Applications Accepted:
August 20 – October 6, 2018

Examination Session Dates:
November 5 – December 8, 2018

Computer-based examination at Prometric™ sites

The Endocrine Certification in Neck Ultrasound Program is governed by the AACE ECNU Certification Committee. The Committee reserves the right to expand the testing content for the CCE and ECNU validation process as new information or procedures arise over time and become incorporated into the scope of thyroid ultrasound practice. Candidates for ECNU will be notified in advance of any changes.

Version 2018 – November-December Testing
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Nondiscrimination Policy
The American Association of Clinical Endocrinologists (AACE) does not discriminate among applicants on the basis of age, gender, race, religion, national origin, disability, sexual orientation or marital status. The Comprehensive Certification Examination (CCE) will be offered to candidates in environments that meet the standards established by the American Disability Act (ADA).

Please save this Candidate Handbook for future reference.
Endocrine Certification
In
Neck Ultrasound
I. ENDOCRINE CERTIFICATION IN NECK ULTRASOUND

1.1. BACKGROUND

The American Association of Clinical Endocrinologists (AACE) represents subspecialty physicians who are recognized for their expertise in the care of patients with thyroid and parathyroid diseases. These clinicians routinely perform consultations and diagnostic evaluations for patients with thyroid and parathyroid disorders, which include both diagnostic ultrasound (US) and ultrasound-guided fine needle aspiration (UGFNA). AACE and the American College of Endocrinology (ACE), which is the educational and scientific arm of AACE, recognize that the certification process for US and UGFNA provides assurance for optimal quality in patient treatment outcomes.

This handbook has been developed to provide information needed to apply for the AACE Endocrine Certification in Neck Ultrasound (ECNU) Program. AACE appreciates the significant effort and expense required to participate in this certification program, and our objective is to provide a smooth and positive application process. If further questions arise after reading this Handbook, please contact the ECNU Certification Manager via e-mail nmizell@aace.com, or phone (904) 404-4145. Please also visit the ECNU site at https://www.aace.com/ecnu.

1.2. THE ECNU CREDENTIAL AND ITS IMPORTANCE

Endocrine Certification in Neck Ultrasound (ECNU) is a professional certification in the field of neck ultrasound for physicians who perform consultations and diagnostic evaluations for thyroid and parathyroid disorders through both diagnostic ultrasound and ultrasound-guided fine needle aspiration (UGFNA). The ECNU credential signifies that an individual has passed the Comprehensive Certification Examination (CCE) and successfully completed the Validation of Competency Process (VCP). Successful candidates can use the ECNU designation after their names.

Volunteer content experts representing the American College of Endocrinology worked for several years to develop the ECNU Program. The foundation of the examination is the practice/job analysis conducted by subject matter experts comprised of endocrinologists experienced in ultrasound and sonographers certified by the American Registry of Diagnostic Medical Sonographers (ARDMS), who identified the critical areas and appropriate application of knowledge required of individuals practicing neck ultrasonography and ultrasound-guided FNA procedures. An outline of the content areas covered on the examination can be found under section 7.1 of this Handbook.

ECNU is recognized by the American Institute of Ultrasound in Medicine (AIUM), a preeminent national accreditation body for ultrasound practices. The ECNU credential allows those certified to be directors of their ultrasound laboratory and apply for AIUM practice accreditation. The AIUM ultrasound practice accreditation is a peer review process that examines practices against nationally recognized standards of excellence in training and qualifications of personnel, quality of ultrasound examinations, maintenance and calibration of machines, quality of reports, implementation of protection policies, and regular quality assurance activities. The AIUM recognizes successful completion of the ECNU Program as evidence of sufficient physician training in thyroid/parathyroid ultrasound. Certification and subsequent accreditation in this area may become increasingly important for reimbursement from Medicare and third party payors.

Participation in the ECNU Program is voluntary and open to anyone meeting the eligibility requirements. Membership in the American Association of Clinical Endocrinologists (AACE) is not required. However, AACE members who apply for the ECNU Program enjoy a significant discount on their certification fees.
Pathway to
Physician Certification
II. PATHWAY TO PHYSICIAN CERTIFICATION

The ECNU Program is comprised of the following steps. Please note that all candidates must satisfy both Step 1 and Step 2 in order to receive the ECNU designation.

STEP 1: Comprehensive Certification Examination (CCE)

The Comprehensive Certification Examination is a multiple-choice, computer-based examination that covers major topic areas in neck ultrasound. Achieving a passing grade on the CCE will entitle the candidate to continue to the Validation of Competency Process (VCP). If the candidate fails the CCE, he/she must retake and successfully pass the examination prior to continuing to the VCP.

To better prepare for the examination, candidates must participate in an approved basic thyroid ultrasound course (minimum of 15.0 AMA PRA Category 1 Credits™) within the past 36 months prior to taking the CCE. A partial list of approved basic Neck Ultrasound Courses can be found at https://www.aace.com/ecnu or in the Appendix section of this handbook.

STEP 2: Validation of Competency Process (VCP)

The Validation of Competency Process assesses the physician’s level of activity and demonstrated competency in the knowledge and skills required to interpret and report complete diagnostic ultrasound examinations (either performed personally by the physician or by a supervised ARDMS-certified sonographer with real time confirmation by physician), and to perform and report UGFNA procedures.

The VCP requires submission of a total of fifteen (15) ultrasound (US) studies and reports, and must be submitted in accordance with the VCP Instructions for Ultrasound Procedure Reports.

Please refer to the Validation of Competency Process (VCP) section of this Handbook for detailed requirements and instructions regarding the validation process (Section IX).

STEP 3: ECNU Program Completion (Issuance of ECNU Certificate and ECNU Designation)

Endocrine Certification in Neck Ultrasound (ECNU) is a professional designation awarded to individuals who meet specific knowledge and procedural requirements, measured through a standardized examination and validation of competency process in diagnostic ultrasound and ultrasound-guided fine needle aspiration (UGFNA).

- Upon successfully completing the VCP, the candidate will have earned the right to use the ECNU designation after his/her name.
- A formal letter, ECNU Certificate, and ECNU lapel pin, will be sent to candidates who have successfully completed the ECNU Program.
- Certification is valid for 10 years.

2.1. TIME FRAME FOR COMPLETING THE ECNU PROGRAM

Upon written notification of achieving a passing score on the Comprehensive Certification Examination (CCE), candidates are given 12 months to complete the ECNU Program by successfully completing the Validation of Competency Process (VCP).

The 12-month time frame begins upon the candidates’ receipt of their score report. The 12-month timeframe does not begin on the date that candidates took the examination at a Prometric™ test center.

Example: If you take the CCE on December 3, 2018 and you received your score report on December 31, 2018 your deadline for VCP submission will be December 31, 2019.
IMPORTANT

The ECNU Certification Committee will not grant extensions to the 12-month time frame required for completing the VCP. It is the sole responsibility of the candidate to fulfill/complete the requirements of the ECNU Program in its entirety.

Failure to complete the VCP process **within 12 months** of passing the CCE or failure to return corrected VCP package by the correction due date will result in the loss of certification eligibility, and the individual must reapply for the ECNU Program and pay the required fees.

Example: If the CCE was taken on December 3, 2018 and the score report indicating successfully passing the exam was received on December 31, 2018, the VCP submission process must be completed on or before **December 31, 2019**.

**Please note:**
- Submission of the **VCP Part 1** (the FIVE (5) thyroid nodule cases) **is required within 3 months** of passing the CCE. **Failure to submit the cases within 3 months will result in loss of eligibility to submit the remainder of the VCP.**
- Completing the entire VCP submission of the required 15 cases **within 6 months** is recommended in order to allow plenty of time for corrections.
Certification Fees
III. CERTIFICATION FEES

The ECNU Program is comprised of two major steps – Step 1: the Comprehensive Certification Examination (CCE) and Step 2: the Validation of Competency Process (VCP). Candidates who wish to obtain the ECNU designation must complete the certification program and pay the fees for both the CCE and the VCP. The fee structure for the ECNU Program is as follows:

<table>
<thead>
<tr>
<th>CATEGORY</th>
<th>CCE</th>
<th>VCP</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>AACE Member</td>
<td>$350</td>
<td>$900</td>
<td>$1,250</td>
</tr>
<tr>
<td>Non-AACE Member</td>
<td>$550</td>
<td>$1,000</td>
<td>$1,550</td>
</tr>
<tr>
<td>*Fellows In Training</td>
<td>$250</td>
<td>$800</td>
<td>$1,050</td>
</tr>
<tr>
<td>**International testing site fee</td>
<td>$200</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*NOTE FOR FELLOWS: A letter from Department Chair verifying status must accompany application. Fellow’s fees only apply if candidate is in his/her final year of fellowship program. Fellows who have completed the fellowship program will be charged the AACE Member or non-member rate, whichever is applicable at the time of application.

**INTERNATIONAL TESTING SITE FEE: For candidates who live outside of the United States, international testing sites are available if desired for an additional fee of $200.

** IMPORTANT

- Fees for CCE and VCP will be collected separately.
- Your first payment will be for the CCE, and this must be submitted with your ECNU Program Application.
- Do not submit the VCP fee until you receive official written notification from AACE that you passed the CCE. VCP payments submitted to AACE prior to passing the CCE will be returned to the candidate.
- All fees are non-refundable, regardless of whether you pass or fail the CCE or do not complete the certification process within the allotted timeframe (e.g. failure to submit Validation of Competency Process package).
Candidate Eligibility Criteria

and

Validity of the ECNU Designation
IV. CANDIDATE ELIGIBILITY CRITERIA

The ECNU Program is open to both AACE and non-AACE members. The ECNU Certification Committee has established the eligibility criteria to qualify for the ECNU Program. Candidates applying for the ECNU Program may qualify through one (1) of the six (6) routes outlined on the next page, and must satisfy all requirements for the chosen route in order to be eligible for ECNU.

- **ROUTE 1:** Endocrinologists with formal training in the subspecialty of endocrinology with attainment of board eligibility/board certified status; *full time activity in the various fields of endocrinology, metabolism and diabetes as a clinician, academician, research physician or any combination of these. Documentation of board status is required.

  *Full time activity refers to full time focus, not the hours spent in practice in a day/week. For example, an endocrinologist may work part-time, but dedicates 100% of his/her activities in the various fields of endocrinology, metabolism, and diabetes.

- **ROUTE 4:** Cytopathologists with formal training in the subspecialty of cytopathology with attainment of board certified status under the American Board of Pathology (ABP). Documentation confirming board status is required.

- **ROUTE 5:** Endocrine Surgeons with formal training in the subspecialty of endocrine surgery with attainment of board certified status under the American Board of Surgery. Documentation confirming board status is required.

- **ROUTE 6:** Otolaryngologists/Head and Neck Surgeons with formal training in the diagnosis and treatment of diseases related to ear, nose and throat, and related structures of the head and neck, with attainment of board certified status under the American Board of Otolaryngology. Documentation confirming board status is required.

- **ROUTE 7:** Radiologists with formal training in the subspecialty of radiology with attainment of board certified status under the American Board of Radiology. Documentation confirming board status is required.

If applying under any of these routes, you must:

A. Have attended CME-accredited, approved basic or advanced Thyroid Ultrasound Course(s) in which you have received at least 15.0 hours of **AMA PRA Category 1 Credits™ within the past 36 months** prior to applying to the ECNU Program.

At least 10 of the 15 approved CME hours must come from a comprehensive in-person ultrasound course. This can be an introductory/basic or an advanced course but must include both didactic (lecture) and lab sessions with hands on neck imaging as well as USGFNA instruction on neck phantoms.

CME hours can be obtained from one or multiple courses, and can be earned from an AACE or other organizations’ Thyroid Ultrasound Course(s). Refer to Appendix III for full explanation of required CME credits.

Copy/copies of CME certificate(s) must be submitted with the ECNU Program Application.

B. Be currently performing at least 100 ultrasound studies per year (70 diagnostic; 30 UGFNA). Studies should include parathyroid ultrasound and thyroid cancer lymph node mapping in the neck. A signed attestation is required upon application. See Attestation Statement.

C. Submit a complete ECNU Program Application. Refer to the Appendix section of this Handbook for the ECNU Program Application form and documentation requirements. This form can also be downloaded...
ECNU Candidate Handbook Overview – Nov./Dec. - 2018

during open application period, from the AACE website: https://www.aace.com/ecnu during the open application period.

- **ROUTE 3:** Endocrinology fellows/trainees or endocrine surgeons in training: Physicians who have completed a minimum of one year of fellowship in endocrinology or endocrine surgery training, or who have participated in additional, post-graduate endocrinology training or research may apply for the ECNU Program with written verification of status from their program director.

If applying under this route, you must:

A. Have attended CME-accredited, approved basic Thyroid Ultrasound Course(s) in which you have received at least **15.0 hours of AMA PRA Category 1 Credits™ within the past 36 months** prior to applying to the ECNU Program. CME hours can be obtained from one or multiple courses, and can be earned from an AACE or other organizations’ Thyroid Ultrasound Course(s). Refer to Appendix III for full explanation of required CME credits.

Copy/copies of CME certificate(s) must be submitted with the ECNU Program Application.

*Note:* Fellows who have attended Endocrine University® within the past 3 years may use the CME credits obtained from the Neck Ultrasound and UGFNA portion of the curriculum. If the CME credits are less than the 15-hour requirement for ECNU, additional CME hours must be provided.

B. Submit notarized, validated imaging logs (signed by program director) of at least 50 ultrasound studies (35 diagnostic; 15 UGFNA). Studies should include parathyroid ultrasound and thyroid cancer lymph node mapping in the neck. Logs submitted to the AACE Office must be HIPAA-compliant and include the following information: total number of exams performed, date of service, type of exam, location, results/diagnosis and recommendations. Logs must be submitted with the ECNU Program Application. Studies must document required participation of the candidate in interpreting the images and generating a report.

The 50 US studies must be performed prior to applying for ECNU and during the fellowship training program.

C. Submit a signed attestation confirming that you have performed at least 50 of the required ultrasound studies at the time of your ECNU Application, and affirming your understanding that the remaining 50 ultrasound studies must be completed within the 12-month period after passing the Comprehensive Certification Examination (CCE).

D. Submit a letter on department stationary from your program director, verifying your status as an Endocrinology or Endocrine Surgery Fellow.

E. Submit a complete ECNU Program Application. Refer to the Appendix section of this Handbook for the ECNU Program Application form and documentation requirements. This form can also be downloaded during open application period, from the AACE website: https://www.aace.com/ecnu during the open application period.

**IMPORTANT**

BEFORE YOU PROCEED WITH YOUR APPLICATION...

--- FOR ENDOCRINOLOGY OR ENDOCRINE SURGERY FELLOWS---

- If you have completed an endocrine fellowship program, but have not taken the endocrinology board, a certificate of fellowship program completion must be submitted with your application.

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American Association of Clinical Endocrinologists • Jacksonville, FL
V. DURATION OF VALIDITY OF THE ECNU DESIGNATION

The ECNU designation is valid for ten (10) years. The ECNU certification validity period will begin the first January after the year in which the ECNU designation is awarded. The certificant will have until January 1, ten (10) years later to complete the recertification requirements.

Please refer to the ECNU Website for ECNU approved CME Courses.

EXAMPLE
If you obtain your ECNU designation December 1, 2019, your recertification period will begin January 1, 2020 and you will need to complete all recertification requirements prior to January 1, 2030, when your certification will expire.
The Comprehensive Certification Examination (CCE) Process
VI. THE COMPREHENSIVE CERTIFICATION EXAMINATION (CCE) PROCESS

6.1. DEADLINES - Application Deadline: October 6, 2018

Completed applications must be submitted and all fees paid by the deadline to be eligible for the examination. Incomplete applications will not be processed and will be returned to the applicant. The CCE is computer-based and offered at Prometric™ sites conveniently located throughout the United States.

The test window is November 5 – December 8, 2018. Upon acceptance of application, a written notification in the form of an Authorization to Test (ATT) letter will be mailed to the candidate, and the candidate will schedule the examination with Prometric™, the test vendor. Information regarding examination scheduling will be included in the candidate’s ATT letter. For more information on Prometric™, please go to www.prometric.com.

6.2. EXAMINATION FEES

Examination fees are paid to AACE either online or by mail, depending on how the application is submitted. Fees must accompany the completed ECNU Program Application form and supporting documentation. The following fees only apply to the Comprehensive Certification Examination (CCE):

- AACE Member: $350
- Non-AACE Member: $550
- *Fellows: $250

*NOTE FOR FELLOWS: A letter from Department Chair verifying status must accompany application. Fellow’s fees only apply if candidate is in a fellowship program at the time that their application is submitted. Fellows who have completed their fellowship program will be charged the AACE Member or non-member rate, whichever is applicable at the time of application.

- **International testing site fee: $200

** INTERNATIONAL TESTING SITE FEE: For candidates who live outside of the United States, international testing sites are available if desired for an additional fee of $200.

**IMPORTANT**

- Full payment in the form of check or credit card must be submitted with the application. Online credit card payment is also available by visiting https://www.aace.com/ecnu and completing the online application process. Applications will not be processed until the fee has been received by the ECNU Certification Manager.
- Complete the payment application found in Section 6 of the ECNU Program Application form. Please make checks payable to the American Association of Clinical Endocrinologists (AACE).
- Fees are non-refundable in the event the candidate does not complete and submit his/her application and required documentation by the application deadline.
- If the candidate submitted an ECNU application with payment, but failed to schedule the CCE without notifying ACE of his/her decision to postpone taking the exam, the fee will be non-refundable.

6.3 EXAMINATION APPLICATION PROCEDURE

1. Candidate must complete the ECNU Program Application. Applications must be typed or clearly printed, and must be complete with examination fee and signatures on the Attestation and Confidentiality Statements. All required documentation must be submitted with the application (e.g., CME certificates/letters for 15.0 hours of CME credits obtained from one or more basic Thyroid
ECNU Candidate Handbook Overview – Nov./Dec. - 2018

Ultrasound Courses within the past 36 months, written verification of fellowship status, etc.)
Incomplete applications and those without the required supporting documentation will be returned unprocessed. Fees are non-refundable.

2. AACE will acknowledge receipt of candidate’s application via e-mail, within 5 business days of receipt of the application in the AACE Office.

3. AACE will review all applications. Once the candidate’s application has been reviewed and accepted, the candidate will be sent an Authorization to Test (ATT) letter, no later than two weeks before the test window. Instructions on how to schedule an exam with Prometric™ will be included with the ATT.

4. Candidate must complete the online registration process with Prometric™. Once completed, an electronic confirmation will be sent to the candidate containing the candidate’s name, authorization number, address of the nearest test center, the date and time of the test, and name of the test.

Note: If a candidate loses the confirmation or has not received a confirmation two weeks before the test date, he/she should contact Prometric™ at 1-800-479-6376.

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**Examination Application Process at A Glance**

Candidate completes application form ➔ Candidate submits application, examination fees, and all required CME documentation to ACE ➔ AACE/ECNU acknowledges receipt of application via e-mail ➔ AACE/ECNU reviews application ➔ AACE/ECNU sends ATT to accepted candidates ➔ Candidate registers for exam with Prometric™ ➔ Prometric™ sends electronic confirmation to candidate ➔ Candidate takes examination at Prometric™ site

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**Applications can be submitted online at** [https://www.aace.com/ecnu](https://www.aace.com/ecnu)

Or

**Manual applications and examination fees can be mailed or faxed to:**

Nickie Mizell, ECNU Certification Manager
American Association of Clinical Endocrinologists
245 Riverside Avenue, Suite 200
Jacksonville, FL 32202
Fax: (904) 404-4205

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**6.4. EXAMINATION SCHEDULE**

Candidates must report to the test center no later than 15 minutes before the scheduled time of the examination and will be given two (2) hours to complete the examination. There are no scheduled breaks.

**6.5. REQUIRED IDENTIFICATION**

The following must be presented, in order to take the exam:

- **One form of photo ID with signature.** If primary presented ID does not contain a signature, a second form of ID with signature will be requested: current, non-expired driver’s license, passport, medical license, or other government-issued photo ID.
- **Authorization to Test (ATT) letter:** The name and address on the photo ID must match the name and address listed on the ATT. Contact Certification Manager to report any address changes that occur after application has been approved.

**IMPORTANT**

Candidates without an Authorization to Test (ATT) letter and valid photo ID with signature will **NOT** be permitted to enter the test center, and their examination fees will be forfeited.
6.6. TESTING CENTER RULES

The following rules are enforced at all test administrations:

- All candidates must have proper photo ID with signature to be admitted to take the exam.
- Candidates will be admitted only to their assigned test center.
- Candidates arriving less than 15 minutes prior to the scheduled time of the exam will not be admitted.
- No guests are permitted in the examination rooms.
- No reference materials, books, papers, or personal items (purses, briefcases, coats, etc.) are allowed in the examination room.
- No electronic devices are permitted in the assessment site, including telephones, signaling devices such as pagers and alarms, personal digital assistants (PDAs) and other hand-held computers.
- No weapons or instruments that may reasonably be used as weapons may be brought into the examination room.
- No test materials, documents, or memoranda of any sort are to be taken from the examination room.
- Candidates may not communicate with other candidates during the examination. Test Center Administrators (TCA) are authorized to maintain secure and proper test administration procedures, including relocation of candidates.
- No questions concerning the content of the examination may be asked during the testing period.
- Candidates will be provided with a survey at the end of the exam to comment on the exam administration.
- Food and beverages are not permitted in the assessment center. Tobacco products and gum may not be used during the examination.
- Breaks are not scheduled during the exam. Candidates are permitted to take breaks on an individual basis, but no additional time is allotted to candidates who take breaks, for completing the exam. Candidates who must leave the testing room must receive permission from the Test Center Administrator and may be escorted while outside the testing room.
- Candidates will not be allowed to talk during rest room trips. Those who violate this requirement will be denied re-admittance to the testing room, forfeit all fees, and will not have their exam scored.
- Test Center Administrators cannot take and/or relay phone messages to candidates during the testing period.

Medical Supplies Allowed in the Test Room:
- A candidate may bring a medical device into the test room if it is physically attached to the body. For example, insulin pump. Test Center Administrators (TCA’s) will visually inspect the device to make sure it is not a recording device of any kind.
- Unless expressly prohibited, candidates may bring emergency medicine into the test room, including nitroglycerin tablets, and inhalers. The TCA will inspect these items to confirm that they do not contain any notes or anything that could possibly compromise the examination.

6.7. EMERGENCIES

Every attempt will be made to administer all examinations as scheduled. However, should any problems occur, due to the testing vendor, the examination will be rescheduled at no cost to the candidate.

6.8. NO SHOW, LATE ARRIVAL, INCLEMENT WEATHER, AND RESCHEDULING

Candidates who have scheduled with Prometric™, and are unable to sit for the examination at the assigned time must notify the AACE Certification Manager in advance of the scheduled examination date. Please do not contact Prometric™. The AACE/ECNU office must make any changes to the candidate’s appointment.
6.9. CONDUCT DURING THE EXAMINATION

Any individual found by the ECNU Neck Ultrasound Certification Committee, at its sole discretion, to have engaged in conduct which subverts or attempts to subvert the examination process may have his or her scores on the examination withheld and/or declared invalid, and/or be subject to the imposition of other appropriate sanctions by the Committee.

Conduct which subverts or attempts to subvert the examination process includes:

- Conduct which violates the security of the examination materials, such as removing from the examination room any of the examination materials; reproducing or reconstructing any portion of the licensing examination; aiding by any means in the reproduction or reconstruction of any portion of the licensing examination; selling, distributing, buying, receiving or having unauthorized possession of any portion of a current or future examination.

- Conduct which violates the standard of test administration, such as communicating verbally or otherwise with any other examinee during the administration of the examination; copying answers from another examinee or permitting one's answers to be copied by another examinee during the administration of the examination; having in one's possession during the administration of the examination any book, notes, written or printed materials, or data of any kind, other than the examination materials distributed or specifically listed as approved materials for the examination room.

- Conduct which violates the credentialing process such as falsifying or misrepresenting educational credentials or other information required for admission to the examination; impersonating an examinee, or having an impersonator take the examination on one's own behalf.

IMPORTANT

- If advance notice is received 48 hours prior to scheduled test, the candidate may have the registration moved to another exam administration for a fee of $25 OR cancel the examination with a refund of the examination fee minus a $150 administrative fee.

- If notice is not received 48 hours prior to the scheduled exam or candidate fails to show for their scheduled exam, the registration will NOT be moved to another exam administration, nor is the examination fee refunded.

- Candidates will not be permitted to take the exam if they arrive less than fifteen (15) minutes before the scheduled time of the exam. The examination fee will be forfeited.

- If the exam cannot be administered, or if a candidate is unable to arrive at a designated exam site due to inclement weather, terrorist acts, natural disaster, or other unforeseen emergencies beyond the control of the test vendor and the candidate, as determined by the ECNU Certification Committee, the candidate may receive an extended testing window (to be determined on an individual basis) and will be allowed to reschedule the exam without being charged a reexamination fee. Candidates will be responsible for their own associated expenses for future testing (travel, hotel, food, etc.).
The CCE Examination Structure
VII. THE EXAMINATION STRUCTURE

AACE/ECNU offers the Comprehensive Certification Examination (CCE) in neck ultrasonography for physicians who perform consultations and diagnostic evaluations for thyroid and parathyroid disorders through both diagnostic ultrasound and ultrasound-guided fine needle aspiration (UGFNA).

7.1. CONTENT OUTLINE

The examination will cover the following major topic areas:

I. Principles of Ultrasound Imaging – 15%
II. Neck Anatomy – 15%
III. Thyroid Pathology – 34%
IV. Parathyroid Pathology – 10%
V. Lymph Node Pathology – 10%
VI. Ultrasound-Guided Fine Needle Aspiration (UGFNA) – 16%

7.2. EXAMINATION SPECIFICATIONS

The CCE is a multiple-choice, computer-based examination consisting of 100 questions. Candidates should answer each question by selecting the best alternative from the four choices presented. Each correctly answered question is one point, and points are not deducted for incorrect answers. There is no extra penalty for wrong answers or for guessing on the examination, therefore, every question should be answered. Candidates are given two (2) hours to complete the examination.

7.3. SAMPLE QUESTIONS (Correct answers are in bold)

1. A 45-year-old patient is found to have a 1 cm nodule in the thyroid. Which of the following ultrasound characteristics would necessitate an ultrasound-guided FNA?
   (A) Nodule has a spongiform appearance
   (B) Patient has history of XRT for Hodgkins therapy at age 15
   (C) Nodule has comet tail artifact
   (D) Nodule has eggshell calcifications

2. A 25-year-old patient is seen for follow-up three years after having a total thyroidectomy for papillary thyroid cancer. An ultrasound reveals a lymph node in the lateral neck at Level II. What ultrasound characteristic of the lymph node would NOT warrant an ultrasound-guided FNA?
   (A) Central hilar line
   (B) Coarse calcifications
   (C) Cystic degeneration
   (D) Vascularity in the periphery

3. A patient presents with serum calcium of 12 mg% and a PTH of 125. Ultrasound shows a mass posterior to the thyroid. What ultrasound characteristic would the sonologist expect to find?
   (A) Mass is hyperechoic
   (B) Power Doppler shows mass is avascular
   (C) A hyperechoic line separates mass from thyroid
   (D) Mass is heterogeneous
7.4. REFERENCES

The examination questions are mapped to the references listed below:
Please note: This is a non-inclusive list

Reference List

1. AACE Ultrasound Course Syllabus


5. Rosario PW. Ultrasonography for the Follow-up of Patients with Papillary Thyroid Carcinoma: How Important is the Operator? *Thyroid* 2010; 20: 833-839.


10. Management Guidelines for Patients with Thyroid Nodules andDifferentiated Thyroid Cancer. *Thyroid* 2009.

11. AACE ECNU Resource CD – Available upon Request of AACE/ECNU Certification Manager - nmizell@aace.com.
The CCE Examination Results
VIII. EXAMINATION RESULTS

8.1. NOTIFICATION OF RESULTS

Candidates will be officially notified of the Comprehensive Certification Examination (CCE) results via postal mail, within approximately four to six weeks following the close of the examination window. No results will be provided by telephone, fax, or e-mail. Scores will be released ONLY to the individual candidate. Requests to release examination scores via e-mail or phone will not be considered.

IMPORTANT

If you wish to authorize a person to inquire regarding the status of your application and/or results, a copy of the proof of power of attorney must be submitted to the ACE Office. Only persons authorized as power of attorney may act on behalf of a candidate. Inquiries from unauthorized individuals will not be considered.

8.2. CUT SCORE (PASSING SCORE)

The passing score, or cut score, was established through a Passing Score study. AACE has contracted with Prometric™ to conduct the study and convene a panel of subject matter experts (SMEs) in the field of thyroid ultrasound. During the process, the panel was presented with the final standard of minimal knowledge, skills, and abilities composed of specific statements about what the candidate needed to know to be considered minimally acceptable for certification, as developed in the test development process. After reaching consensus on the definition of the minimally qualified candidate, the panel rated each question in reference to the proportion of minimally qualified candidates that will get the answer right.

A summary report documenting the methods and results of the standard setting study was then presented to the ECNU Certification Committee. The report outlined the discussion conducted with the panel of experts regarding selection of the recommended cut score for the exam. Upon approval of the recommended cut score by the ECNU Certification Committee, the minimum score necessary to pass the CCE was established. The passing score is reflective of the minimum amount of knowledge in this field required to pass the examination.

When the relative merits and drawbacks of various cut score possibilities are evaluated, it is important to consider that each possible cut score will have some degree of decision error.

- Setting a cut score too low undermines the purpose of credential testing by permitting a large number of people who are not minimally competent to practice in the field.
- Setting a cut score too high helps ensure no true “not qualified” candidates pass, but creates an injustice by preventing a large number of candidates who are minimally competent from becoming credentialed after preparation for the test.

8.3. SCORING PROCEDURES

The minimum passing score for the ECNU Comprehensive Certification Examination (CCE) is a scaled score. All questions on the examination are weighted equally during scoring. The use of scaled scores is an established practice for many state and national examinations. It allows the use of a passing score, which can remain constant from one examination to the next. While this procedure does not affect whether an examinee passes or fails, it will better enable comparison of the results from one administration to another.

The CCE scale score range is 200 to 800 and a total scaled score of 500 is needed to pass the examination.
If the candidate passes the examination, his/her results will NOT include a numeric scale score. It will only contain a statement that he/she passed. The examination is designed as a minimum competency test for credentialing purposes and is not intended to distinguish between passing scores. This policy is established as a safeguard against misuse of the examination scores by passing candidates.

If the candidate fails the examination, his/her results will include a total failing scale score. The candidate’s score report will also contain diagnostic levels in each of six sub score categories based on the six content areas outlined in this Handbook.

**THE SIX SUBSCORE AREAS ARE AS FOLLOWS:**

I. Principles of Ultrasound Imaging  
II. Neck Anatomy  
III. Thyroid Pathology  
IV. Parathyroid Pathology  
V. Lymph Node Pathology  
VI. Ultrasound-Guided Fine Needle Aspiration (UGFNA)

Sub score results are reported in three diagnostic levels: Proficient, Marginal, or Deficient. To avoid confusion with total examination scores, the percentage of questions you answered correctly in each sub score area is not reported. Pass/fail decisions are not made using sub scores because sub scores alone do not provide sufficient information for pass/fail decisions.

### DIAGNOSTIC LEVEL DESCRIPTIONS

- **Deficient:** The score obtained is below an acceptable level; substantial study of this content area is recommended prior to retaking the examination.
- **Marginal:** The score obtained is marginally unacceptable understanding in this domain does not appear to be strong, and additional study is suggested.
- **Proficient:** The score obtained in this domain is at or above the acceptable level; The candidate has demonstrated an acceptable understanding of the domain. A review of this area may be helpful prior to retaking the examination.

### 8.4. QUESTIONS ABOUT THE EXAMINATION

Candidates have two options to raise questions regarding the examination:

* Candidates will receive a survey at the end of the examination, and may use this opportunity to express comments and questions about the examination.
* Candidates may forward their comments in writing, to AACE/ECNU (c/o Certification Manager) within 10 business days after the examination.

**IMPORTANT**

All questions regarding the examination will be reviewed by the Certification Council, and candidates will receive an individual response following the Council review.

### 8.5. REEXAMINATION INFORMATION

If a candidate fails the CCE, he/she may retake the examination the next time it is offered by AACE/ECNU. Such registration will be subject to the current guidelines and fees established by AACE.
8.6. APPEALS

All appeals regarding examination scores must follow these procedures:
* Appeals must be filed within 15 business days of receipt of the score report.
* An appeal letter must be sent to AACE/ECNU via postal mail, stating the specific issue/concern and the reason(s) for the appeal. Letters sent via e-mail or fax will not be processed.
* Certification Manager will acknowledge receipt of the appeal letter within 3 business days of receipt from candidate.
* The ECNU Certification Committee will review the appeal letter, and a response will be forwarded within 15 business days of receipt of the appeal letter. The response will outline the reasons for the approval/denial of the request.

Please send appeal letter to:
Nickie Mizell
ECNU Certification Manager
American Association of Clinical Endocrinologists
245 Riverside Avenue, Suite 200
Jacksonville, FL 32202
The Validation of Competency Process (VCP)
IX. THE VALIDATION OF COMPETENCY PROCESS (VCP)

9.1. BACKGROUND

The Validation of Competency Process assesses the physician’s level of activity and demonstrated competency in the knowledge and skills required to interpret and report complete diagnostic ultrasound examinations (either performed by a supervised ARDMS-certified sonographer or personally by the physician), and to perform and report UGFNA procedures.

Successful completion of the Comprehensive Certification Examination (CCE) will entitle the candidate to continue to the Validation of Competency Process (VCP). If the candidate fails the CCE, he/she must retake and successfully pass the examination prior to continuing to the VCP. Documentation and fees submitted for VCP will be returned unprocessed if the candidate has not passed the CCE.

<table>
<thead>
<tr>
<th>There are two segments to the Validation of Competency Process:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Proper submission of diagnostic-quality ultrasound (US) images with interpretation, (submitted online or USB Flash Drive, in PowerPoint® format).</td>
</tr>
<tr>
<td>2. Signed attestation of the total number of US examinations and UGFNA procedures performed by the candidate in the twelve (12) months preceding submission of the required images and reports.</td>
</tr>
</tbody>
</table>

**IMPORTANT**
All images and reports must be submitted in PowerPoint® format. Paper images or reports will NOT be accepted.

All original reports must be scanned as they would appear in the patient record and must be HIPAA compliant. If reports are in a language other than English, a TYPED English translation is to accompany the original report.

Reports that have been cut and pasted and are not in their original format will be returned.

All images and reports, including cytology, must contain the original date(s) the examination or procedure was performed. All cytology reports must have corresponding dates to ultrasound guided FNA procedure reports.

The 15 cases submitted MUST be from 15 different patients.

9.2. VCP FEES

<table>
<thead>
<tr>
<th>Type</th>
<th>Fee</th>
</tr>
</thead>
<tbody>
<tr>
<td>AACE Member</td>
<td>$900</td>
</tr>
<tr>
<td>Non-AACE Member</td>
<td>$1,000</td>
</tr>
<tr>
<td>Fellows</td>
<td>$800</td>
</tr>
<tr>
<td>*International Testing Site Fee: $200</td>
<td>* For candidates who live outside of the United States, international testing sites are available if desired for an additional fee of $200.</td>
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</tbody>
</table>

**IMPORTANT**
- Full payment must be submitted with ultrasound reports and completed VCP Form. Reports will not be graded until the fee has been received by the Certification Manager. Do not send advance payment for VCP. Payment must be sent with the complete VCP Package.
- Complete the VCP payment found in Section 2 of the Validation of Competency Process Form. If paying by check, please make checks payable to the American Association of Clinical Endocrinologists (AACE).
9.3. INSTRUCTIONS FOR ULTRASOUND PROCEDURE REPORTS

9.3.1. GENERAL INSTRUCTIONS

Ultrasound examinations may be performed by either the ECNU-qualified physician or by an ARDMS-certified sonographer under the direct supervision of the ECNU-qualified physician candidate. Although the static images may be obtained by the physician or ARDMS-certified sonographer, it is mandatory that the physician candidate participate in obtaining and viewing the images in real-time ultrasound. The physician candidate must also author the ultrasound reports.

Again, without exception, the physician candidate must be the author of the original ultrasound reports.

Upon notification of successful completion of the CCE, the qualified candidate must submit appropriate ultrasound images for evaluation purposes within the ensuing twelve (12) month period. Ultrasound studies performed prior to passing the CCE may be submitted provided that they meet the criteria for submission, and the studies submitted were conducted in a time frame not to exceed twelve (12) months prior to passing the CCE.

Example: If the CCE was successfully passed in December, 2018 the candidate may submit ultrasound studies performed between December, 2017 and December, 2019.

IMPORTANT
In accordance with HIPAA regulations, all patient identifying information must be removed from the images and/or patient and cytology reports, prior to submission to the AACE office. Patient identifying information includes name, address, phone number, birth date, social security number and medical record number. Images and reports with patient identifying information will not be accepted and will be returned to the candidate ungraded.

9.3.2. FORMAT FOR IMAGES AND REPORTS

Ultrasound images for evaluation must be technically acceptable, properly annotated, and submitted in PowerPoint® format only via the online option which can be found under the “VCP Submission” tab located at www.aace.com/ecnu. If preferred, the application can be submitted via traceable mail (FedEx, UPS, etc) with the cases in a PowerPoint® presentation that has been saved on a CD or USB Flash Drive. Images and reports submitted on paper will not be accepted, and will be returned to the candidate ungraded. All submitted ultrasound examinations must be in accordance with the VCP Instructions for Ultrasound Procedure Reports.

PLEASE NOTE: A FULL SAMPLE SUBMISSION IS AVAILABLE FOR REVIEW ON THE ECNU RESOURCE CD, AVAILABLE COMPLEMENTARY FROM THE ECNU CERTIFICATION MANAGER

A. WHAT TO SUBMIT

A total of fifteen (15) separate US cases and reports, with a different patient for each case. These must include:

1. Five (5) diagnostic thyroid nodule cases within 3 months of passing the CCE (see VCP manual for submission guidelines). Each case must include at least one (1) nodule 1cm (10mm) or greater.

2. Five (5) diagnostic US studies comprised of the following:
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a. Two (2) must demonstrate parathyroid adenoma pathology *(verification required)*
b. Two (2) must demonstrate a malignant lymph node(s) *(verification required)*
c. One (1) must demonstrate autoimmune or Hashimoto’s thyroiditis findings

3. Five (5) UGFNA of thyroid nodule procedures *(must include cytology report)*

**WHY ARE THE FIRST 5 CASES DUE WITHIN 3 MONTHS?**

- To make certain that the candidate is following the submission format required
- As many insurance companies are accepting that the ECNU application is in process, this will provide objective proof that this is being followed.

All ultrasound reports must be in a narrative form!

*Cases not submitted in this format will be returned.*

Computer/ultrasound machine-generated reports will be returned.

**IMPORTANT**

A physician applying for certification must attest that he/she participated in performing the real-time ultrasound. *(See Section IV: Attestation of Ultrasound Procedures)*

A patient’s US reports/images can only be used by one physician for VCP submission. For example, US reports/images previously submitted by Physician A cannot be used by Physician B, even if both Physicians A & B participated in real-time ultrasound for the same patient. Physician B must use reports/images from another patient.

The Validation Panel will not accept previously submitted patient reports/cases that have been used by another physician for the VCP. *All U/S reports must be in a narrative form. Cases not submitted in this format will be returned.* Please see resource CD for samples submissions.

**B. HOW TO LABEL/FORMAT VCP SUBMISSION**

Each slide in your PowerPoint® submission and each corresponding image must be labeled in the manner listed below. All cytology reports must also be labeled. VCP packages that are not labeled in this required format will be returned to the candidate.

All images and corresponding reports must contain an original, corresponding date. By complying with the following instructions, the VCP package can be graded in a more timely fashion.

A sample submission and a PowerPoint® Template for submission is available on the ECNU reference CD or available online at [https://www.aace.com/ecnu](https://www.aace.com/ecnu) under the download tab.

The submission of the VCP Parts 1 & 2 should be a single and continuous PowerPoint® presentation labeled as follows:

- **Part 1:** *(Due within 3 months of passing the CCE)*
  - Cases 1-5: Thyroid Nodule US
Part 2: (Due within 12 months of passing CCE)
- Cases 6-7: Parathyroid Adenoma
- Cases 8-9: Malignant Lymph Node
- Case 10: Hashimoto’s Thyroid Case
- Cases 11-15: UGFNA of Thyroid Nodules

Each case study in the PowerPoint® presentation should start with the ultrasound report, followed by the cytology reports (if required) and then the corresponding images. Images should be submitted for each case with one (1) image per slide. PLEASE NOTE THAT THE ECNU CERTIFICATION PANEL HAS THE RIGHT TO REJECT IMAGES THAT ARE JUDGED TO BE OF INADEQUATE QUALITY.

Each slide associated with the required case study should be clearly labeled in the header with the case number and descriptor. Utilize the ECNU PowerPoint® submission blank available under the download tab at https://www.aace.com/ecnu.

For example: Page 1 of your report is on Thyroid Nodule US, make sure you label the top page as follows:
Case 1: Thyroid Nodule US
Case 2: Thyroid Nodule US, etc.

PLEASE utilize the ECNU VCP PowerPoint® submission blanks available for both Part 1 and Part 2 under the download tab at https://www.aace.com/ecnu.

C. WHAT INFORMATION TO INCLUDE IN ALL REPORTS

While some may use a checklist to record ultrasound features, the Ultrasound Reports must:

- Be a separate document and be able to stand alone from any other documentation (specifically should NOT be embedded in progress notes or other reports/notes/documentation).
- Be in a narrative form, not computer generated or in check-box formatting.
- Be concise and contain all pertinent positive and negative findings.

Reports and accompanying cytology reports must:

- Be typed. Handwritten reports are not acceptable.
- Be in English. If reports are in a language other than English, a typed English translation is to accompany the original report.
- Contain an original date, corresponding to the date of the FNA biopsy.

Surgical pathology reports must:

- Have date of surgical intervention clearly labeled.

IMPORTANT
All reports and images must be submitted in such a way that the reviewer should not be required to zoom or enlarge the slides in order to make them viewable for grading.

PLEASE NOTE THAT THE ECNU CERTIFICATION PANEL HAS THE RIGHT TO REJECT IMAGES THAT ARE JUDGED TO BE OF INADEQUATE QUALITY.
All reports must be copies of the original report as submitted to the patient record, and contain the following information:

1. The indication for performing the exam.
2. Measurement in three dimensions of each Thyroid lobe & A-P measurement of isthmus. The preferred measurement listing order for ECNU VCP reports is Longitudinal/Sagittal x AP x Transverse. If this order is not used, the order of the measurements must be specified on the report.
3. A diagnostic impression or differential diagnosis.
4. Disposition/plan indicating specifically what action is recommended based on the information obtained from the US (e.g., surgery, follow-up in six months, FNA, etc.). Terms like “Clinical correlation recommended” are NOT acceptable.
5. Signature of the physician (Electronic signature is acceptable)
6. Original date(s) the examination or procedure was performed, with corresponding dates on cytology report.

For additional examples of reports and a full ECNU sample submission, an ECNU Resource CD can be requested from the ECNU Certification Manager at nmizell@aace.com.

9.3.3. SCORING PROCEDURES AND CONTENT CRITERIA FOR REPORTS AND IMAGES

Certification status will be determined on a pass/fail basis. In addition to the requirements listed for all Ultrasound Reports, there are additional requirements for each category. These are listed below.

All reports will be reviewed by the ECNU Validation Panel and will be graded according to the criteria specified under each category (e.g., Thyroid Diagnostic US Reports, Parathyroid Adenoma Cases, etc.). Points will be deducted from images and reports missing the required information.

The Validation Panel is a peer review panel composed of ECNU certified individuals. In order to ensure an unbiased review process, the identity of the VCP reviewers will not be provided to candidates.

VCP PART 1 (Due within 3 months of passing the CCE)

A. THYROID NODULE DIAGNOSTIC US REPORTS: Five (5) studies required

IMPORTANT: Each case must include at least one (1) nodule 1cm (10mm) or greater.

Thyroid Nodule Diagnostic US reports must contain the following information:

1. Indication for performing examination
2. Thirteen (13) standard images of the thyroid gland as required in the 2013-AIUM PRACTICE GUIDELINE – Thyroid and Parathyroid Ultrasound (http://www.aium.org/resources/guidelines/thyroid.pdf) including
   - Images of each thyroid lobe present in longitudinal and transverse planes
     - Transverse images of the superior, mid, and inferior portions of each lobe.
These should be clearly labeled: RIGHT-TRANS-SUP, RIGHT-TRANS-MID, RIGHT-TRANS-INF, LEFT-TRANS-SUP, LEFT-TRANS-MID, LEFT-TRANS-INF
- Longitudinal images of the medial, mid, and lateral portions each lobe present.
- These should be clearly labeled: RIGHT-LONG-LAT, RIGHT-LONG-MID, RIGHT-LONG-MED, LEFT-LONG-LAT, LEFT-LONG-MID, LEFT-LONG-MED
- AP image of isthmus

3. Measurement of each thyroid lobe & isthmus Anterior-Posterior. The preferred measurement listing order for ECNU VCP reports is Longitudinal/Sagittal x AP x Transverse. If this order is not used, the order of the measurements must be specified on the report.

4. Description of thyroid parenchyma (homogeneous, heterogeneous, fibrosis, pseudonodules, etc.)

5. Evaluation of nodules
   a. Describe echogenicity of nodule(s) (solid/cystic, hypoechoic/hyperechoic, homogeneous/heterogeneous)
   b. Description of nodule margins (irregular, smooth, halo, invasion, etc.)
   c. Narrative Description and Grade of Doppler flow within the nodule.
   - For example: Grade 1 (Absent) Doppler flow is seen. Grade 2 (peripheral) Doppler flow is seen. Grade 3 (penetrating) Doppler flow is seen. Grade 4 (Chaotic) Doppler flow is seen.
   - Note: Doppler Grades are in Arabic numbers, not Roman numerals

6. Description and characterization of any abnormal findings on each nodule
   a. Calcifications (presence or absence of)
   b. Cysts-Description (Simple, complex, mural components)
   c. Comet Tail artifact
   d. Posterior Acoustic Enhancement (if relevant)

7. Comment regarding presence or absence of cervical nodes and description of characteristics if present.

8. Diagnostic impression

9. Recommendations for additional studies, procedures or treatment provided

******** IMPORTANT – NEW REQUIREMENT ********

- The five (5) thyroid nodule cases must be submitted within three (3) months of successfully completing the CCE.

- PLEASE NOTE, THE ENTIRE VCP PACKET MAY BE SUBMITTED IN TOTO AT ANYTIME, BUT THE 5 NODULE CASES MUST BE SUBMITTED WITHIN 3 MONTHS OF PASSING THE CCE.


IMPORTANT
At least one (1) Doppler image of each described nodule (Black & White acceptable) MUST accompany each thyroid nodule case.
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VCP PART 2 (Due within 12 months of passing the CCE)

B. PARATHYROID ADENOMA CASES: Two (2) cases required. Minimum of two (2) images of the parathyroid tumor per case

Parathyroid Adenoma cases must contain the following criteria:

1. Indication for performing examination
2. Basic thyroid measurements and parenchyma description and sagittal and transverse images of each lobe
3. Location of parathyroid gland and supporting images
4. Measurement of parathyroid adenoma. The preferred measurement listing order for ECNU VCP reports is Longitudinal/Sagittal x AP x Transverse. If this order is not used, the order of the measurements must be specified on the report.
5. Echogenicity (hypoechoic, homogeneous/heterogeneous) of parathyroid gland.
6. Doppler image of parathyroid
7. Comment on vascularity of parathyroid (polar artery or vascular pedicle location if applicable or lack thereof)
8. Diagnostic impression
9. Parathyroid must be verified by surgery or FNA (PTH in needle washout or confirmatory cytology report)
10. Recommendation for additional studies, procedures, or treatment based on the results of the study, either in the impression or as an addendum to the case. This can be a clinic note, letter to referring physician or an addendum to the original ultrasound report.

IMPORTANT
At least one (1) Doppler image of the parathyroid tumor (Black & White acceptable) MUST accompany each parathyroid case.

C. MALIGNANT LYMPH NODE US REPORTS: Two (2) cases required. Minimum of two (2) images as well as a Doppler image of each pathologic node described per case. These must be from the neck but do not have to be of thyroid origin. Please see #9 below.

Malignant Lymph Node US reports must contain the following criteria:

1. Indication for performing examination. If thyroid cancer, the indication should state on which side of the thyroid the primary malignancy occurred (right, left, or bilateral). If this is not known (primary occurred years earlier and records not available), this should be stated.
2. Location (Compartment I thru VI, right or left)
3. Measurement of each pathologic node in three dimensions. The preferred measurement listing order for ECNU VCP reports is Longitudinal/Sagittal x AP x Transverse. If this order is not used, the order of the measurements must be specified on the report.
4. Comment on the shape of the lymph node, specifically whether or not the lymph node demonstrates a round shape. Provide a numerical short to long (normal <0.5) or long to short (normal >2) axis ratio from an image of the node in the longest axis supporting this finding. The longest dimension of a node may be in the sagittal or oblique view. A normal node may be round in transverse but flat in sagittal view – in this case, the ratio should be taken from the sagittal view to reflect the long axis (greatest dimension of node).
5. Comment on echogenicity
6. Evaluation of vascularity (central or peripheral) or lack thereof
7. Provide Doppler image
8. Comment on presence or absence of Hilar line.
9. Comment on presence or absence of calcifications
10. Comment on the presence or absence of cystic changes or degeneration.
11. Diagnostic Impression

12. Malignant Lymph Node must be verified by surgery or FNA (positive cytology report, Tg or calcitonin in needle washout, or positive flow cytometry). The pathology report must state “positive for malignancy”. In addition to metastatic thyroid cancer, lymphoma, squamous cell carcinoma and other metastatic disease involving neck lymph nodes are acceptable as long as it can be confirmed by FNA, open biopsy or surgery.

13. Recommendation for additional studies, procedures, or treatment/observation based on results of #11, added as an addendum to the case. This can be a clinic note, letter to referring physician or an addendum to the original ultrasound report.

**IMPORTANT**

At least one (1) Doppler image of the malignant node (Black & White acceptable) **MUST** accompany each malignant lymph node case.

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**D. HASHIMOTO’S THYROIDITIS CASE:** One (1) case required

Minimum of five (5) images must be submitted (sagittal & transverse of each lobe and transverse of isthmus) as well as sagittal Doppler image of each lobe

Hashimoto’s Thyroiditis case must contain the following criteria:

1. Indication for performing examination.
2. Measurement of each lobe and Isthmus (Anterior-Posterior). The preferred measurement listing order for ECNU VCP reports is Longitudinal/Sagittal x AP x Transverse. If this order is not used, the order of the measurements must be specified on the report.
3. Description of parenchyma (fibrosis, pseudonodules, etc.)
4. Comment on echogenicity of the thyroid parenchyma
5. Comment on vascularity of the thyroid parenchyma
6. Provide Doppler image, with comment in report of findings
7. Diagnostic impression
8. Recommendations for additional studies, procedures or treatment provided

**E. ULTRASOUND GUIDED FNA OF THYROID NODULE REPORTS:** Five (5) cases required

Minimum of three (3) images per case is required (Image of the target lesion in transverse and longitudinal views, and an additional image of the needle in the target lesion.

Ultrasound Guided FNA reports must contain the following information:

1. Indication for performing examination
2. Description of target lesion including location
3. Image marked clearly showing needle bevel in target (Use of an arrow in PowerPoint® is acceptable.)
4. Cytology report showing adequate cells
5. Diagnostic impressions based on cytology report
6. Recommendations for additional studies, procedures or treatment.
7. Additional recommendations based on cytology report, added as an addendum to the case. This can be a clinic note, letter to referring physician, or an addendum to the original ultrasound report.


**IMPORTANT**

If, after 10 months following successful completion of the CCE, the candidate is unable to submit all 15 cases and is deficient in one case, the candidate may submit a request to the ECNU Committee and request an extension of 3 months to obtain the one remaining case. However, in order to be eligible for this option, all cases with the exception of the missing case must have been submitted and approved.

**OR**

If the candidate is deficient in submission of one malignant lymph node (MLN) case or one parathyroid case, and all other required cases have been submitted and approved, the candidate has the option of submitting a highly sonographically suspicious lymph node, or a highly representative parathyroid gland/adenoma, even if fine needle aspiration (FNA) or surgery are not considered clinically appropriate and thus pathologist confirmation will not be available. This case may be submitted for review along with an explanation as to why to why FNA or surgery were not performed.

**REMEMBER**

- The first five (5) nodule cases must be submitted within 3 months of passing the CCE. Failure to comply with this submission schedule will result in loss of eligibility to continue with the VCP process.
- Doppler images as described above (Black & White acceptable) **MUST** accompany each thyroid nodule, parathyroid adenoma, malignant lymph node and Hashimoto’s Thyroiditis cases. Doppler image is **not** required for UGFNA.
- In accordance with HIPAA regulations, all patient identifying information **must** be removed from the images and/or reports, prior to submission to the AACE/ECNU office. Patient identifying information includes name, address, phone number, birth date, and social security number. Images and reports with patient identifying information **will not** be accepted and will be returned to the candidate unprocessed.
- Any reports or images submitted without dates will be returned.
- If reports are in a language other than English, a **TYPED** English translation is to accompany the original report.
- Any cytology reports that do not match the date of the ultrasound guided FNA procedure will be rejected.

**9.4. FAILURE TO MEET THE VCP INSTRUCTIONS FOR ULTRASOUND PROCEDURE REPORTS**

**IMPORTANT**

The VCP Panel will reject images and reports that do not meet the criteria specified under the Instructions for Ultrasound Procedure Reports.

The VCP Panel has the right to request additional information about images and reports that do not meet the specified criteria for grading.

The VCP package containing the rejected images will be returned ungraded, and the candidate will be asked to submit corrected images within **ninety (90) days** of receipt of the rejected VCP package.

If the candidate does not submit the images within ninety (90) days, or still does not pass the VCP after resubmission of corrected images, he/she may complete the entire VCP again (including payment of fees and submission of all reports), provided that the candidate completes the certification process **within the required twelve (12) month period** after notification of successfully completing the CCE.
9.5. ATTESTATION OF ULTRASOUND PROCEDURES

A signed attestation form must be submitted documenting the total number of US examinations and UGFNA procedures performed in the twelve (12) month period preceding submission of the required images and reports according to the following:

- Minimum of 100 total US studies (70 diagnostic; 30 UGFNA) if performed under the supervision of an ECNU-qualified physician.
- Minimum of 125 total US studies (88 diagnostic; 37 UGFNA) if performed without the supervision of an ECNU-qualified physician.

The ECNU Certification Committee reserves the right to request additional information if needed (e.g. billing statements).

A verification process will be performed through the random selection of candidates testing for ECNU certification each year. The verification process is structured to be in compliance with HIPAA regulations. Selected individuals will be required to submit the following for review by the Certification Council:

1. Imaging logs (including date of service and type of exam)
2. Code-specific billing statements or chart notes/reports to verify the total number of exams performed and specific types of exams performed.
3. Validation by an office manager with a notarized signature to attest that all information is accurate.

9.6. SUBMISSION OF VCP REQUIREMENTS

VCP Application and cases can be submitted online at https://www.aace.com/ecnu at the VCP Submission tab. This tab will allow you to complete an online application, submit the appropriate application fee and provide the option of uploading your cases in PowerPoint®.

- **Part 1:** (Due within 3 months of passing the CCE)
  - Cases 1-5: Thyroid Nodule US

- **Part 2:** (Due within 12 months of passing the CCE)
  - Cases 6-7: Parathyroid Adenoma
  - Cases 8-9: Malignant Lymph Node
  - Case 10: Hashimoto’s Thyroid Case
  - Cases 11-15: UGFNA of Thyroid Nodules

Cases 1-5 must be contained in one (1) complete package.
Cases 6-15 must be contained in one (1) complete package.

- PLEASE utilize the ECNU VCP PowerPoint® submission blanks available for both Part 1 and Part 2 under the download tab at https://www.aace.com/ecnu.

If your VCP package is missing any of the required components, it will not be graded.

**IMPORTANT**

A complete VCP package must include:

- **A. Completed/signed VCP Form** (see Appendix section)
  - Section 1: Candidate Information
  - Section 2: VCP Payment
  - Section 3: Attestation of Ultrasound Procedures

- **B. Required Cases with accompanying patient and cytology reports are accepted in PowerPoint® format only, but can be submitted by online submission or via USB Flash Drive/CD. Images or reports submitted on paper will not be accepted and will be returned to the candidate ungraded.**
9.7. NOTIFICATION OF RESULTS

Upon successful completion of the VCP, you will receive your official notification of certification via postal mail approximately six (6) to eight (8) weeks after submission of your completed VCP package.

The AACE confidentiality policy ensures that candidate VCP results are held confidential; therefore, results CANNOT be given out over the telephone. PLEASE DO NOT CALL OR E-MAIL THE AACE OFFICE FOR THIS INFORMATION.

9.7.1 CORRECTIONS OR ADDITIONAL INFORMATION REQUIRED FOR REVIEW PROCESS

If corrections are requested by review panel or additional information is needed to complete the review process, candidates will be granted 90 days to make the corrections or submit the additional information.

If corrections or additional information does not meet specified submission criteria, the entire case may be subject to rejection by the review panel.

Review process cannot exceed 15 months following receipt of passing score report.

9.8. APPEAL OF REVIEW DECISION

All appeals regarding case submission review(s) must follow these procedures:

- Appeals must be filed within 10 business days of receipt of the final review.
- Certification Manager will acknowledge receipt of the appeal letter within 3 business days of receipt from candidate.
- The ECNU Certification Committee will review the appeal letter, and a response will be forwarded within 15 business days of receipt of the appeal letter. The response will outline the reasons for the approval/denial of the request.
- The decision on the appeal by the ECNU Certification Committee will be final.

Please send appeal letter to:
Nickie Mizell
ECNU Certification Manager
American Association of Clinical Endocrinologists
245 Riverside Avenue, Suite 200
Jacksonville, FL 32202

IMPORTANT
Ultrasound images and reports submitted for the VCP will not be returned to the candidate. The AACE/ECNU office will archive the images and reports for a period of six (6) months. After that time, all submitted images and reports will be destroyed.
Failure to Complete the Certification Process
X. FAILURE TO COMPLETE THE CERTIFICATION PROCESS

It is the sole responsibility of the candidate to submit all VCP requirements and supporting documentation in order to complete the certification process.

Upon **written notification** of successful completion of the CCE, candidates are given 12-months to complete the ECNU Program (3 months - Part 1, 12 months - Part 2). The Committee will no longer grant extensions to this 12-month time frame required for completing the Validation of Competency Process.

The 12-month timeframe begins upon the candidates’ receipt of their score reports. The 12-month timeframe does not begin on the date that candidates took the examination at a Prometric™ test center.

**Example:** The CCE was taken on December 3, 2018 and the score report was received on December 31, 2018. The deadline for VCP Part 1 (5 nodule cases) will be April 2, 2019. VCP Part 2 submission deadline will be December 31, 2019.

**IT IS RECOMMENDED THAT BOTH PARTS OF THE VCP BE SUBMITTED AT THE CANDIDATE’S EARLIEST CONVENIENCE.**

Failure to complete PART 1 within 3 months and the entire certification process within the required **twelve (12) month period** after notification of successfully completing the CCE may result in the loss of certification eligibility, and the individual must reapply for the ECNU Program and pay the required fees.

**MEDICAL OUT-OF-OFFICE CIRCUMSTANCES**

In the event a candidate experiences an extended time out of the office due to a medical hardship that prevents a candidate from performing ultrasounds, candidates can submit a request for a short extension to complete the VCP process. Medical extension requests will be considered on a case-by-case basis. A candidate seeking a medical extension will be required to provide information to document the medical situation.
Recertification
XI. RECERTIFICATION

11.1 BACKGROUND

The American Association of Clinical Endocrinologists (AACE) represents subspecialty physicians who are recognized for their expertise in the care of patients with thyroid and parathyroid diseases. These clinicians routinely perform consultations and diagnostic evaluations for patients with thyroid and parathyroid disorders, which include both diagnostic ultrasonography (US) and ultrasound-guided fine needle aspiration (UGFNA). The American College of Endocrinology (ACE), which is the scientific arm of AACE, recognizes that the certification process for US and UGFNA provides assurance for optimal quality in patient treatment outcomes.

This handbook has been developed to provide you with the information you will need to apply for ECNU recertification. AACE recognizes the responsibility you take in participating in this re-certification program, and it is our aim to provide you with a smooth and positive application process.

If you have further questions after reading this Handbook, please contact the Certification Manager via e-mail nmizell@aace.com or phone (904) 353-7878, ext. 145. You can also visit the ECNU site at https://www.aace.com/ecnu.

11.2 PATHWAY TO PHYSICIAN RECERTIFICATION

Recertification is required at ten (10) year intervals effective as of the date of ECNU certification. Recertification requires documentation of both continuing clinical activity in diagnostic US and UGFNA procedures and maintenance of high level skills in this activity.

To complete the recertification process, the candidate must complete the following:

1. Perform on average at least 100 diagnostic thyroid US examinations and/or UGFNA procedures annually (at least 30 of the total 100 must be USGFNA).

2. Provide written attestation of compliance with 11.2.1 (above) and to the total number of diagnostic US examinations and UGFNA procedures performed within the twelve (12) months preceding the recertification process.

3. Present documentation verifying the completion of a minimum of 50 CME hours of ECNU approved AMA recognized Category 1 CME in ultrasound performed during the prior ten year interval. Documentation must be in the form of certificates or letters issued by the accrediting organization.

   **Note:** ECNU approved course subjects for CME credit include: thyroidology, parathyroidology, thyroid and parathyroid cancer, advanced procedures (interventional ultrasonography, PEI, etc.), Doppler applications in neck ultrasound and vascular ultrasonography.

   See https://www.aace.com/ecnu for CME Courses approved for approved recertification CME courses available.

4. Submit the images and US reports for 5 diagnostic ultrasounds performed within the 12 months preceding recertification for which FNA biopsy was performed.
It is the sole responsibility of the candidate to successfully complete the requirements for a ten (10) year ECNU Recertification Certificate. Failure to complete the recertification process at each ten (10) year interval will result in revocation of the ECNU certification.

During any 10-year recertification cycle, it is the responsibility of a certificate holder to maintain a current address and contact information with the AACE/ECNU office. Changes to a certificate holder’s professional information will be updated regularly in the AACE/ECNU Certification Registry.

11.2.1 WHEN TO BEGIN THE RECERTIFICATION PROCESS

The ECNU Recertification process must be completed prior to the recertification date listed on the formal ECNU Certification Letter and Certificate. This process includes the submission of required CME documentation, 5 case submissions, and the successful completion of case reviews.

ECNU Certified physicians can begin the recertification process up to 2 years prior to their recertification due date. If the ECNU certified physician completes the recertification process 2 years prior to the original recertification due date, the new recertification date will remain at 10 years from the original recertification expiration date. This will extend the length of time for the recertified physician to gather the 50 hours of approved ECNU recertification CME for the new certification period.

For example: If a physician is due for recertification by January 1, 2020, but recertifies by January 1, 2019, the new recertification would expire on January 1, 2030 giving the ECNU certified physician 11 years to gather the 50 hours of required approved CME.

11.3 RECERTIFICATION FEES

AACE Member: $450
Non-AACE Member: $650

◊ Full payment must be submitted with ultrasound reports and completed Recertification Application Form. Reports will not be graded until the fee has been received by the Certification Manager. Do not send advance payment for Recertification.

◊ Complete the Recertification payment found in Section 2 of the Recertification Application Form. If paying by check, please make checks payable to the American Association of Clinical Endocrinologists (AACE).

11.4 INSTRUCTIONS FOR SUBMITTING RECERTIFICATION CASES FOR REVIEW

11.4.1 GENERAL INSTRUCTIONS

Ultrasound examinations may be performed by either the ECNU-qualified physician or by an ARDMS-certified sonographer under the direct supervision of the ECNU-qualified physician candidate. Although the static images may be obtained by the physician or ARDMS-certified sonographer, it is mandatory that the physician candidate participate in and view the images in real-time ultrasound. The physician candidate must also author the ultrasound reports and personally perform the USGFNAs that are submitted for review.

Again, without exception, the physician candidate must author the ultrasound reports.
11.4.2 FORMAT FOR IMAGES AND REPORTS

Ultrasound images and reports submitted for evaluation must be technically acceptable, properly annotated, and submitted in CD, USB Flash Drive or online download of stored images in PowerPoint® format only. Images and reports submitted on paper will not be accepted, and will be returned to the candidate ungraded. All submitted ultrasound examinations must be in accordance with the Recertification Instructions for Ultrasound Procedure Reports. Please utilize the ECNU PowerPoint® submission blank available under the download tab at https://www.aace.com/ecnu.

**IMPORTANT**

In accordance with HIPAA regulations, all patient identifying information must be removed from the images and/or patient and cytology reports, prior to submission to the AACE office. Patient identifying information includes name, address, phone number, birth date, social security number and medical record number. Images and reports with patient identifying information will not be accepted and will be returned to the candidate unprocessed.

11.4.3 WHAT TO SUBMIT

A total of five (5) separate thyroid nodule ultrasound cases for which you performed a complete diagnostic thyroid and FNAB along with the corresponding reports, using a different patient for each case. These must include the criteria for Thyroid Diagnostic US reports outlined in 4.5.1 in the Recertification manual and the corresponding cytology report for each nodule biopsied.

A total of five (5) separate US cases and reports, using a different patient for each case. These must include:

- Five (5) diagnostic nodule cases for which FNA biopsy was performed (see submission guidelines).

**IMPORTANT**

All images and reports must be submitted in PowerPoint® format. Paper images or reports will NOT be accepted.

All original reports must be scanned as they would appear in the patient records and must be HIPAA compliant. If reports are in a language other than English, a Typed English translation is to accompany the original report.

Reports that have been cut and pasted and are not in their original format will be returned.

All images and reports, including cytology, must contain the original date(s) the examination or procedure was performed. All cytology reports must have corresponding dates to ultrasound guided FNA procedure reports.

All ultrasound reports must be in a narrative form!

Cases not submitted in this format will be returned.

Computer/ultrasound machine-generated reports will be returned.
11.4.4 HOW TO LABEL/FORMAT VCP SUBMISSION

Each slide in your PowerPoint® submission and each corresponding image must be labeled in the manner listed below. All cytology reports must also be labeled. Recertification packages that are not labeled in this required format will be returned to the candidate. All images and corresponding reports must contain an original, corresponding date. By complying with the following instructions, the VCP package can be graded in a timely fashion.

The submission of the cases should be a single and continuous PowerPoint® presentation labeled as follows:

- **Cases 1-5:** Diagnostic thyroid Nodule US for which FNA biopsy was performed.

Each case study in the PowerPoint® presentation should start with the ultrasound report, followed by the cytology reports and then the corresponding images.

Images should be submitted for each case with **one (1) image per slide.**

**PLEASE NOTE THAT THE ECNU CERTIFICATION PANEL HAS THE RIGHT TO REJECT IMAGES THAT ARE JUDGED TO BE OF INADEQUATE QUALITY.**

Each slide associated with the required case study should be clearly labeled in the header with the case number and descriptor. Utilize the ECNU PowerPoint® submission blank available under the download tab at [https://www.aace.com/ecnu](https://www.aace.com/ecnu).

For example: Page 1 of your report is on Thyroid Nodule US, make sure you label the top page as follows: **Case 1: Thyroid Nodule US**

**PLEASE utilize the ECNU PowerPoint® submission blank available under the download tab at [https://www.aace.com/ecnu](https://www.aace.com/ecnu).**
11.4.5 WHAT INFORMATION TO INCLUDE IN ALL REPORTS

While some may use a checklist to record ultrasound features, the Ultrasound Reports must:

- Be a separate document and be able to stand alone from any other documentation (specifically should NOT be embedded in progress notes or other reports/notes/documentation).
- Be in a narrative form, not computer generated or in check-box formatting.
- Be concise and contain all pertinent positive and negative findings.

Reports and accompanying cytology reports must:

- Be typed. Hand written reports are not acceptable.
- Be in English. If reports are in a language other than English, a typed English translation is to accompany the original report.
- Contain an original date, corresponding to the date of the FNA biopsy.

**IMPORTANT**

All reports and images must be submitted in such a way that the reviewer should not be required to zoom or enlarge the slides in order to make them viewable for grading.

**PLEASE NOTE THAT THE ECNU REVIEW PANEL HAS THE RIGHT TO REJECT IMAGES THAT ARE NOT CLEAR.**

All reports must be copies of the original report as submitted to the patient record, and contain the following information:

- The indication for performing the exam.
- Measurement of each thyroid lobe and isthmus (Anterior-Posterior). The preferred measurement listing order for ECNU VCP reports is: Longitudinal/Sagittal x AP x Transverse. If this order is not used, the order of the measurements must be specified on the report.
- A diagnostic impression or differential diagnosis.
- Disposition/plan indicating specifically what is to be done with the information obtained from the US (e.g., surgery, follow-up in six months, FNA, etc.). Terms like “Clinical correlation recommended” are NOT acceptable.
- Signature of the physician (Electronic signature is acceptable)
- Original date(s) the examination or procedure was performed, with corresponding dates on cytology report.

For additional examples of reports and a full ECNU sample submission, an ECNU Resource CD can be requested from the ECNU Certification Manager at nmizell@aace.com.
11.5 SCORING PROCEDURES AND CONTENT CRITERIA FOR REPORTS AND IMAGES

Certification status will be determined on a pass/fail basis. In addition to the requirements listed for all Ultrasound Reports, there are additional requirements for the recertification studies. These are listed below.

All reports will be reviewed by the ECNU Validation Panel and will be graded according to the following criteria. Points will be deducted from images and reports missing the required information.

11.5.1 THYROID DIAGNOSTIC US REPORTS: Five (5) nodules required

Report Requirements:

Thyroid Nodule Diagnostic US reports must contain the following information:

1. Indication for performing examination
2. Measurement of each thyroid lobe & isthmus (Anterior-Posterior). The preferred measurement listing order for ECNU reports is Longitudinal/Sagittal x AP x Transverse. If this order is not used, the order of the measurements must be specified on the report.
3. Description of thyroid parenchyma (homogeneous, heterogeneous, fibrosis, pseudonodules, etc.)
4. Evaluation of nodules
   a. Describe echogenicity of nodule(s) (solid/cystic, hypoechoic/hyperchoic, homogeneous/heterogeneous)
   b. Description of nodule margins (irregular, smooth, halo, invasion, etc.)
   c. Narrative description and grade of Doppler flow within the nodule
      For example:
      • Grade 1 (absent) Doppler flow is seen.
      • Grade 2 (peripheral) Doppler flow is seen.
      • Grade 3 (penetrating) Doppler flow is seen.
      • Grade 4 (chaotic) Doppler flow is seen.
      Note: Doppler grades are in Arabic numbers, not Roman numerals
5. Description and characterization of any abnormal findings on each nodule
   a. Calcifications (presence or absence of)
   b. Cysts-Description (simple, complex, mural components)
   c. Comet tail artifact
   d. Posterior Acoustic Enhancement (if relevant)
6. Comment regarding presence or absence of cervical nodes and description of characteristics if present.
7. Description of target lesion including location
8. Cytology report showing adequate cells
9. Diagnostic impressions based on cytology report
10. Recommendations for additional studies, procedures or treatment provided

Images required (total of at least 15 images required for each case):

1. Thirteen (13) standard images of the thyroid gland as required in the 2013-AIUM PRACTICE GUIDELINE – Thyroid and Parathyroid Ultrasound (http://www.aium.org/resources/guidelines/thyroid.pdf) including:
   • Images of each thyroid lobe present in longitudinal and transverse planes
     o Transverse images of the superior, mid and inferior portions of
each lobe. These should be clearly labeled:

- RIGHT-TRANS-SUP
- RIGHT-TRANS-MID
- RIGHT-TRANS-INF
- LEFT-TRANS-SUP
- LEFT-TRANS-MID
- LEFT-TRANS-INF

- Longitudinal images of the medial, mid, and lateral portions each lobe present. These should be clearly labeled:
  - RIGHT-LONG-LAT
  - RIGHT-LONG-MID
  - RIGHT-LONG-MED
  - LEFT-LONG-LAT
  - LEFT-LONG-MID
  - LEFT-LONG-MED

- AP image of isthmus

2. Provide Doppler image

3. Image marked clearly showing needle bevel in target (use of an arrow in PowerPoint® is acceptable.) Note: This image must match the date of cytology but is not required to be the same date as the diagnostic report/images above.

**IMPORTANT**
At least one (1) Doppler image (Black & White acceptable) **MUST** accompany each thyroid nodule case.

**REMEMBER**
- Doppler images as described above (Black & White acceptable) **MUST** accompany each thyroid nodule. Doppler images need not be repeated for USGFNA.
- In accordance with HIPAA regulations, all patient identifying information **must** be removed from the images and/or reports, prior to submission to the AACE/ECNU office. Patient identifying information includes name, address, phone number, birth date, and social security number. Images and reports with patient identifying information **will not** be accepted and will be returned to the candidate unprocessed.
- **Any reports or images submitted without dates will be returned.**
- If reports are in a language other than English, a **TYPED** English translation is to accompany the original report.
- **Any cytology reports that do not match the date of the ultrasound guided FNA procedure and the image of the needle bevel in target will be rejected.** (Note: Diagnostic images/report can be performed on day of or on a date prior to the USGFNA).

**11.5.2 FAILURE TO MEET THE RECERTIFICATION SUBMISSION INSTRUCTIONS FOR ULTRASOUND PROCEDURE REPORTS**

- The Review Panel will reject images and reports that do not meet the criteria specified under the Instructions for Ultrasound Procedure Reports.

- **The Review Panel has the right to request additional information about images and reports that do not meet the specified criteria for grading.**
The Recertification package containing the rejected images will be returned ungraded, and the candidate will be asked to submit corrected images within **ninety (90) days** of receipt of the rejected Recertification package.

If the candidate does not submit the images within ninety (90) days, or still does not pass the Recertification review after resubmission of corrected images, he/she will be required to complete the entire ECNU Certification process again (including payment of fees and submission of all reports).

### 11.6 ATTESTATION OF ULTRASOUND PROCEDURES

A signed attestation as to the number of US examinations and UGFNA procedures performed on average over the last 10 years and specifically in the twelve (12) month period preceding submission of the required images and reports meeting the following requirements:

- An average of 100 total ultrasound studies annually of which at least 30 were USGFNA. Studies performed by fellows may be included if the candidate was the preceptor during the study/procedure and signed the report.

The ECNU Certification Committee reserves the right to request additional information if needed (e.g. billing statements).

A verification process will be performed through the random selection of candidates testing for ECNU certification each year. The verification process is structured to be in compliance with HIPAA regulations. Selected individuals will be required to submit the following for review by the Certification Council:

- Imaging logs (including date of service and type of exam)
- Code-specific billing statements or chart notes to verify the total number of exams performed and specific types of exams performed.
- Validation by an office manager with a notarized signature to attest that all information is accurate.

**IMPORTANT**

**A complete recertification package must include:**

**A. Completed/signed VCP Form** (see Appendix section)
- Section 1: Candidate Information
- Section 2: Recertification Application Fee Payment
- Section 3: Attestation of Ultrasound Procedures

**B.** Required Cases with accompanying patient and cytology reports are accepted in PowerPoint® format only, but can be submitted by online submission or via USB Flash Drive/CD. Images or reports submitted on paper will not be accepted and will be returned to the candidate ungraded.

Recertification Submissions can be submitted online at [https://www.aace.com/ecnu](https://www.aace.com/ecnu) at the Recertification Submission tab

or

Manual applications and examination fees can be mailed or faxed to:

Nickie Mizell, ECNU Certification Manager
American Association of Clinical Endocrinologists
245 Riverside Avenue, Suite 200
Jacksonville, FL 32202
Fax: (904) 404-4205
11.7 FAILURE TO COMPLETE THE RECERTIFICATION PROCESS

It is the sole responsibility of the candidate to submit all recertification requirements and supporting documentation in order to complete the certification process.

11.8 CONTACT INFORMATION

QUESTIONS, CHANGE OF ADDRESS OR NAME CHANGE
Please contact the ECNU Certification Manager for questions regarding the ECNU Program or if you have an address or name change after submission of your application

Nickie Mizell
ECNU Certification Manager
American Association of Clinical Endocrinologists
245 Riverside Avenue, Suite 200
Jacksonville, FL 32202
E-mail: nmizell@aace.com
Phone: (904) 404-4145
Fax: (904) 404-4205
Application Instructions

Contact Information
XII. APPLICATION INSTRUCTIONS

Complete the ECNU Application Form (see Appendix section). The form is also available for download at www.aace.com/ecnu during the open application period.

General Instructions:
- Please type or handwrite applications in a legible manner. If application is incomplete or illegible, it will be returned to the applicant and will cause a delay in processing.
- All application materials and required documents must be sent to AACE before the given deadline.
- The application review process cannot be conducted by AACE until all components of the application and associated documentation and fees have been received.

Itemized Instructions:
The following provides detailed instructions for each section on the application:

Section 1: Candidate Information (Please read carefully)
- Name – Please print your name as it appears on your Driver’s License or photo ID. This name will be used in your Authorization to Test (ATT) letter.
- AACE Membership Number (If applicable)
- Home Address – All correspondences from AACE, including the Authorization to Test (ATT) letter, will be sent to this address. This address must match your driver’s license.
- Phone/Fax/E-mail – Include city and country and city codes on phone and fax numbers. Please print clearly.
- Organization/Company – Please name the organization/company of your primary practice setting (where you spend the most time per week).
- Job Title – Please specify your current position or job title in the above organization/company (e.g. Associate Professor, Clinical Director, etc.).
- Special Testing Accommodations (STA) Request: please see Appendix section for the STA Request form. If applicable, complete and submit this form with your application.

Section 2: Attestation of Ultrasound Studies – It is important that you read and understand the attestation statements before signing.
  3.1. Must be completed by Routes 1, 4, 5, 6, and 7 applicants
  3.2. Must be completed by Route 3 applicants

Section 3: Continuing Medical Education (CME) Credits – Please list the Thyroid Ultrasound Courses that you have attended prior to submitting your application. Candidates must have at least 15.0 hours of AMA PRA Category 1 Credits™ obtained from one or multiple thyroid ultrasound courses within the past 3 years prior to applying to the ECNU Program. Copy/copies of CME certificate(s) and/or letters from accrediting organization(s) must be submitted with your application. Refer to Appendix III for full explanation of required CME credits.

Section 4: Candidate Attestation Statement – Please note that ECNU reserved the right to request imaging logs, billing reports, copies of studies, etc. for verification.

Section 5: Candidate Confidentiality Agreement – Please read and understand the declaration statements before signing.

Section 6: Application Payment – The appropriate fee must be sent with the application. The application will not be processed until payment has been received. Application fee is non-refundable if complete application and required documentation are not received by the application deadline.
Section 7: Submitting Your Application – If submitting via paper application, please mail the application and supporting documentation to the address provided. It is highly recommended that the application package be sent via USPS certified mail, or via a traceable mailing method (i.e. Fed Ex, UPS). If submitting via the online application, please fax all supporting documentation (CME certificate, log sheet, etc.) to the ECNU Certification Manager at (904) 404-4205.

XIII. CONTACT INFORMATION

QUESTIONS, CHANGE OF ADDRESS OR NAME CHANGE
Please contact the ECNU Certification Manager for questions regarding the ECNU Program or if an address or name change is needed after submission of your application

Nickie Mizell
ECNU Certification Manager
American Association of Clinical Endocrinologists
245 Riverside Avenue, Suite 200
Jacksonville, FL 32202
E-mail: nmizell@aace.com
Phone: (904) 404-4145
Fax: (904) 404-4205
Taking the Next Step – AIUM Practice Accreditation
XIV. TAKING THE NEXT STEP – AIUM PRACTICE ACCREDITATION

Earning the ECNU credential demonstrates the candidate’s commitment and competence in providing high quality care for patients with thyroid and parathyroid disorders. The American Institute of Ultrasound in Medicine (AIUM) practice accreditation provides any physician performing ultrasound services the opportunity to confirm meeting nationally recognized standards in the performance and interpretation of diagnostic ultrasound through its Ultrasound Practice Accreditation.

14.1. BACKGROUND

The AIUM strives to continuously improve the quality of diagnostic ultrasound services by offering ultrasound practice accreditation. AIUM ultrasound practice accreditation is a voluntary peer review process that allows practices to demonstrate that they meet or exceed nationally recognized standards in the performance and interpretation of diagnostic ultrasound examinations. The accreditation process encourages providers of diagnostic ultrasound services to assess their strengths and weaknesses and initiate changes to improve their practices.

Practices accredited by the AIUM have demonstrated competency in every aspect of their operation, including:

- Personnel Education, Training, and Experience
- Document Storage and Record Keeping
- Policies and Procedures Safeguarding Patients, Ultrasound Personnel, and Equipment
- Instrumentation
- Quality Assurance
- Case Studies

Diagnostic medical ultrasound makes important contributions to patient care and may be used in a variety of settings. Ultrasound practice accreditation is designed to set a standard of quality for the performance of basic ultrasound procedures. These Standards and Guidelines for the Accreditation of Ultrasound Practices specify minimum training, experience, credentialing, and continuing medical education requirements for medical staff and personnel who perform and interpret diagnostic ultrasound examinations. Furthermore, these Standards specify the requirements for safety, maintenance, and calibration of equipment, staff performance, reports, record keeping, and quality assurance for clinical practices where studies are performed.

Dedicated Thyroid/Parathyroid Ultrasound is one of the specialties eligible for ultrasound practice accreditation. The completed application and supporting documents are reviewed by the AIUM’s Ultrasound Practice Accreditation Program’s peer reviewers. Reaccreditation is required every 3 years.
14.2. WHY SEEK AIUM PRACTICE ACCREDITATION?

- Exhibit commitment to clinical excellence
- Display commitment to the highest quality patient care.
- Provide credibility to peers and patients.
- Demonstrate that the accredited practice meets the quality assurance requirements of a growing number of insurance companies.
- Meet the reimbursement eligibility requirements of a growing number of insurers.
- Your competitors are accredited... why not you?

14.3. WHY APPLY FOR AIUM PRACTICE ACCREDITATION SOON AFTER EARNING YOUR ECNU CREDENTIAL

Practices applying for AIUM accreditation in thyroid/parathyroid ultrasound for the first time are eligible for a discounted accreditation fee, and are not required to submit case studies if the person designated as the physician director of ultrasound received ECNU certification within the previous 12 months. Practices that do not meet these requirements, and practices that are applying for reaccreditation are not eligible for the case study exemption or the discount.

Take advantage of this opportunity to fast-track the AIUM application process.

14.4. HOW TO APPLY FOR AIUM’S ULTRASOUND PRACTICE ACCREDITATION

The AIUM’s ultrasound practice accreditation will include demonstration of provider’s competency in every aspect of its operation, including education and training of physicians and sonographers, ultrasound equipment maintenance, document storage, policies safeguarding patients and personnel, and accuracy in diagnosis. For more information regarding the AIUM’s accreditation process, see: http://www.aium.org/accreditation/accreditation.aspx
Appendices
APPENDICES

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Please note that the forms provided with this handbook can also be downloaded from the AACE website.
Please visit https://www.aace.com/ecnu.
Appendix I

AACE Glossary of Ultrasound Terminology
APPENDIX I
ECNU Glossary of Ultrasound Terminology

Acoustic Impedance
Product of density and velocity of sound in a particular material. The amount of reflection of a sound beam is determined by the difference in the impedances of the two tissues. ¹

Acoustic Power
Quantity of energy generated by the transducer, expressed in watts. Also transmit power. ¹

Acoustic Scattering
Reflections from small objects that are the size of the wavelength or smaller. ²

Acoustic Shadow
Loss of echo signals from distal structures due to attenuation of overlying structures. ²

Acoustic Velocity
The speed of sound through a medium as determined by the stiffness and density of the medium. Also: speed of sound; propagation speed; sound velocity. ³

Aliasing
A technical artifact occurring when the frequency change is so large that it exceeds the sampling view and pulse repetition frequency. The frequency display wraps around so that the signal is seen at both the top and bottom of the image. ¹

Amplitude
Strength or height of the wave, measured in decibels. ¹

Amplitude mode (A-mode)
A one-dimensional image displaying the amplitude strength of the returning echo signals along the vertical axis and the time (the distance from the transducer) along the horizontal axis.¹

Anechoic
Refers to a structure that returns no echoes. This could be a simple cyst or cystic structure such as the gall bladder, urinary bladder, or chambers of the heart. Also, sonolucent, echo-free, echolucent, transonic. ⁴

Attenuation
Reduction in amplitude and intensity with increasing distance traveled due to scatter, reflection and absorption. Dependent on frequency; higher frequencies give less penetration. ²

Axial Resolution
Depth resolution; ability to separate two objects lying in tandem along the axis of the beam. ²

Azimuthal
The dimension perpendicular to the image slice, the thickness of the slice of anatomy. ⁵
APPENDIX I
ECNU Glossary of Ultrasound Terminology Continued

Bandwidth
The frequency range represented in a pulse from the transducer; *quality factor*. ²

B-Scan
A two-dimensional cross-sectional image displayed on a screen in which the brightness of echoes and their position on the screen are determined by the movement of a transducer and the time it takes the echoes to return to the transducer. *Also static scan*. ¹

Cineloop
The system memory stores the most recent sequence of images in a series of frames before the freeze button is pressed allowing a continuous loop of images to be reviewed. ¹

Color Flow Doppler
Operating mode in which a two-dimensional image is generated that portrays moving reflectors in color simultaneously with B-mode images. ²

Complex
Refers to a structure that is heterogeneous and may contain both cystic (fluid-filled) and solid components. ¹

Compression
Regions of high pressure and density as sound travels through a medium. ⁶

Crystal
The active transducer component that actually generates and receives ultrasonic energy by converting electrical impulses into sound waves and vice versa. ¹

Cystic
A sac or pouch with a definite wall that contains fluid or semisolid material ⁷

Decibel (db)
A unit used to express the intensity of amplitude of sound waves; does not specify voltage. ¹

Density
Concentration of matter (mass per unit volume). ⁶

Doppler Shift
The perceived frequency change that occurs dependent upon whether the source and listener are moving toward or away from one another. ²

Dynamic Range
(Log Compression). The range of intensity from the largest to the smallest echo that the system can display. ⁸

Echo
Reflected sound. ³
APPENDIX I
ECNU Glossary of Ultrasound Terminology Continued

Echogenic
Capable of producing echoes. Correlate with the terms hyperechoic, hypoechoic and anechoic which refer to the quantity of echoes produced. ⁹

Echopenic
Few echoes within a structure; less echogenic. Echo-poor. ¹

Echolucent
Without internal echoes; anechoic. ¹

Edge Enhancement
An electronic postprocessing function which makes contours of structures within the image more distinct and clear. ⁴

Electronic Focusing
Each crystal element within a group is pulsed separately to focus the beam at a particular area of interest. ¹

Enhancement
Because sound traveling through a fluid-filled structure is barely attenuated, the structures distal to a cystic lesion appear to have more echoes than neighboring areas. Also called through transmission. ¹

Far Gain
Control that affects the strength of the distant echoes in the image. ¹

Focal Zone
The depth of the sound beam where resolution is the highest. ¹

Focusing
The act of narrowing the beam to a small width at a set depth. ¹

Footprint
Shape of the transducer that is in contact with the patient. ¹

Frame rate
Rate at which the image is refreshed in a real-time system display.¹

Frequency
The number of times in a given interval of time that a particular action occurs. ¹

Gain
Regulates the amplification (brightness) of returning echoes to compensate for loss of transmitted sound caused by absorption and reflection. ¹
APPENDIX I
ECNU Glossary of Ultrasound Terminology Continued

Gray Scale
Display mode in which echo intensity is recorded as degrees of brightness or shades of gray.  

Hertz
Unit for wave frequency (cycles per second); pulse repetition frequency (pulses per second); frame rate (frames per second).  

Heterogeneous
Refers to an uneven echo pattern or reflections of varying echodensities.  

Homogeneous
Refers to an even echo pattern or reflections that are relative and uniform in composition.  

Hyperechoic
A relative term that refers to the echoes returned from a structure. Hyperechoic refers to a lesion or tumor which produces a stronger echo than surrounding structures or tissues.  

Hypoechoic
Refers to structures that contain fewer or weaker echoes than surrounding tissues.  

Interface
Surface forming the boundary between media having different properties.  

Isoechoic
Refers to a lesion or tumor which produces an echo of the same strength as that of the surrounding structures or tissues.  

Kilohertz
1000 hertz or $10^3$ cycles/s  

Lateral Resolution
Ability to separate two objects that are positioned perpendicular to the axis of the ultrasound beam. Related to beam width.  

Linear Array
Many small electronically coordinated transducers producing a rectangular image.  

Megahertz (MHz)
1,000,000 hertz  

Near Gain
The amplification of echoes returning from the near field.  

Noise
Artifactual echoes resulting from too much gain rather than echoes from true anatomic structures.  

American Association of Clinical Endocrinologists • Jacksonville, FL
Overall Gain Control
Single gain control that increases amplification at all depths. ²

Phased Array
Electronically steered system where many small transducers are electronically coordinated to produce a focus wave front. ¹

Piezoelectric Effect
Electric current created by pressure forces. Certain types of ceramic materials can convert pressure to electricity and vice versa. Transducer elements utilize this phenomenon, which is also referred to as piezoelectricity. ⁴

Persistence
The accumulation of echo information over a specified period of time. ¹

Power Doppler
The presentation of two-dimensional Doppler information by color-encoding the strength of the Doppler shifts. Power Doppler is free of aliasing and angle dependence and is more sensitive to slow flow and flow in small or deep vessels. ⁶

Pulse-echo Principal
Sending pulses of ultrasound into the body so that they react with tissue and return reflections. ²

Pulse Repetition Frequency (PRF)
The number of times per second that a transmit-receive cycle occurs. ⁶

Refraction
Bending of waves as they pass from one medium to another. ²

Resolution
Ability to distinguish between two adjacent structures (interfaces). ¹

Reverberation
The phenomenon of multiple back-and-forth reflections created by two strong reflectors that causes the echoes to be misplaced in the display thereby representing a false image; ring-down effect. ²

Scattering
Redirection of ultrasound from a reflector which is small compared to the wavelength of the beam. This occurs with rough surfaces or heterogeneous substances such as a solid organ. ⁴

Shadowing
Failure of the sound beam to pass through an object. ¹

Slice thickness
Elevational resolution. The size of the beam perpendicular to the image plane. ²
APPENDIX I
ECNU Glossary of Ultrasound Terminology Continued

Sonodense
A structure that transmits sound poorly. ¹

Spatial Resolution
How closely positioned two reflectors can be to one another and still be identified as separate reflectors on an image display. Reflector resolution. ²

Speckle
Interference effects of the scattered sound from the distribution of scatterers in the tissue that is not related to the scattering properties of tissue (echo texture). Produces granular appearance. ⁹

Specular Reflectors
Reflections from surfaces, which are smooth, compared to the wavelength of sound thereby creating a bright echo on the monitor.¹

Stiffness
Resistance of a material to compression. Hardness.⁶

Temporal Resolution
The ability of a display to distinguish closely spaced events in time and to present rapidly moving structures correctly. Improves with frame rate.⁶

Texture
The echo pattern within an organ.¹

Time Gain Compensation (TGC) or Depth Gain Compensation
Control that compensates for the loss (attenuation) of the sound beam as it passes through tissue.¹

Transducer
An electromechanical device that is part of an ultrasound system. The device that contacts the patient and converts electrical energy into mechanical energy and vice versa.²

Wavelength
Distance a wave travels in a single cycle. As frequency becomes higher, wavelength becomes smaller.¹
ECNU Glossary of Ultrasound Terminology Bibliography

2. Zagzebski, JA, Essentials of Ultrasound Physics, St. Louis, Mosby, 1996
Appendix II

Frequently Asked Questions (FAQ)
What is the ECNU Program?
ECNU stands for Endocrine Certification in Neck Ultrasound.

Endocrine Certification in Neck Ultrasound (ECNU) is a professional certification in the field of neck ultrasonography for physicians who perform consultations and diagnostic evaluations for thyroid and parathyroid disorders through both diagnostic ultrasound and ultrasound-guided fine needle aspiration (UGFNA). The ECNU credential signifies that an individual has passed the Comprehensive Certification Examination (CCE) and successfully completed the Validation of Competency Process (VCP). Successful candidates can use the ECNU designation after their names.

Why is it important that I participate in the ECNU Program?
ECNU is recognized by the American Institute of Ultrasound in Medicine (AIUM), one of the preeminent, national accreditation bodies for ultrasound practices, and allows those with the ECNU credential to be directors of ultrasound laboratories and apply for AIUM Practice Accreditation. Also, it is expected that achieving ECNU certification will become increasingly important in the future for reimbursement from Medicare and third party payors.

Who is eligible to participate in the ECNU Program?
The ECNU Program is open to both AACE and non-AACE members. The ECNU Certification Committee has established the eligibility criteria to qualify for the ECNU Program. Candidates applying for the ECNU Program may qualify through one (1) of the six (6) routes outlined on the next page, and must satisfy all requirements for the chosen route in order to be eligible for ECNU.

- **ROUTE 1:** Endocrinologists with formal training in the subspecialty of endocrinology with attainment of board eligibility/board certified status;*full time activity in the various fields of endocrinology, metabolism and diabetes as a clinician, academician, research physician or any combination of these. Documentation of board status is required.
  *Full time activity refers to full time focus, not the hours spent in practice in a day/week. For example, an endocrinologist may work part-time, but dedicates 100% of his/her activities in the various fields of endocrinology, metabolism, and diabetes.

- **ROUTE 4:** Cytopathologists with formal training in the subspecialty of cytopathology with attainment of board certified status under the American Board of Pathology (ABP). Documentation confirming board status is required.

- **ROUTE 5:** Endocrine Surgeons with formal training in the subspecialty of endocrine surgery with attainment of board certified status under the American Board of Surgery. Documentation confirming board status is required.

- **ROUTE 6:** Otolaryngologists/Head and Neck Surgeons with formal training in the diagnosis and treatment of diseases related to ear, nose and throat, and related structures of the head and neck, with attainment of board certified status under the American Board of Otolaryngology. Documentation confirming board status is required.

- **ROUTE 7:** Radiologists with formal training in the subspecialty of radiology with attainment of board certified status under the American Board of Radiology. Documentation confirming board status is required.
If applying under any of these routes (1, 4, 5, 6 OR 7), you must:

A. Have attended CME-accredited, approved basic Thyroid Ultrasound Course(s) in which you have received at least 15.0 hours of AMA PRA Category 1 Credits™ within the past 36 months prior to applying to the ECNU Program. CME hours can be obtained from one or multiple courses, and can be earned from an AACE or other organizations’ Thyroid Ultrasound Course(s). Refer to Appendix III for full explanation of required CME credits.

Copy/copies of CME certificate(s) must be submitted with the ECNU Program Application.

B. Be currently performing at least 100 ultrasound studies per year (70 diagnostic; 30 UGFNA). Studies should include parathyroid ultrasound and thyroid cancer lymph node mapping in the neck. A signed attestation is required upon application. See Attestation Statement.

C. Submit a complete ECNU Program Application. Refer to the Appendix section of this Handbook for the ECNU Program Application form and documentation requirements. This form can also be downloaded during open application period, from the AACE website: https://www.aace.com/ecnu during the open application period.

• ROUTE 3: Endocrinology fellows/trainees or endocrine surgeons in training: Physicians who have completed a minimum of one year of fellowship in endocrinology or endocrine surgery training, or who have participated in additional, post-graduate endocrinology training or research may apply for the ECNU Program with written verification of status from their program director.

If applying under this route (3), you must:

A. Have attended CME-accredited, approved basic Thyroid Ultrasound Course(s) in which you have received at least 15.0 hours of AMA PRA Category 1 Credits™ within the past 36 months prior to applying to the ECNU Program. CME hours can be obtained from one or multiple courses, and can be earned from an AACE or other organizations’ Thyroid Ultrasound Course(s). Refer to Appendix III for full explanation of required CME credits.

Copy/copies of CME certificate(s) must be submitted with the ECNU Program Application.

Note: Fellows who have attended Endocrine University® within the past 3 years may use the CME credits obtained from the Neck Ultrasound and UGFNA portion of the curriculum. If the CME credits are less than the 15-hour requirement for ECNU, additional CME hours must be provided.

B. Submit notarized, validated imaging logs (signed by program director) of at least 50 ultrasound studies (35 diagnostic; 15 UGFNA). Studies should include parathyroid ultrasound and thyroid cancer lymph node mapping in the neck. Logs submitted to the AACE Office must be HIPAA-compliant and include the following information: total number of exams performed, date of service, type of exam, location, results/diagnosis and recommendations. Logs must be submitted with the ECNU Program Application. Studies must document required participation of the candidate in interpreting the images and generating a report.

The 50 US studies must be performed prior to applying for ECNU and during the fellowship training program.

C. Submit a signed attestation confirming that you have performed at least 50 of the required ultrasound at the time of your ECNU Application, and that the remaining 50 ultrasound studies be completed within the 12-month period after passing the Comprehensive Certification Examination (CCE).

D. Submit in writing, a letter from your program director, verifying your status as an Endocrinology Fellow.
E. Submit a complete ECNU Program Application. Refer to the Appendix section of this Handbook for the ECNU Program Application form and documentation requirements. This form can also be downloaded during open application period, from the AACE website: https://www.aace.com/ecnu

Who is not eligible to participate in the ECNU Program?
Physicians who do not perform their own ultrasounds or who do not directly supervise an ARDMS-certified sonographer or author diagnostic ultrasound reports. In addition, Technologists, Nurse Practitioners, Physician Assistants, or other allied health professionals are NOT eligible to participate in the ECNU Program at this time.

Physicians who only perform ultrasound guided FNA (USGFNA) without diagnostic ultrasound are not eligible for ECNU.

I have attended an AACE Thyroid Ultrasound Course in the past. Am I considered “certified” in thyroid ultrasound if I took the AACE Thyroid Course?
No, completion of the AACE Course does not mean an individual is certified in Thyroid Ultrasound. The AACE Thyroid Course was accredited for AMA PRA Category 1 Credit™, and participants who completed the AACE Course were awarded AMA PRA Category 1 Credits™ and issued a CME credit certificate. To receive the ECNU designation, one must complete the ECNU Program.

What is the pathway to certification for the ECNU Program?
The ECNU Program is comprised of the following steps:

STEP 1: Comprehensive Certification Examination (CCE)
The CCE is a multiple choice, computer-based examination. Achieving a passing grade on the examination will entitle the candidate to continue to the Validation of Competency Process (VCP). If the candidate fails the CCE, he/she must retake and successfully pass the examination prior to continuing to the VCP. To better prepare for the examination, candidates must participate in an approved basic Thyroid Ultrasound Course (minimum of 15.0 AMA PRA Category 1 Credits™) within the past 3 years, prior to taking the CCE. Refer to Appendix III for full explanation of required CME credits.

STEP 2: Validation of Competency Process (VCP)
The Validation of Competency Process assesses the physician’s demonstrated competency, activity, and level of skills to interpret and report complete diagnostic ultrasound examinations (either performed by a supervised ARDMS-certified sonographer with real time confirmation by physician or personally by the physician), and to perform and report UGFNA procedures.

The VCP requires submission of a total of fifteen (15) ultrasound (US) studies and reports, and must be submitted in accordance to the VCP Instructions for Ultrasound Procedure Reports.

Detailed requirements and instructions regarding the validation process are outlined in the Candidate Handbook, and are available via the AACE website at https://www.aace.com/ecnu.

STEP 3: ECNU Program Completion (Issuance of ECNU Certificate and ECNU Designation)
Endocrine Certification in Neck Ultrasound (ECNU) is a professional designation awarded to individuals who meet specified knowledge requirements, measured through a standardized examination and validation of competency process in diagnostic ultrasound and ultrasound-guided fine needle aspiration (UGFNA).

- Upon successfully completing the VCP, the candidate will have earned the right to use the ECNU designation after his/her name.
- A formal letter, ECNU Certificate, and ECNU lapel pin will be sent to candidates who have successfully completed the ECNU Program.
- Certification is valid for 10 years.
What if I do not pass the CCE?
You can register to re-take the examination during another scheduled testing window. Such registration will be subject to the current guidelines and fees established by ECNU/AACE.

How many times can I sit for the CCE?
There is no limit to the number times you can sit for the CCE.

When and where can I take the CCE?
The CCE will be offered twice a year using computer-based testing (CBT), each with a two or three week testing window. It will be administered at Prometric™ testing centers located throughout the United States.

Is the examination scored immediately?
The examination scoring process can take up to six (6) weeks. After scoring is complete, the candidates will receive their score report by mail.

If the candidate passes the examination, the results will NOT include a numeric scale score. It will only contain a statement of passing. The examination is designed as a minimum competency test for credentialing purposes and is not intended to distinguish between passing scores. This policy is established as a safeguard against misuse of the examination scores by passing candidates.

If the candidate fails the examination, the results will include the total failing scale score. The failing score report will also contain diagnostic levels in each of six subscore categories based on the six content areas outlined in the Candidate Handbook.

Where can I find the study materials for the CCE?
There are no official study materials for the Comprehensive Certification Examination (CCE). Refer to the reference list found in the Candidate Handbook. The examination questions are mapped to these references.

What topics will be covered in the examination?
The examination will cover the following major topic areas:

I. Principles of Ultrasound Imaging – 15%
II. Neck Anatomy – 15%
III. Thyroid Pathology – 34%
IV. Parathyroid Pathology – 10%
V. Lymph Node Pathology – 10%
VI. Ultrasound-Guided Fine Needle Aspiration (UGFNA) – 16%

How much will it cost to participate in the ECNU Program?
The ECNU Program is comprised of two major steps – Step 1: the Comprehensive Certification Examination (CCE) and Step 2: the Validation of Competency Process (VCP). Candidates who wish to obtain ECNU designation must complete the certification program and pay the fees for both the CCE and the VCP. The fee structure for the ECNU Program is as follows:

<table>
<thead>
<tr>
<th>CATEGORY</th>
<th>CCE</th>
<th>VCP</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>AACE Member</td>
<td>$350</td>
<td>$900</td>
<td>$1,250</td>
</tr>
<tr>
<td>Non-AACE Member</td>
<td>$550</td>
<td>$1,000</td>
<td>$1,550</td>
</tr>
<tr>
<td>*Fellows In Training</td>
<td>$250</td>
<td>$800</td>
<td>$1,050</td>
</tr>
<tr>
<td>**International testing site fee</td>
<td>$200</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*NOTE FOR FELLOWS: A letter from Department Chair verifying status must accompany application. Fellow’s fees only apply if candidate is in his/her final year of fellowship program. Fellows who have completed the fellowship program will be charged the AACE Member or non-member rate, whichever is applicable at the time of application.

** INTERNATIONAL TESTING SITE FEE: For candidates who live outside of the United States, international testing sites are available if desired for an additional fee of $200.
How will the fees be collected for CCE and VCP?
Fees for CCE and VCP will be collected separately. The first payment will be for the CCE, and this must be submitted with the ECNU Program Application. VCP fees will not be collected until receipt of the official notification of successfully passing the CCE. The Validation of Competency Process (VCP) fees will be due at the time of submission of the VCP cases.

How do I apply for the ECNU Program?
Please read the Candidate Handbook (https://www.aace.com/ecnu) to learn more about the ECNU Program, and eligibility. The ECNU Program Application form can be downloaded from the AACE website during any open application period.

Applications can be submitted to online or by postal mail.
1. Paper Application
Candidates have the ability to download the paper application from the ECNU/AACE website during open application period. For reference, all forms are also included in the Candidate Handbook.

Paper applicants must include payment with the application or may use a credit card or personal check as form of payment. Please make checks payable to the American Association of Clinical Endocrinologists (AACE). Checks must be in U.S. dollars and drawn on a U.S. bank.

An application cannot be processed until all fees are paid in full. For a detailed fee structure, see the payment section of the application.

2. Online Application
The online application can be accessed at www.aace.com/ecnu under the “APPLY” tab. Applications will only be accepted during the application period. Online applicants must provide a valid (working) e-mail address that is capable of receiving e-mail from ECNU/AACE.

Note: For AACE Members utilizing the Online Application - In order to receive the member rate for the CCE, log on to the AACE website using member log in ID, before completing the online application and payment process.

Proceed through each screen of the application, carefully following the on-screen instructions and providing the information required. Applicants must complete all sections of the online application. Incomplete applications will not be processed.

What happens next after submitting the ECNU application?

<table>
<thead>
<tr>
<th>Examination Application Process at a Glance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Candidate completes application form ⇒ Candidate submits application and all required documentation to AACE ⇒ AACE acknowledges receipt of application via e-mail ⇒ AACE reviews application ⇒ AACE sends Authorization to Test (ATT) letter to accepted candidates ⇒ Candidate registers for exam with Prometric™ ⇒ Prometric™ sends electronic confirmation to candidate ⇒ Candidate takes examination at Prometric™ site</td>
</tr>
</tbody>
</table>

Upon confirmation of eligibility to take the CCE, the candidate will receive an Authorization to Test (ATT) letter, via postal mail. The ATT letter authorizes the candidate to take the CCE, and will include the following information:

- The contact information for Prometric™, so the candidate can schedule an examination based on the identified testing window
- Details on how to schedule an examination date with Prometric™
- Information on how to reschedule or cancel an examination, should that become necessary

American Association of Clinical Endocrinologists • Jacksonville, FL
Who is Prometric™?
Prometric™ is a wholly-owned, independently operated subsidiary of Education Testing Service (ETS). Prometric™ provides computer based testing sites, allowing the greatest access possible to take the ECNU/AACE Comprehensive Certification Examination (CCE). For more information on Prometric™, please go to www.prometric.com

How do I find a Prometric™ testing center?
Information on how to register at a Prometric™ testing center will be included with the Authorization to Test (ATT) letter or may be accessed at www.prometric.com.

How long is the ECNU designation valid?
The ECNU designation is valid for ten (10) years. The recertification period will begin the first January after the year in which the ECNU designation is awarded. The certificant will have until January 1, ten (10) years later to complete the recertification requirements.

If you obtain your ECNU designation December 1, 2018, your recertification period will begin January 1, 2019 and you will need to complete all recertification requirements prior to January 1, 2029, when your certification will expire.

Additional information regarding the ECNU recertification process will be posted on the AACE website in the near future, so please continue checking https://www.aace.com/ecnu.

Where can I find more information regarding the ECNU Program?
To learn more about the ECNU Program, please go to https://www.aace.com/ecnu. The 2016 ECNU Candidate Handbook is also available for download on the AACE website.

When is the next CCE test window and when will AACE start accepting applications?
Test Window:
The next test window is June 18 – July 14, 2018. Upon notification of acceptance, the candidate will schedule the examination with Prometric™, the test vendor.

Application Deadline:
All application information and requirements will be posted on the AACE website by February 26, 2018, and you can complete the application process from April 9 – May 26, 2018. The deadline for submission is Saturday, May 26, 2018. Application must be submitted and all fees paid by the deadline to be eligible for the examination.

Questions about the ECNU Program?
Please contact the Certification Manager for information regarding the AACE Endocrine Certification in Neck Ultrasound (ECNU) Program.

Nickie Mizell
ECNU Certification Manager
American Association of Clinical Endocrinologists
245 Riverside Avenue, Suite 200
Jacksonville, FL 32202
E-mail: nmizell@aace.com
Phone: (904) 404-4145
Fax: (904) 404-4205
ECNU Application Form
To apply and be accepted for the ECNU Program, the following is required:

- Meet eligibility criteria for the ECNU Program (choose from 7 routes)
- Completed Candidate Information (Section 1 of this form)
- Signed Attestation of Ultrasound Studies (Section 2 of this form)
- CME certificate(s) and/or letters from accredited organization(s) as proof that you have received at least 15.0 hours of AMA PRA Category I Credits™ from one or more approved basic Thyroid Ultrasound Course(s) within the past 3 years (Section 3 of this form).
- Signed Candidate Attestation Statement (Section 4 of this form)
- Signed Candidate Confidentiality Agreement (Section 5 of this form)
- Examination Fee (see Section 6 of this form for details)
- For Fellows: Written letter from program director verifying status as Endocrinology Fellow
- For Fellows: Notarized, validated imaging logs of at least 50 ultrasound studies

This application form consists of seven (7) sections (Section 1. Candidate Information; Section 2. Attestation of Ultrasound Studies; Section 3. CME Credits; Section 4. Candidate Attestation Statement; Section 5. Candidate Confidentiality Agreement; Section 6. Application Payment; and Section 7. Submitting the Application). Incomplete applications will be returned unprocessed.

SECTION 1: CANDIDATE INFORMATION

Name: ________________________________
FIRST MIDDLE LAST

Route # for which you qualify to apply for ECNU: ________________________________

Home Address (Do not use PO or Business) ________________________________

City: ________________________________ State: ________________________________
Zip/Postal Code: ________________________________ Country: ________________________________

Phone: ________________________________ Fax: ________________________________ E-mail: ________________________________

Organization/Company: ________________________________ Job Title: ________________________________

Check one that applies:
- ☐ First Time Applicant
- ☐ Previously Applied but withdrew/canceled
- ☐ Repeat Test Taker
Special Testing Accommodations (STA) for Candidates with Disabilities Request:
If the candidate has special testing requirements, the STA request form must accompany the application. Candidates will be sent a Notice of Approval from AACE included with the Authorization to Test (ATT) letter.

SECTION 2: ATTESTATION OF ULTRASOUND STUDIES

Note: If applying under Routes 1, 4, 5, 6, or 7 please skip section 2.2. and complete only section 2.1. If applying under Route 3, please skip section 2.1. and complete only section 2.2.

2.1. The following attestation must be completed by Routes 1, 4, 5, 6 and 7 applicants. Please read the following statement. By signing the attestation, the candidate is agreeing to abide by this statement.

- I attest that I am currently performing at least 100 ultrasound studies per year (70 diagnostic; 30 UGFNA). These studies include parathyroid ultrasound and thyroid cancer lymph node mapping in the neck.

  Signature: _______________________________ Date: ________________

2.2. The following attestation must be completed by Route 3 applicants (Endocrinology Fellows/Trainees or Endocrine Surgeons in training). Please read the following statement. By signing the attestation, the candidate is agreeing to abide by this statement.

- I attest that I have performed at least 50 of the required ultrasound studies at the time of my ECNU Application, and that the remaining 50 ultrasound studies will be completed within the 12-month period after passing the Comprehensive Certification Examination (CCE).

  Signature: _______________________________ Date: ________________

SECTION 3: CONTINUING MEDICAL EDUCATION (CME) CREDITS

All candidates must complete this section.

List the total number of CME hours accrued in the area of Thyroid Ultrasound. Candidates must have received at least 15.0 hours of AMA PRA Category 1 Credits™ within the past 3 years from a basic ultrasound course to be eligible for the ECNU Program. CME certificates or letter from accrediting organization MUST be submitted with this application.

<table>
<thead>
<tr>
<th>Course Title</th>
<th>Course Date</th>
<th>Sponsoring Organization</th>
<th>CME Hours Earned</th>
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Total CME Hours

American Association of Clinical Endocrinologists • Jacksonville, FL
SECTION 4: CANDIDATE ATTESTATION STATEMENT

All candidates must read and sign the following statement. By signing the agreement, the candidate agrees to abide by this statement.

I hereby apply for the Endocrine Certification in Neck Ultrasound (ECNU) credential. I understand that my certification depends on my ability to meet all requirements and qualifications. I certify that the information contained in this application is true, complete, and correct to the best of my knowledge and is made in good faith. I further understand that if any information is later determined to be false, AACE reserves the right to revoke any certification that has been granted on the basis thereof.

I hereby release, discharge, and exonerate AACE, its directors, officers, members, examiners, representatives, and agents, from any actions, suits, obligations, damages, claims or demands arising out of, or in connection with, any aspect of the application process, including results or any other decision that may result in a decision to not issue me a certificate.

I understand that applicants to the ECNU Program or ECNU certificants are subject to the certification policies and procedures of AACE and its ECNU Certification Committee. In order to maintain my certification, I understand that from time-to-time, AACE may amend its requirements, fees, policies, and procedures for certification and recertification.

During my certification and recertification cycle, I agree to notify AACE in writing immediately if I fail to comply with the requirements of the ECNU Program. I also agree to notify AACE in writing of any address or name changes within thirty (30) days after the change becomes effective. If requested to do so, AACE may verify my certification status.

I attest that I meet the eligibility criteria for the ECNU Program, including 15.0 hours of AMA PRA Category 1 Credits™ obtained from an approved, Thyroid Ultrasound Course(s) within the past 3 years. I further attest that I have performed the required ultrasound studies at the time of my ECNU application.

I understand that any discrepancy in my cases may result in a formal investigation and possible denial or revocation of my certification.

I attest that I have reviewed and understand this handbook.

I acknowledge that I have read and agree to the Attestation Statement.

Signature: ____________________________ Date: ____________________________

SECTION 5: CANDIDATE CONFIDENTIALITY AGREEMENT

All candidates must sign the Candidate Confidentiality Agreement. The agreement follows:

I understand, acknowledge, and agree:

1. That the questions and answers of the Comprehensive Certification Examination (CCE) are the exclusive and confidential property of AACE and are protected by AACE intellectual property rights;

2. That I may not disclose the exam questions or answer or discuss any of the content of the exam materials with any person, without prior written permission and approval of AACE;

3. Not to remove from the examination room any exam materials of any kind provided to you or any other material related to the examination, including any notes or scrap paper;

4. Not to copy or attempt to make copies (written, photocopied, or otherwise) of any examination material, any examination questions or answers;

5. Not to sell, license, distribute, give away, or obtain from any other source other than AACE the examination materials, questions or answers;

6. I agree that my obligations under this Agreement shall continue to be in effect after the examination and, if applicable, after termination of my certification, regardless of the reason or reasons for termination, and whether such termination is voluntary or involuntary.

Signature: ____________________________ Date: ____________________________

American Association of Clinical Endocrinologists • Jacksonville, FL
SECTION 6: APPLICATION PAYMENT

The appropriate fee must be sent with this application. Fees are **non-refundable** (e.g., in the event that the candidate complete and submit the application by **October 6, 2018**).

**Comprehensive Certification Examination (CCE) Fees:**

- AACE Member: $350
- Non-AACE Member: $550
- *Fellows: $250
  *NOTE FOR FELLOWS in Training: A letter from Department Chair verifying status must accompany application.*
- International Testing Site Fee: $200

Candidate’s Complete Name: _________________________________________________________________

AACE Member Number: *(If applicable)*: ______________________________________________________________________

Choose a Payment Method: □ Check □ Visa □ MasterCard □ AMEX □ Discovery

**Checks must be made payable to the American Association of Endocrinologists (AACE)**

Please note: For your protection, the American Association of Clinical Endocrinologists does not accept and will not process credit card information provided via email. Please mail or fax this form to our secured fax line (904) 404-4229.

Credit card payment is accepted in online application process available at [https://www.aace.com/ecnu](https://www.aace.com/ecnu) under the “Apply” tab.
SECTION 7: SUBMITTING YOUR APPLICATION

Thank you for applying for ECNU certification. Please forward the application, payment form/examination fee, and other supporting documentation to the mailing address shown below. The application package should be sent via USPS certified mail, or via a traceable mailing method (e.g., UPS, FedEx, etc.).

Nickie Mizell  
ECNU Certification Manager  
American Association of Clinical Endocrinologists  
245 Riverside Avenue, Suite 200  
Jacksonville, FL 32202

CANDIDATE APPLICATION CHECKLIST

- Completed ECNU Program Application Form
- Documentation confirming Route eligibility
- Signed Attestations (Sections 2, 3, 4, and 5)
- CME Certificates/Transcripts/Letter from Accrediting Organization(s)
- Payment Application for Examination Fee
- Fellowship Letter from Department Chair Verifying Status (If applicable)
- Imaging logs (if applying under Route 3)
Endocrine Certification in Neck Ultrasound (ECNU) Program Validation of Competency Process (VCP) Form

To continue to the Validation of Competency Process (VCP), the following is required:

- Successful completion of Comprehensive Certification Examination (CCE). Documentation and fees submitted for VCP will be returned unprocessed if the candidate has not passed the CCE.
- This completed VCP Form, including the Candidate Information page
- VCP Fee: see payment section of this form for details
- Completed/Signed Attestation of Ultrasound Procedures Form
- 15 ultrasound images and reports (see detailed requirements for images and reports). All patient identifying information must be removed from the images and/or reports, prior to submission to the AACE Office. Images and reports with patient identifying information will be returned to the candidate.

The 3-page VCP Form consists of three (3) sections (Section 1. Candidate Information, Section 2. VCP Payment, and Section 3. Attestation of Ultrasound Procedures). Incomplete applications will be returned unprocessed.

SECTION 1: CANDIDATE INFORMATION

Name: ___________________________ ___________________________ ___________________________

FIRST MIDDLE LAST

CCE Authorization Number: ___________________________

Can be found on the CCE score report

Home Address: __________________________________________

City: ___________________________ State: ___________________________

Zip/Postal Code: ___________________________ Country: ___________________________

Phone: ___________________________ Fax: ___________________________ E-mail: ___________________________

Organization/Company: __________________________________________

Job Title: __________________________________________
SECTION 2: VCP PAYMENT

The appropriate fee must be sent with the complete VCP package.

Validation of Competency Process (VCP) Fees:

- AACE Member: $900
- Non-AACE Member: $1,000
- *Fellows AACE Member: $800

Candidate’s Complete Name: _________________________________________________________________

AACE Member Number: (If applicable): ______________________________________________________________________

Choose a Payment Method: ☐ Check ☐ Visa ☐ MasterCard ☐ AMEX ☐ Discovery

Checks must be made payable to the American Association of Endocrinologists (AACE)

Please note: For your protection, the American Association of Clinical Endocrinologists does not accept and will not process credit card information provided via email. Please mail or fax this form to our secured fax line (904) 404-4229.

Credit card payment is accepted in online application process available at https://www.aace.com/ecnu under the “VCP Submission” tab.
SECTION 3: Attestation of Ultrasound Procedures

This attestation must be submitted with the VCP package. Please read the following statement. By signing the attestation, the candidate is agreeing to abide by this statement.

During the past twelve (12) months*, I attest that I have performed: (please check the appropriate box)

- 100 total ultrasound studies (70 diagnostic; 30 UGFNA) if performed under the supervision of an ECNU-qualified physician.
- 125 total ultrasound studies (88 diagnostic; 37 UGFNA) if performed without the supervision of an ECNU-qualified physician.
- I additionally attest that the work I have submitted represents work performed by and/or directly supervised by me.

Candidate Signature  Date

I understand that any discrepancy or misrepresentation of my cases may result in a formal investigation and possible denial or revocation of my certification.

*EXAMPLE: If you are signing the Attestation Form on May 1, 2018, you are attesting that you have performed the appropriate number of ultrasound studies between May 1, 2017 and May 1, 2018.

Please mail the completed VCP package via certified USPS mail, or via a traceable mailing method to:

Nickie Mizell  
ECNU Certification Manager  
American Association of Clinical Endocrinologists  
245 Riverside Avenue, Suite 200  
Jacksonville, FL 32202
SECTION 1: To be completed by ECNU Candidate

First Name: ____________________________ Middle: ________________ Last: ____________________________
Address (do not use a PO Box): _______________________________________________________________
City: ________________________________________________________ State: _________________________
Zip/Postal Code: ___________________________ Country: ________________________________________
E-mail: _____________________________________________ Daytime Phone: ________________________

Are you repeating the AACE Comprehensive Certification Examination (CCE)?
☐ Yes ☐ No
If yes, did you receive special accommodations before?
☐ Yes ☐ No ☐ N/A

Please describe your disability:

What accommodation(s) are you requesting from AACE?

I understand that AACE will use the information obtained by this authorization to determine eligibility for a reasonable accommodation in regard to the AACE /ECNU Comprehensive Certification Examination (CCE), by reason of my disability. I understand that AACE reserves the right to make additional inquiries regarding my disability and previous accommodations before making a determination as to whether to provide the accommodations I have requested above. Under penalty of perjury, I declare that the foregoing statements, and those in any required accompanying documents or statements, are true. I understand that false information may be cause for denial or revocation of certification. I hereby certify that I personally completed Section 1 of this form, and that I may be asked to verify this information at any time.

Candidate Signature: ___________________________________________ Date: ________________________

I hereby authorize and request the health care professional identified in Section 2 to release the information requested by AACE relating to my disability and the accommodation appropriate to my disability to sit for the AACE Comprehensive Certification Examination (CCE).

Candidate Signature: ___________________________________________ Date: ________________________
SECTION 2: To be completed by healthcare professional

Dear Healthcare Professional:

The individual identified above is requesting accommodation to sit for the AACE Comprehensive Certification Examination (CCE). AACE’s policy requires that candidates requesting special testing accommodation submit current documentation of the disability from an individual qualified to assess the disability. The individual listed above is requesting that you provide such documentation. You must complete the following:

1. The remainder of this form (Section 2).

2. An evaluation, on professional letterhead, that includes the following information. If submitting an existing report, it must have been written within the past three (3) years.

   a. Confirmation of diagnosis and functional impairment
      ✓ Date (month/day/year) of first consultation
      ✓ Date (month/day/year) the individual was last seen by you
      ✓ Diagnosis, summary history, and course of the disability
      ✓ Individual’s current functioning and limitations in major life activities
      ✓ Diagnostic tests administered, scores, and interpretation of scores

   b. Confirmation of Treatment
      ✓ Name and title of the professional
      ✓ Duration of treatment
      ✓ Outcomes of treatment

   c. Recommended Accommodation
      ✓ The healthcare provider’s specific recommendation for accommodation(s) that directly relates to the impairment, and is supported by functional information in the evaluation. The file is considered incomplete if this specific recommendation is not included.

Name: ____________________________________________
Title/Occupation: ____________________________________
Address: __________________________________________
City: _______________________________________________
State/Province: _______________________________________
Zip/Postal Code: _______________________________________
Country: ____________________________________________
Phone: _____________________________________________
Fax: _________________________________________________

Are you licensed/certified in an area that allows you to diagnose the disability?  Yes  No

If yes, please provide your:
Jurisdiction: _________________________________________
License/Certification Number: ___________________________

If no, please identify the credentials that allow you to diagnose the disability:

Please read and sign the following declaration:

I hereby certify that the above information is true and is given pursuant to the authorization to release information by my patient. Under penalty of perjury, I declare that the foregoing statements and those in any required accompanying documentation are true. I hereby certify that I personally completed Section 2 of this form, and that I may be asked to verify the above information at any time.

Signature: __________________________________________
Print Name: __________________________________________
Date: _______________________________________________
Appendix III

Partial List of Approved CME Courses for ECNU
CME Requirement for ECNU Application for All Routes

Have attended CME-accredited, approved basic Thyroid Ultrasound Course(s) in which you have received at least 15.0 hours of AMA PRA Category 1 Credits™ within the past 3 years prior to applying to the ECNU Program. 10 of the 15 hours must come from a comprehensive in-person ultrasound course. This can be an introductory/basic or an advanced course but must include both didactic (lecture) and lab sessions with hands on neck imaging as well as USGFNA instruction on neck phantoms.

CME hours can be obtained from one or multiple courses, and can be earned from an AACE or other organizations’ Thyroid Ultrasound Course(s).

OPTIONS FOR BASIC THYROID ULTRASOUND COURSES
Please note that course titles for the following educational offerings may change, so please check the organization’s website to get the most recent course listing and titles.

- * ACE – Endocrine University for Fellows (http://www.aace.com/): 2 days devoted to thyroid and ultrasound
- AACE – Diagnostic Endocrine Neck Ultrasound and UGFNA Course (http://www.aace.com/)
- AACE – Advance Thyroid Ultrasound and UGFNA Biopsy Course (http://www.aace.com/)
- * AACE – Advances in Medical & Surgical Management of Thyroid Cancer (http://www.aace.com/)
- * ATA (American Thyroid Assoc.) – Annual Meeting - approved ultrasound lectures (http://www.thyroid.org/)
- * Endocrine Society – Thyroid Sonography Hands-On Workshop (Held during Annual Meeting) (http://www.endocrine.org)
- * Endocrine Society – “Thyroid Sonography Workshop”– Clinical Endocrinology Update (http://www.endocrine.org)

* Additional content hours may be necessary to total 15 hours.

OPTIONS FOR ECNU RECERTIFICATION CME COURSES
Please note that course titles for the following educational offerings may change, so please check the organization’s website to get the most recent course listing and titles.

- AACE - Advances in Differentiated Thyroid Cancer (DTC) Management (http://www.aace.com/)
- AACE - Advances in Medical & Surgical Management of Thyroid Cancer (http://www.aace.com/)
- AACE Chapter Meetings – Lectures on Neck Ultrasound and Thyroid/Parathyroid Diseases  
  Note: Contact AACE Certification Coordinator for a list of approved Chapter meeting topics. (nmizell@aace.com)
- AACE – Diagnostic Endocrine Neck Ultrasound and UGFNA Course (http://www.aace.com/)
- AACE – Advances in Diagnostic and Interventional Endocrine Neck Ultrasound (http://www.aace.com/)
- AACE - Diagnostic and Therapeutic Advances in Ultrasound and other Modalities for the Treatment of Thyroid and Parathyroid Disorders (http://www.aace.com/)
OPTIONS FOR ECNU RECERTIFICATION CME COURSES (Continued)

- AIUM – Ultrasonographic Differentiation of Benign from Malignant Neck Lymphadenopathy in Thyroid Cancer (http://www.aium.org/)
- AIUM – Sonographic Features of the Follicular Variant of Papillary Thyroid Carcinoma (http://www.aium.org/)
- AIUM – Hurthle Cell Neoplasms of the Thyroid: Sonographic Appearance and Histologic Characteristics (http://www.aium.org/)
- American Thyroid Assoc.(ATA) - Annual Meeting – approved ultrasound lectures (http://www.thyroid.org/)
- Endocrine Society – Annual Meeting (http://www.endocrine.org/)
- Endocrine Society – Introductory Hands-on Thyroid Ultrasound Workshop (held during Annual Meeting) (http://www.endocrine.org/)
- Endocrine Society – Advanced Hands-on Thyroid Ultrasound Workshop (held during Annual Meeting) (http://www.endocrine.org/)
- Endocrine Society – Advanced Hands-on Thyroid Ultrasound Workshop (held during Clinical Endocrinology Update) (http://www.endocrine.org/)

ONLINE OPTIONS FOR ECNU CME

- **AIUM Practice Parameter for the Performance of Ultrasound Examinations of the Head and Neck: Step-by-Step Video Tutorial for Performing Individual Examinations** – 1.75 hours CME available until 8/31/2019 - Costs: $135 video/DVD and $70 CME online test
- **AIUM Practice Parameter for the Performance of a Thyroid and Parathyroid Ultrasound Examination: Step-by-step Video Tutorial** – 1.0 hours CME available until 12/1/2018 - Costs: $100 video/DVD and $60 CME online test
  - The online courses mentioned above can be found at: [http://www.aium.org/store/products.aspx?cId=108&page=1](http://www.aium.org/store/products.aspx?cId=108&page=1)

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<td>Neck Sonography and Suppressed Thyroglobulin Have High Sensitivity for Identifying Recurrent/Persistent Disease in Patients With Low-risk Thyroid Cancer Treated With Total Thyroidectomy and Radioactive Iodine Ablation, Making Stimulated Thyroglobulin Unnecessary</td>
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<td>A Taller-Than-Wider Shape Is a Good Predictor of Papillary Thyroid Carcinoma in Small Solid Nodules</td>
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- [http://education.endocrine.org/content/thyroid-ultrasound-workshops-online-2016](http://education.endocrine.org/content/thyroid-ultrasound-workshops-online-2016) - Online course offered through the Endocrine Society

**UpToDate®**

- **Diagnostic approach to and treatment of thyroid nodules**

- **Ultrasound-guided thyroid biopsy**
  - [http://www.uptodate.com/contents/ultrasound-guided-thyroid-biopsy?source=search_result&search=ultrasound&selectedTitle=38%7E150](http://www.uptodate.com/contents/ultrasound-guided-thyroid-biopsy?source=search_result&search=ultrasound&selectedTitle=38%7E150)

- **Technical aspects of thyroid ultrasound**
  - [http://www.uptodate.com/contents/technical-aspects-of-thyroid-ultrasound?source=search_result&search=ultrasound&selectedTitle=16%7E150](http://www.uptodate.com/contents/technical-aspects-of-thyroid-ultrasound?source=search_result&search=ultrasound&selectedTitle=16%7E150)

- **Overview of the clinical utility of ultrasonography in thyroid disease**