UCSD Radiology Resident Musculoskeletal Rotations

Goals and Objectives

Rotation 3, Third or Fourth year

MSK/Tele Rotation

Guidelines and Goals

After completing the third four-week rotation in musculoskeletal radiology:

- Attend and participate in all MSK conferences listed on the RadRes conference schedule. Present cases when requested by faculty.
- Be a team-player. Help offload hospital work from the other busier services.
- Demonstrate learning of knowledge-based objectives and mastery of technical objectives for the third rotation.
- Continue to refine skills developed during the first two rotations.
- Effectively use information technology to address clinical problems.
- Participate in the education of junior residents, students, and interns.
- Become a more independent provider of musculoskeletal radiologic interpretive services.
- Manage clinical and technical questions from technical and support staff.

Patient Care. 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. Demonstrate the ability to teach a junior colleague how to protocol examinations and plan procedures.

Demonstrate the ability to assess and prioritize requests for add-on procedures.

Demonstrate the ability to answer common procedural and policy questions from technologists and support staff.

Medical Knowledge.

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.

Discuss current literature as it pertains to the radiologic evaluation of sports injuries, neoplasm, infection and arthropathies. Critique newly published articles and proposed protocol changes for CT and MR.

Recognize and diagnose all pathology seen on radiographs.

Identify abnormal MR findings. Competency in interpretation of ankle, hip and wrist MR. Demonstrate learning of common pathology of the hip and ankle on MRI.

Demonstrate learning of anatomy and common injuries/pathology of the elbow and wrist on MRI

Run the musculoskeletal section efficiently in the event the attending is otherwise occupied.

Residents should be able to function on a level adequate to pass their ABR core exam.

All major texts and the syllabi should be read by now and their ability to interpret films should reflect their knowledge.

Areas of weakness are to be determined by the attending and followed up by reading assignments as well as short talks to the group of residents at the viewbox.

Recognize radiologic findings and describe pathophysiology of endocrine disease including hyperparathyroidism, renal osteodystrophy, osteomalacia/rickets, hypophosphatasia, hypophosphatemia.

Recognize radiologic findings of hematopoietic and storage diseases including sickle cell anemia, thalassemia, mastocytosis, and Gaucher's disease.

Demonstrate systematic approach to relatively common dysplasias and congenital conditions such as achondroplasia, osteogenesis imperfecta, osteopetrosis.

Demonstrate the ability to locate, appraise and assimilate **Practice-based Learning and** evidence from scientific studies related to the performance Improvement. Residents must demonstrate and interpretation of musculoskeletal imaging. Reflect on how they can perform tasks with efficiency and accuracy in a the ability to investigate and evaluate their care of patients, quality driven environment. to appraise and assimilate scientific evidence, and to continuously improve patient care based on constant selfevaluation and life-long learning. Interpersonal and Demonstrate the ability to teach a junior colleague how to **Communication Skills.** protocol examinations and plan procedures. Residents must demonstrate Demonstrate the ability to answer common procedural and interpersonal and communication skills that result policy questions from technologists and support staff. in the effective exchange of information and collaboration with patients, their families, and health professionals. Professionalism. Demonstrate an ability to counsel a patient and obtain informed consent before performing a procedure, including a Residents must demonstrate a description of the procedure, risks, benefits, and alternatives; commitment to carrying out professional responsibilities and and solicit and respond to patient questions without an adherence to ethical discrimination based on religious, ethnic, sexual, economic, principles. or educational differences. Conduct of residents should reflect confidence in their ability, and a pleasant on-going relationship with clinicians. Attendance at all didactic lectures, and timely arrival each day on the rotation is expected. **Systems-based Practice.** Residents must recognize a diagnostic cross-sectional Residents must demonstrate an imaging study, versus a non-diagnostic one. Ability to critique radiography and imaging studies should be present. awareness of and Knowledge on how to improve the study should be gained in responsiveness to the larger context and system of health final year. care, as well as the ability to call effectively on other Communicate CT or MR scan problems to the technologist resources in the system to whilst the scan is being done and suggest imaging changes provide optimal health care. to optimize the scans. Be able to instruct the technologist on proper scan orientation. Provide effective and timely feedback and education to CT and MRI technologists regarding quality of examinations.

Reading list: "Musculoskeletal MRI" by P. Kaplan et al

References

- Accreditation Council for Graduate Medical Education. Competencies Definitions and Practice Performance Measurements for Diagnostic Radiology. Available online at http://www.acgme.org/acWebsite/RRC 420/420 compDefsPerfMeas.pdf.
- Accreditation Council for Graduate Medical Education. Program Requirements for Graduate Medical Education in Diagnostic Radiology. Available online at http://www.acgme.org/acWebsite/downloads/RRC progReq/420pr701 u705.pdf.
- 3. Collins J, Abbott GF, Holbert JM, et al. Revised Curriculum on Cardiothoracic Radiology for Diagnostic Radiology Residency With Goals and Objectives Related to General Competencies. Acad Radiol 2005; 12:210-223.
- American College of Radiology. ACR Practice Guideline for Communication of Diagnostic Imaging Findings. Available online at http://www.acr.org/s_acr/bin.asp?CID=541&DID=12196&DOC=FILE.PDF.
- 5. American College of Radiology. ACR Appropriateness Criteria: Expert Panel on Musculoskeletal Imaging. Available online at http://www.acr.org/s_acr/sec.asp?CID=1206&DID=15047.
- 6. American College of Radiology. ACR Practice Guidelines and Technical Standards. Available online at http://www.acr.org/s_acr/bin.asp?CID=1848&DID=14800&DOC=FILE.PDF.
- 7. Radiographics Top 10 Reading List (4th year & Fellow): https://pubs.rsna.org/page/radiographics/rgteam/top10_musculoskeletal#resyear4 https://pubs.rsna.org/page/radiographics/rgteam/top10_musculoskeletal#fellows