

Application for BSCI/BSCCT Level 2 Initial Accreditation in Cardiac CT

PLEASE TYPE OR PRINT (IN INK) ALL INFORMATION

I hereby make an application to the BSCI/BSCCT for initial accreditation of Level 2 practice in Cardiovascular CT. I agree to the withdrawal of accreditation if any of the statements I make in this regard are found to be false or if any of the rules governing this process are violated.

Eligibility

Applicants for Level 2 Initial accreditation must be one of the following

- Consultants in Radiology or Cardiology
- Trainees (ST trainees or staff doctors with equivalent experience) who wish to undertake advanced training in cardiovascular imaging.
- Other applicants will only be considered in exceptional circumstances.

Are you a BSCI/BSCCT Member? Yes 🗌 No 🗌

Membership number:

Notes

- This application is for initial accreditation as a Level 2 practitioner of Cardiac CT. It is likely that you have undertaken clinical training in a practicing centre and have attended sufficient CPD events to fulfil the BSCI/BSCCT requirements (see details below) OR recently completed a relevant training course and compiled a logbook of 25 additional clinical cases.
- 2. The onus is on the applicant to demonstrate clearly that they have reached the required standard. Applications that are unclear or do not include all of the required information will be suspended and returned to the applicant for clarification and resubmission.

Section One

| APPLICANT INFORMATION | | | | | |
|---|---------------|--|-------------------|--|--|
| Name | | | | | |
| Date of birth | | Phone | | | |
| Current address | | | | | |
| Email | | GMC number (or equivalent) | | | |
| FIELD OF SPECIALISATION | | | | | |
| Radiology / Cardiology / Other ¹ | | Year of training or date of consultant appointment | | | |
| FRCR / FRCP / MRCP / Other ¹ | | Date: | | | |
| CARDI | AC CT PROGRAM | IME EXPERI | ENCE ² | | |
| Institution: | | | City: | | |
| Role: | Start date: | | End date: | | |
| Institution: | | | City: | | |
| Role: | Start date: | | End date: | | |
| CURRENT INSTITUTION | | | | | |
| Institution: | | | City: | | |
| Role: | Start date: | | End date: | | |

¹ If you (i) are not a Radiologist or Cardiologist by training and/or (ii) have not completed the corresponding postgraduate qualifications (FRCR/MRCP or equivalent), please provide a separate statement detailing current scope of and the relevance of BSCI Level 2 accreditation to your medical practice.

² If more space is required, please provide a chronological list of training via a separate written statement.

Section Two

The BSCI/BSCCT encourages applications through two principal routes.

Route 1 – Hospital-based

- 1. The applicant, during normal clinical practice, has performed **150 contrast-enhanced** cardiovascular CT studies.
 - a. These studies should cover the case-mix defined in the Verification of Hands-On Cardiovascular CT Practice.
 - b. The applicant should have been involved in choice of scan protocol, patient preparation, study acquisition, analysis and report production.
 - c. All studies should have been supervised by cardiac CT practitioners formally accredited to at least BSCI/BSCCT Level 2 standard.³
- 2. In lieu of a logbook of **all** cases, supporting evidence must comprise:
 - a. A completed Verification of Hands-On Cardiovascular CT Practice form. A letter on departmental letterhead **using the same form of words** may be submitted instead.
 - b. A logbook of **25 dated, anonymised but otherwise complete cardiac CT reports**. Reports may be co-signed by no more than one supervising Cardiologist and/or Radiologist and must include information on dose (DLP) and scan technique.
- 3. The Verification of Hands-On Cardiovascular CT Practice form **must** be signed by a practitioner accredited to at least BSCI/BSCCT Level 2 Clinical Practitioner standard.⁴
 - a. BSCI/BSCCT Level 2 Initial accredited practitioners are not eligible to sign this form.
- 4. Evidence of 16 hours Continuing Professional Development must be submitted. This **must** demonstrably fulfil the requirements outlined in Section 3.

Route 2 – Course-based

- 1. The applicant has attended a classroom-based course that meets **all** of the following criteria:
 - a. The course must have been attended **no more than 24 months prior to the date of application**. Applicants applying more than a year after attending the course must meet additional requirements (see 3, below).
 - b. The course **must** be supervised by a faculty lead (and, ideally, all trainers) accredited to at least BSCI/BSCCT Level 2 **Clinical Practitioner** standard.⁴
 - i. BSCI/BSCCT 'Level 2 Initial' accredited practitioners **do not** meet this criterion.
 - c. During the course, applicants must examine **150 contrast-enhanced cardiac CT studies**.
 - d. These studies **must** cover the case-mix defined in the Verification of Hands-On Cardiac CT Practice (see 'Hospital-based Training', above). A logbook of all cases examined should be included with the application.
 - e. A course attendance certificate may be submitted in lieu of completing the 'Verification of Hands-On Cardiac CT Practice' and **must** confirm:
 - i. Interpretation of a minimum of 150 contrast-enhanced cardiac CT studies.
 - ii. The case-mix requirements for Level 2 Initial Accreditation have been met.

³ The BSCI/BSCCT also recognises the accreditation programmes of both the Society of Cardiovascular Computed Tomography (SCCT) and European Association of Cardiovascular Imaging (EACVI). At the discretion of the Accreditation Committee, practitioners accredited by other societies may also be considered eligible.

⁴ SCCT or EACVI Level 2 or 3 accredited cardiovascular CT practitioners **are also eligible** to sign this form. At the discretion of the Accreditation Committee, Level 2 practitioners accredited by other societies may also be considered eligible.

- iii. The number of approved Category 1 CPD points for the course
- iv. The accreditation level of the Faculty lead/Course Organiser.
- f. Information in (e) not included on the course attendance certificate should be highlighted from other course documentation or be requested in writing from the course organiser.
- g. Applications that do not include all of the required information will be suspended and returned to the applicant for clarification and resubmission.
- Supplementary to the 150 classroom-based cases, and reflecting the non-clinical learning environment of a classroom-based course, is the requirement for evidence of involvement in the scanning and report production of an <u>additional</u> 25 hospital/clinic-based cases.
 - a. The applicant should provide dated, anonymised but otherwise complete reports for all 25 cases. Reports may be co-signed by no more than one supervising Cardiologist and/or Radiologist and must include information on dose (DLP) and scan technique.
 - b. Cases must have been performed in the interval between course completion and accreditation application and must have been supervised by cardiac CT practitioners formally accredited to at least BSCI/BSCCT Level 2 standard.⁵
 - c. The reports should be accompanied by a covering letter from a practitioner formally accredited to at least BSCI/BSCCT Level 2 standard⁵ confirming that the supervision requirement in (b) has been met for each of the 25 cases.
 - d. Applications that do not include all of the required information will be suspended and returned to the applicant for clarification and resubmission.
- 3. Applicants applying **more than one year** after completion of a classroom-based course must submit a logbook of an **<u>additional</u> 100 hospital/clinic-based cases**.
 - The applicant should provide an anonymised and dated summary logbook of all 100 cases. The template available on the BSCI/BSCCT website (or any other format that contains all of the same information) can be used for this purpose.
 - b. The applicant should provide dated, anonymised but otherwise complete reports for 25 of the 100 cases. Reports may be co-signed by no more than one supervising Cardiologist and/or Radiologist and must include information on dose (DLP) and scan technique.
 - c. Cases **must** have been performed in the interval between course completion and accreditation application and, by definition, **cannot** be more than 24 months old at the time of accreditation application submission. It is therefore highly advisable to apply for accreditation within 12 months of the date of a classroom-based training certificate.
 - d. The additional 100 cases **must** have been supervised by a practitioner formally accredited at least BSCI/BSCCT Level 2 standard.⁵
 - e. The reports should be accompanied by a covering letter from a practitioner formally accredited to at least BSCI/BSCCT Level 2 standard⁵ confirming that the supervision requirement in (d) has been met for each of the 100 cases.
 - f. Applications that do not include all of the required information will be suspended and returned to the applicant for clarification and resubmission.
- 4. Courses completed **more than two years** before the date of application for accreditation **will not count** towards the accreditation requirement. Applicants wishing to apply for accreditation either should have accrued enough cardiac CT cases in clinical practice to apply via the Hospitalbased route or will need to attend another course to top up training.

⁵ Including BSCI/BSCCT Level 2 Initial. The BSCI/BSCCT recognises the accreditation programmes of both the Society of Cardiovascular Computed Tomography (SCCT) and European Association of Cardiovascular Imaging (EACVI). At the discretion of the Accreditation Committee, practitioners accredited by other societies may also be considered eligible.

VERIFICATION OF HANDS-ON CARDIOVASCULAR CT PRACTICE Statement of Accredited Cardiovascular CT Practitioner

I verify that the applicant has been involved in decision-making, interpretation and report production of at least 150 contrast-enhanced cardiovascular CT studies.

I verify that a practitioner accredited to at least BSCI Level 2 standard has supervised the applicant during all cases.

I verify that the cases include:

- At least 60 cases of coronary analysis, no more than 25% of which were entirely normal
- At least 25 cases of other cardiac pathology e.g. pericardial diseases, valvular disease
- At least 10 cases of patients who have undergone coronary artery bypass grafting

I verify that the applicant is a specialist registrar, clinical specialist or consultant (or equivalent, if applying from outside the UK). They work in this department and are in good standing.

I verify that the applicant is providing **25 anonymised but otherwise complete cardiac CT reports**, each including date of study, indication, technique, DLP, findings and conclusion.

| Signature | | Title |
|--------------------------|-------------------|-------|
| Name in full | | Date |
| Accreditation body | | |
| Level of Accreditation | Membership number | |
| Email | | |
| Institution and position | | |
| Address | | |

Section Three

Continuing Professional Development – all applicants

Evidence of the following must be provided with your application:

CPD CONFIRMATION

The applicant must provide evidence of 16 hours of CPD in cardiovascular CT that includes, but is not limited to:

1. Image optimization, radiation dose reduction, and advanced post-processing.

- 2. Functional assessment with cardiac CT and correlation with other modalities.
- 3. Bypass graft anatomy and assessment.
- 4. Coronary artery stent assessment.
- 6. Assessment of valvular heart disease including TAVI planning.
- 7. Role of CT in patients with heart failure.
- 8. Role of CT in pericardial diseases and cardiac masses.
- 9. The role of CT in evaluation of congenital heart disease.

10. Assessment of non-cardiac pathologies on a cardiac CT scan, particularly lung pathology.

Applicants should note the following points:

- If a Level 2 course certificate is submitted as evidence of relevant cardiovascular CT CPD, the certificate should confirm specifically that the content areas above has been covered. A course programme indicating the lecture content will also suffice.
- All CPD must be pertinent to cardiovascular CT, demonstrably apply to the content areas above and be supported by formal certificates stating the number of CPD hours granted for the activity.
- If the submitted CPD certificates relate to general or multi-stream meetings, the onus is on the applicant to detail the lectures and modules attended relevant to this application. The applicant will be credited an appropriate proportion of the CPD value of the meeting certificate.
- If this detail is not provided and/or, in the view of the Accreditation Committee, the claimed CPD has unclear relevance to cardiac CT accreditation, **no credit will be allocated**. If the CPD requirement is not met as a result, forms will be returned to the applicant for clarification and resubmission. The application will be suspended in the meantime.

Section Four

Agreement to Terms

I understand and agree that, in consideration of my application, my practice may be reviewed and assessed by the Society and that the Society may make enquiries in to such practice, to whomsoever they deem appropriate. If the information gathered is at odds with the details contained within the application, I will be given the opportunity to address such conflicts, but will not be advised as to the identity of the individuals who have furnished adverse information. I understand that in addition, that all statements and other information furnished to the Society in connection of this application should be confidential and not subject to examination by me or anyone acting on my behalf.

| Signature of Applicant | Date |
|------------------------|------|
| | |

Instruction to Applicant:

Applications and payment for BSCI/BSCCT Accreditation MUST be submitted in electronic format.

1. Complete the application form and collate supporting documentation as appropriate. Use extra paper for additional data if necessary. All required signatures must be present for the application to be considered complete. Incomplete applications will be returned to the applicant.

2. For course based applicants only, obtain a letter verifying your status as a Consultant or Specialist Registrar from your Head of Department, Human Resources, Medical Director, etc.

3. Scan the completed application form and all supporting documentation.

4. Email a copy of the completed application form and supporting documentation to:

bsci@biomedex.co.uk

5. The appropriate fee should be paid by BACS with your name as the reference

Level 2 fees £175 (Sterling) for BSCI members £250 for non-members. BACS payment details are Account Name: "BSCI / BSCCT" Account Number: 81374346 Sort Code: 40 16 57; BIC: HBUKGB4124C IBAN: GB23 HBUK 4016 5781 3743 46

Postal address:

BSCI/BSCCT Secretariat c/o BioMedEx, Centrum House, 38 Queen Street, Glasgow, G1 3DX, UK T: +44(0)141 378 0958

Check list for application

| Provide a valid phone number, fax and e-mail address on your application in order to avoid delays | |
|--|--|
| 2. Include your BSCI/BSCCT Membership number (if appropriate) | |
| 3. Payment made by BACS. | |
| Letter verifying status as a Consultant or Specialist Registrar from the Head of Department, Human Resources, Medical director, etc. | |
| 5. Include: Verification of Attendance at a Dedicated Level 2 Course (including 150 studies) and dated, anonymised but otherwise complete reports for additional 25 cases. | |