Continued medical education credit hours: Are they being awarded too liberally?

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In a recent move, the Medical Council of India has begun awarding of credit hours for continued medical education (CME). A minimum of 150 credit hours is needed to renew medical registration. This has led to most state medical councils coming up with their guidelines for credit hours. [1-3] While the concept of credit hours has been in United States of America for over 30 years, it has recently been introduced in our country. However, it has not been warmly welcomed from the very outset. [4]

In the earlier days, recognition of scientific work done was limited to writing in curriculum vitae or just for name and fame. There was no scoring done to get license renewals.

Now, awarding credit hours will have the advantages like:

- The CME meets would be accredited by medical council which means the doctors would be getting points for the meets they attend
- The whole event would be monitored by an observer from medical council
- Quantification or scoring of scientific work done by doctors would be possible
- Researchers would be getting points for presentations and publications
- Teaching would be given credit
- Organizers and resource persons of scientific meets would be given credits

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- Subscription to journals published by medical societies would be given credit
- It will foster a scientific culture.

The flip side is that:

- Rules have come in without any proper system in place
- Most doctors object saying that there is no mandatory CME for lawyers and engineers^[4]
- When all information is available at the click of a button on the internet, busy practitioners feel that it is a waste of time and money to attend conferences^[4]
- Some doctors believe that nothing extra would be learnt sitting in a dark room with slide presentations^[4]
- No credit given to interaction or active involvement in scientific meets
- All publications get equal credits irrespective of the impact factor of journals
- All teachers get equal credit points irrespective of the quality and quantity of classes taken

What can be done?

Credit points are being distributed like *prasad* (temple offerings). Just to gain credit hours, doctors are attending different specialty CME meets. [5] Our body cannot be compartmentalized to subjects, so, any doctor can attend CME on any specialty and get credit hours. However, weightage should be given to credit points awarded in his/her specialty. Similarly, credit points should preferably be given to those who subscribe to journals and are members of associations of their specialty.

Workshops (of about 30 participants) should be given more credit points than conferences. Level of interaction and active participation of doctors can be scored in these workshops and extra credit points can be given to active participants.

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International and national internet journals have mushroomed up everywhere. Most of these journals are run on 'author pays' model and do not hesitate to accept articles of poor quality. Credit points can be given to these articles. However, if an article is published in journals of high impact factor, extra credit points should be awarded.

Doctors/faculty/post-graduate students who win prizes at conferences in oral or poster presentation should be awarded credit points. More credit points can be given to prizes won in international conferences followed by national and then state level conferences.

Once the CME credit hours system comes into place and is well-accepted by medical fraternity, there can be assessment of doctors in their specialty every 5 to 10 years (in addition to 150 credit hours) for renewal of registration. More weightage should be given to skills and attitudes gained and less for mere theoretical knowledge in these exams.

For medical teachers, if teaching is well-appreciated through student feedback or assessment of teachers, extra credit points can be given.

CONCLUSION

Doctors are life-long learners. Hence, if CME programmes

have credit hours, this would foster a culture amongst doctors to get updated with latest developments in their specialty. This would indirectly improve health-care in our country. However, awarding of credit hours should not be too liberal; otherwise, the basic purpose of CME accreditation would be defeated.

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