

## ACGME-I Case Logs QUICK GUIDE for Ophthalmology Faculty and Staff Members

When reviewing resident Case Log reports or counselling residents on their Case Log entry, consider:

- 1. The following resident roles for each case are counted toward minimum case requirements:
  - To be recorded as **Surgeon**, a resident must be present for all critical portions and must perform greater than or equal to 50 percent of the critical portions of the procedure under appropriate faculty supervision. All cases performed in the role of **Surgeon** count toward the resident's minimum case requirements.
  - To be recorded as **Assistant**, the resident must serve as the first assistant to a faculty member performing the procedure or to another resident who is responsible for the case and performing it under faculty member supervision. Only one resident can record a case as **Assistant** on a given procedure.
  - The following cases performed in the role of **Surgeon** or the role of **Assistant** will count toward minimum requirements: Corneal Surgery Keratoplasty; Keratorefractive Surgery total; Retinal Vitreous total.
  - To be recorded as a Teaching Assistant, the resident must be a senior resident who instructs another resident who is taking credit for the case as Surgeon. The Teaching Assistant performs less than 50 percent of the surgical procedure. Cases performed in the role of Teaching Assistant do not count toward minimum requirements.
- 2. Residents can count multiple procedures on one case if they perform the majority of the critical portions of the procedures. If a resident completes both sides of a bilateral procedure and has the SAME role for both procedures, the resident should choose the appropriate role (Surgeon or Assistant) and record two cases.
- If resident completes one side of a bilateral procedure as Surgeon and the other side as Assistant, the resident must create two cases in the Accreditation Data System (ADS)Case Log System and choose the Surgeon role in one, and the Assistant role in the other. The system only permits one role per case; however, each side can count for one case.

## Examples:

- A. A resident performs a bilateral blepharoplasty and acts as surgeon on both sides. The resident chooses the Surgeon role and records the case twice.
- B. A resident performs the role of surgeon in a case where a patient undergoes a combined phaco/trabeculectomy. The resident should record both procedures for this case using the Surgeon role.
- C. A resident performs the role of surgeon for a bilateral medial rectus muscle recessions and anterior transposition of the right superior oblique muscle on a single patient. The resident should record three procedures for this case using the Surgeon role.
- D. A patient undergoes strabismus surgery on two different muscles in each eye, where the resident is first surgeon. The resident should record each muscle as a separate procedure performed during the strabismus surgery using the Surgeon role.
- E. A resident performs a scleral buckle procedure as surgeon, combined with a pars plana vitrectomy serving as assistant. The resident should create two cases in the Case Log System and choose the Surgeon role for the scleral buckle procedure and the Assistant role for the pars plana vitrectomy.

Experience by Role	This report lists all procedures, including those that do not count toward the required minimum numbers, the number of each performed by the selected resident in each of the three roles, and the total number for each procedure.
Experience by Year	This report provides the total number of procedures included in the Resident Experience by Role Report.
Log Activity	This report allows program directors to note the number of cases or procedures logged by residents and the date and time that cases or updates were entered. This report is a quick way to keep track of how frequently residents are entering their cases. For example, if the program has a requirement that residents must enter cases weekly, running this report on a weekly basis is an easy way to identify residents who are not meeting the residency's requirements.
Case Brief Report	This is a brief report that lists the procedure date, case ID, CPT code, institution, resident role, attending, and description for each case for the selected resident.
Case Detail Report	All information for each case entered into the Case Log System is displayed in this report, making it most useful for getting an in-depth view of a resident's experience during a defined period. For example, this report could be generated for each resident for the preceding three- month period and used as part of the quarterly evaluation meeting with the program director or designated faculty mentor. The use of filters can provide additional insight into the resident's activities.

## **Available Reports**

Code Summary Report	This report provides the number of times each procedure is entered into the Case Log System by the program's residents. Filtering by specificprocedure, attending, institution, and/or setting can provide information on clinical activity that is useful to make targeted changes in rotation schedules, curriculum, faculty assignments, etc. This report can also be especially helpful in monitoring the procedures that do not count toward minimums. Choosing non-tracked codes on the area drop-down will show the procedures that have been entered and will not count toward minimum requirements. Review of these codes can determine if cases are being correctly entered.
Tracked Codes Report	This report provides a summary and description of all cases defined by the specialty that can be entered into the ACGME-I Case Log System. This report is organized by CPT codes; however, even if CPT codes are not used in your system, the report is useful to get a comprehensive listing of all procedures that are available to be tracked.
Minimums Report	This report will track resident progress toward achieving minimum numbers. A separate report should be generated for each resident using the default settings.

For technical support with Accreditation Data System (ADS) and/or the Case Log System, email ads@acgme.org.