



# IAC Accreditation Checklist for MRI Image-Guided Prostate Biopsy Procedures

*A guide to applying for accreditation.*

## [Menu](#)

[Step 1: Getting Started](#)

[Step 2: Gather Information for Submission](#)

[Step 3: Complete and Submit the Application](#)

[Step 4: After You Submit](#)

[Step 5: Site Visit](#)

## Step 1: Getting Started

- Review the *IAC Standards and Guidelines for MRI Image-Guided Prostate Biopsy Accreditation***

The *Standards* are the basis for the IAC MRI Image-Guided Prostate Biopsy accreditation program and can be downloaded at [www.intersocietal.org/document/standards-mri-image-guided-prostate-biopsy](http://www.intersocietal.org/document/standards-mri-image-guided-prostate-biopsy). These *Standards* define the complete, minimum requirements for which an accredited facility is held accountable.
- Perform a Thorough Facility Self-Assessment**

Prior to beginning the accreditation application, applicant facilities should review current policies, protocols and final reports to ensure compliance with the *IAC Standards*.
- Create an IAC Online Accreditation Account**
  - Visit [iaconlineaccreditation.org/webdriver/Create%20Account.aspx](http://iaconlineaccreditation.org/webdriver/Create%20Account.aspx)
  - Enter the requested information.
  - Select Image-Guided Program and MRI Guided Prostate Biopsy as the Testing Area
  - Provide an e-mail address to receive your login information.
  - Click the *Create Account* button at the bottom of this page.
- Review and Sign the Business Associate Agreement (BAA) and Accreditation Agreement (AA)**
  - Login to [IAC Online Accreditation Account](#) using the user ID and password provided in the e-mail sent to the e-mail address you provided.
  - Follow the instructions on the main page to create an administrator for the account.
  - Complete the facility/organization information.
  - Complete the Business Associate Agreement and Accreditation Agreement.

Once these steps have been completed, notify Darlene Humphreys ([dhumphreys@intersocietal.org](mailto:dhumphreys@intersocietal.org)) and a link to the application will be sent – **You will not start an application for this account in the current system** (even though you will receive an auto message).

## Step 2: Gather Information for Submission

- Medical Director and Medical Staff License(s)** (for the state in which the facility is located)
- Credential Information for Non-physician Providers** (Advanced Practice Providers, Nursing Staff, Anesthesia personnel, Technical Staff)
- Procedure Complication Log** – The procedure complication log is a record kept by the facility to document the outcomes, including complications, of the procedures that they have performed on individual patients.
- Procedure Log** – The procedure log is a ledger kept documenting the procedures performed in the past six months.
- Quality Improvement Meeting Minutes** – Minutes from a Quality Improvement meeting performed within the past 6 months. The minutes must include all four of the QI measures outlined in *Standard 1.1C*.

## MRI Unit Documentation

- Acceptance Test** (report of acceptance test performed post installation or post system upgrade if unit installed less than one year.
- Preventative Maintenance** (most recent preventative maintenance (PM) report or physicist report if unit installed greater than one year prior.

## Procedure Study Requirements

Select one patient from the complication log and one patient from the procedure log.

- Procedure Log Selection** – Identify one patient from the procedure log and upload pre-procedure, during procedure, and post procedure reports, anesthesia report and final report from staff who performed the procedure.
- Complication Log Selection** – Identify one patient from the procedure log and upload pre-procedure, during procedure, and post procedure reports, anesthesia report and final report from staff who performed the procedure. If there have not been any complication issues within the past six months, select a second patient from the Procedure Log.

## Step 3: Submit the Application

- Once the application is complete and submitted, you will receive an e-mail notification that the submission has been received. An additional e-mail notification will be sent to you once an invoice has been generated.

## Step 4: After You Submit

- The internal review and board review are conducted prior to a decision being rendered. The [application review process](#) takes approximately 4 weeks. The accreditation decision will be provided to the facility via a notification letter that may be downloaded from the Online Accreditation account.

## Step 5: Site Visit

- Facilities are required to undergo a site visit within 12 months of receiving an accreditation decision.** The site visitor will observe procedures and evaluate documentation. Documentation will include:  
  
Please reference the current Site Visit Checklist to review the information that will be reviewed during the Site Visit: [www.intersocietal.org/document/site-visit-checklist-mri-guided-prostate-biopsy](http://www.intersocietal.org/document/site-visit-checklist-mri-guided-prostate-biopsy).



### **Helpful Resource – Sample Document Repository**

Sample versions of policies and protocols listed above can be found in the [IAC Sample Document Repository](#).