

Case Log Frequently Asked Questions: Diagnostic and Interventional Radiology
Review Committee for Radiology
ACGME

Question	Answer
General	
<i>Is it OK for 2022 interventional radiology graduates to have up to three different procedure logs at graduation?</i>	All procedures logged during residency, whether in the ACGME Case Log System or another system, count toward the required 1,000 cases to be reported to the ACGME prior to graduation. For example, residents graduating in 2022 may report cases from their Training Tracker (July 1, 2020-April 30, 2021), cases logged in the ACGME Case Log system (March 1, 2021-June 30, 2022), and cases logged in residency before July 1, 2020 in personal or commercial logging programs.
<i>Is there any way to upload the existing Training Tracker spreadsheet into the online system so it can be easily populated with prior procedures?</i>	Unfortunately, no. The ACGME Case Log System cannot accept spreadsheets or other case log formats from outside systems, including the Training Tracker.
<i>When is backlogging required?</i>	Backlogging is required for all diagnostic radiology and interventional radiology residents scheduled to graduate June 30, 2023 and beyond.
<i>Can program directors monitor and track a resident's progress and tracking of procedures in the system?</i>	Yes. Program directors and program coordinators have access to reports in the system to provide oversight of residents' data entry. There are two detailed reports available, Log Activity and Case Detail, that will be most helpful to provide ongoing oversight throughout the residents' educational programs.
<i>Can program directors have a "dummy" login to access the system?</i>	No. The Case Log System does not allow dummy access. The program director and program coordinator can view the case entry screens using their Accreditation Data System (ADS) logins.
<i>If a resident logged a case and the program director determined it was logged incorrectly (Area/Type), can it be corrected?</i>	Yes. Case Log data can be edited as long as the resident is active in the residency program. Once a resident graduates, Case Log data is archived and may not be edited.

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<p><i>Should the program coordinator enter resident procedures into the Case Log System?</i></p>	<p>Two types of cases are logged into the Case Log System in ADS:</p> <p>Aggregate logging, usually performed by the program coordinator, is for non-interventional types of cases (chest radiographs, mammograms, CT angiograms, etc.).</p> <p>Individual logging, performed by residents, is for interventional procedures; for example liver biopsies, angiograms, and drain placements.. Interventional radiology, diagnostic radiology, and ESIR residents are all required to log the interventional procedures in which they participate and it is expected they will log these procedures themselves, not the program coordinator.</p>
<p><i>Will the diagnostic radiology (non-Early Specialization in Interventional Radiology(ESIR)) residents log their interventional procedures in the ACGME Case Log System?</i></p>	<p>All diagnostic radiology residents must log their interventional procedures in the Case Log System.</p>
<p><i>Does the case date need to reflect the actual case date or can programs continue to use the date the data was entered?</i></p>	<p>The case date for procedures entered into the Case Log should be the date the procedure was performed. Residents who backlog cases into the Case Log System may enter the date of data entry, for backlogged cases only.</p>
<p><i>Is patient identification necessary?</i></p>	<p>A case ID is necessary. While typically this will be the Medical Record Number (MRN), any unique identifier (that does not contain patient identifiable information) is acceptable.</p>
<p><i>If some residents have hundreds of cases already logged with no MRN number, can they put anything in that field for the backlogged cases?</i></p>	<p>For backlogged cases where the MRN was not collected when the procedure was performed any unique identifying number may be entered as the Case ID for such procedures.</p>
<p>Interventional</p>	
<p><i>Can ESIR residents count interventional procedures that are performed on rotations that were not identified as an interventional radiology or interventional radiology-related rotation?</i></p>	<p>Yes, ESIR residents should include all interventional procedures in which they participate towards the ESIR 500 case minimum, including procedures performed on rotations other than interventional radiology or interventional radiology-related rotations. Examples include arthrograms performed on a musculoskeletal rotation and breast biopsies performed on a breast imaging rotation, even when those rotations are standard diagnostic radiology rotations that do not meet criteria for interventional radiology-related.</p>

Question	Answer
<p><i>For interventional radiology-integrated residents who do a surgical intern year, do the interventional radiology cases from that year count toward the overall graduation case requirement?</i></p>	<p>Yes, residents may count interventional radiology procedures performed during their intern year. Residents who complete an internship that is not in a clinical year “owned” by their diagnostic radiology or interventional radiology residency program will not have access to the Case Log System. It is recommended that residents keep track of their interventional radiology procedures performed during internship in a personal log and log them in the Case Log System when they start their radiology residency.</p>
<p><i>Are interventional radiology-independent/ESIR residents required to have 1,000 cases in their PGY-6, or does the 1,000 by graduation imply the 500 from their PGY-2-5 plus another 500 in their final PGY-6?</i></p>	<p>To graduate from an interventional radiology residency program, whether it is integrated interventional radiology, two-year independent interventional radiology, or post-ESIR one-year independent interventional radiology, a minimum of 1,000 cases performed is required. This includes cases done throughout an individual resident’s graduate medical education (diagnostic radiology, interventional radiology, and even interventional radiology cases done during internship) and represents the total minimum requirement.</p>