies and, in some cases, are counting fetal autopsies and medical examiner cases that may be less than ideal learning experiences. Performing fifty autopsies requires a disproportionate amount of time in training programs stretched to include training on more and more topics. At the same time, however, the ABP is hearing from practice groups that new hires are not able to competently perform autopsies.

3. Residency Information Systems (Steve Black-Schaffer) – is there a "best practice" and can we, as a group, effect change? The recent PRODS survey revealed the use of 4 different residency systems, with New Innovations being most frequently used. At issue is whether "best practices" with respect to milestones can be identified, and if the group as a whole can effect change with New Innovations (and potentially other systems).

4. Residency Boot Camp – As Pathology is emphasized less and less in medical school

curricula, more and more residency programs are finding it necessary to institute some type of introduction/orientation/"boot camp" for incoming residents at the beginning of the academic year. A joint PRODS/UMEDS session was held with presentations on boot camps from Dr. Suzanne Powell (Houston Methodist) and Dr. Amy Lin (University of Illinois). In addition, small group break-out sessions addressed the content of boot camps and the appropriate mix of national vs. local material.

5. APC Proposal for Research Pathway (Dan Remick) – APC has recently had a proposal approved by the ABP for a physician-scientist pathway with the goal of increasing the number of physician scientists training in Pathology. In brief, the proposal is for AP/CP – 5 years training with 18 months for research; for AP Only or CP Only – 4 years training with 18 months training.

And finally, at the PRODS Business Meeting, I assumed the duties as Chair of PRODS from Wes Naritoku, who we all should thank for the outstanding job he did as PRODS Chair the past 2 years—he is always a tough act to follow.

I look forward to working with all of you and hope to see you at the PRODS meeting at USCAP in Boston, March 21-27, 2015, and next summer in Rancho Bernardo (San Diego), July 14-17, 2015.



Does your department have a new staff member to enroll in an APC Section?

Chairs and PDAS members can complete APC's Additional Member Form at apcprods.org/members/new.

GMEAS Section News

By Jeanne Lay – Section Chair



Meeting presentations can be viewed by logging in at:

apc.memberclicks.net/2014-meeting-presentations

Hello to the APC community! GMEAS had a wonderful showing at the annual meeting in Boston, and it is hoped that this will continue in the future. Highlights from the meeting included a presentation on the Milestones implementation in orthopedics (phase 1 specialty) by Ms. Starla Pathak, and two presentations given by Dr. C. Bruce Alexander: a Milestone test site report, and the first SOAP match from the NRMP perspective. They were both very informative and thought provoking presentations for our group. GMEAS attendees had the chance to connect with other program administrators and compare best practices at GMEAS-specific sessions. Some of our seasoned administrators presented and answered questions on three of the evaluation programs, E-Value, MedHub, and New

Innovations. Another session was spent on answering questions regarding the use of ERAS© (Electronic Residency Application Service). In another session, one of our “seasoned administrators,” Raymond Anderson, encouraged administrators in his presentation to get C-TAGME certification and reported on his own steps to certification. Other presentations on best practices were well received with several on the recruitment process and one on personal development and setting priorities in your busy work and home life.

This year at the Boston meeting our GMEAS administrators stepped up to present five posters that were on display Wednesday afternoon for all members of APC to view on their way to the reception in the ballroom. These wonderful posters

covered timely subjects, such as milestones, patient safety, student interest groups, and cutting waste in GME program administration. Of particular interest to everyone was a jointly produced poster on residency and fellowship coordinators: a comparison. These can be viewed on the APC meeting website.

GMEAS is excited to continue developing “netiquette” for our listserv and adding our section history to the APC archives. Plans are being developed for a GMEAS Service Award to be presented next year in San Diego. The newly elected council members look forward to a productive year working with milestones and the NAS, and to our next meeting in San Diego.

Northeast Regional Meeting Report

By Dani Zander, MD – Meeting Co-Organizer



The Northeast Pathology Chairs’ meeting will be held in its usual location at Cambridge Beaches, Bermuda, on September 11-14, 2014. The meeting offers a well-balanced combination of formal presentations and creative, inspired discussion by the chairs. Session topics include Genomics, Value-

Based Initiatives in Pathology and Laboratory Medicine, and Designing the Ideal Residency Program. In addition, Dr. Rebecca Johnson will join us to present an update from the American Board of Pathology. Discussions about the mornings’ topics can be continued in the afternoons at the beach or restaurants.

Alternatively, attendees and guests can take advantage of nearby snorkeling, sailing, tennis, golf, and motorbiking opportunities, or visit King’s Wharf or Hamilton for browsing and shopping. Any questions can be directed to Daniel Knowles (dknowles@med.cornell.edu) or Dani Zander (dzander@hmc.psu.edu).

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West–Midwest Regional Meeting Report

By Bob Mrak, MD PhD, and Alan Schiller, MD – Meeting Co–Organizers

We are extremely happy to announce that the 2014 West, Midwest & Canadian Regional Meeting of Pathology Chairs and Pathology Departmental Administrators will be held on the magical paradise island of Kaua'i, Hawai'i, October 21-24, 2014. The hotel (**Grand Hyatt Kaua'i Resort and Spa**) has given us a fantastic deal with outstanding reduced room rates. Please visit their website at www.ghkmarketing.com.

The program is presently being developed, but will include the following sessions and speakers:

- The Affordable Care Act and Pathology: Jonathan Myles, Cleveland Clinic; Kandice Marchant, Cleveland Clinic; John Scott, Vice President, Advocacy, College of American Pathologists
- Adding Performance-based Incentives to Part A Support: Robert Tessier, HBP Services
- Report from the College of American Pathologists:

Richard Friedberg, Bay State Health

- The Clinical Laboratory's Role in Cost and Share Transformation (including systems, outreach, and IT tools): Karen Kaul, NorthShore University HealthSystem

- Pathology in Canada: Richard Hegele, University of Toronto

- Education and Curriculum: Barbara Knollman-Ritschel, Uniformed Services University of the Health Sciences

- Mentoring in Pathology: John Baci, Boston Children's Hospital

- Pathology Informatics Essentials for Residents (PIER): Don Karcher, George Washington University

- The American Pathology Foundation: Karen Thompson, University of Hawaii

- Preparing residents for private practice

- Role of medical examiners in academic Pathology

- Round-table discussions: Fostering and supporting

research activities in academic Pathology; Funding the academic mission; Other challenges on the horizon

- Surprise guest and talk
- Free-for-all final discussion

[Kauai attractions](#) include the fabulous Waimea Canyon (the "Grand Canyon of the Pacific") and the Napali Coast (accessible only by foot, sea, or helicopter), as well as fabulous beaches, bays, towns, rivers, waterfalls, and more.

We want as many Chairs and Administrators as possible from anywhere in the US and Canada to share this exotic experience. Please come!

Hotel reservations can be made using the passkey <https://resweb.passkey.com/go/hawaii2014>. There is no separate meeting registration at present, as we are lining up sponsors and hope to offer the meeting without a registration fee.



West–Midwest meeting questions can be directed to either Dr. Bob Mrak (robert.mrak@utoledo.edu) or Dr. Alan Schiller (alanls@hawaii.edu).

Southeast Regional Meeting

By Tris Parslow, MD PhD, and Aryn Rojiani, MD PhD – Meeting Co–Organizers

Registration is now open on-line for the Southeast Regional Meeting of Administrators and Pathology Chairs. This year's SEAPC meeting will be held on October 1-4, 2014, at the beautiful Westin Savannah Harbor Resort in Savannah, GA.

Sessions will focus on a range of topics in

informatics, curriculum, advanced diagnostics, and practice management. There will also be plenty of time each day for networking, discussion, and exploring Savannah, one of America's most architecturally distinctive and evocative small cities.

Leaders of academic Pathology departments from

across the country are warmly invited. Details and registration are at http://pathology.emory.edu/SEAPC_2014/

Any questions can be directed to Ms. Corey Anderson, cande03@emory.edu.

We look forward to seeing you in Savannah!





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From the Executive Office...

APC is happy to have wrapped up another extremely successful annual meeting. Details on the event can be found elsewhere in *Paths to Progress*. We hope you will all join us next year at the Rancho Bernardo Inn in sunny San Diego! Room rates at the Rancho Bernardo Inn range from \$245-295; those on a budget can take advantage of APC's room block at the San Diego-Rancho Bernardo Radisson Hotel, where the room rates are \$199. **Check for hotel registration links this month at apcprods.org/meetings/2015.**

Presentations from the 2014 meeting have been posted

online; they can be accessed through apcprods.org/meetings/2014 (login required). **CME certificates** from our 2014 meeting have been sent out via email. Excepting those who have sent in payments or evaluation forms after September 1, 2014, all meeting attendees who paid the \$100 CME fee and submitted a completed evaluation form should have received their certificates.

It's almost that time again... APC will begin collecting **2015 membership dues** payments in mid-October. Based on ease of use and overwhelmingly positive feedback, we will be using

the same online system for 2015 dues collection as we did for 2014 dues.

One of the great features of our online system is that members can live search our membership database. Details are available at apcprods.org/Members. The **2014 PDF edition of the APC Member Directory** is in its final stages, and will be available online shortly (stay tuned to your listserv for more information!).

If you have questions, concerns, or suggestions about any of the above, please contact Jen Norman at jnorman@apcprods.org.

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