

BODY CT AND MR

H. Lee Moffitt Cancer Center and Research Institute

Rotation Director: Junsung (JC) Choi, M.D.

General Goals and Overview: On this rotation, the resident will learn to interpret CT and MR examinations of the neck, chest, abdomen, and pelvis in cancer patients.

Daily Work:

The rotation in Body CT and MR rotation begins immediately after the completion of morning conference and concludes at 5:00 p.m. or when the work is completed, whichever is later. Readout of body CT and MR scans at the Moffitt Cancer Center is divided between the residents rotating in the section and the cross-sectional imaging attending radiologist(s).

The resident should review relevant prior exams on PACs to help with accurate interpretation of the current exam. The resident should review prior discharge dictations and relevant pathology and surgical reports from the electronic medical records. The resident should then review the examinations and form their own impressions. At this point, all cases will be reviewed with the attending. At mid-day and at the conclusion of the day the resident should review and sign all of their reports, making sure their queue is empty on the computer system before leaving work. Any unexpected or emergent findings should be communicated to the referring physician during the course of the day. All studies should be dictated prior to leaving for the day and within 24 hours of the performance of the exam. Residents are expected to help referring physicians interpret studies performed at the Moffitt Cancer Center.

Educational Goals and Objectives:

Second Year Residents

Patient Care:

- Become familiar with oncologic CT and MR body imaging protocols
- Be able to manage contrast reactions

Medical Knowledge:

- Describe proper CT and MR protocols for specific disease processes
- Describe dynamic vs. equilibrium phase imaging and differentiate between these entities
- Describe normal thoracic parenchymal, mediastinal and vascular anatomy
- Describe normal abdominal and pelvic anatomy
- Apply RECIST criteria for staging and restaging examinations

Interpersonal and Communication Skills:

- Appropriately communicate and document in the patient record urgent or unexpected radiologic findings
- Produce radiologic reports that are accurate, concise and grammatically correct
- Communicate effectively with all members of the health care team

Practice-Based Learning and Improvement:

- Identify, rectify and learn from personal errors
- Incorporate feedback into improved performance
- Efficiently use electronic and print resources to access information

Professionalism:

- Demonstrate respect for patients and all members of the health care team
- Serve as a role model for medical students
- Respect patient confidentiality
- Present oneself as a professional in appearance and communication.
- Demonstrate a responsible work ethic with regard to work assignments

Systems-Based Practice:

- Demonstrate knowledge of how radiologic information is integrated with the other parts of the health care system in the treatment of the patient
- Demonstrate knowledge of ACR standards and appropriateness criteria
- Demonstrate knowledge of cost-effective imaging practices

Third and Fourth Year Residents

Patient Care:

- Develop a management plan based upon CT and findings and clinical information.
- Demonstrate proper technique in planning and performing CT procedures
- Know the appropriate indications for body CT and examinations and alternatives depending on the suspected diagnosis
- Appropriately protocol body CT and MR cases based upon the indication for the examination
- Minimize adverse reactions to iodinated contrast through appropriate patient selection and medication.

Medical Knowledge:

- Respond logically and with competence as a CT and MR body imaging consultant
- Provide a differential diagnosis for thoracic, abdominal, pelvic pathology
- Orient and supervise the proper imaging investigation of a patient or of a specific disease.

Interpersonal and Communication Skills:

- Appropriately obtain informed consent
- Appropriately communicate and document in the patient record urgent or unexpected radiologic findings

- Produce radiologic reports that are accurate, concise and grammatically correct
- Effectively teach junior residents and medical students
- Communicate effectively with all members of the health care team

Practice-Based Learning and Improvement:

- Identify, rectify and learn from personal errors
- Incorporate feedback into improved performance
- Efficiently use electronic and print resources to access information

Professionalism:

- Demonstrate respect for patients and all members of the health care team
- Serve as a role model for junior residents and medical students
- Respect patient confidentiality
- Present oneself as a professional in appearance and communication.
- Demonstrate a responsible work ethic with regard to work assignments

Systems-Based Practice:

- Demonstrate knowledge of how radiologic information is integrated with the other parts of the health care system in the treatment of the patient
- Demonstrate knowledge of ACR practice guidelines for body CT and MR examinations
- Demonstrate knowledge of cost-effective imaging practices
- Understand treatment implicated by findings on CT and MR (e.g., what is the next treatment that should occur based on the findings?).

Evaluation:

These are the evaluation mechanisms used to evaluate the resident and determine that the program goals and objectives are met.

After the completion of the rotation, global evaluation forms will be completed by body imaging faculty. Evaluation by CT and MR technology staff may be done via the 360o professionalism survey on the USF GME website homepage.

Medical knowledge will be assessed by the annual ACR In-Training exam and the senior Mock Oral Board exam.

The residents will also be evaluated on attendance and efficiency during the rotation, knowledge of CT and MR protocols, knowledge of CT and MR anatomy, physiology and pathology, ability to provide a reasonable differential diagnosis for an imaging finding and suggest the next most appropriate step in the work-up of the patient, efficiency and quality in dictating studies as well as interactions with referring physicians and affability with coworkers, technologists, secretaries, nursing staff and radiology support staff.