

NESAC

RULES AND REGULATIONS UNDER SNS/CAST

July 1, 2023

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**RULES AND REGULATIONS:
NEUROENDOVASCULAR SURGERY ADVISORY COMMITTEE
(NESAC)**

INTRODUCTION

The NeuroEndovascular Surgery Advisory Committee (hereafter referred to as “NESAC”) is a multidisciplinary council, duly organized under the auspices of the Society of Neurologic Surgeons (SNS) and one of its standing committees, the Committee for Advanced Subspecialty Training (CAST). The principal office of NESAC will be that of the SNS.

NESAC has a close working relationship with the Central Nervous System Endovascular Surgery (CNS-ES) Advisory Council (“CESAC”). The NESAC and CESAC interrelationship was organized under the auspices of the American Board of Medical Specialties (ABMS) and three of its member boards, the American Board of Neurological Surgery (ABNS), the American Board of Psychiatry and Neurology (ABPN), and the American Board of Radiology (ABR). This working relationship facilitates individual practitioner recognition of their participation in the Focused Practice of CNS-ES.

ARTICLE I. PURPOSE(S)

As stated in the CAST committee’s Charter filed in the SNS Secretary’s office, the purposes for which NESAC is organized are:

- (1) to promote excellence in CNS Endovascular Surgery through the development of guidelines and standards for training programs
- (2) to ensure that candidates seeking participation in “recognition of focused practice” by their respective ABMS Boards (the ABNS, ABPN, and ABR) have received appropriate high-quality training including all in-training requirements and practice assessments.

More specifically, NESAC will be responsible for:

- (1) the development and updating of subspecialty training requirements for neurosurgery residents and for CAST Accredited subspecialty fellowships in Central Nervous System Endovascular Surgery (CNS-ES)
- (2) the review and recommendation of approval to CAST for fellowship accreditation of individual training programs
- (3) the review of annual program reports with recommendation to CAST of ongoing accreditation, probation or removal of accreditation

- (4) the study and analysis of outcomes relative to CNS-ES training and, when necessary, develop and monitor programs for quality of education and the impact on neurosurgery and other residency training programs.

ARTICLE II. NESAC OVERSIGHT AND GOVERNANCE

Section 1. Affiliation with Neurological Surgery, Radiology and Neurology.

The Committee on Advanced Subspecialty Training (CAST) of the SNS founded NESAC as an advisory committee. NESAC shall therefore structure its organization, programs, and activities to advance excellence in subspecialty training and practice of CNS Endovascular Surgery by qualified individuals from Neurological Surgery, Radiology and Neurology.

Section 2. CAST oversight.

NESAC shall operate at all times under the oversight of CAST, as delegated by the Executive Committee of the SNS. The purpose of the oversight function is to monitor the committee's activities so that they conform with generally accepted principles of the ABMS Boards and the ACGME Review Committees.

The Chair and Vice Chair of CAST, as well as the CAST member assigned to the subspecialties, shall attend and participate in all NESAC meetings. The CAST Vice Chair shall direct CAST Administration to :

- (a) keep a register of the post office and email addresses as well as the telephone access numbers of each member of the Committee, for use by NESAC as well as by the SNS and CAST
- (b) keep the minutes of all NESAC meetings (or provide for provisions of such) so as to assure that all meetings and activities are carried forth in accordance with the provisions of these Rules and Regulations
- (c) be the custodian of the committee records. Any member of NESAC, CAST or the respective ABMS Boards or their delegate/agent/attorney may inspect these records for any proper purpose at any reasonable time.

CAST shall be responsible for approving all appointments to NESAC.

ARTICLE III. COMMITTEE MEMBERSHIP

Section 1. Requirements for NESAC Membership. Each NESAC member shall be a CNS Endovascular Surgery practitioner acknowledged by ABMS Boards with recognition of focused practice in this subspecialty discipline.

Section 2. Number of Committee Positions. The committee shall have nine members, with equal representation from the fields of Neurological Surgery, Radiology and Neurology. In response to major expansions or contractions in the size of NESAC, CAST may choose to increase this number in the future, while maintaining relative numerical balance among the specialties.

Section 3. Selection and Appointment. The three constituent organizations listed below are responsible for committee membership nominations, including the:

- (a) Joint Section of Cerebrovascular Surgery (JSCVS) of the American Association of Neurological Surgeons (AANS) and the Congress of Neurological Surgeons (CNS),
- (b) Society of Vascular and Interventional Neurology (SVIN), and
- (c) Society of NeuroInterventional Surgery (SNIS).

The CAST Chair and NESAC Chair will solicit nominations to fill existing/prospective vacancies on the Committee from NESAC members and the three constituent societies. CAST will then approve an individual from the list of candidates to fill each vacancy.

Section 4. Tenure. All newly appointed members serve for two years, with one possible 2-year renewal (a total of four years) unless their appointment was made to fill an unexpected vacancy. Once approved, the nominee may begin attending meetings immediately as part of the preparation process. The nominee will become a NESAC member beginning in January of the year following their nomination approval. Each term will begin in January of the initial appointment year, and their term will continue until the adjournment of the last meeting of the final year of the said term.

The terms of service for members will be staggered so that the number of terms that expire each year is generally uniform and limited to a minority of committee positions. To maintain continuity of the group and its processes and at its own discretion, CAST may add additional “ad hoc” members, especially during periods of transition. Terms for reappointment to NESAC follow the same provisions that govern the selection and appointment of new members. CAST may choose to alter the specific limits on terms of service at its own discretion, so long as the same limits apply equally to all subspecialty disciplines.

Section 5: Officer(s): The Chair of CAST, with the consensus of NESAC members, will name a NESAC Chair who will work with CAST leadership to set the time, place, and agenda for all regular and special NESAC meetings. This individual serves in that role for two years. The Chair position will rotate among the three representative specialties so that each specialty is represented during a six-year cycle. This individual will assign reviewers of candidates and programs so that all specialties have equal access and information to discuss all candidates and program applications, and to participate in their approval or denial. The NESAC Chair will also gather and lead discussions regarding issues that arise before the Committee, and strive to achieve a consensus viewpoint from all specialties within the group. The NESAC Chair will be a member of CAST and will regularly attend CAST meetings to coordinate activities of the advisory committee and the overarching goals of CAST. Other NESAC officers or subcommittee appointments may become necessary as the activities of the committee become more established and complex.

Section 6. ABMS and Society Communications: Each NESAC member may communicate freely with their respective ABMS board and/or nominating society to provide information about the Committee’s activities and processes. The group of subspecialty members (i.e. the three neurologists, radiologists, or neurosurgeons) may elect a NESAC member to serve as an official delegate to their respective ABMS board or society meetings, if desired by those entities.

Section 7. Compensation. Members shall not receive any stated salaries for their service, but nothing herein shall preclude members from receiving compensation for out-of-pocket expenses incurred and authorized by CAST.

ARTICLE IV. MEETINGS OF THE COMMITTEE

Section 1. Annual Meetings. NESAC will have two regularly scheduled meetings during each calendar year. Meeting notices shall be forthcoming to all committee members at least 30 days in advance. These meetings will be for committee review for the new application cycle in the spring and also for the annual report application cycle in the fall.

Section 2. Other Regular Meetings. NESAC may hold other meetings at whatever intervals and locations deemed appropriate and essential. At its discretion, NESAC may also choose to conduct one or more regular meetings by conference call or videoconference.

Section 3. Special Meetings. Special meetings of NESAC may be called at appropriate locations and times, as directed by the urgency of the issue prompting the meeting.

Section 4. Quorum. A majority of the NESAC members shall constitute a quorum for the transaction of business at any NESAC meeting. A quorum must include at least one member from each specialty.

Section 5. Manner of Acting. A quorum must be present for any official NESAC meeting. The act(s) of a majority of the members present at a meeting represent an official act of the committee. Any proposed committee actions will generally be debated until a consensus is reached amongst the representatives of the three-subspecialty groups.

The initial Rules and Regulations of NESAC were submitted to the SNS Executive Committee on December 1, 2018, and approved on May 18 2019. These have been revised to reflect evolving relationship between NESAC and CAST. These were updated July 1, 2023 to align with changes to CAST Charter.