

Cardiology: Initial Level 2 Training or Equivalent in Cardiovascular CT

Revised 2021

Category A and A ₁ (65 minimum cases)	Category B and B ₁ (85-135 cases)	Category C (50 maximum cases)	Total Cases Required
Category A: 50 minimum cases	Category B: 85 - 135 cases (based on use of B ₁ , see note below) OR can be met through completion of Category A or A ₁ cases	Category C: 50 maximum cases	250
Category A ₁ : 15 minimum cases	Category B ₁ : 50 maximum cases		

Category A: DIRECT Contrast studies in which the physician:

- Was physically present while scanning took place and during image reconstruction; **scan acquisition personally witnessed.**
- Had the opportunity to ask questions of techs and nurses present.
- Reviewed the contrast CT angiographic images and contrast morphology using a CT workstation; **scan data independently manipulated and interpreted.**
- Arrived at a diagnosis and performed a complete interpretation; **independent interpretation compared to expert read.**
- Had the opportunity to review his/her interpretation with a Level 2 or 3 trained instructor.

Category A₁: DIRECT Contrast studies in which the physician:

- Reviewed the contrast CT angiographic images and contrast morphology on video using a CT workstation; **scan acquisition witnessed via a recording.**
- Arrived at a diagnosis and performed a complete interpretation; **scan data independently manipulated and interpreted.**
- Had the opportunity to review his/her interpretation with a Level 2 or 3 trained instructor; **independent interpretation compared to expert read.**

Category B: Non-DIRECT Contrast studies in which the physician:

- Cases involved interactive manipulation of reconstructed datasets using a CT workstation; **scan data independently manipulated and interpreted.**
- **Library cases (via training course, CD, DVD or online)**
- **Scan acquisition not witnessed.**
- **Independent interpretation compared to expert read.**
- **“Mentored” cases.**

Category B₁: Non-DIRECT Contrast studies in which the physician

- Reviewed the contrast CT angiographic studies from an educational CD or presentation that includes CT data review, clinical information and appropriate clinical correlative information, and which grant CME credit.
- **Library cases (via training course, CD, DVD, on-line, or educational presentation with CME)**
- **Patient preparation, scan acquisition, image reconstruction not witnessed.**
- **Scan data not independently manipulated and interpreted.**
- **Expert interpretation observed.**

Category C: Non-Contrast studies

- These may be the same as the contrast cases (A or A₁) above with an initial non-contrast component

Ongoing Experience Requirement (Maintenance of Competence)

To meet the continuing experience requirement of the ACCF/AHA Clinical Competence Statement on Cardiac CT and MR, physicians must have 150 cases within the last 36 months. The distribution may be the same as for having initially attained Level 2 or equivalent.

Cardiology: Level 2 Maintenance of Competency Requirements

Revised 2021

To meet the continuing experience requirement of the ACCF/AHA Clinical Competence Statement on Cardiac CT and MR, physicians must have 150 cases within the last 36 months prior to application submission, after [fulfilling initial training requirements](#).

Category A and A ₁ (50 minimum cases)	Category B and B ₁ (50 cases)	Category C (50 maximum cases)	Total Cases Required
Category A: 25 minimum cases	Category B: 25-50 cases (based on use of B ₁ , see note below) OR can be met through completion of Category A or A ₁ cases	Category C: 50 maximum cases	150
Category A ₁ : 25 maximum cases	Category B ₁ : 25 maximum cases		

Category A: DIRECT Contrast studies in which the physician:

- Was physically present while scanning took place and during image reconstruction; scan acquisition personally witnessed.
- Had the opportunity to ask questions of techs and nurses present.
- Reviewed the contrast CT angiographic images and contrast morphology using a CT workstation; scan data independently manipulated and interpreted.
- Arrived at a diagnosis and performed a complete interpretation; independent interpretation compared to expert read.
- Had the opportunity to review his/her interpretation with a Level 2 or 3 trained instructor.

Category A₁: DIRECT Contrast studies in which the physician:

- Reviewed the contrast CT angiographic images and contrast morphology on video using a CT workstation; scan acquisition witnessed via a recording.
- Arrived at a diagnosis and performed a complete interpretation; scan data independently manipulated and interpreted.
- Had the opportunity to review his/her interpretation with a Level 2 or 3 trained instructor; independent interpretation compared to expert read.

Category B: Non-DIRECT Contrast studies in which the physician:

- Cases involved interactive manipulation of reconstructed datasets using a CT workstation; scan data independently manipulated and interpreted.
- Library cases (via training course, CD, DVD or online)
- Scan acquisition not witnessed.
- Independent interpretation compared to expert read.
- “Mentored” cases.

Category B₁: Non-DIRECT Contrast studies in which the physician

- Reviewed the contrast CT angiographic studies from an educational CD or presentation that includes CT data review, clinical information and appropriate clinical correlative information, and which grant CME credit.
- Library cases (via training course, CD, DVD, on-line, or educational presentation with CME)
- Patient preparation, scan acquisition, image reconstruction not witnessed.
- Scan data not independently manipulated and interpreted.
- Expert interpretation observed.

Category C: Non-Contrast studies

- These may be the same as the contrast cases (A or A₁) above with an initial non-contrast component