

**DXIT® EXAMINATION SPECIFICATIONS** v.10/21

		<b>Major Domain</b>	<b>Sub-Domain</b>
<b>1</b>		<b>BREAST</b>	
	1.1		Breast Masses
	1.2		Breast Calcifications
	1.3		Breast Ultrasound
	1.4		Breast MRI
	1.5		Breast Pathology
	1.6		Breast Interventions
	1.7		Quality Control
<b>2</b>		<b>CHEST</b>	
	2.1		Anatomy
	2.2		Parenchymal
	2.3		Pleural/Mediastinal
	2.4		Airway
	2.5		Iatrogenic
<b>3</b>		<b>CARDIAC</b>	
	3.1		Anatomy & Physiology
	3.2		Congenital
	3.3		Pericardium
	3.4		Myocardial Disease
	3.5		Coronary Artery Disease/Ischemia/Infarction
	3.6		Valvular Heart Disease
	3.7		Great Vessels
	3.8		Neoplasm/Mass
<b>4</b>		<b>GASTROINTESTINAL</b>	
	4.1		Liver
	4.2		Gallbladder/Biliary
	4.3		Pancreas/Spleen/Peritoneum
	4.4		Esophagus
	4.5		Stomach/Duodenum
	4.6		Small bowel
	4.7		Colon
<b>5</b>		<b>GENITOURINARY</b>	
	5.1		Adrenal
	5.2		Renal Neoplasm/Cystic Disease
	5.3		Renal/Congenital/Inflammatory/Function Infection/Trauma
	5.4		Renal Stones

	5.5		Contrast Media
	5.6		Female Pelvis – Non-US
	5.7		Male Pelvis (Scrotum, prostate, penis)
	5.8		Retroperitoneum/Vascular
	5.9		Bladder & Neobladder, Ureter
<b>6</b>		<b>INTERVENTIONAL</b>	
	6.1		Vascular Diagnosis
	6.2		Pre- and Post- Intervention Vascular Imaging
	6.3		Arterial Vascular Intervention
	6.4		Venous Vascular Interventions
	6.5		Non-Vascular Interventions
<b>7</b>		<b>MUSCULOSKELETAL</b>	
	7.1		Anatomy/Normal Variants
	7.2		Congenital/Developmental
	7.3		Tumor/Tumor-Like
	7.4		Rheumatic/Infection/Arthritis/Articular
	7.5		Metabolic/Endocrine
	7.7		Trauma
	7.8		Internal Derangement
<b>8</b>		<b>NEURORADIOLOGY</b>	
	8.1		Brain
	8.2		Spine
	8.3		Head & Neck
	8.4		Advanced Imaging Techniques
	8.5		Interventional/Stroke/ED
<b>9</b>		<b>NUCLEAR RADIOLOGY</b>	
	9.1		Musculoskeletal
	9.2		Cardiopulmonary
	9.3		Endocrine
	9.4		Gastrointestinal
	9.5		Genitourinary
	9.6		Infection/Inflammation
	9.7		Central Nervous System
	9.8		Neoplasm
	9.9		Unsealed Source Therapy
	9.10		Non-Imaging and QC/QA

<b>10</b>		<b>PEDIATRIC</b>	
	10.1		Pediatric Airway
	10.2		Pediatric Chest
	10.3		Pediatric Cardiac
	10.4		Pediatric Abdomen & GI
	10.5		Pediatric Genitourinary
	10.6		Pediatric Musculoskeletal
	10.7		Pediatric Neuroradiology
	10.8		Pediatric Interventional
	10.9		Fetal MRI (included in pertinent categories)
	10.10		Oncology
	10.11		Technique/Safety
<b>11</b>		<b>ULTRASOUND</b>	
	11.1		Abdomen
	11.2		Renal
	11.3		Female Pelvis
	11.4		Vascular
	11.5		Obstetrics
	11.6		Thyroid
<b>12</b>		<b>GENERAL COMPETENCY</b>	
	12.1		Professionalism & Ethics
	12.2		Government Regulations & HIPAA
	12.3		Quality
	12.4		Safety
	12.5		ACGME Guidelines & Milestones
	12.6		Medical Reasoning/Decision Analysis
	12.7		Appropriateness Criteria, Imaging Utilization & Guidelines
	12.8		Board Certification & MOC
<b>13</b>		<b>PHYSICS</b>	
	13.1		CT
	13.2		MRI
	13.3		US
	13.4		Angiography
	13.5		Plain Film/Radiography
	13.6		Fluoroscopy
	13.7		Mammography
	13.8		Radiation Protection/Radiation Biology
	13.9		Nuclear Medicine/ PET-CT/SPECT-CT
	13.10		Basic Physics