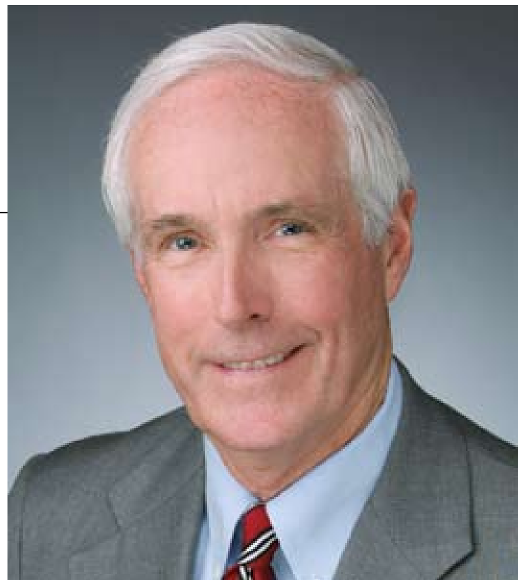
From my perspective



Since it became operational during the 2005 Clinical Congress, the ACS Case Log System has accumulated more than 100,000 cases. Such intense interest in this resource clearly illustrates that surgeon and resident members of the American College of Surgeons recognize the value of having a single repository for tracking the patient care they provide.

How it works

To participate in this robust program, surgeons enter case information either via a personal digital assistant (PDA) or via computer through the College's Web portal at *http://efacs.org/portal/page/portal/ACS_Content/ACSSvcs/MEMBERBENEFITS*. This system allows members of the College to gather practice data in an ongoing and systematic way. They then use this information to monitor their practice patterns, identify their strengths and weaknesses, and choose educational programs that will enable them to improve the clinical or cognitive skills needed to offer their patients high-quality care.

The ACS Case Log System also provides participants with masses of deidentified data that they may use to determine how their outcomes compare with those of other surgeons in the pooled database. More specifically, the Case Log System captures information on a surgeon's patients and uploads it into his or her own private data store. The data are then stripped of any information that could be used to identify the patient or the surgeon and placed in a central database that can be accessed by all users.

In addition, the system streamlines the process of case log reporting by generating simple reports about mortality and complication rates, including the percentage of deaths or cases that incurred complications. This information is organized by procedure. Surgeons also may compare their caseloads against national trends and use the data to determine the effects educational programs have on their performance. In other words, they can assess how they were doing before they took a course, see if the program helped them to improve their outcomes, and compare themselves with other surgeons who are performing the same procedure.

"The College believes its Case Log System is an invaluable instrument for surgeons who are concerned about maintaining their board certification and hospital privileges."

Credentialing purposes

The College believes its Case Log System is an invaluable instrument for surgeons who are concerned about maintaining their board certification and hospital privileges.

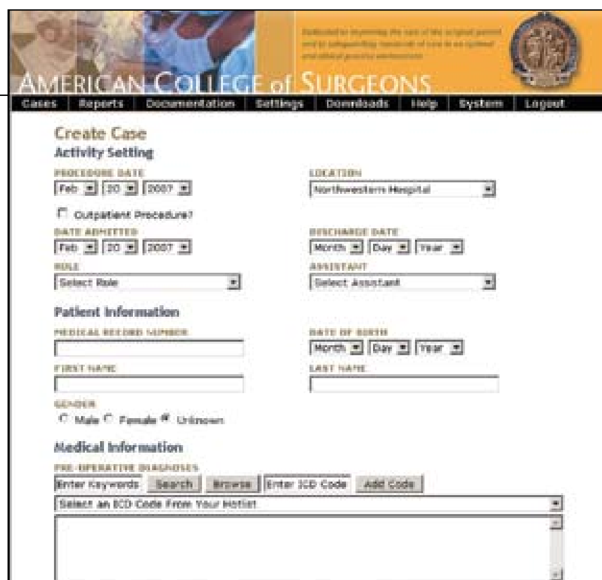
As most surgeons know, a few years ago, the American Board of Medical Specialties identified practice-based learning and improvement as a core competency. Hence, in order to attain and maintain board certification, surgeons in all specialties must offer evidence that they are tracking their practice patterns, evaluating their own skills, and engaging in lifelong learning.

Indeed, it is quite possible that practice-based learning and improvement will be the key aspect of maintenance of certification in the near future. As surgeons' practices become more specialized and as our emphasis as professionals continues to center on patient safety and quality care, the boards are finding that the traditional, broad-based recertification examination process is no longer an accurate method of determining whether surgeons are competent. Today, results speak louder than test scores.

Furthermore, it will no longer be enough for surgeons to spend a specific number of hours

in continuing medical education programs. The boards are going to want know how those courses affect performance and how they relate to an individual's practice patterns.

Similarly, hospitals will likely narrow the range of services they provide, focusing on the types of care they are best able to provide. That is to say, some medical centers will strive to build a reputation in cardiovascular treatment, whereas others will become leaders in cancer care, and so on. To help them create and sustain their identities, hospitals are likely to become more selective about the physicians they privilege and credential. Surgeons will need to keep and provide evidence of the number of specific procedures they have performed and their outcomes, and the ACS Case Log System certainly will be useful to those ends.



The Case Log System Web page.

Relevance to payment

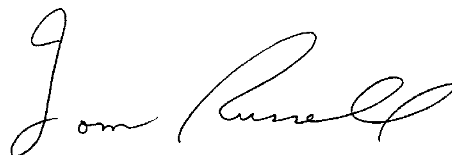
In their efforts to develop a more equitable, efficient, and effective health care delivery system, federal policy experts and lawmakers have demonstrated significant interest in linking reimbursement to outcomes. For its part, the College has been working steadfastly to bring the ACS National Surgical Quality Improvement Program (ACS NSQIP) into the private sector and arrive at a methodology that will appropriately measure surgical outcomes. The Case Log System will also allow the surgeon to compare outcomes with the data collected from the NSQIP program. We believe that ultimately the data collected and reported through these systems will be useful to the government and insurers as they attempt to develop a value-based, consumer-driven reimbursement system. To test this theory, the ACS NSQIP has partnered with the Centers for Medicare & Medicaid Services and Blue Cross Blue Shield of Michigan to have NSQIP data incorporated into their quality assessment programs.

Furthermore, although pay for performance is still in the conceptual stage, the government already is making progress in establishing the protocols for pay for reporting. On December 20, 2006, President Bush signed legislation that provided for additional payment by Medicare if a physician voluntarily reports quality information in the last half of 2007. (Surgeons who are interested in learning more about how this system will work and its potential benefits and pitfalls for their practices are encouraged to read this month's "Socioeconomic tips" column on page 39.)

Reducing the hassle factor

Unquestionably, surgeons are now expected to provide more documentation about their performance than has ever before been required, and it's probably safe to assume that this trend will only expand in the coming years. The College recognizes that many of our members have concerns about trying to balance their time in the operating room with the time they expend documenting what they have done. We anticipate that surgeons will find the Case Log System to be an effective means of quickly and accurately maintaining their records.

If you have suggestions regarding additional services or resources we might offer our members, please let us know. The College wants to provide services that will assist our members as we move into a new era of surgical care and accreditation.



Thomas R. Russell, MD, FACS

If you have comments or suggestions about this or other issues, please send them to Dr. Russell at fmp@facs.org.