

Outreach Committee Minutes
Friday, June 10, 2016
Hilton San Diego Bayfront – Indigo 206
11 a.m. – 1 p.m. PT

Attending: Henry F. VanBrocklin, PhD (Co-Chair); Alexandru Bageac, MD, MBA (via phone); Mehdi Djekidel, MD; Giuseppe Esposito, MD; Jonathan McConathy, MD, PhD; Ashley Mishoe, PharmD; Chadwick Wright, MD, PhD; Josh Mailman, MBA (PAAB)

Guests: Lisa Hazen, BS, CNMT, RT(N), (Central Chapter); Merle Hedland (Pacific Southwest Chapter); Douglas Van Nostrand, MD; Mitchell Stromer (Greater NY Chapter); LisaAnn Trembath, MSM, CNMT, NCT (MITA); Shari Moreau (Mid-Eastern Chapter)

Not Attending: Andrei Horia Iagaru, MD (Co-Chair); Richard Benator, MD, FACR; Betsy de Parry; Vasken Dilsizian, MD; Phillip Koo, MD; Timothy Manzone, MD, JD, CCD; Neeta Pandit-Taskar, MD; James Timpe, MS, RT(N)(MR); Katherine Zukotynski, BAsc, MD, FRCPC

SNMMI Staff: Virginia Pappas, Saima Hedrick, Ali Haidar, Sukhjeet Ahuja, Linda Budzinski

1) **Introduction and Call to Order, Henry VanBrocklin, PHD**

a) **Establish Quorum and Introductions**

Quorum was established. During introductions, H. VanBrocklin announced that Co-Chair A. Iagaru would be stepping down from his role following the Annual Meeting. G. Esposito has agreed to serve with him as Co-Chair for the coming year.

b) **Approve Minutes from 1/29/16**

There was a question on page 1 of the minutes, relating to A. Bageac's suggestion regarding working with a neuroscience institute. He explained that he was referring in general terms to partnering with brain scan institutes such as the institute in Portland, Oregon, and others. SNMMI staff will make that adjustment to the minutes. Minutes were approved with the change.

c) **Review Action Items**

The committee reviewed the action items from 1/29/16 and determined that all items had been addressed or were to be addressed during the Annual Meeting.

G. Esposito reported that in his communications with the chapters, some indicated they had trouble finding the Speaker Request Form. Saima noted that this has since been moved to a more visible location.

A. Mishoe reported that she had reached out to the Young Professionals Committee regarding review and approval of the website content for the referring physicians site but had not heard back. She indicated she would bring it up again during the Annual Meeting.

2) **Updates**

a) **Brain Imaging Outreach Working Group, J. McConathy**

The group has planned five roadshows focusing on amyloid for dementia; thus far, they have completed two (UPenn and U of Utah); the shows have been well attended (46 at UPenn and 55 at Utah), and the group has been successful in getting industry sponsorships. Shows are still to come at UCSF, Washington U, and a location TBD in the Southeast. The goal is to have an imaging physician; the program is not just about how to do imaging but how it fits into patient care. They hope it will become a defined program that could then be presented by chapters and others outside the Brain Imaging group. They developed a generic survey to assess knowledge of criteria and where amyloid is appropriate, which was administered at UPenn but not at Utah. Surveys using audience response systems have been done at the sessions at the referring physician national meetings, such as the recent session at the American Psychiatric Association, but not at the roadshows.

H. VanBrocklin noted that the group wants to collect information to see how much people learned and to obtain feedback on how well the presenters are doing. This type of data should be collected at each event.

S. Hedrick has been active in seeking out other groups. Once the Society submits a session for consideration, we begin getting that organization's alerts on deadline for submissions.

A. Mishoe suggested reaching out to the American Pharmacists Association. J. McConathy spoke there in 2011 and it was well received. Ashley will share contacts with Saima.

We do offer CME at these events; questions/testing are not needed for a live event.

M. Hedland suggested that we consider revising the current evaluation sent via CME to include content questions.

i. **IDEAS Communications Committee**

This group is working on getting information out to all relevant audiences. The goal for the study is to recruit 18000 patients over a period of 2 yrs. The committee is ensuring uniformity of information being sent out by all the groups; approved by Institutional Review Board and appropriate for study. S. Hedrick has made them aware of the upcoming roadshow on July 19th at UCSF. This event will be recorded and used as enduring educational material.

b) **Targeted Radioisotope Therapy Working Group, S. Hedrick**

The TRT group is working to address underuse of these therapies - PRRT, thyroid ablation; radium-223; and RIT. They have had some success with ASCO. They held a joint session at ASCO 2015 but were unable to hold a session in 2016 due to ASCO's policy of allowing joint sessions only every other year. The group decided to hold 2 ancillary sessions at ASCO Gastrointestinal Symposium (GI) and ASCO Genitourinary Symposium (GU) in January 2016 instead. The GI session was on Neuroendocrine Tumors: had 40+ attendees; Eric Mittra, Jennifer Eades (oncologist), and Tom Hope spoke. SNMMI tried to get this on their program and was not accepted, so this was a satellite program. The GU session focused on different types of prostate imaging and therapy - - PSMA, cycladine, bombesinand radium 223. Speakers for this session were Tom Hope, Andrei

Igaru, and Sandy Srinivas (oncologist).

The group is now planning to submit for ASCO 2017. We are developing an MOU with ASCO. They are well aware of the importance of appropriate use criteria; imaging more a key part of assessment; will need to disseminate AUC to oncologists.

i) **Thyroid Subgroup, D. VanNostrand**

NOC was dissolved so there is a subcommittee now under the Therapy Center of Excellence that addresses this same topic.

The group is focusing on endocrine meetings; building and prioritizing topics we want to address. The guidelines are very controversial. The group is helping Saima get grants and is pursuing company sponsorships.

D. VanNostrand is a member of AACE and the ATA. The goal is to increase awareness amongst all thyroid-related physicians about the need for appropriate use of thyroid imaging and therapy. Currently, the working group is operating in the U.S. but perhaps it can expand to cover Canada and Europe down the road. With the help of the Therapy Center and Helen Leonard (SNMMI Staff Liaison to the Center), there will be a website where committee members and others can tell them about endo meetings going on. They have not yet reached out to ThyCa chapters. They want to identify local speakers to speak pro bono at chapters.

Members of the group have spoken at AACE meetings at Nashville, Orlando, SNMMI Chapter meetings, and at ATA in Denver in September.

Committee members asked if it might be worthwhile to replicate what Brain Imaging is doing with its roadshows? The dilemma, is who are we reaching out to?

Can reach out to endocrine meetings; chapter meetings; other issues with endocrine surgeons, family practice doctors, etc. Can explore but limiting factor is speakers. Who will do the traveling?

It was noted that a virtual meeting/broadcast would remove this limiting factor.

Genzyme puts on a roundtable event. This is not a commercial presentation. They talk about thyroid therapy; this could be a great avenue we could take advantage of. There is more freedom since there is no commercial spin. They will do webinars and theater presentations. Could do webinars; need support from committee; could stream presentations at hospitals. M. Djekidel offered to serve as a speaker.

c) **Outreach for Appropriate Use Criteria**

As the committee decided at the mid-winter meeting, SNMMI staff has been working to form the 4 new appropriate use criteria outreach working groups for HIDA, V/Q, bone scanning, and PET/CT for restaging of malignant disease. To date, only one of the working groups has begun creating a plan.

i) **PET/CT Committee, Chadwick Wright, MD**

We've had three teleconferences; went to our home institutions and surveyed oncologists to see what topics would be of interest re: AUC ... How to get off peer to peer ... how to get studies pre-certified and get through insurance.

Model used for AUC development is to engage referring societies; ASCO, internal medicine, oncologists ... hope to get published in all their journals.

L. Trembath stated that the DETAIL committee of MITA would be happy to add AUCs in their kits for physician education.

d) **Patient Advocacy Advisory Board, Josh Mailman**

The committee reviewed a survey put together by the PAAB to assess patient concerns regarding nuclear medicine. There are currently 11 members on the PAAB. J. Mailman indicated he would like to bring those members to Washington, D.C., annually for a Hill Day. He reported they have held several successful webinars; 100+ attended the neuroendocrine webinar and several hundred have reviewed it since. The board has translated eight fact sheets to Spanish and has made them available online.

The board is now developing MOUs to allow the Society to establish ongoing relationships with a variety of patient advocacy groups. They are struggling with some groups (including the Breast Cancer Society??).

D. Van Nostrand suggested reaching out to thyroid cancer groups. Attendance at events is usually good when coordinated with local ThyCa chapters. He indicated he would be happy to help and work with ThyCa and SNMMI for Denver.

3) Inreach

a) **Outreach Session, H. VanBrocklin**

A CE session will be held Monday morning at the Annual Meeting providing outreach tools. The purpose of this session is to arm members to be able to do their own outreach; it will include a panel discussion with speakers from the U.S., Canada, and Europe.

The tools (fact sheets, infographics, and other valuable resources organized by disease area) will be disseminated via flashdrive. They also will be placed on the SNMMI website, and a member email will be sent out alerting members to them. MITA documents will be included. Also they are recording the session.

b) **Chapter Outreach Discussion**

L. Trembath ... asking to put two modules for prostate and two for cardiology on flashdrive. Tools re: the basics—very basic information on prostate, for example—to help a hospital's marketing person learn. Literature, case studies, reimbursement information. Tools on many types of oncology, amyloid imaging being finalized. It is clinically strong work, not commercial in any way ... CME level quality. The purpose is to help nuclear medicine market itself.

G. Esposito indicated he would gauge interest from chapters and give feedback on what they are looking for.

M. Hedland asked to be send a flashdrive; H. VanBrockllin indicated it would be a good idea to send flashdrives out to all Chapter Executive Directors. Also need on website.

A. Haidar noted that they also can use SharePoint.

4) **AHRQ Tool and Outreach**, *S. Ahuja, MD*

a) **AHRQ Tool**

S. Ahuja reported that SNMMI now has a functioning Agency for Healthcare Research and Quality tool. It is not state-of-the-art but it works; a lot of other institutions received similar grants, but SNMMI's tool is the furthest along in terms of development.

Next steps include identifying topic experts, getting input from referring physicians, and determining how to incorporate the tool into existing outreach efforts. The site can be found at snmmi10.bayatree.com. Money is needed to pay for site hosting.

The site is simple and follows the same format for three cancer types (lung, colorectal, breast). It will have four clinical questions for each type of cancer; some questions are still being developed. The key clinical questions that show up on the front page for each section are for referring physicians and are the most important piece of the site; other sections along the side are more for other audiences to use.

SNMMI will launch a small pilot to get feedback on what is missing, how to refine language, etc., to make it as useful as possible for referring physicians. Next steps include a pilot launch, a soft launch, and then the actual launch.

The Society would like to include as much material as possible within the site; however, a lot of media means greater cost for hosting. The challenge will be to procure the content and keep it up to date. We want to find articles published for references, as well as educational videos, fact sheets, etc.

b) **AUCs**

AUCs are currently being developed, once peer-reviewed it will go to other organizations for endorsement. The goal is to have everything done by third quarter of 2016. Implementation/Dissemination will begin in 2018 at the earliest. SNMMI will be responsible for educating referring physicians; CMS will not help. SNMMI has finalized six topics: thyroid cancer (I-123 and I-131); cardiac PET MPI; infection imaging; somatostatin; prostate cancer and gastrointestinal transit.

5) **ASCO MOU**, *S. Hedrick*

SNMMI recently had a call with the new Chief Marketing Officer at ASCO, and his main focus is to think broadly and foster excellence in practice. We believe we have an opportunity to add an addendum to the MOU where we can specify what we want.

V. Pappas reported that this is the first time ASCO has been so open to collaboration; they developed an MOU according to their usual protocol.

What types of activities can SNMMI do with ASCO? The committee needs to brainstorm proposals. Examples could include exchanging education at each other's meetings (symposia); webinars; journal articles. This would be a good topic for one of the committee's upcoming calls.

6) Adjournment

ACTION ITEMS

- SNMMI staff will adjust the 1/29/16 minutes to reflect the clarification from A. Bageac re: working with brain scan institutes.
- A. Mishoe will approach the YPC during the Annual Meeting re: review and approval of website content for the referring physicians site.
- A. Mishoe will share her American Pharmacists Association contacts with Saima.
- The UCSF event will be recorded and available as enduring educational material.
- M. Djekidel will serve as a speaker for the Thyroid Subgroup's programming.
- D. Van Nostrand will work with ThyCa and SNMMI to develop programming for the Annual Meeting in Denver.
- The Outreach Tools (fact sheets, infographics, and other resources organized by disease area) presented at the Annual Meeting will be disseminated via flashdrive. They also will be placed on the SNMMI website, and a member email will be sent out alerting members to them.
- G. Esposito will gauge interest from the chapters with regard to outreach tools and give feedback on what they are looking for.
- The tools flashdrives will be sent out to all Chapter Executive Directors.
- The committee will brainstorm proposals for working with ASCO.