

**SNMMI Bone Scan AUC Outreach Working Group  
Conference Call  
September 19, 2016  
11 am (ET)  
Minutes**

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**Present:** Kevin Donohoe, MD (Chair); Irfan Farukhi, MD, ABNM; Erin Grady, MD, CCD, FACNM; Robert Henkin, MD, FACNM, FACR; Daniel Pryma, MD

**SNMMI Staff Present:** Saima Hedrick, MPH; Sukhjeet Ahuja; Linda Budzinski

**Not Present:** Carina Mari Aparici, MD

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**1. Welcome and Introductions**

- a. K. Donohoe welcomed members to the call and provided background on the purpose of the Working Group.
- b. Members introduced themselves and, where applicable, their roles in developing the Bone Scan AUC.
- c. Quorum was established.
- d. The agenda was approved.

**2. Purpose and Objectives**

K. Donohoe noted that the most important step in ensuring physician referrals for bone scintigraphy is to have it included as a pre-approved option in the clinical decision support software tools currently on the market. This has been a primary focus of those working on the AUC and is the biggest obstacle they have to overcome.

The next step is to raise awareness among relevant physician communities that the AUC exists and has been written according to Institute of Medicine standards, and that the CMS has deemed SNMMI as an approved provider-led entity. In addition, the Society needs to ensure that members are able to talk to their local physician groups about the AUC.

**3. Review of Draft Bone Scan AUC Outreach Plan**

K. Donohoe requested input on the draft outreach plan distributed prior to the call. He noted that the plan lays out numerous options for educating referring physicians about the AUC and that the Working Group needs to prioritize those options based on limited resources.

R. Henkin noted that many of the strategies included in the plan have been tried for various previous efforts but have not been effective. In particular, he said that exhibiting, joint meetings, and joint sessions with ASCO have had no measurable outcome. He indicated that webinars and apps are an exception, and he would support trying those. He believes SNMMI needs to find new ways to reach oncologists.

S. Ahuja stated that he believes there will naturally be more interest in the AUC topics among oncologists because they will cover processes/procedures that will be mandated by legislation. SNMMI staff met this month with ASCO, and they offered to work with us jointly and were very receptive to the Society's message.

R. Henkins urged the Working Group to consider the message. Oncologists and urologists already understand that bone scans are effective; the message should be that they are relatively inexpensive for their patients. He also urged that the group develop metrics to determine which audiences to target.

K. Donohoe agreed that learning which types of physicians order bone scans (including initial scans vs. follow-up scans) is important. SNMMI staff will research how best to acquire this data—whether it currently exists and, if not, whether it is feasible to conduct an industry survey.

The committee discussed the option of offering SAMs in addition to CMEs for any sessions or webinars. E. Grady suggested researching the requirements of the American Board of Internal Medicine. She also suggested titling the sessions something such as, "What You Don't Know About Bone Scans" to combat the concern that referring physicians do not see a need for education on the topic.

S. Ahuja stressed that the focus of the education should be on the AUC itself and how the new legislation will affect the physicians. It is possible that SNMMI will not succeed in getting its procedure in the first round of the software, so it will be necessary to educate physicians to specifically look for it.

R. Henkins stated that it will be important to figure out what the audience needs and to get their input. K. Donohoe agreed and suggested adding representatives from referring physician communities to the Working Group. SNMMI Staff will contact Sandy Srinivas to see if she would be willing to serve or if she can suggest a colleague who would be willing. E. Grady indicated she will reach out to her contacts to find potential participants and recommended that SNMMI staff also contact Erica Cohen (SNMMI member) for recommendations. D. Pryma offered to speak to

oncologists at UPenn to get their feedback on who would be the best targets for the Working Group messages and what their needs are.

#### 4. Schedule Regular Call Date/Time

K. Donohoe suggested that the best way to determine a regular day and time for the Working Group's call would be via a Doodle poll. SNMMI can poll the group once the referring physician members have been identified. L. Budzinski will develop and disseminate a poll.

#### Action Items

- SNMMI staff will research how best to acquire data on who orders bone scans—whether it currently exists and, if not, whether it is feasible to conduct an industry survey.
- SNMMI staff will contact Dr. Sandy Srinivas to see if she is willing to serve as a member of the Working Group or if she can suggest a colleague who would be willing.
- E. Grady will reach out to her contacts to find potential Working Group participants.
- SNMMI Staff will email Dr. Erica Cohen to get recommendations for oncologists who would be willing to participate in the working group.
- D. Pryma will speak to oncologists at UPenn to get their feedback on who would be the best targets for the Working Group messages and what their needs are.
- L. Budzinski will develop and disseminate a Doodle poll to determine the best day/time to hold regular Working Group calls.