Editorial

WFITNRecommendations for Certification and Maintenance of Competence in Interventional Neuroradiology (Therapeutic NeuroIntervention/ Endovascular Neurosurgery)

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Interventional Neuroradiology (INR) is a medical discipline using interventional procedures for patients with diseases of the brain, sensory organs, head & neck, spinal cord, vertebral column and adjacent structures and the peripheral nervous system in adults and children.

The objectives of INR are to provide expert endovascular and percutaneous treatment of all diseases in the anatomical areas mentioned above and in relation to other specialties in neuroscience. This document proposes guidelines and standards for Certification and Maintenance of Competence (MOC) in INR.

It is recognized that there are a number of structural and operational differences in the health care systems, appointment procedures and training systems in the different countries. The goal of this document is to provide a platform for the development of a harmonized, comprehensive, structured and balanced continuous medical education (CME) in INR.

The WFITN recommends to each member to adopt a process of maintenance of compe-

tence, responding to the concerns and expectations of patients, third party payers and governments for monitoring and assurance of quality and safety in health care.

Training in INR

Recommendations on training in Therapeutic NeuroIntervention have been published by the WFITN in the Journal "Interventional Neuroradiology" in 1998 and modified in 2009¹. These guidelines are still valid in 2014 and were the basis for the UEMS guidelines for training in INR ^{2,3}. These UEMS guidelines have been fully endorsed by the WFITN ^{1,2,4}.

Certification

Physicians practicing INR should be trained according to published WFITN guidelines and certified in accordance with their national requirements and rules. In countries where there is no certification in INR, the WFITN strongly recommends such a certification program including an examination ^{5,6}.

Goals of the Maintenance of Competence (MOC) program

The goal of the MOC program is to allow a regular update of competence essential for a good practice and to encourage the implementation of a program for Continuous Professional Development (CPD).

The main components of the MOC program are:

• Working in a comprehensive neuroscience center as defined in the Standards of Practice.

• Doing personally a minimum of 100 neuroendovascular cases in a three year period.

• Maintenance of professional standing (license to practice).

- Being audited with satisfactory results.
- Recertification every 5 to 10 years.
- Practice of CPD.

The CPD is defined as the educative means of updating, developing and enhancing how doctors apply the knowledge, skills and attitudes required in their working lives. It is believed that CPD is essential for ensuring high standards of medical practice.

Each physician must demonstrate a commit-

References

- 1 Picard L, et al. Interventional neuroradiology training charter. Interv. Neuroradiol. 2009; 15 (1): 11-15.
- 2 Flodmark O, Grisold W, Richling B, et al. Training of future interventional neuroradiologists: the European approach. Stroke. 2012; 43 (10): 2810-2813. doi: 10.1161/ STROKEAHA.112.657882.
- 3 European Union of Medical Specialists. UEMS recommendations for acquiring "Particular qualification" in Endovascular Interventional Neuroradiology - INR. EJMINT. 2012: 1212000052.
- 4 Rodesch G, Picard L, Berenstein A, et al. Intervention-

ment to improve his practice quality and to enhance his competences.

The concept of Personal Quality Improvement (PQI) is a key component of CPD, demonstrating that certified physicians are continuously improving care, reducing risk, increasing patients' safety, and providing better cost-benefit ratios.

Physicians engaged in the maintenance of a competence process are required to participate in projects of practice reinforcement, which entail data collection, analysis, implementation of a course of action, recollection of data, reanalysis, and assessment for improvement.

Although an individual can develop projects, the MOC process allows group practices, academic departments or divisions, or national societies to engage in Practice Quality Improvement (PQI) projects together.

Conclusions

The WFITN recommends all members and national scientific societies to initiate and participate in:

A Certification and Recertification process.

• A Maintenance of Competence program.

• A Continuous Professional Development program.

• A Professional Quality Improvement program.

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- 5 Taki W, Goto K, Hyodo A, et al. The first specialist qualification examination of the japanese society of intravascular neurosurgery (JSIN). Interv Neuroradiol. 2002; 8 (4): 343-345.
- 6 Hyogo T, Taki W, Negoro M, et al. Japanese society of neuro-endovascular treatment specialist qualification system. Six years' experience and introduction of an animal model examination. Interv Neuroradiol. 2008; 14 (3); 235-240.