

other than known or suspected pituitary disease. The period covered was from January 1 to December 31, 2017. We reviewed all scans; anamnesis and biochemical evaluation was performed on patients who presented PIs. Results: During this period 3894 patients underwent imaging studies. MRI was performed in 1146 patients, and CT in 2748 of them. Mean age was 53.1 ± 19 years, with similar gender distribution (50.6% women). Most imaging studies were ordered in the emergency department (43%), followed by the outpatient clinics (29%) and inpatient wards (28%). Most common reasons that led to request the image were trauma (20.4%), headaches (11.3%) and stroke (10.9%). We detected two PIs, which accounts for a prevalence of 5 cases per 10,000 individuals per year (0.05%). Both were detected by CT, with a MRI done later to further evaluate them. Final diagnosis was of a vascular aneurysm and a sellar meningioma. Work-up showed a secondary hypothyroidism in the patient with the sellar meningioma. No cases of pituitary adenomas were found. Discussion: We observed a strikingly lower prevalence of PIs than that reported in the literature. In addition, no PIs were found in MRI. Moreover, no pituitary adenoma was discovered. The reasons for these findings are unknown. In our study scans were not focused to the pituitary fossa so small lesions may have been missed. However, Esteves et al(1) reported a prevalence of PIs 5.8% in 1232 patients who had head MRI/CT, not pituitary MRI. In addition, the majority were pituitary adenomas, almost 40% of them microadenomas. Slices of 2-mm thickness were obtained in the scans, similar to imaging techniques used in other studies. Most reports have longer study duration (3-5 years). Our hospital is a teaching hospital where fellows evaluate scans initially, which are then reevaluated by neuroradiologists. This may account for the prevalence found, as sensitivity may be lower when professionals in training evaluate scans. In addition, frequency of pituitary hypointensity areas may decrease as the number of reviewers increase. Furthermore, this low prevalence could be related to difference in population characteristics. Conclusions: We found a very low prevalence of PIs in our hospital. More studies are warranted to further investigate frequency of PIs in our country. (1)Esteves et al. Pituitary. 2015;18(6):777-81.

Healthcare Delivery and Education

EXPANDING CLINICAL CONSIDERATIONS FOR PATIENT TESTING AND CARE

The Implementation of a Scholarly Activity Curriculum: Impact Assessment

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Introduction:

As detailed in the 2018 ACGME Common Program Requirements statement for fellowship institutions, “The physician is a humanistic scientist who cares for patients. This requires the ability to think critically, evaluate the literature, appropriately assimilate new knowledge, and practice lifelong learning.” Endocrinology fellowship

programs are tasked with the expectation of creating an environment that fosters scholarly pursuit. It is under the discretion of each program to consider its institutional resources and community needs in order to meet this ACGME requirement.¹

With the goal of enhancing trainee scholarly activity, our fellowship program created a Scholarly Activity Curriculum in 2017. The core curriculum pillars include delineating a yearly timeline of objectives and expectations, facilitating regular individual mentoring, permitting allotment of protected time, and advocating involvement in faculty scholarship and national conferences.

Objective:

To assess the impact of the 2017 Endocrinology Fellowship Scholarly Activity Curriculum with respect to its ability to increase trainee scholarship.

Methods:

The scholarly activities of the fellowship classes of 2017-2020 were extracted from archived Fellow Scholarly Activity Update presentations and exit-interview curricula vitae. The activities were categorized as conference presentations (oral/poster), basic scientific research, clinical scientific research, quality improvement, book chapters, review articles, case reports, and teaching activities. With the 2017 and 2018 classes representing the pre-curriculum study group and the 2019 and 2020 classes representing the post-curriculum study group, the number of activities per study group per scholarly category were tabulated and compared.

Results:

An increase in scholarly activity was noted in five of the delineated categories: conference presentations (80%), clinical scientific research (86%), review articles (100%), case reports (100%), and teaching activities (38%). The remaining three categories of basic scientific research, quality improvement, and book chapters showed no change.

Conclusions:

The implementation of the 2017 Endocrinology Fellowship Scholarly Activity Curriculum was associated with a rise in trainee scholarly activity. Four of eight categories showed an 80% or more increase. Interestingly, the fellows involved in basic scientific research both pre and post-curriculum implementation were limited to those in the Specialty Training and Advanced Research (STAR) Program. Finally, identifying the need to increase involvement in quality improvement research, our program has implemented a 2019 Quality Improvement Curriculum.

¹Common Program Requirements (Fellowship). ACGME. <https://www.acgme.org/What-We-Do/Accreditation/Common-Program-Requirements>. 2018. Accessed Nov 2019.

Thyroid

THYROID NEOPLASIA AND CANCER

Thyroseq V3 GC for Bethesda III and IV: An Institutional Experience

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