

**5441 E. Williams Circle**

**Tucson, Arizona 85711-7412**

**Phone (520) 790-2900 Fax (520) 790-3200**

**www.theabr.org**

**Diagnostic Radiology**

**Self-Assessment Module (SAM)**

**Application Guidelines**

American Board of Radiology (ABR) qualification of Self-Assessment Modules (SAMs) will support the administrative requirements and documentation of comprehensive subject matter relevant to the goal of Maintenance of Certification (MOC): to improve the quality of patient care and professional development.

**Instructions for SAM Application**

There are three parts to a SAM application:

1. Content
2. Assessment
3. Administrative

**Part 1: Content**

1. Content materials. So that the ABR reviewers can confirm that the subject matter is relevant to MOC goals, applications must include sufficient materials to fully demonstrate the comprehensive nature of the proposed SAM offering. At a minimum, content submitted to the ABR must include: 1) an abstract or statement of educational objectives **and** 2) the full content (written articles, video material, or power point presentation). For presentations, a draft containing “word slides” will usually be an acceptable substitute for the full presentation content. **Category 1 credit must be approved prior to the SAM application**.
2. Images. The inclusion of appropriate, high-quality images is particularly encouraged for diagnostic radiology. They may be video, digital, multimedia, or other creative data display formats. Please submit images electronically, or provide the ABR with the necessary information and access to view web-based images. However, please limit the number of individual image files submitted with each SAM. Where possible, images should be consolidated into the content, with appropriate annotation.

**Part 2: Assessment**

A qualified SAM must have an assessment exercise that covers each of the main points and themes of the subject. The SAM may include a pre-assessment exercise, at the discretion of the SAM developer; the ABR does not require pre-assessments.

1. Questions (Items).
	1. Each SAM must have a minimum of 5 assessment questions (items). Please see Table 1 below for a detailed breakdown of the number of required SAM questions.
	2. The *stem* (question or statement to be completed) and *answer options* should accompany the SAM application. Please submit questions in a Word document electronically attached to your SAM application.

Table 1: CME/SAM Credit Requirements

*Note: all SAM activities must be a minimum of 1 Category 1 CME credit hour.*

|  |  |  |
| --- | --- | --- |
| At least \_\_\_ CME credit(s) | But less than \_\_\_ CME credits | # questions required |
| 1 | 2 | 5 |
| 2 | 3 | 10 |
| 3 | 4 | 15 |
| 4 | 5 | 20 |
| Etc. | Etc. | (pattern continues) |

1. References. The SAM application must include one or more specific references associated with each question, which will be given to participants to guide their directed reading as part of their personalized feedback. References will preferably be in standard citation format, assuring that all necessary information is present for participants to locate the specific information relative to the items. In addition to the references, it is encouraged that explanatory rationales (which may be brief) be supplied to inform participants as to *why* each answer option is correct or incorrect. Educational links back to key portions of the content materials may be supplied in addition to references.
2. Performance Data:
3. For each participant in the SAM, the sponsoring organization must create a record comparing that individual’s assessment performance to the performance of the other participants. Such record will be stored by the organization and provided to the individual as feedback. A sponsoring society may also collaborate/contract with another society to collect, analyze, and report the data to the participants and the ABR.
4. Aggregate performance data (number of participants choosing each response to each question and distribution of scores, at a minimum) must be supplied to the ABR within six months of the initiation of the SAM; individual-level performance data are not to be supplied to the ABR.

**Part 3: Administrative**

In the administrative portion of the SAM application, the submitter completes two forms (attached) and submits them electronically along with the content and assessment information described above.

1. The Application for Qualification should be completed per the instructions on the form.
2. The Development Criteria Checklist should be completed per the instructions on the form.
3. Submit applications *electronically* to: the ABR, information@theabr.org
4. For files that are too large to send via e-mail, a file transfer protocol (ftp) site may be used – contact the ABR office for details at 520-790-2900.

**ABR Response Process \*SAM must be submitted at least 30 days prior to first date to be offered**

1. The ABR strives to meet a 30 calendar-day turnaround time to notify the submitting organization of the status of the application. SAMs with large numbers of questions may take longer to review. Organizations are encouraged to submit SAM materials for qualification as early as possible to avoid any difficulties with timelines due to heavy SAM load or issues that need to be corrected before qualification. The notification of status may refer to notice that certain elements of the application are missing and needed before review can begin; or, if the original application was complete, the actual decision on qualification. Three decisions are possible:
	1. Qualified – A fully qualified SAM should be identified by the organization as “Qualified by the American Board of Radiology in meeting the criteria for self-assessment CME toward the purpose of fulfilling requirements in the ABR Maintenance of Certification Program.” SAM promotional material should bear the date of ABR qualification.
	2. Provisionally qualified – While some additional specified work is required before the SAM will be considered fully qualified, the understanding as to the nature and timeline of the work between the submitting organization and the ABR is clear and there is confidence that all can and will be accomplished before the SAM is actually offered. This decision allows the submitting organization to proceed with announcing/promoting the SAM offering, which should be identified as “provisionally qualified as of [date], with full qualification by the ABR expected before the SAM is taken.”
	3. Under consideration with further work required (“work in progress”) – This decision will describe missing elements or needed revisions that must be provided before the SAM can be provisionally qualified or qualified. Given the magnitude and/or timeline of the anticipated work, there is less certainty as to this SAM’s eligibility for qualification. At this stage, the submitting organization is not authorized to announce this offering as a provisionally qualified or qualified SAM.

1. The ABR will list the SAM on the ABR’s website and link to information about the SAM on the sponsoring society’s website. The link will remain established for the period of time considered appropriate by the sponsoring society.
2. A SAM remains qualified for up to 36 months, in accord with the ACCME definition of enduring material. Past that point, the module must be reviewed and modified as necessary by the sponsoring organization and resubmitted to the ABR if renewed qualification is desired. SAMs may be offered as little as one time, or as much as continuously for 36 months, at the discretion of the sponsoring organization.

**Diagnostic Radiology**

**Self-Assessment Module**

**Application for Qualification**

Please consider the program herein outlined for ABR qualification as a self-assessment module.

1. Organization: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Title of SAM: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­­\_\_\_\_
3. Speaker/Author(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. Format: ⬜ Enduring Material (Print, CD/DVD, Web, A/V) ⬜ In person
5. Venue: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
6. First date to be offered: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Last date to be offered: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
\*SAM must be submitted at least 30 days prior to first date to be offered.
7. Date CME approved (required):\_\_\_\_\_\_\_\_\_\_\_\_\_ CME Credit hours (required):\_\_\_\_\_\_ Sponsor: \_\_\_\_\_\_\_\_\_\_\_\_

**The number of SAM credits will equal the number of CME credits. (Please list CME credits for this offering alone, not entire meeting credits)**

1. Please indicate, by checking the appropriate boxes, that you have included all of the required SAM materials:

 ⬜ Abstract or list of educational objectives

 ⬜ Full Content (written articles, video material, or power-point presentation). NOTE: for presentations, a
 draft containing the word slides will usually be sufficient.

 ⬜ Test questions with references.

1. Please provide the following information on your **data reporting plans**:

a.To **Individual Participants**:

|  |
| --- |
| 1) Results (for each question: right/wrong)2) Comparison (personal score compared to score distribution for group)3) References (for each question, for further study)*Place the appropriate numbers* (1-3 above) before the method you plan to use for reporting:  |
| Methods:\_\_\_\_\_\_\_\_\_\_ audience response technology\_\_\_\_\_\_\_\_\_\_ on line \_\_\_\_\_\_\_\_\_\_ mail \_\_\_\_\_\_\_\_\_\_ other: (please specify)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

* 1. To the **ABR**:

⬜ Required: Score Distribution for Group (number receiving each possible score)

⬜ Required: Question Performance Data (number selecting each answer choice, for each question)

⬜ Option 1: as simple counts

⬜ Option 2: as histograms

Application, page 2:

1. **Timeline** you will use for reporting the above data:
	1. To **Individual Participants** (may choose more than one if results/comparison/references will be reported at different times):

⬜ on-site immediate (e.g., audience response technology)

⬜ within 3 months after participation (e.g., for SAM taken at a meeting)

⬜ no more than 6 months after taking the SAM (e.g., for on-line or enduring materials SAM)

* 1. To the **ABR** (choose one):

⬜ One-time presentation: *within three months*

⬜ Up to 6 months availability (on-line, print, etc.): *within 3 months of last date offered*

⬜ 6 months to 3 years availability: *every 6 months during entire period of offering*

1. What is your deadline for announcing the program (e.g., brochure publication)?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. When may the ABR post the title of this SAM on our website, linked to your website? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. Complete URL for the link: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. **Clinical Content Category**: Please indicate the primary content of this SAM by marking **one** of the following boxes “1.” If applicable, indicate a secondary category by marking a second box “2.”

|  |
| --- |
| Content Categories |
| ⬜ 01A Musculoskeletal (disease)⬜ 01B Musculoskeletal (trauma)⬜ 02A Cardiac⬜ 02B Thoracic⬜ 03 Gastrointestinal⬜ 04 Genitourinary⬜ 05 Neuroradiology⬜ 06 Vascular/Interventional⬜ 07 Nuclear⬜ 08 Ultrasound⬜ 09 Pediatric⬜ 10 Breast⬜ 11 Other⬜ 12 Noninterpretive Skills |

Name of person submitting SAM: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date submitted: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Development Criteria Checklist**

To receive ABR qualification, your self-assessment module (SAM) program must meet the guidelines listed. The organization’s representative **must initial each** criterion that has been met. Provide details on a separate page if the meeting of the criterion is in doubt. Please return this form with your application.

|  |  |
| --- | --- |
| **Development Criteria** | **Initial each box if criterion is met** |
| 1. The program is produced, sponsored, or approved by a national society, university, or recognized educational organization authorized to grant category 1 CME.
 |  |
| 1. The program planning committee takes responsibility for the content and execution of the program.
 |  |
| 1. The program planning committee is made up of peers of the target audience—those in the same or related specialty and practice settings.
 |  |
| 1. The program is relevant to practice, intended to improve patient care and appropriate for the target audience.
 |  |
| 1. The program description, instructions, and methods of assessment are clearly defined.
 |  |
| 1. The program consists of the following items:
	1. Assessment items designed to meet these guidelines
	2. Documentation of participant responses and performance data for credit
	3. References links for content and assessment items
 |  |
| 1. The participants will receive performance evaluation:
	1. An overall score
	2. Documentation of own vs. correct responses
	3. Feedback/references for incorrect responses
	4. Comparison of personal score to score distribution of the group
 |  |
| 1. The SAM format conforms to all ABR requirements and guidelines for content and test questions.
 |  |

Society Contact Person:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

These criteria are adapted from the Royal College of Physicians and Surgeons of Canada