Guidelines for Tracking
Interventional Radiology Patient Care and Procedural Experiences
Review Committee for Radiology

To comply with the Program Requirements for Graduate Medical Education in Interventional Radiology, the procedural training experience of each interventional radiology resident must be tracked through two methods:

1. ACGME Resident Case Log System
2. Interventional Radiology Patient Procedural Encounters Log

Resident Case Log System
The ACGME's Resident Case Log System is intended to capture a sample of the procedural experiences of an interventional radiology resident. Interventional radiology case data must be entered into the Case Log System for each resident. Interventional radiology Case Log data are entered in aggregate, similar to the diagnostic radiology Case Logs, and must be reviewed at least semiannually by the program director for accuracy [Program Requirement II.A.4.r)].

Specific interventional radiology Case Log procedural categories were chosen to provide a representative picture of resident procedural activities across the full domain of interventional radiology (see **Table 1**). Procedural minimums have not been established at this time, but will be determined in the future once sufficient data has been collected. Of note, initial interventional outpatient evaluation, while not a procedure, is an important resident experience and has been included as a Case Log category.

Interventional radiology-integrated program directors must track both interventional radiology Case Log categories and diagnostic radiology Case Log categories (see **Table 2**). Interventional radiology-independent program directors need to track only the interventional radiology Case Log categories.

Interventional radiology Case Log categories are defined by CPT codes, shown in **Table 3**. The Association of Program Directors in Interventional Radiology/Society of Interventional Radiology will inform the ACGME of CPT code updates on an annual basis.

Interventional Radiology Patient Procedural Encounters Log
An interventional radiology patient procedural encounter is defined as a patient visit during which an interventional radiology patient is evaluated or treated by a resident. This includes visits in which an interventional radiology patient undergoes an interventional radiology or interventional radiology-related procedure, as well as outpatient visits in which an initial evaluation is performed.

The Interventional Radiology Patient Procedural Encounters Log reflects the cumulative procedural experience of an interventional radiology resident. The Program Requirements for Graduate Medical Education in Interventional Radiology specify a minimum number of procedures per resident (1000 procedures during the interventional radiology residency, and

500 during the Early Specialization in Interventional Radiology (ESIR) curriculum). Programs must ensure that residents keep a log of all interventional radiology patient procedural encounters in order to track the cumulative procedural experience obtained during training. The cumulative Interventional Radiology Patient Procedural Encounters Log, commonly known as a "procedure log," should track the volume and type of all procedures and patient encounters, but should also provide some meaningful detail about each case.

Guidelines for Determining Interventional Radiology Case Log Numbers
1. Case Log entries are defined and counted according to established CPT code descriptions of interventional radiology procedural activity (**Table 3**).
2. The Case Log information for each ESIR resident who enters an independent program must be entered into the Resident Case Log System by the receiving interventional radiology-independent program director upon resident matriculation.
3. No more than two residents can take credit for the same procedure.

Guidelines for Counting Patient Encounters
1. An interventional radiology patient encounter is associated with an interventional radiology or interventional radiology-related procedure or initial outpatient evaluation and management visit.
2. Vascular imaging studies do not count toward interventional radiology patient encounters.
3. A resident must be the first operator on a patient procedural encounter in order to count it. An exception can be made to allow both a senior and a junior resident to count the same procedure when the senior resident is supervising the performance of a minor procedure performed by the junior resident.

Considerations for ESIR
1. Upon completion of ESIR training, the diagnostic radiology program director must provide residents with written verification of their completion of a minimum of 500 patient procedural encounters. This written verification, along with the resident's procedure log, must be provided to the interventional radiology-independent program director upon the resident's matriculation into the program. Please see **Appendix 1** for a sample of a standardized form to be used.
2. Residents who successfully complete ESIR training and enter an interventional radiology-independent program in the second year of training should include in their logs all interventional radiology patient procedural encounters completed during the ESIR curriculum in addition to those completed during the interventional radiology-independent program.

Table 1: Interventional Radiology Case Log Categories

CASE LOG CATEGORY (12)	REQUIRED MINIMUM
Aortic Stent Grafting	TBD
Arterial PTA or Stent	TBD
Dialysis Access Intervention	TBD
Embolization	TBD
New Outpatient Clinic Evaluation	TBD
Primary GI Intervention (PTBD, Cholecystostomy, Gastrostomy)	TBD
Primary Nephrostomy	TBD
Thrombolysis or Thrombectomy (Arterial or Venous)	TBD
TIPS or TIPS Revision	TBD
Tumor Ablation	TBD
Venous Port	TBD
Venous Intervention (Stent, PTA, or filter)	TBD

Table 2: Diagnostic Radiology Case Log Categories

CASE LOG CATEGORY (11)	REQUIRED MINIMUM
Chest X-Ray	1900
CTA/MRA	100
Mammography	300
CT Abdominal/Pelvic	600
US Abdominal/Pelvic	350
Image Guided Biopsy/Drainage	25
MRI Lower Extremity Joints	20
MRI Brain	110
PET	30
MRI Body	20
MRI Spine	60

Table 3: Interventional Radiology CPT Codes by Category

CASE LOG CATEGORY (12)	CPT CODES
Aortic Stent Grafting	33880, 33881, 34701, 34702, 34703, 34704, 34705, 34706, 34707, 34708, 34713, 34841, 34842, 34843, 34844, 34845, 34846, 34847, 34848,
Arterial PTA or Stent	37220, 37221, 37224, 37225, 37226, 37227, 37228, 37229, 37230, 37231, 37236, 37246
Dialysis Access Intervention	36901, 36902, 36903, 36904, 36905, 36906
Embolization	37241, 37242, 37243, 37244, 61626
New Outpatient Clinic Evaluation	99201, 99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215
Primary GI Intervention (PTBD, Cholecystostomy, Gastrostomy)	47533, 47534, 47490, 49440
Primary Nephrostomy	50432, 50433
Thrombolysis or Thrombectomy (Arterial or Venous)	37184, 37187, 37211, 37212
TIPS or TIPS Revision	37182, 37183
Tumor Ablation	20982, 20983, 32994, 32998, 47382, 47383, 50592, 50593
Venous Port	36560, 36561
Venous Intervention (Stent, PTA, or filter)	37191, 37193, 37238, 37248

Appendix 1: Standardized Form for ESIR Resident Training Verification

Verification of ESIR Training

Programs should complete this form and provide to the accepting interventional radiology-independent program director for each resident who completes ESIR training.

Resident Name: _____

The above-named resident has successfully completed our ACGME-approved ESIR curriculum. This form summarizes the procedural experience obtained during the ESIR training and includes interventional radiology Case Log volumes and the total number of interventional radiology patient procedural encounters.

ACGME Case Logs

CASE LOG CATEGORY (12)	Number Performed
Aortic Stent Grafting	
Arterial PTA or Stent	
Dialysis Access Intervention	
Embolization	
New Outpatient Clinic Evaluation	
Primary GI Intervention (PTBD, Cholecystostomy, Gastrostomy)	
Primary Nephrostomy	
Thrombolysis or Thrombectomy (Arterial or Venous)	
TIPS or TIPS Revision	
Tumor Ablation	
Venous Port	
Venous Intervention (Stent, PTA, or filter)	

Interventional Radiology Patient Procedural Encounters

The total number of interventional radiology patient procedural encounters in which the resident participated during ESIR training is _____.

A detailed log enumerating these patient procedural encounters has been reviewed by myself, with the resident, and a copy is attached to this form.

Diagnostic Radiology Program Director Name: _____

Date: _____