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## Editorial

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### Continuing medical education (CME) in pathology: the role of the College of Pathologists of Sri Lanka.

Continuing medical education (CME) enables us to keep abreast of new advances, maintain high standards, acquire expertise to enhance our careers, adopt new roles and manage change (1). This process extends from medical school until retirement. The field of pathology has expanded at an unprecedented rate in the last few years, due to the development of fields such as immunohistochemistry, cytogenetics and molecular biology. This has led to characterization of previously unrecognized disease entities, tumour types and variants, better definition of known entities and constant reclassifications. Thus CME has become a necessity rather than a luxury in the field of pathology.

CME activities related to pathology in Sri Lanka include "black box" slide discussion sessions, clinicopathological conferences, audit meetings and journal clubs organized at hospital, departmental or regional level and national level activities organized by the College of Pathologists of Sri Lanka such as workshops, symposia, update lectures, annual academic sessions, consensus meetings and publication of this journal. Whilst these activities help in advancing professional development and careers of Pathologists, their greatest drawback is their informal, unstructured nature. Hence the need for a more formal CME programme linked to an accreditation scheme. At the same time such a scheme should incorporate known characteristics of an effective CME programme such as convenience, flexibility, relevance, individual suitability, ability to provide self assessment and feedback and responsiveness to community needs (2).

During a pre-congress symposium on "the role of the Colleges in continuing medical education" organized by the Sri Lanka Medical Association (SLMA) in 2001, it was apparent that most colleges lacked a formal CME programme (3). This prompted the SLMA to consider introduction of periodic re-certification of doctors through CME schemes. When this scheme is in place the College of Pathologists will also be requested to formulate its own guidelines on how to award CME points to its members.

The role of the College would be to identify the most relevant and useful CME related activities and translate them into a point scheme. Learning from the experience of others is vital. A survey of CME activities showed that attending national meetings and lectures was amongst the least effective forms of CME (4). The College should be aware that any CME scheme needs to be practically applicable if it is to ultimately provide patients with a better and more efficient service. It has been shown that personal motivation for CME is associated with more significant change in practice. Thus the focus of CME should be centred on "self directed" learning. An effective CME system needs to be flexible, learner controlled and managed with a self-directed curriculum (5).

It is not essential for the College to organize all CME activities related to pathology. The CME activities undertaken by individual pathologists could be under their control, such as in the maintenance of a log book which could be peer reviewed by a colleague. Adoption of such methods will help to fulfil the more desirable qualities of a CME programme such as convenience, flexibility and suiting individual needs.

Perhaps the most essential CME activity for pathologists is upgrading knowledge by accessing journals, the latest editions of textbooks and relevant web sites. Unfortunately these are unavailable to most Sri Lankan pathologists, especially to those working in peripheral hospitals. The College will have to take the initiative to convince the health authorities that provision of new editions of textbooks is the minimal requirement and not a luxury. In fact the College should convince the health authorities that textbooks and journals are as essential as the basic laboratory equipment. Raising funds for procurement of essential textbooks needs to be a College initiative.

The College needs to commence an external quality assurance (EQA) scheme or participate in a foreign EQA scheme. It should also play a leading role in commencing a national referral system where pathologists working alone in peripheral hospitals could refer difficult cases to larger centres with specialized services. Establishment of telepathology links with foreign centres of excellence should be the final link in this referral pathway. These activities would provide opportunities for self assessment and feedback.

A CME scheme in pathology is essential and details need to be worked out by a special subcommittee appointed by the College. The evaluation of the efficacy of such a CME programme with regard to providing a better and more efficient service to patients is another issue altogether.

**SJ de S Hewavisenthi**  
**MVC de Silva**

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