From the Editor

Reflecting on the Departure of Dr. Kay Vydareny and Improvements to the ABR MOC Process

by Lane F. Donnelly, MD, Editor, The Beam

On June 30, 2017, Dr. Kay Vydareny retired from her role as the ABR’s associate executive director for diagnostic radiology and the subspecialties, ending a long history of service to the ABR.

I first met Dr. Vydareny at the Association of University Radiologists (AUR) meeting, held in Cincinnati in 1993 when I was a radiology resident. I remember being struck by the way she treated me and the other residents. I felt that I had her unbridled attention and that she truly cared about what I had to say. She had a way of making everyone feel as if they were someone of importance. In contrast, I clearly remember another incident from that same meeting when a prominent radiologist told another resident and me, who were presenting before him, to be sure we finished on time because the audience was there to listen to him, not us. Dr. Vydareny definitely had an approach different from that individual. I had the pleasure of interacting with her on multiple other occasions over the years, related to the ABR and other societies, and I was always impressed.

Dr. Vydareny is an incredibly good listener, is genuinely concerned for the development and well-being of others, and is continually devoted to the right path. She always treated my family—whom she got to know via the ABR—and me with kindness and respect. She will be incredibly missed. I believe that the behavior of such people is infectious, and that the ABR is a better organization and group of people and has a better culture than it otherwise would have without the exposure to and guidance from people like Dr. Vydareny. Certainly, we at the ABR should aspire to continue to cultivate those attributes and that culture.

Dr. Vydareny’s departure caused me to reflect on the ABR and, more specifically, the changes and improvements that have been made to the ABR Maintenance of Certification (MOC) process over the past five years. A great deal has been accomplished. Taking the lead from Dr. Vydareny and other like-minded ABR leaders, we have listened to the ABR community and have taken multiple actions to improve the ABR MOC process for all our diplomates. These changes include the following:

- In 2012, the ABR expanded the activities that qualify to meet self-assessment CME (SA-CME) requirements. We added SA-CME enduring activities from radiology journal...
articles with self-assessment tests to the existing Self-Assessment Modules (SAMs) available from in-person, society-sponsored activities. This has made it much easier for diplomates to meet MOC Part 2 requirements without needing to travel.

- In 2013, the ABR launched the MOC Team Tracker program, which enabled group practices to appoint authorized administrators to help with bookkeeping and payments.
- In 2015, the ABR reviewed MOC Part 4 (Practice Quality Improvement, or PQI) and expanded the means by which diplomates could fulfill Part 4 requirements. In addition to performing PQI projects, diplomates have been able to meet Part 4 requirements by active participation in any one of many PQI activities, such as peer review, quality or safety review committees, and root cause analysis teams. This change has given diplomates the ability to receive Part 4 credit for quality work in which they were already participating.
- Also in 2015, the ABR launched its Connections Customer Service Center to expedite the ability for candidates and diplomates to receive answers to their questions in an efficient, friendly manner.
- In 2016, the ABR introduced simplified MOC annual attestation. This new process has eliminated the need for diplomates to upload or enter detailed information in myABR. Now diplomates need only to attest that they have met the requirements and produce supporting documentation only if they happen to be audited.
- On August 1, 2017, the ABR launched a new and greatly improved website (see announcement in this issue of The BEAM).
- As announced in 2016, the ABR will go live in 2019 with ABR Online Longitudinal Assessment (ABR OLA), which will replace the traditional 10-year examination as the way diplomates meet MOC requirements for Part 3. Benefits of the new ABR-OLA approach include elimination of the need for travel to exam centers, little impact on the workday, educational opportunities (immediate feedback will be provided after each question), flexible timing for answering questions, and reassessment in areas of potential weakness.

The ABR will continue to work to improve its processes in order to optimize value and reduce inefficiencies for candidates and diplomates. And we wish Dr. Vydareny all the best during this next chapter of her life. Please see the “Focus on Diagnostic Radiology” article for more tributes to her.