

Diagnostic Radiology: Foundations EPA #5

Detecting acute and/or common abnormalities on imaging studies

Key Features:

- This EPA focuses on the application of the knowledge of anatomy and imaging technique to address the clinical question.
- This includes identification of acute and/or common findings significant to the patient's care and recognition of critical findings that warrant communication with the referring physician.
- This EPA does not include identification of all findings on the image – for example, in a CT performed for pulmonary embolism, it is not expected that a resident at this stage would necessarily identify findings consistent with interstitial lung disease.

Assessment Plan:

Image review with staff radiologist, Core or TTP resident, or fellow, which may include input from technologists

Use Form 1. Form collects information on:

- Body region: abdomen/pelvis; cardiothoracic; MSK; neuro
- Patient location: emergency department; inpatient; outpatient
- Modality: CT; fluoroscopy; radiography; ultrasound
- Finding (write in):

Collect 20 observations of achievement

- At least 5 of each body region
- At least 1 emergency department case for each body region
- At least 2 CTs
- At least 2 radiographs
- At least 2 ultrasounds
- A variety of findings
- At least 5 different assessors
- At least 3 staff radiologists

CanMEDS Milestones:

- 1 ME 2.2 Gather and synthesize patient information to establish the clinical question**
- 2 ME 3.4 Assess the quality of the study and any impact on the diagnostic interpretation**
- 3 ME 3.4 Identify normal structures and anatomic landmarks**
- 4 ME 3.4 Identify key findings and common or significant incidental findings**
- 5 ME 3.4 Recognize critical findings that warrant verbal reporting to the referring**

physician

6 P 1.1 Work within personal limits, seeking assistance as needed