

Certification Board of Nuclear Cardiology

9929 Main Street

Suite C

Damascus, MD 20872

Phone: (301) 253-7122

Fax: (301) 253-7123

January 10, 2003

BOARD OF DIRECTORS

Representing the American Society of Nuclear Cardiology

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James E. Udelson, MD

William D. Nelligan III, CAE Executive Director Robert Ayers Nuclear Regulatory Commission M/S - P8 F5 Washington, DC 20555-0001

Dear Mr. Ayers:

Our Executive Director, Mr. William D. Nelligan III, has advised me that there is a problem in some of your Regional Offices and that there may be a problem in the future at NRC for those seeking an NRC license in Non-Agreement states relative to the fact that our Board was initially incorporated as "Certification Council of Nuclear Cardiology." I believe that you have a copy of our Incorporation Certificate indicating a simple change on February 1, 1999 of one word in the name of our corportation......Board instead of Council. As I understand it, at the present time those who were granted certification by the Certification Council of Nuclear Cardiology are being denied the use of those certificates as one pathway toward licensure by the Agreement States despite the fact that our organization is at present the only Board recognized on your website.

It should be noted that there have been a few changes in our Eligibility Requirements since our first exam in 1996. As pointed out previously, the Radiation Safety/Physics requirements of our exam were more rigid for the '96, '97 and '98 exams than they are currently.

Let me review the Eligibility Requirements in 1996 [see attached] and compare these with the Eligibility Requirements which were included in our Application for Recognition by the NRC of the Certification Board of Nuclear Cardiology.

1. A current, unconditional, unrestricted license to practice medicine has always been required.

in accordance with the Freedom of Information
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PAGE TWO

- 2. In 1996, candidates could be either Board-certified or Board-eligible. A review of a sample of applications for those who were certified in 1996, 1997 and 1998 shows that candidates were certified by one primary board. This is the current requirement. A few cardiologists indicated "Board-eligible," but this was for the sub-specialty board in Adult Cardiology. Those physicians already had primary certification by the American Board of Internal Medicine. Thus, there is no fundamental change in this requirement.
- 3. Relative to Training and Experience for the 1996, 1997 and 1998 exams, cardiologists who completed training before July 1998 were required to have training or experience equivalent to Level 2 training in Nuclear Cardiology as recommended in the 1995 ACC/ASNC COCATS Training Guidelines. Those Guidelines, as shown on pages 7 and 8 of the 1996 Candidate Bulletin, call for 4 to 6 months of total training of which 200 hours are to be in radiation safety training with specific areas of radiation safety spelled out in the requirements. Since the 1995 COCATS did not make reference to Nuclear Cardiology services provided, a separate reference to "300 Nuclear Cardiology cases, of which 30 have angiography correlation" was added to the Eligibility Requirements in 1996, 1997 and 1998.

Beginning with the 1999 exam, our Training and Experience requirements were changed to mirror that which was planned for the Revised Part 35 requirements, namely a total of 700 hours of at least 4 months of training/experience which incorporates Radiation Safety and Work Experience. One could argue that indeed the requirements in areas of primary concern to NRC were more rigid in '96, '97 and '98 than the current requirements. Since the revised COCATS Guidelines include specific reference to the number of Nuclear Cardiology service cases, there was no need to spell out this requirement separately as we did the first three years of our exams.

Since the first exam, all cardiologists who completed training <u>after</u>
July 1998 must have completed fellowship training in Nuclear
Cardiology which includes all COCATS requirements.



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PAGE THREE

Therefore, I believe we can/have demonstrated that indeed the Eligibility Requirements for certification in 1996, 1997 and 1998 by the Certification Council of Nuclear Cardiology are at least equal to, and in some instances exceed, those of the Certification Board of Nuclear Cardiology.

It is our hope, Mr. Ayers, that your webpage will recognize both Boards to avoid the problems which some cardiologists are now experiencing. We will be glad to provide your office with any further documentation necessary or attempt to answer any questions which you may have after receiving this correspondence. We are most anxious to resolve this matter as soon as possible.

Best regards.

Sincerely,

James E. Udelson, M.D., Vice President Certification Board of Nuclear Cardiology

Junio E. Udelson

c: William D. Nelligan III, CAE, Executive Director Certification Board of Nuclear Cardiology

Attachment