Forging a New Residency Training Pathway in Interventional Radiology: Historical Perspective from the Radiation Oncology Precedent

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Disclosures:
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Introduction

• Resident training in IR is undergoing a transformation as the Interventional Radiology/Diagnostic Radiology (IR/DR) and Early Specialization in Interventional Radiology (ESIR) pathways are introduced.

• Challenges:
  – Gaining buy-in from the broader radiology community
  – Garnering resources to support these training programs.
Introduction

• Prior to the 1970s, RO training was a part of general radiology residency training programs, with subsequent RO fellowship training available

• RO pushed to define itself as a distinct specialty in the 1970s, and new training programs were launched to support development of a workforce of dedicated ROs
Purpose:

1. To examine historical archives pertaining to the establishment of radiation oncology (RO) as a residency training pathway distinct from radiology.

2. To analyze ways in which the historical RO precedent may guide the contemporary effort to establish dedicated interventional radiology (IR) resident training programs.
Materials and Methods

- Review of the Alan Mason Chesney Medical Archives at Johns Hopkins Hospital was conducted to retrieve documents pertinent to the nascence of RO training.
- Documents were analyzed for themes and insights potentially transferrable to the present transition in IR training.
Results

Archive Review:

At the Alan Mason Chesney Medical Archives at Johns Hopkins Hospital, each archived document from the years 1960 to 1990 with keywords “radiology” and “radiation therapy” was examined
Results

Leaders in the development RO training gained support for their mission by:

1. Conducting a needs assessment:
   - Detailing the trend toward subspecialization in radiology
   - Quantifying need for RO treatment in the US versus the number of available providers to demonstrate a deficit
RELATIONSHIPS OF RADIATION THERAPY TO DIAGNOSTIC RADIOLOGY

DIGNOSTIC RADIOLOGY
IMAGING
PHYSICS
NUCLEAR MEDICINE
RADIATION THERAPY
CURATIVE
EDUCATION
Results

Leaders in the development RO training gained support for their mission by:

2. Making the case that training programs must be the foundation for launching RO as a distinct specialty by:
   - Describing the dangers of nonstandardized training
   - Invoking the need for dedicated teaching faculty
   - Exposing medical students to the specialty
Results

Leaders in the development RO training gained support for their mission by:

3. Emphasizing identity as a clinical specialty:
   - Incorporating a longitudinal foundation in clinical care into training
   - Establishing concrete clinical relationships with other departments to support understanding of role in referral
Leaders in the development RO training gained support for their mission by:

4. Advocating for departmental status (rather than divisional status within Radiology) to support:
   - Staff recruitment and appointing
   - Budget development
   - Hospital admission privileges
Results

Leaders in the development RO training gained support for their mission by:

5. Prioritizing Research:
   - To support innovation
   - To establish evidence validating practices
Conclusion

• As IR residency training programs launch, the historical examples from RO may guide successful implementation.

• Review of historical archives reveals that:
  1. A thorough needs assessment, emphasis on identity as a clinical specialty, and focus on research are key
  2. Independent departmental status may support efforts
  3. Training pathways may serve to define the future of a new subspecialty as a whole
References


2. Author Unknown. Report on Requirements of Radiation Oncology Department at Hopkins. Date Unknown. The Alan Mason Chesney Medical Archives of the Johns Hopkins Medical Institutions. Box: 431971146
