

The American College of Radiology, with more than 30,000 members, is the principal organization of radiologists, radiation oncologists, and clinical medical physicists in the United States. The College is a nonprofit professional society whose primary purposes are to advance the science of radiology, improve radiologic services to the patient, study the socioeconomic aspects of the practice of radiology, and encourage continuing education for radiologists, radiation oncologists, medical physicists, and persons practicing in allied professional fields.

The American College of Radiology will periodically define new practice parameters and technical standards for radiologic practice to help advance the science of radiology and to improve the quality of service to patients throughout the United States. Existing practice parameters and technical standards will be reviewed for revision or renewal, as appropriate, on their fifth anniversary or sooner, if indicated.

Each practice parameter and technical standard, representing a policy statement by the College, has undergone a thorough consensus process in which it has been subjected to extensive review and approval. The practice parameters and technical standards recognize that the safe and effective use of diagnostic and therapeutic radiology requires specific training, skills, and techniques, as described in each document. Reproduction or modification of the published practice parameter and technical standard by those entities not providing these services is not authorized.

Revised 2017 (Resolution 11)*

ACR PRACTICE PARAMETER FOR CONTINUING MEDICAL EDUCATION (CME)

PREAMBLE

This document is an educational tool designed to assist practitioners in providing appropriate radiologic care for patients. Practice Parameters and Technical Standards are not inflexible rules or requirements of practice and are not intended, nor should they be used, to establish a legal standard of care.¹ For these reasons and those set forth below, the American College of Radiology and our collaborating medical specialty societies caution against the use of these documents in litigation in which the clinical decisions of a practitioner are called into question.

The ultimate judgment regarding the propriety of any specific procedure or course of action must be made by the practitioner in light of all the circumstances presented. Thus, an approach that differs from the guidance in this document, standing alone, does not necessarily imply that the approach was below the standard of care. To the contrary, a conscientious practitioner may responsibly adopt a course of action different from that set forth in this document when, in the reasonable judgment of the practitioner, such course of action is indicated by the condition of the patient, limitations of available resources, or advances in knowledge or technology subsequent to publication of this document. However, a practitioner who employs an approach substantially different from the guidance in this document is advised to document in the patient record information sufficient to explain the approach taken.

The practice of medicine involves not only the science but also the art of dealing with the prevention, diagnosis, alleviation, and treatment of disease. The variety and complexity of human conditions make it impossible to always reach the most appropriate diagnosis or to predict with certainty a particular response to treatment. Therefore, it should be recognized that adherence to the guidance in this document will not assure an accurate diagnosis or a successful outcome. All that should be expected is that the practitioner will follow a reasonable course of action based on current knowledge, available resources, and the needs of the patient to deliver effective and safe medical care. The sole purpose of this document is to assist practitioners in achieving this objective.

¹ *Iowa Medical Society and Iowa Society of Anesthesiologists v. Iowa Board of Nursing*, ___ N.W.2d ___ (Iowa 2013) Iowa Supreme Court refuses to find that the *ACR Technical Standard for Management of the Use of Radiation in Fluoroscopic Procedures* (Revised 2008) sets a national standard for who may perform fluoroscopic procedures in light of the standard's stated purpose that ACR standards are educational tools and not intended to establish a legal standard of care. See also, *Stanley v. McCarver*, 63 P.3d 1076 (Ariz. App. 2003) where in a concurring opinion the Court stated that "published standards or guidelines of specialty medical organizations are useful in determining the duty owed or the standard of care applicable in a given situation" even though ACR standards themselves do not establish the standard of care.

I. INTRODUCTION

The American College of Radiology (ACR) strongly values continuing medical education (CME), as evidenced in its Mission Statement. The purposes of the ACR are to advance the science of radiology, improve radiologic services to the patient, study the socioeconomic aspects of the practice of radiology, and encourage improved and continuing education for radiologists, radiation oncologists, interventional radiologists, and medical physicists. The ACR seeks Medical Physics Continuing Education Credits (MPCEC) from the [Commission on Accreditation of Medical Physics Education Programs](#) (CAMPEP) for continuing education activities designed specifically for medical physicists.

The ACR, through its Commission on Education, has consistently provided a variety of CME programs to meet the needs of radiologists, radiation oncologists, interventional radiologists, and medical physicists.

II. RECOMMENDATIONS

There are several approaches to determining the number of hours, the format, and the content of CME.

A. The American Board of Radiology, the American Osteopathic Board of Radiology, and the American Board of Nuclear Medicine

For many years, the American Board of Radiology (ABR), the American Osteopathic Board of Radiology (AOBR) and the American Board of Nuclear Medicine (ABNM) awarded lifelong certification in General Radiology, Diagnostic Radiology, Radiation Oncology, Medical Physics, and Nuclear Medicine. However, diplomates of these Boards currently receive time-limited 10-year certificates in these specialties. The ABR and AOBR also issue time-limited certificates in radiological subspecialties (formerly called Certificates of Added Qualifications or CAQs). Diplomates with time-limited certificates must enroll and participate in a Maintenance of Certification (MOC) program for ABR-certified physicians, or Osteopathic Continuous Certification (OCC) for AOBR-certified physicians, to retain board certification. (See <http://theabr.org/>, <http://www.aobr.org>, and <http://www.abnm.org/>.)

Subspecialties for which the ABR provides certification include Neuroradiology, Vascular/Interventional Radiology, Nuclear Radiology, and Pediatric Radiology. Subspecialties for which the AOBR provides certification include Body Imaging, Neuroradiology, Pediatric Radiology, Nuclear Radiology, and Vascular/Interventional Radiology.

The MOC programs evaluate 6 “essential competencies” on a continuous basis:

1. Medical knowledge
2. Patient care
3. Interpersonal and communication skills
4. Professionalism
5. Practice-based learning and improvement
6. Systems-based practice

To evaluate these 6 competencies, MOC uses 4 components:

1. Evidence of professional standing
2. Lifelong learning and self-assessment
3. Cognitive expertise
4. Practice quality improvement

The OCC programs evaluate 7 “essential competencies” on a continuous basis:

1. Osteopathic philosophy and osteopathic manipulative medicine
2. Medical knowledge
3. Patient care

4. Interpersonal and communication skills
5. Professionalism
6. Practice-based learning and improvement
7. Systems-based practice

To evaluate these 7 competencies, OCC uses 5 components:

1. Unrestricted licensure
2. Lifelong learning/CME
3. Cognitive assessment
4. Practice performance assessment and improvement
5. Continuous American Osteopathic Association (AOA) membership

CME in conformance with the MOC/OCC program of one's certifying board(s) is encouraged.

B. The American Medical Association

The American Medical Association (AMA) promotes CME and issues a Physician Recognition Award (PRA) for physicians who document they have met the requisite CME. Details can be found on the AMA website (<http://www.ama-assn.org>). CME may be in 2 categories, Category 1 or Category 2.

C. The American Osteopathic Association

The AOA requires 120 CME credits within a 3-year cycle. CME credit may be obtained with either Category 1-A, 1-B, 2-A, or 2-B. Details regarding AOA CME requirements may be found on the AOA website (<http://www.osteopathic.org>).

D. Licensure and Accreditation Requirements

Many states, hospital credentialing boards, and medical societies require CME to obtain and renew licensure, maintain hospital privileges, and retain active membership status.

Many accreditation programs have educational requirements specific to the modalities involved. ACR members are strongly encouraged to know and comply with the educational requirements of their state jurisdictions, hospital medical staffs, professional associations, and accreditation programs.

E. Lifelong Learning

ACR members are strongly encouraged to participate in lifelong learning and to arrange their own self-directed study programs.

III. EDUCATIONAL REFERENCE WEBSITES

In addition to the ACR (<http://www.acr.org>), many other organizations provide information on CME. The referenced websites mentioned here are provided for informational purposes only. These resources are only a few of the websites offering information on CME related to radiology or the radiation sciences. The ACR cannot attest to the accuracy of content on the websites of other organizations.

The American Board of Radiology
<http://theabr.org>

American Osteopathic College of Radiology
<http://www.aocr.org>

The American Board of Nuclear Medicine
<http://www.abnm.org>

American Osteopathic Board of Radiology
<http://www.aobr.org>

American Roentgen Ray Society
<http://www.arrs.org>

American Medical Association
<http://www.ama-assn.org>

Radiological Society of North America
<http://www.rsna.org>

CME gateway site administered by the Radiological Society of North America
<http://www.cmegateway.org>

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Development Chronology for This Parameter

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