Quick Guide for preparing for the Validation Survey[i]

Tab1.Facility Walkthrough: Ensure the accreditation database ACRedit Plus accurately reflects the current personnel and equipment at the facility. It is recommended to have Zoom/Teams downloaded to a cell phone to perform the virtual walkthrough. Some sites have a pre-recorded video which is shared during the virtual survey. The following items are reviewed for Onsite and Virtual surveys:

- Posted ACR Notice to Patients (Consumer Complaint) and ACR certificates
- Crash cart/medication box and documentation that the crash cart/medication box is checked if applicable
- ACR-accredited equipment (CT, MR, NM, PET, and US) to include any radiation signage, MR Zone signage, MR safety signage, MR safe fire extinguisher, and the hot lab for NM/PET

The Validation Site Survey team will review the types of exams performed at each facility. Facilities undergoing a virtual survey will be sent a ShareFile link to upload a list of exams performed at the site. Facilities **must** be accredited in all modules that are routinely performed on their equipment. In emergency situations, MRI, NM, PET, and US facilities may perform a certain number of imaging exams for which they are not accredited. Please reference the Units of Emergency Use. CT can only perform exams and patient types for which they are accredited.

Tab 2. Physician qualifications: Physicians certified through the American Board of Radiology board certification can be found at the ABR website by searching the physician's last name in the "Verify Board Certification Status" field found on the right side of the page. If a physician is participating in the continuing certification program, the Verification of Certification and Continuing Certification (MOC) will be the **only** documentation needed for the survey. If they are **not** participating, CMEs (continued education) and proof of interpretation of 200 exams for each ACR-accredited modality (CT, MR, NM, PET, and US), all within the last 36 months (continued experience) must be provided. Reference the Knowledge Base[ii] for other approved board certifications and complete accreditation requirements by selecting the respective modality, "Personnel," and "Interpreting Physician." The initial qualifications, continuing experience, and continuing education requirements can be found in these articles.

Cardiologist: The following documentation is required for cardiologists interpreting NM/PET cardiac studies: The American Board of Internal Medicine (ABIM) in CARDIOLOGY **and** documentation showing completion of Level II Core Cardiology Training Symposium (COCATS) **or** certification in nuclear cardiology by the Certification Board of Nuclear Cardiology (CBNC). If the cardiologist is **not** participating in the Maintenance of Certification (MOC), CMEs (continued education), proof of interpretation of 200 nuclear medicine/PET exams (continued experience), all within the last 36 months must be provided. Reference the Knowledge Base[ii] for other approved board certifications and complete accreditation requirements by selecting the respective modality, "Personnel," and "Interpreting Physician." The initial qualifications, continuing experience, and continuing education requirements can be found in these articles.

Tab 3. **Physicist qualifications**: Physicists that are board-certified through the American Board of Radiology must visit the website in Tab 2 ABR to confirm. Reference the Knowledge Base[ii] for other approved board certifications and complete accreditation requirements by selecting the respective modality "Personnel," and "Medical Physicist". Initial qualifications, continuing experience, and continuing education requirements can be found in these articles.

Tab 4. **Technologist qualifications**: Verification of the technologist's qualifications can be verified during the survey through ARRT, NMTCB, ARDMS, etc. Technologists who are not certified in the modality they are working in require additional documentation. Reference the Knowledge Base[ii] for additional technologist requirements and complete accreditation requirements by selecting the respective modality, "Personnel," and "Technologist". The initial qualifications, continuing experience, and continuing education requirements can be found in these articles.

Tab 5. Annual Physics Survey/Performance Evaluation and Quality Control Review: Provide the most recent and previous year's annual physicist reports for each unit of your ACR-accredited modalities (CT, MR, NM, PET, and US) and your technologist's quality control documentation for CT, MR, NM, and PET. Reference the toolkit ACR VSS Toolkit for further information.

Tab 6. Policies and Procedures: The general policies apply universally to all facilities. Additionally, facilities accredited in CT, MR, or the cardiac module for NM/PET must adhere to specific policies tailored to those modalities and MIPPA sites are required to maintain a licensing verification and an Office of Inspector General (OIG) policy. Reference the toolkit ACR VSS Toolkit for further information.

Tab 7. Physician Quality Assurance Program: All interpreting physicians must participate in one of two Quality Assurance pathways. Physicians who do not participate in RADPEER must provide either their peer review or peer learning policy. In addition to the policy, documentation must be provided to confirm peer review or peer learning is actively being performed. Furthermore, facilities accredited in the breast MRI module must provide the medical outcomes audit. Reference the toolkit ACR VSS Toolkit and/or the Physician QA Requirements Quality Assurance Requirements for further information.

Tab 8. Image Labeling: During the virtual survey, PACS images are reviewed for each ACR-accredited modality to ensure the proper labels are either on the image or in the DICOM header. Reference the toolkit ACR VSS Toolkit for further information.

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[i] The ACR VSS TOOLKIT and the Knowledge Base provide detailed information.
[ii] Knowledge Base is found at the bottom of the webpage.