Case Log Information for Radiology Programs

Background
The ACGME-I Case Log System is a data depository to support programs in complying with Advanced Specialty Requirements and to enable program directors to monitor each resident’s clinical experience by capturing and categorizing resident cases.

The Surgical/Hospital-based Review Committee-International examines cases completed by graduating residents to determine a program’s compliance with clinical experience requirements, judge if educational resources are sufficient for the program’s accredited complement of residents, and evaluate the breadth and depth of resident experiences. The Committee understands that documenting experience in any of the listed procedures does not signify achievement of competence in any procedure, nor do the cases required for logging represent the totality of clinical competency needed in any given specialty. Most importantly, completing a certain number of procedures does not replace or negate the requirement that, upon a resident’s completion of the program, the program director must verify that he or she has demonstrated sufficient competence to enter practice without direct supervision.

Residents have a responsibility to enter cases accurately and in a timely manner. It is recommended that residents log cases daily or at least weekly. Residents must continue to log cases throughout the duration of their program.

Program directors have the responsibility to regularly review and analyze each resident’s completed cases. It is recommended that program directors review the Activity Report at least quarterly to ensure each resident is gaining adequate experience for their level in the program.

The Accreditation Data System (ADS) Case Log tab includes general references on entering and retrieving information. Each specialty’s page on the ACGME-I website contains additional Case Log references, including a Resident Quick Guide with definitions and case entry requirements particular to the specialty and a Faculty and Staff Quick Guide to assist program directors and faculty members choose and evaluate Case Log reports. Residents are encouraged to review these resources prior to their first case entries and to continue to refer to them as needed. Program directors can use information from the reports in ADS to review resident progress toward meeting clinical experience requirements, to set and evaluate curriculum, and to inform clinical faculty members about residents’ clinical experience needs.
FREQUENTLY ASKED QUESTIONS

1. If the institution uses an electronic system to track cases, duty hours, resident evaluations, etc., can the Case Log data from this system be uploaded into ADS?
No. At present there is no mechanism to electronically transfer cases from another system into ADS. The program director has ultimate responsibility to ensure that all data reported in ADS is accurate and complete, and should encourage residents to enter their case data daily in the Case Log System in ADS.

Note that if your institution’s electronic system has the capability, it may be possible to download ADS case log data into your system. Please contact technical support at WEBads@acgme.org to obtain technical assistance for this function.

2. Will residents have access to their Case Logs after graduation?
Yes. Residents can access their Case Log reports after completion of the program to use for hospital credentialing, apply for fellowship training, etc. Residents are not able to add cases after completing the program.

3. How can a resident use information from their Case Logs?
During the residency, Case Logs are useful to help residents determine the breadth and depth of their procedural experience. Case Logs can be used to inform revision of rotations to allow for more experience in a procedure or prevent too much experience with one type of patient or procedure at the expense of broader educational goals. After residency, Case Logs provide a record of experiences when applying for fellowship training or for hospital credentialing.

4. How can a program director use information from resident Case Logs?
Program directors can apply filters for several of the reports available on the Case Log tab in ADS to determine how individual rotations, participating sites, or supervising faculty members are contributing to the residents’ experiences. Program directors can also review when and how residents are recording their cases. For example, if a program requires residents to enter cases each week, the Resident Activity Report can be run weekly, and it can be quickly identified if a resident has not logged any cases.

5. How does the Review Committee use Case Log data?
The Review Committee-International will review case reports for residents who have graduated from the program to determine the type of clinical experiences graduating residents have completed. The Committee will also review the data to determine if residents are completing large numbers of certain procedures while not obtaining experience all specialty areas. These analyses will allow the Committee to determine the breadth and depth of experiences provided by a program and to help judge the residents’ service obligations. Citations will result if the Committee judges that residents are performing certain procedures as excessive service over education, and if resident reporting is inconsistent or lacking.

Additionally, the Review Committee-International will periodically review Case Logs of graduating residents to determine if minimum numbers can and should be established for certain clinical experiences.
5. What are the clinical experiences the Review Committee-International is tracking for radiology?

The following table summarizes the clinical experiences the Review Committee-International reviews for graduating residents in radiology:

<table>
<thead>
<tr>
<th>Area</th>
<th>Procedure</th>
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<tbody>
<tr>
<td>Breast imaging</td>
<td>Mammograms</td>
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<td>Interventional procedures</td>
<td>Image guided biopsies</td>
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<td>Drainage procedures</td>
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<td>Angioplasty</td>
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<td>Embolization and infusion</td>
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<td></td>
<td>Other percutaneous and interventional procedures</td>
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<tr>
<td>Radiopharmaceutical therapy</td>
<td>Oral administration of I-131</td>
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