

Emergency Radiology/Block Nights (First 6 months of the Second Year)

These block nights (1 week rotation schedule from Saturday to Friday nights 9pm-5am) rotation involves coverage of conventional radiographs and all modalities of the neck, chest, abdomen, pelvis, brain, spine, and extremities performed in patients seen in the Emergency Department, as well as consultation on radiographs performed on hospitalized patients. Multiple Faculty and DIA radiologists are interpreting simultaneously more studies than the residents are covering. Residents are at all times having continuous or near continuous read outs.

Patient Care

Goal

Residents must be able to provide patient care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health. Residents are expected to:

Knowledge Objectives:

- (1) Recognize the signs of life-threatening conditions on chest and abdominal radiographs (line or tube malposition, pneumothorax, extraluminal gas, bowel obstruction, abscess) and appropriately notify the emergency physician without being prompted, and
- (2) Recognize the signs of life-threatening conditions on neck, chest, abdominal, pelvis, brain and spine CT Scans, and
- (3) List nomenclature and radiographic appearance of basic fractures, and
- (4) Diagnose basic abnormalities on chest and abdominal radiographs, and CT scans of the brain, spine, neck, chest, abdomen and pelvis, and
- (5) Be familiar with more common orthopedic and surgical hardware.

Skill Objectives:

- (1) Become facile with PACs and utilize available information technology to manage patient information, and
- (2) Provide concise, accurate reports on most studies.

Behavior and Attitude Objectives:

- (1) Work with the health care team in a professional manner to provide patient-centered care, and
- (2) Notify referring clinician for urgent, emergent or unexpected findings, and document in dictation.

Medical Knowledge

Goal

Residents must demonstrate knowledge of established and evolving biomedical, clinical, epidemiological, and social-behavioral sciences, as well as the application of this knowledge to patient care. Residents are expected to:

Knowledge Objectives:

- (1) Become familiar with the imaging algorithm of the Level 1 trauma victim and non-traumatic medical emergencies, and
- (2) Describe the basic mechanisms of injury to the neck, chest, abdomen, pelvis, brain, spine and extremities, and

Skill Objectives:

- (1) Interpret basic neck, chest, abdomen, pelvis, brain, spine and extremity studies performed for traumatic and non-traumatic emergent indications, and
- (2) Describe common patterns of injury, and
- (3) Interpret and understand basic patterns of injury,

Behavior and Attitude Objectives

- (1) Recognize limitation of personal competency and ask for guidance when appropriate

Practice-Based Learning and Improvement

Goal

Residents must demonstrate the ability to investigate and evaluate their care of patients, to appraise and assimilate scientific evidence, and to continuously improve patient care based on constant self-evaluation and lifelong learning. Residents are expected to develop skills and habits to be able to:

Knowledge Objectives:

- (1) Assess radiographs for quality and suggest methods of improvement.

Skill Objectives:

- (1) Demonstrate independent self-study using various resources including texts, journals, teaching files, and other resources on the internet, and
- (2) Facilitate the learning of students and other health care professionals.

Behavior and Attitude Objectives:

- (1) Incorporate formative feedback into daily practice, positively responding to constructive criticism, and
- (2) Follow-up interesting or difficult cases without prompting and share this information with appropriate faculty and fellow residents.

Systems Based Practice

Goal

Residents must demonstrate an awareness of, and responsiveness to, the larger context and system of health care, as well as the ability to call effectively on other resources in the system to provide optimal health care. Residents are expected to:

Knowledge Objectives:

- (1) Understand how their image interpretation affects patient care.

Skill Objectives:

- (1) Provide accurate and timely interpretations to decrease length of hospital and emergency department stay,
- (2) Appropriately notify the referring clinician if there are urgent or unexpected findings and document such without being prompted; and
- (3) Practice using cost effective use of time and support personnel.

Behavior and Attitude Objectives:

(1) Advocate for quality patient care in a professional manner, particularly concerning imaging utilization issues.

Professionalism

Goal

Residents must demonstrate a commitment to carrying out professional responsibilities and an adherence to ethical principles. Residents are expected to demonstrate:

Knowledge Objectives:

(1) Understanding of the need for respect for patient privacy and autonomy, and
(2) Understanding of their responsibility for the patient and the service, including arriving in the reading room promptly each day, promptly returning to the reading room after conferences, completing the work in a timely fashion, and not leaving at the end of the day until all work is complete. If the resident will be away from a service (for time off, meeting, board review, etc.), this must be arranged in advance with the appropriate faculty.

Skill Objectives:

(1) Sensitivity and responsiveness to a diverse patient population, including but not limited to diversity in gender, age, culture, race, religion, disabilities, and sexual orientation.

Behavior and Attitude Objectives:

(1) Respect, compassion, integrity, and responsiveness to patient care needs that supersede self-interest.

Interpersonal and Communication Skills

Goal

Residents must demonstrate interpersonal and communication skills that result in the effective exchange of information and teaming with patients, their families, and professional associates. Residents are expected to:

Knowledge Objectives:

(1) Know the importance of accurate, timely, and professional communication.

Skill Objectives:

(1) Produce concise and accurate reports on most examinations, and
(2) Communicate effectively with physicians, other health professionals,

Behavior and Attitude Objectives:

(1) Work effectively as a member of the patient care team.

Emergency Radiology/Block Nights (Last 6 months of Second and first half of the Third Year)

These block nights (1 week rotation schedule from Saturday to Friday nights 9pm-5am) rotation involves coverage of conventional radiographs and all modalities of the neck, chest, abdomen, pelvis, brain, spine, and extremities performed in patients seen in the Emergency Department, as well as consultation on radiographs performed on hospitalized patients. Multiple Faculty and DIA radiologists are interpreting simultaneously more studies than the residents are covering. Residents are at all times having continuous or near continuous read outs.

Patient Care

Goal

Residents must be able to provide patient care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health. Residents are expected to:

Knowledge Objectives:

- (1) Recognize the signs of life-threatening conditions on chest and abdominal radiographs (line or tube malposition, pneumothorax, extraluminal gas, bowel obstruction, abscess) and appropriately notify the emergency physician without being prompted, and
- (2) Recognize the signs of life-threatening conditions on neck, chest, abdominal, pelvis, brain and spine CT Scans, and
- (3) List nomenclature and radiographic appearance of more complex fractures, and
- (4) Diagnose moderately complex abnormalities on chest and abdominal radiographs, and CT scans of the brain, spine, neck, chest, abdomen and pelvis, and
- (5) Be familiar with common orthopedic and surgical hardware, and
- (6) Become familiar with CT angiograms of the neck, chest, abdomen, and pelvis in a trauma setting.

Skill Objectives:

- (1) Become facile with PACs and utilize available information technology to manage patient information, and
- (2) Provide concise, accurate reports on most studies.

Behavior and Attitude Objectives:

- (1) Work with the health care team in a professional manner to provide patient-centered care, and
- (2) Notify referring clinician for urgent, emergent or unexpected findings, and document in dictation.

Medical Knowledge

Goal

Residents must demonstrate knowledge of established and evolving biomedical, clinical, epidemiological, and social-behavioral sciences, as well as the application of this knowledge to patient care. Residents are expected to:

Knowledge Objectives:

- (1) List the imaging algorithm of the Level 1 trauma victim and non-traumatic medical emergencies, and
- (2) Describe the more complex mechanisms of injury to the neck, chest, abdomen, pelvis, brain, spine and extremities, and

Skill Objectives:

- (1) Interpret more complex neck, chest, abdomen, pelvis, brain, spine and extremity studies performed for traumatic and non-traumatic emergent indications, and
- (2) Describe more complex patterns of injury, and
- (3) Interpret and understand more complex patterns of injury,

Behavior and Attitude Objectives

- (1) Recognize limitation of personal competency and ask for guidance when appropriate

Practice-Based Learning and Improvement

Goal

Residents must demonstrate the ability to investigate and evaluate their care of patients, to appraise and assimilate scientific evidence, and to continuously improve patient care based on constant self-evaluation and lifelong learning. Residents are expected to develop skills and habits to be able to:

Knowledge Objectives:

- (1) Assess radiographs for quality and suggest methods of improvement.

Skill Objectives:

- (1) Demonstrate independent self-study using various resources including texts, journals, teaching files, and other resources on the internet, and
- (2) Facilitate the learning of students and other health care professionals.

Behavior and Attitude Objectives:

- (1) Incorporate formative feedback into daily practice, positively responding to constructive criticism, and
- (2) Follow-up interesting or difficult cases without prompting and share this information with appropriate faculty and fellow residents.

Systems Based Practice

Goal

Residents must demonstrate an awareness of, and responsiveness to, the larger context and system of health care, as well as the ability to call effectively on other resources in the system to provide optimal health care. Residents are expected to:

Knowledge Objectives:

- (1) Understand how their image interpretation affects patient care.

Skill Objectives:

- (1) Provide accurate and timely interpretations to decrease length of hospital and emergency department stay,
- (2) Appropriately notify the referring clinician if there are urgent or unexpected findings and document such without being prompted; and

(3) Practice using cost effective use of time and support personnel.

Behavior and Attitude Objectives:

- (1) Advocate for quality patient care in a professional manner, particularly concerning imaging utilization issues

Professionalism

Goal

Residents must demonstrate a commitment to carrying out professional responsibilities and an adherence to ethical principles. Residents are expected to demonstrate:

Knowledge Objectives:

- (1) Understanding of the need for respect for patient privacy and autonomy, and
- (2) Understanding of their responsibility for the patient and the service, including arriving in the reading room promptly each day, promptly returning to the reading room after conferences, completing the work in a timely fashion, and not leaving at the end of the day until all work is complete. If the resident will be away from a service (for time off, meeting, board review, etc.), this must be arranged in advance with the appropriate faculty.

Skill Objectives:

- (1) Sensitivity and responsiveness to a diverse patient population, including but not limited to diversity in gender, age, culture, race, religion, disabilities, and sexual orientation.

Behavior and Attitude Objectives:

- (1) Respect, compassion, integrity, and responsiveness to patient care needs that supersede self-interest.

Interpersonal and Communication Skills

Goal

Residents must demonstrate interpersonal and communication skills that result in the effective exchange of information and teaming with patients, their families, and professional associates. Residents are expected to:

Knowledge Objectives:

- (1) Know the importance of accurate, timely, and professional communication.

Skill Objectives:

- (1) Produce concise and accurate reports on most examinations, and
- (2) Communicate effectively with physicians, other health professionals,

Behavior and Attitude Objectives:

- (1) Work effectively as a member of the patient care team.

Emergency Radiology (Last half of the third year)

These block nights (1 week rotation schedule from Saturday to Friday nights 9pm-5am) rotation involves coverage of conventional radiographs and all modalities of the neck, chest, abdomen, pelvis, brain, spine, and extremities performed in patients seen in the Emergency Department, as well as consultation on radiographs performed on hospitalized patients. Multiple Faculty and DIA radiologists are interpreting simultaneously more studies than the residents are covering. Residents are at all times having continuous or near continuous read outs.

Patient Care

Goal

Residents must be able to provide patient care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health. Residents are expected to:

Knowledge Objectives:

- (1) Recognize the signs of life-threatening conditions on chest and abdominal radiographs (line or tube malposition, pneumothorax, extraluminal gas, bowel obstruction, abscess) and appropriately notify the emergency physician without being prompted, and
- (2) Recognize the signs of life-threatening conditions on neck, chest, abdominal, pelvis, brain and spine CT Scans, and
- (3) List fracture nomenclature and their radiographic appearance paying attention to cross-sectional imaging and soft tissue ultrasound, and
- (4) Diagnose complex abnormalities on chest and abdominal radiographs, CT scans of the brain, spine, neck, chest, abdomen and pelvis, and Neuro MRI, and
- (5) Be familiar with complex orthopedic and surgical hardware, and
- (6) Further develop understanding of CT angiograms of the neck, chest, abdomen, pelvis, and extremities in a trauma setting, and
- (7) Recognize major findings with main Cardiac CTA.

Skill Objectives:

- (1) Become facile with PACs and utilize available information technology to manage patient information, and
- (2) Provide concise, accurate reports on most studies.

Behavior and Attitude Objectives:

- (1) Work with the health care team in a professional manner to provide patient-centered care, and
- (2) Notify referring clinician for urgent, emergent or unexpected findings, and document in dictation.

Medical Knowledge

Goal

Residents must demonstrate knowledge of established and evolving biomedical, clinical, epidemiological, and social-behavioral sciences, as well as the application of this knowledge to patient care. Residents are expected to:

Knowledge Objectives:

- (1) Demonstrate competency and independently protocol exams to evaluate the Level 1 trauma victim and non-traumatic medical emergency, and
- (2) Describe complex mechanisms of injury to the neck, chest, abdomen, pelvis, brain, spine and extremities, and

Skill Objectives:

- (1) Interpret complex neck, chest, abdomen, pelvis, brain, spine and extremity radiographs performed for traumatic and non-traumatic indications,
- (2) Describe complex patterns of injury, and
- (3) Interpret and understand complex patterns of injury,

Behavior and Attitude Objectives

- (1) Recognize limitation of personal competency and ask for guidance when appropriate

Practice-Based Learning and Improvement

Goal

Residents must demonstrate the ability to investigate and evaluate their care of patients, to appraise and assimilate scientific evidence, and to continuously improve patient care based on constant self-evaluation and lifelong learning. Residents are expected to develop skills and habits to be able to:

Knowledge Objectives:

- (1) Assess radiographs for quality and suggest methods of improvement.

Skill Objectives:

- (1) Demonstrate independent self-study using various resources including texts, journals, teaching files, and other resources on the internet, and
- (2) Facilitate the learning of students and other health care professionals.

Behavior and Attitude Objectives:

- (1) Incorporate formative feedback into daily practice, positively responding to constructive criticism, and
- (2) Follow-up interesting or difficult cases without prompting and share this information with appropriate faculty and fellow residents.

Systems Based Practice

Goal

Residents must demonstrate an awareness of, and responsiveness to, the larger context and system of health care, as well as the ability to call effectively on other resources in the system to provide optimal health care. Residents are expected to:

Knowledge Objectives:

- (1) Understand how their image interpretation affects patient care.

Skill Objectives:

- (1) Provide accurate and timely interpretations to decrease length of hospital and emergency department stay,
- (2) Appropriately notify the referring clinician if there are urgent or unexpected findings and document such without being prompted; and

(3) Practice using cost effective use of time and support personnel.

Behavior and Attitude Objectives:

(1) Advocate for quality patient care in a professional manner, particularly concerning imaging utilization issues.

Professionalism

Goal

Residents must demonstrate a commitment to carrying out professional responsibilities and an adherence to ethical principles. Residents are expected to demonstrate:

Knowledge Objectives:

(1) Understanding of the need for respect for patient privacy and autonomy, and
(2) Understanding of their responsibility for the patient and the service, including arriving in the reading room promptly each day, promptly returning to the reading room after conferences, completing the work in a timely fashion, and not leaving at the end of the day until all work is complete. If the resident will be away from a service (for time off, meeting, board review, etc.), this must be arranged in advance with the appropriate faculty and/or fellow.

Skill Objectives:

(1) Sensitivity and responsiveness to a diverse patient population, including but not limited to diversity in gender, age, culture, race, religion, disabilities, and sexual orientation.

Behavior and Attitude Objectives:

(1) Respect, compassion, integrity, and responsiveness to patient care needs that supersede self-interest.

Interpersonal and Communication Skills

Goal

Residents must demonstrate interpersonal and communication skills that result in the effective exchange of information and teaming with patients, their families, and professional associates. Residents are expected to:

Knowledge Objectives:

(1) Know the importance of accurate, timely, and professional communication.

Skill Objectives:

(1) Produce concise and accurate reports on most examinations, and
(2) Communicate effectively with physicians, other health professionals,

Behavior and Attitude Objectives:

(1) Work effectively as a member of the patient care team.

Emergency Radiology/Block Nights (Fourth Year)

These block nights (1 week rotation schedule from Saturday to Friday nights 9pm-5am) rotation involves coverage of conventional radiographs and all modalities of the neck, chest, abdomen, pelvis, brain, spine, and extremities performed in patients seen in the Emergency Department, as well as consultation on radiographs performed on hospitalized patients. Multiple Faculty and DIA radiologists are interpreting simultaneously more studies than the residents are covering. Residents are at all times having continuous or near continuous read outs. These block nights (1 week rotation schedule from Saturday to Friday nights 9pm-5am) rotation involves coverage of conventional radiographs and all modalities of the neck, chest, abdomen, pelvis, brain, spine, and extremities performed in patients seen in the Emergency Department, as well as consultation on radiographs performed on hospitalized patients. Multiple Faculty and DIA radiologists are interpreting simultaneously more studies than the residents are covering. Residents are at all times having continuous or near continuous read outs.

Patient Care

Goal

Residents must be able to provide patient care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health. Residents are expected to:

Knowledge Objectives:

- (1) Recognize the signs of life-threatening conditions on chest and abdominal radiographs (line or tube malposition, pneumothorax, extraluminal gas, bowel obstruction, abscess) and appropriately notify the emergency physician without being prompted, and
- (2) Recognize the signs of life-threatening conditions on neck, chest, abdominal, pelvis, brain and spine CT Scans, and
- (3) List fracture nomenclature and their radiographic appearance paying attention to cross-sectional imaging and soft tissue ultrasound, and protocol studies to further evaluate associated injuries, and
- (4) Diagnose complex abnormalities on chest and abdominal radiographs, CT scans of the brain, spine, neck, chest, abdomen and pelvis, and Neuro MRI, and
- (5) Protocol all CT, MR and CTAs, and
- (6) Be familiar with complex orthopedic and surgical hardware, and
- (7) Understanding of CT angiograms of the neck, chest, abdomen, pelvis, and extremities in a trauma setting, and
- (8) Protocol and Interpret Coronary CT angiography, Cardiac CTA emergencies
- (9) Recognize findings with Cardiac CTA.

Skill Objectives:

- (1) Become facile with PACs and utilize available information technology to manage patient information, and
- (2) Provide concise, accurate reports on most studies.

Behavior and Attitude Objectives:

- (1) Work with the health care team in a professional manner to provide patient-centered care, and

(2) Notify referring clinician for urgent, emergent or unexpected findings, and document in dictation.

Medical Knowledge

Goal

Residents must demonstrate knowledge of established and evolving biomedical, clinical, epidemiological, and social-behavioral sciences, as well as the application of this knowledge to patient care. Residents are expected to:

Knowledge Objectives:

- (1) Demonstrate competency and independently protocol exams to evaluate the Level 1 trauma victim and non-traumatic medical emergency, and
- (2) Describe complex mechanisms of injury to the neck, chest, abdomen, pelvis, brain, spine and extremities, and

Skill Objectives:

- (1) Interpret complex neck, chest, abdomen, pelvis, brain, spine and extremity radiographs performed for traumatic and non-traumatic indications,
- (2) Describe complex patterns of injury, and
- (3) Interpret and understand complex patterns of injury,

Behavior and Attitude Objectives

- (1) Recognize limitation of personal competency and ask for guidance when appropriate

Practice-Based Learning and Improvement

Goal

Residents must demonstrate the ability to investigate and evaluate their care of patients, to appraise and assimilate scientific evidence, and to continuously improve patient care based on constant self-evaluation and lifelong learning. Residents are expected to develop skills and habits to be able to:

Knowledge Objectives:

- (1) Assess radiographs for quality and suggest methods of improvement.

Skill Objectives:

- (1) Demonstrate independent self-study using various resources including texts, journals, teaching files, and other resources on the internet, and
- (2) Facilitate the learning of students and other health care professionals.

Behavior and Attitude Objectives:

- (1) Incorporate formative feedback into daily practice, positively responding to constructive criticism, and
- (2) Follow-up interesting or difficult cases without prompting and share this information with appropriate faculty and fellow residents.

Systems Based Practice

Goal

Residents must demonstrate an awareness of, and responsiveness to, the larger context and system of health care, as well as the ability to call effectively on other resources in the system to provide optimal health care. Residents are expected to:

Knowledge Objectives:

- (1) Understand how their image interpretation affects patient care.

Skill Objectives:

- (1) Provide accurate and timely interpretations to decrease length of hospital and emergency department stay,
- (2) Appropriately notify the referring clinician if there are urgent or unexpected findings and document such without being prompted; and
- (3) Practice using cost effective use of time and support personnel.

Behavior and Attitude Objectives:

- (1) Advocate for quality patient care in a professional manner, particularly concerning imaging utilization issues.

Professionalism

Goal

Residents must demonstrate a commitment to carrying out professional responsibilities and an adherence to ethical principles. Residents are expected to demonstrate:

Knowledge Objectives:

- (1) Understanding of the need for respect for patient privacy and autonomy, and
- (2) Understanding of their responsibility for the patient and the service, including arriving in the reading room promptly each day, promptly returning to the reading room after conferences, completing the work in a timely fashion, and not leaving at the end of the day until all work is complete. If the resident will be away from a service (for time off, meeting, board review, etc.), this must be arranged in advance with the appropriate faculty and/or fellow.

Skill Objectives:

- (1) Sensitivity and responsiveness to a diverse patient population, including but not limited to diversity in gender, age, culture, race, religion, disabilities, and sexual orientation.

Behavior and Attitude Objectives:

- (1) Respect, compassion, integrity, and responsiveness to patient care needs that supersede self-interest.

Interpersonal and Communication Skills

Goal

Residents must demonstrate interpersonal and communication skills that result in the effective exchange of information and teaming with patients, their families, and professional associates. Residents are expected to:

Knowledge Objectives:

(1) Know the importance of accurate, timely, and professional communication.

Skill Objectives:

(1) Produce concise and accurate reports on most examinations, and

(2) Communicate effectively with physicians, other health professionals,

Behavior and Attitude Objectives:

(1) Work effectively as a member of the patient care team.