

# Issue 2 June 2022



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Editor's Note (Prof Dr Norlisah Mohd Ramli)

Assalamualaikum and a Good Day to my colleagues.

Our appreciation and thanks to the contributors of the past Issue 1 - Mar 2022, Dr Mawaddah Abdul Malik, Assoc Prof Dr Thajunissa Hassan Mohd, Dr Zaharudin Haron, Dr Noor Azlin Ahmad, Dr Nur Izani Abu Hassan, Dr Muhammad Azrif Ahmad Annuar, Dr Mahayuddin Abdul Manap, Dr Muhammad Adib Abdul Onny and Dr Naveen Rajaduria for their articles and updates.

CoR Newsletter is published quarterly by the College of Radiology, Academy of Medicine of Malaysia. Our goal is for it to be 'by our members for our members. It will highlight CoR events and activities, educational case series, stories and achievements of our members, enabling us to be closer together as a community. Members are welcome to contribute articles suitable for **CoR Newsletter.** Please submit to <u>secretariat@radiologymalaysia.org</u> - for appropriateness, only articles vetted and approved by the editor will be published.

Dreadful to think, but conceivably, the nation will be facing a daunting Covid-19 third-wave battle, and at the current time, the numbers are already alarmingly on the rise. The world has been tirelessly facing and challenging Covid-19 for a while now, and it will be long before everyone can reclaim that lost comfort to relax, breathe easy and be safe again. We pray for everyone in the world, especially the frontliners of various professions, to be strong and keep the faith.

We come to our current Issue 2 - Jun 2022 of the **CoR Newsletter**. For your reading pleasure, this issue brings you articles on the "National Occupational Skills Standard (NOSS) for Medical Sonography", "MSK Imaging Highlights", "Continuing Professional Development (CPD)", an introduction to MyRAD as well as congratulatory notes to 2 members for their achievements.

To our Muslim colleagues, "Selamat Hari Raya Aidiladha" that is coming up around the corner and to all others, "Enjoy the Holiday". Take care, everyone, and stay safe always!

Co-opted Council Member SIG Cardiac Imaging Dr Noor Khairiah A. Karim

Co-opted Council Member SIG Body Imaging Dr Zaharudin Haron

Co-opted Council Member SIG Musculoskeletal Imaging Dr Maizatul Jamny Mahmood

Co-opted Council Member SIG Paediatric Imaging Dr Hasyma Abu Hassan

Co-opted Council Member SIG Chest Imaging Dr Mohammad Hanafiah Kreah

Co-opted Council Member Head of Services Dr Yun Sii Ing

#### CoR Newsletter Editorial Team

Editor: Prof. Dr Norlisah Mohd Ramli

> Editorial Assistant: Ms. Lesley Whitelaw



**PROFESSOR DR NG KWAN HOONG** 

Prof Dr Ng Kwan Hoong, from University Malaya, was elected as a Fellow of The World of Academy Sciences (TWAS) effective 1 January 2022. TWAS is a global science academy for advancing science in developing countries and supports sustainable prosperity through research, education, policy, and diplomacy.



Prof Dr Ng had won the Marie Sklodowska-Curie Award for his work in medical physics, which was given by the International Organisation for Medical Physics during the World Congress on Medical Physics and Biomedical Engineering in Prague on 3-8 June 2018.

Also, in 2018, Prof Dr Ng was among the four recipients honoured with the Merdeka Award under the Outstanding Scholastic Achievement category for his contribution to breast cancer research and medical physics toward a more sustainable Malaysia.

#### PROFESSOR DR SAIFUL NIZAM BIN ABDUL RASHID

Professor Dr Saiful Nizam bin Abdul Rashid has recently obtained a PhD in Forensic Radiology from UPM and focuses on PMCTA.

Professor Dr Saiful is the head and Consultant Clinical Radiologist at the Imaging Services Department, Park City Medical Center (Ramsay Sime Darby Group). He was a senior medical lecturer, general radiologist and forensic radiologist at the Faculty of Medicine & Health Sciences, Universiti Putra Malaysia (UPM) and Consultant Forensic Radiologist at the National Institute of Forensic Medicine (IPFN), Hospital Kuala Lumpur.

He graduated from the University of Malaya (UM) with basic degree of Medical Bachelor & Bachelor of Surgery (MBBS) in 1997 and Master of Radiology (MRad UM) in 2008, and completed subspecialty training in Forensic Radiology at the Institute of Forensic Medicine, University of Zurich (UZH), Zurich, Switzerland in 2012-2013 and attended a short clinical attachment in Forensic Radiology at the Victoria Institute of Forensic Medicine (VIFM), Monash University, Melbourne, Australia in 2011.



"It took me six years to finish everything and wait two more years for graduation due to the MCO. The headache, heartache, tears and frustration that I went through all these years as it is not an easy task juggling your work as a private radiologist, family and your thesis simultaneously. It does not matter how long it takes or the results that count, but the journey, the climb and the experience were priceless. I hope this will motivate others to pursue their dreams. I also hope to see more Malaysian radiologists with PhD in the future. Believe in yourself, work hard, pray, and leave the rest to Him. Finally, age is just a number".

# MALAYSIAN SOCIETY OF RADIOLOGISTS



During the College of Radiology Annual General Meeting held on 11 June 2022 at the Hilton Hotel Petaling Jaya, the establishment of the "Malaysian Society of Radiologists" under the Registrar of Societies (ROS) on 18 March 2022 was announced.

The main point for the formation of MyRAD is for the College of Radiology to have a sister society that is officially under ROS and is not governed by the constitution of the Academy of Medicine of Malaysia (AMM).

MyRAD will be the **educational arm** of CoR, particularly for Diagnostic Radiologists, since Nuclear Medicine, Oncology, and Interventional Radiology have already established their societies.

Enhancing Radiology Elevating Learning

MyRAD Council Members term 2022 - 2023		
President	Prof Dr Norlisah Mohd Ramli	
Vice-President	Dr Naveen Rajadurai	
Honorary Secretary	Dr Shantini A. Arasaratnam	
Honorary Treasurer	Dr Sivakumaran Karupayah	
Council Member (Selangor)	Assoc Prof Dr Thajunissa Hassan Mohd	
Council Member (Selangor)	Dr Jeyaledchumy Mahadevan	
Council Member (Selangor)	Prof Dr Kartini Rahmat	
Council Member (Kuala Lumpur)	Assoc Prof Dr Amir Fuad Hussain	
Council Member (Penang)	Dr Zainariah Mohd Zain	
Council Member (Pahang)	Dato Dr Humairah Abdul Samad	
Council Member (Melaka)	Dr Ng Seng Man	
Council Member (Sabah)	Dr Fatimah @ Hartina Hussin	
Council Member (Sarawak)	Assoc Prof Dr Ahmad Tirmizi Jobli	

In the next CoR Newsletter Issue 3 (Sep 2022), we will update on the MyRAD membership procedure and requirement (transition of CoR members criteria and application) and the initial planning of educational activities as we meantime endeavour to progressively steer both societies (CoR and MyRAD) towards their respective roles, aims and visions.

## NATIONAL OCCUPATIONAL SKILLS STANDARD (NOSS) FOR MEDICAL SONOGRAPHY

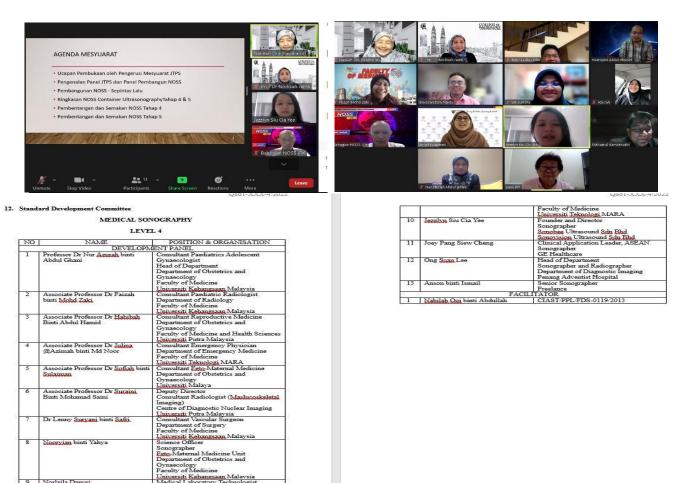
The meeting on Standard Practice - National Occupational Skills Standard (NOSS) for Medical Sonography Level 4 and Level 5 between the Standard Development Committee and the Standard Technical Evaluation Committee was held virtually on 12 April 2022 and hosted by Bahagian NOSS, Jabatan Pembangunan Kemahiran, Kementerian Sumber Manusia. The committee members were selected from industry backgrounds.

The objective of the development of this NOSS is to provide a national occupational standard for the profession to use as a reference to align sonographer qualification requirements with nationally adopted certificates of competence, charter career path, create training programmes, the benchmark for best practices and solicit recognition from both public and private sectors regulatory bodies.

In addition to curriculum development and training, this standard will also be used as the primary reference to accomplish the other equally pertinent actions in the pipeline, including the enaction of a Sonographer Act formation of the Board of Sonographers, which will also act as a licensing board, and to obtain formal recognition by the Ministry of Health to create a sonographer position in the ministry.

Sonographers are integral members of the healthcare team and interact extensively with other healthcare professionals to provide essential information for diagnosis and patient care.

The College of Radiology's President, Prof Dr Norlisah Mohd Ramli, was invited as one of the Evaluation Committee. The committee evaluates the Standard Practice and Standard Content document. The next meeting to be held will determine the Curriculum of the Competency Unit.



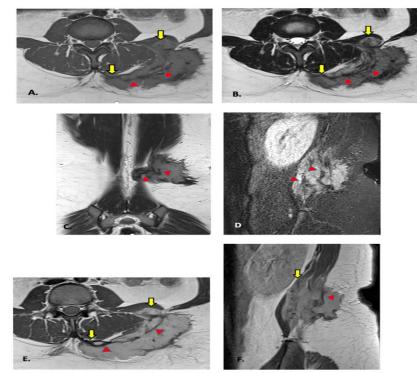
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## **MUSCULOSKELETAL IMAGING HIGHLIGHTS**

### Article contributed by:

Dr Siti Hajar bt Omar Hospital Kuala Lumpur Dr Maizatul Jamny Mahmood Hospital Kuala Lumpur

History: A 24-year-old housewife was referred for the MRI evaluation of a palpable, painless lower back mass. She had noticed the swelling for the past two years, but it has progressed in size in the past three months. On examination, she had a palpable, hard, painless mass that was adhered to the right lower back region.



MRI images of the right lower back.

**A**. Axial T1W shows an irregular intermediate lesion with low signal bands (arrowheads) infiltrating the underlying fascia, right erector spinae and quadratus lumborum lumbar muscles (arrow).

**B** Axial T2W shows an irregular heterogeneous hyperintense lesion with low signal bands (arrowheads) infiltrating the underlying fascia and right paravertebral muscles (arrow).

C & D Coronal T2W and sagittal STIR again show the intralesional low signal bands (arrowheads) and lack of surrounding subcutaneous oedema.

**E & F** Axial and sagittal T1W post gadolinium showing the mass is enhancing with non-enhancing intralesional low signal intensities (arrowheads) infiltrating the underlying fascia and right paravertebral muscles (arrow).

Differential diagnosis:

- 1. Desmoid type fibromatosis
- 2. Soft tissue sarcoma (fibrosarcoma)

#### Final diagnosis: Fibromatosis

Fibromatosis, also known as desmoid tumours, represents a group of fibroblastic proliferation that vary from benign to locally aggressive growth but does not metastasise (1-3).

# Epidemiology

Occurs most frequently in patients in the 2nd to 4th decades of life. An estimated two to four people per million population are affected by this lesion with female predilection (1-3).

### Clinical presentation

Typically manifests as a deep-seated, poorly circumscribed soft tissue mass with slow, insidious growth and usually painless lesions. The most common sites include the abdominal wall and cavity, chest wall, scapular area and the limbs. Less frequently, intra-abdominal forms are associated with familial adenomatous polyposis or Gardner's syndrome. Other reported symptoms include decreased joint mobility and neurologic complaints (numbness, tingling, sharp pain, or motor weakness) but are less frequent (1, 4).

#### Pathologic feature

At gross pathologic examination, these lesions are usually solid, firm, coarsely trabeculated, whitish masses resembling scars and have a gritty texture when cut. Histopathologically, they are composed of uniform spindle-shaped cells and often form poorly defined fascicles within a collagenous stroma. The degree of cellularity is generally moderate; however, the extent of cellularity and collagen varies. Keloidal-like collagen may be present (1, 5).

## Imaging features

Cross-sectional imaging modalities, especially magnetic resonance imaging (MRI), are the modality of choice to detect, characterise and show the extension of these tumours into adjacent tissues.

MRI findings include heterogeneous iso- to hyperintense masses on T1- and T2-weighted sequences with the presence of hypointense signals or bands. The highly variable signal reflects the proportion of cellular and fibrotic components. These low-signal-intensity bands are common (62%–91% of cases) in desmoid type fibromatosis, compared with other neoplastic lesions, although they are not specific to fibromatosis. They are related to the collagenised, hypocellular bands seen at gross pathologic examination (1, 6). The lesions may be well defined (49%–54% of cases) or have irregular infiltrative margins (46%–51%) (1,5,6). The fascial tail sign, linear extension along fascial planes, is also a common manifestation of this lesion (83% of cases) (1,6).

#### Treatment

The primary therapeutic modality is excision. Fibromatosis tumours are significantly associated with high recurrence levels when compromised surgical margins. Other modern options are radiotherapy, anti-estrogenic drugs, non-steroidal anti-inflammatory drugs, cytotoxic chemotherapy, and tyrosine kinase inhibitors (7).

#### References:

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- 4. Obeidin F, Alexiev B. Fibromatosis desmoid type. PathologyOutlines.com website. http://www.pathologyoutlines.com/topic/ softtissuefibromatosisdeep.html. Accessed 18 June 2020
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## CONTINUING PROFESSIONAL DEVELOPMENT (CPD)

## Article contributed by Assoc Prof Dr Thajunissa Hassan Mohd KPJ Damansara Specialist Hospital

CPD is any learning outside of undergraduate education or postgraduate training that helps to maintain and improve performance, the development of knowledge, skills, attitudes and behaviours across all areas of professional practice. It includes both formal and informal learning activities. Participation in CPD is an individual's ethical responsibility to keep abreast with the latest development in a particular field of practice.

The Medical (Amendment) Act 2012 and Medical Regulations 2017 requires evidence of enough CPD points to renew APC. Effective CPD helps to anticipate and respond to the changing demands in one's practice. It enables us to keep up to date and fit to practise and maintain our professional standards throughout our careers. CPD ensures the public that we are up to date and competent in all our work.

## What is the CPD Point System?

- The CPD point is a mechanism for recording CPD based on your time in the educational activity.
- The CPD point system facilitates an organised approach to recording your attendance at educational activities.
- All CPD points for APC application shall be awarded based on the MMC-CPD Grading system.
- You are required to show evidence that you have acquired sufficient CPD points for the renewal of your APC. There must be documented evidence such as a certificate of attendance, letter of attestation, synopsis (for self-study activities) etc.
- You may use any CPD point collection systems (MMA, MOH or AMM systems) that the Council has approved to record and monitor your CPD points.
- You shall take responsibility for recording and monitoring your CPD activities.
- The CPD record should accurately reflect the CPD activities you have attended.
- All CPD points for APC application shall be awarded based on the MMC-CPD Grading system.

# **CPD Requirement for APC Renewal**

A minimum of 20 CPD points is required per CPD year for the renewal of APC.

The collection of CPD points for the application of APC for a CPD year shall be from 1st July to 30th June, e.g. CPD points for the application of APC for 2022 shall be from 1st July 2020 to 30<sup>th</sup> June 2021.

No maximum limit to the number of CPD points a medical practitioner may obtain in the given CPD year.

Extra CPD points earned in a CPD year cannot be carried over to the following year.

If for some reason, you decide to take a break in your career, you are expected to keep updated and participate in CPD if you seek to maintain your APC.

#### **MMC-CPD** Grading System

It is a point-based system that records CPD activities based on the time spent on an activity and its impact on the medical practitioner's practice.

The Council, in consultation with the Ministry of Health, the Malaysian Medical Association and the Academy of Medicine of Malaysia, has identified several different types of learning that count as CPD activities.

The range of learning activities that count have been grouped into eight categories (A1 to A8).

All Registered Medical Practitioners are encouraged to attend a range of different types of learning activities.

All CPD points for APC application shall be awarded based on the MMC-CPD Grading system.

## AMM Medical Specialist CPD System

The Academy of Medicine of Malaysia has been tasked to administer and manage the CPD for medical specialists in the country.

CPD system for the NSR specialist is linked to the registration on the Specialist Register. One can claim CPD activities specific to one's a speciality/field of practice through the CPD system for specialists; (Category of A1, A2, A5a, A5e, A7a & A7c)

MMC has not made it a requirement to claim speciality-related CPD points. However, specialists are encouraged to participate in speciality-related CPD events.

CPD points are compulsory for APC Renewal purposes.

### AMM & MMA

AMM Medical Specialist CPD and MMA CPD are different organisations and are not linked. Specialists can claim from either one of the systems for APC renewal purposes.

As NSR Specialists, we are encouraged to capture our CPD activities with the AMM Medical Specialist CPD system. However, the CPD points captured will not be automatically reflected in the MMA CPD system.

#### **SUMMARY:**

CPD Administrators linked with the MERITS system:

a. Bahagian Perkembangan Perubatan, KKM (MyCPD system)

- b. The Academy of Medicine Malaysia (AMM Medical Specialist CPD system)
- c. The Malaysian Medical Association (MMA CPD system)

CPD points are compulsory for APC Renewal, not NSR Renewal.

NSR specialists are encouraged to capture CPD activities under individual specialities.

NSR Specialists can choose only one system, AMM or MMA, to capture CPD points for APC renewal.

#### The MMC-CPD Grading System (effective 1st July 2020)

The MMC-CPD Grading System (effective 1<sup>st</sup> July 2020)

Category		CPD Activity Description	Credit Points		
A1	Scientific N	Scientific Meetings/Congress			
	a.	Half day (2-4 hours)	4 points		
	b.	Full day (5-8 hours)	8 points		
	с.	2 full days	16 points		
	d.	3 or more full days	20 points (max)		
A2	Workshops/Courses/Skill Courses including ATLS/ CCrISP/CPR/ACLS/ALS/PALS/NRP/MTLS				
	a.	Half day (2-4 hours)	4 points		
	b.	Full day (5-8 hours)	8 points		
	с.	2 full days	16 points		
	d.	3 or more full days	20 points (max		
A3	Work-base	d Learning			
	a.	Hospital/department CME	1 point/hr		
	b.	Small group discussion/case conference	1 point/hr		
	с.	Participation in inter-department clinical	1 point/hr		
		meeting / epidemiological review	1 point/nr		
	d.	Journal club meeting	1 point/hr		
	e.	Formal grand ward round	1 point/hr		
	f.	External CME lecture/ topic seminar	1 point/hr		
	g.	Short courses/attachment >1 – 3 months	10 points		
	h.	Short courses/attachment >3 - 6 months	20 points		
	i.	Short courses/attachment >6 months - 1 year	30 points		
A4	Quality Improvement Activities				
	a.	Morbidity and mortality reviews	1 point/hr		
	b.	Audit meetings	1 point/hr		
	с.	Participation in accreditation exercise	1 point/hr		
	d.	Participation in quality assurance (QA) activities	1 point/hr		
A5	Scholarly Activities/Training/Presentation				
	a.	Organising chairperson for a recognised	E mainte		
- I		Scientific meeting or workshop	5 points		
	b.	Examiner at final undergraduate/postgraduate	-		
		examination	5 points		
	с.	Trainer/facilitator at a workshop	5 points		
	d.	Plenary /keynote lecture	5 points		
	e.	Presentation of lectures/oral/papers/posters at scientific meetings	5 points		
	f.	Presentation at hospital/departmental meetings and external lecture/topic seminar	5 points		

A6	Scholarly	Scholarly Activities/Research/Publication		
	a.	Principal/Co-Investigator in a clinical	5 points	
	-	trial/research		
	b.	Obtained a research grant	5 points	
	c.	Author of an indexed/peer reviewed journal article	5 points	
	d.	Author of a non-indexed/non-peer reviewed journal article	5 points	
	e.	Author of a textbook/book chapter	5 points	
	f.	Chief Editor of a Journal Editorial Board	5 points	
	g.	Member of a Journal Editorial Board	5 points	
	h.	Reviewer of a peer reviewed journal article	5 points	
	i.	Reviewer of a textbook	5 points	
	j.	Supervisor for postgraduate research project	5 points	
	k.	Reviewer/examiner of research thesis	5 points	
	L	Preparation of reports/member of reports		
		committee e.g. technical reports, working	5 points	
		papers, guidelines		
	m.	Member of clinical guidelines/consensus	5 points	
		guidelines (national/international)	5 points	
A7	Self-directed Learning			
	a.	Online CME modules	1 point/module	
	b.	Self-study (Relevant books, publications, Journal articles, podcasts etc.)	1 point/module	
	с.	External lecture/ topic seminar	1 point/hr	
A8	Professional Development			
a. b.	a.	Leadership role in medical societies /NGOs	5 points	
	b.	Self-development courses e.g. IT courses,		
		business management, administrative skills,	5 points	
		leadership skills		
		leadership skills		
	C.	Risk management courses e.g. communications, ethics, medico-legal, patient safety	5 points	
	c. d.	Risk management courses e.g. communications,	5 points 5 points	
		Risk management courses e.g. communications, ethics, medico-legal, patient safety		

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# MALAYSIAN MEDICAL COUNCIL 16<sup>th</sup> JUNE 2020