



American Urological Association

September, 2007

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Dear Medical Director:

It is the position of the American Urological Association (AUA) that urologists are appropriately trained in the performance of sonographic procedures. In spite of this, it has come to our attention that many insurance carriers are implementing policies, which dictate that only radiologists may perform these procedures. Such policies are simply inappropriate.

Urological training programs in the United States place heavy emphasis on the use of ultrasound and sonography during training. It should also be noted that the American Board of Urology tests extensively on these subjects during its certification and recertification exams, with special emphasis given to transrectal sonographic studies and transrectal sonographically guided biopsies of the prostate, as well as bladder and kidney sonography.

Transrectal sonography is most often done to conduct a biopsy and urologists are best qualified to determine the indications for and manage the complications of prostate biopsy. In fact, it is the urologist and not the radiologist who is uniquely qualified to conduct these studies given their levels of interest, common knowledge and training in these areas. It is unfair to develop this type of policy given urology's specific training requirements in sonography, and the detailed examinations conducted by our Board.

I have also included a copy of the American Urological Association's Policy Statement on the use of ultrasound in urology. As indicated in the policy, urologists are very qualified to perform these services.

For additional information on use of imaging in the practice of urology, visit the Imaging Resource Center on the American Urological Association's web site at www.auanet.org/imaging/.

If you would like to discuss this issue on ultrasounds further, please contact Stephanie N. Stinchcomb, Manager of Reimbursement at 866-746-4282, extension 3786. In the case of an appeal, all other correspondence should be directed to the medical office requesting the review of the denied claim.

Headquarters

Mr. Michael T. Sheppard, C.P.A., C.A.E.
Executive Director

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www.AUAFoundation.org

www.UrologyHealth.org

www.urologichistory.museum

Sincerely,

James B. Regan, MD
Chair, Health Policy Council

Attachment

1. AUA POLICY STATEMENT ON IMAGING SERVICES

Urologists' Use of Imaging Services

The American Urological Association, Inc.[®] (AUA) affirms that urologists are the physicians best qualified to diagnose, manage and treat diseases and conditions of the genitourinary tract in patients of all ages. Urologists are trained in the performance and interpretation of diagnostic and interventional imaging studies including ultrasonography, radiography, axial scanning (CT and MRI) and other imaging techniques.

Urologists combine technical skill in the use of imaging equipment with the cognitive skills of the underlying disease processes. It is the urologist's role, using appropriate clinical indications, to select the study, or sequence of studies, needed to aid in the optimal diagnosis and management of urologic patients.

The acquisition and maintenance of skills and knowledge associated with imaging technology is assured by the Accreditation Council for Graduate Medical Education (ACGME) residency review committee for urology, continuing medical education provided by the AUA and the certification, recertification and maintenance of certification process of the American Board of Urology.

Urologists integrate an understanding of the risks and benefits of imaging technologies with the clinical care of the patient. Patient care is optimized when urologists coordinate the use of appropriate imaging techniques and equipment in the setting most beneficial to their patients.

Board of Directors, May 1993

Board of Directors, September 1995 (Revised)

Board of Directors, January 2001 (Reaffirmed)

Board of Directors, October 2006 (Revised)

Board of Directors, February 2007 (Revised)