Maintenance of Certification (MOC), introduced in 2001, is a common program of the 24 member boards of the American Board of Medical Specialties. Participation in MOC demonstrates that physicians are committed to the highest professional standards. This MOC effort includes 4 parts: Part 1: Professionalism and Professional Standing; Part 2: Lifelong Learning and Self-Assessment; Part 3: Assessment of Knowledge, Judgment, and Skills; and Part 4: Improvement in Medical Practice (IMP). The American Board of Nuclear Medicine (ABNM) began to implement MOC in 2007 and fully implemented the program in 2014 with a requirement for IMP. Physicians who routinely participate in quality improvement activities in their practices demonstrate commitment to patient-centered care that improves quality. The ABNM recognizes these activities, such as participation in peer review, membership on safety committees, and regular attendance at tumor boards and other clinical conferences. A complete list of the recognized activities is available on the ABNM website at https://www.abnm.org/index.php/qualifying-activities/. To meet MOC requirements, physicians must attest only once each year to participation in one or more of these activities.

The ABNM also recognizes that physicians who practice in outpatient settings or small groups may not have the opportunity to routinely engage in quality improvement activities. The ABNM has developed a practice survey for these and other physicians interested in a convenient and clinically relevant way to compare their practices to those of peers and identify opportunities for improvement. These practice surveys are based on procedure standards and clinical guidelines of professional societies such as SNMMI. They are designed to be easily completed by individual physicians or groups. The practice surveys are based on a review of 10 clinical studies and require answers to no more than 10 questions. Diplomates receive a summary of the answers provided by other physicians that allows them to compare their practices to those of peers.

The 2018 practice survey, Lung Scintigraphy for Diagnosis of Pulmonary Embolism, is available on the ABNM website at: http://interactive.snm.org/docs/lung_scintigraphy_v4_final.pdf. The survey asks 6 questions:

1. How often is the referring physician’s estimate of the prior probability of pulmonary embolism (low, medium, high) documented in the procedure request/order or documented in the patient’s medical record and available to you at the time of study interpretation?
2. How often has a chest radiograph or CT scan been performed within the preceding 24 hours before the lung scan when a patient presents with acute symptoms?
3. How often is SPECT imaging obtained in addition to, or instead of, planar images in multiple projections?
4. Which criteria do you use for interpretation?
5. How are the study results reported?
6. How often is direct (verbal or other methods accepted by your hospital) communication of results documented in the study report or the medical record?

The ABNM believes that completing the survey will provide a valuable educational opportunity to review the SNMMI guidelines and learn what others are doing. Physicians will learn, for example, how often other physicians are performing SPECT imaging and which interpretive criteria are most frequently used. The practice survey can be completed online and fulfills the MOC Part 4 requirement for the year in which it is completed.

The ABNM has improved MOC to make it more valuable, easier to understand, and convenient. Diplomates can document meeting MOC requirements by logging onto My Profile on the ABNM website at https://www.abnm.org/account/profile/login, answering a few questions, and confirming that they are meeting requirements for continuing medical education as well as IMP. The ABNM would like to know how we can continue to improve MOC. Please send comments and suggestions to abnm@abnm.org.
From the ABNM: Improvement in Medical Practice

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