The Quest for Continual Recertification

We physicians suffer through so many inspections and recertifications that I wonder whether there is any communication at all between the inspecting agencies. Surely similar criteria are used by the organizations enumerated below and meeting those criteria for one inspection might logically satisfy another organization. I suppose that physicians, hospitals, and training programs can suddenly become stale and out-of-date, but I doubt that this could occur so quickly as to require such frequent reviews.

Consider the following groups that inspect either ourselves, our hospitals, or our training programs, which occur several times if we work in more than one hospital. I wish I could avoid writing out all the abbreviated titles of these organizations but I suspect that I cannot get away with this, so I will have to bore you with the full names at least once. First there is the Joint Commission on the Accreditation of Healthcare Organizations (JCAHO), which inspects each hospital every 3 years (if you are lucky enough to receive full accreditation). Then there is the College of American Pathologists (CAP), which inspects every laboratory on site every 2 years and allows self-inspections on the alternate years.

The Accreditation Council for Graduate Medical Education (ACGME) certifies and conducts site visits of all training programs every 5 years (thank the Lord), but until recently they conducted separate inspections for internal medicine, pulmonary medicine, cardiology, and critical care programs. The American Board of Internal Medicine (ABIM) requires monthly written evaluations of every fellow in training. Also to completely practice my specialty, I must be certified in Internal Medicine, Pulmonary Medicine, Critical Care Medicine, and Sleep Medicine—all separate examinations. Soon recertification examinations will be required in some, if not all, of these disciplines.

Our hospital privileges must be renewed every 2 years with letters of recommendation, evidence of continuing medical education (CME), and recertification of procedure competency. Medical license renewal in my state must be done every 2 years with a similar type of documentation. There is virtually constant inspection by clerks and nurses to assure excellence by utilization review (UR) and quality assurance (QA). To top it all off, after your patients are discharged from the hospital, Medicare charts are reviewed by the Professional Review Organization (PRO), which evaluate the quality of your care. It takes my breath away!

What in the world is going on? Do we really need all of these independent inspections and recertifications or do these organizations exist in complete isolation from one another? Does it occur to anyone that physicians might just be overregulated? It is a wonder that anyone has time to see patients if they take the time to be properly certified to do so. Perhaps the system will fail when we reach the point of constant and continual inspections and recertifications such that all organizations will be satisfied and no medicine can be practiced.

A. Jay Block, MD, FCCP
Gainesville, Florida

Should Bystanders Perform Mouth-to-Mouth Ventilation During Resuscitation?

Each year over a quarter of a million Americans collapse in sudden, unexpected, out-of-hospital cardiac arrest. In most cases, the event is triggered by a ventricular tachyarrhythmia. The probability that a victim will survive out-of-hospital cardiac arrest varies widely among cities in the United States, ranging from less than 1% in congested urban areas to 17% in communities with a strong “chain of survival.”

Although survival is significantly higher when bystanders perform cardiopulmonary resuscitation (CPR) prior to arrival of emergency medical services personnel, we do not know whether it is essential for rescuers to perform both mouth-to-mouth ventilation and chest compression, or whether chest compressions alone would suffice. Many individuals state that they are reluctant to perform mouth-to-mouth ventilation on strangers because they are afraid that they...