INTRODUCTION

Welcome to radiology. This document is intended to provide you with some guidelines regarding your elective goals and objectives as well as some resources for study. Please note that IR has late starts on Wednesday mornings. You do not have to be to IR until 9:30am for the morning meeting.

CODE OF CONDUCT IN RADIOLOGY

1. Please dress appropriately as you would in clinical areas. In IR, scrubs in procedures, scrubs with white coat otherwise. You must provide your own scrubs.

2. The presence of learners (outside of radiology residents) within radiology requires considerable time and effort by both radiology staff and residents in addition to the usual work. With this in mind, we will make every effort to teach you.

3. As in the OR, cellphones and pagers should not be in the procedure rooms or should be silenced.

4. The workstations are not to be used for email and other non-work uses. Bringing your own laptop would be wise.

ASSESSMENT AND EVALUATION

You will be given a web-based quiz at the end of your elective. This will cover general aspects of interventional radiology and will be both image and non-image based. E-value will be completed on all elective students. Input is requested from all staff and residents in IR. You will be given an E-value to complete of your elective.
GENERAL EDUCATIONAL RESOURCES

The self-teaching room is available all week. The code for the door is: 135.

To log into the computers, use your windows login.

TEXTBOOKS

Brit K. Willey has copies of several standard student radiology textbooks that you may borrow for the period of your rotation.

Additional reading for IR

Vascular anatomy - see "vasculature" section in each learning module

DHMC angio survival manual

CDROMS

Brit has a set of teaching CDROMS including ones in OBGYN, general radiology, MSK, chest imaging and radiological anatomy that you can checkout.

You can access the student teaching files on the PACS workstations by using your username and password which should be given to you on the first day. If you have not been given one, contact Brit K. Willey. The instructions for logging in, configuring the PACS system and accessing these files is on a separate sheet that should have been in your packet.

There are also various other folders here such as neuro, body MRI, cardiac etc which you are welcome to look at if you wish.

CORE CASES

If you are a DMS student you will already have done some of the CORE cases. We highly recommend that you review these cases, which can take the place of textbook study for this course. These cases can all be accessed at http://www.med-u.org/. These are a series of interactive cases that are designed to teach the student curriculum in radiology. These include cases in chest, GI, GU, neuro, pediatrics and MSK. They include multiple web-links to expand the learning experience. Your prior login or that from CLIPP or FM cases is valid.

OTHER WEB RESOURCES

www.learningradiology.com (note, use the ppt links, some of the flash links go to adverts for his book)
University Virginia radiology tutorials
BrighamRad teaching cases
Beth Israel (Lieberman) web-tutorials (see list at bottom page)
Harvard guide to imaging in pregnant patients
Dartmouth Anatomy web-course
WEB SOURCES OF RADIOLOGICAL IMAGES

http://images.google.com/
http://www.e-anatomy.org/index.html

MODALITY SPECIFIC GOALS, OBJECTIVES AND EDUCATIONAL RESOURCES

INTERVENTIONAL RADIOLOGY

Goals of rotation

• Learn how different imaging modalities are used to guide procedures and begin to understand when each is used: ultrasonography, fluoroscopy, CT.

• Be familiar with the indications and techniques of the following common IR procedures:
  o central venous access, fluid aspiration and drain placement, angiography, percutaneous nephrostomy, percutaneous transhepatic cholangiography, gastrostomy tube placement, percutaneous angioplasty and stent placement

• Be able to describe to a patient the following procedures (observe any of these which occur the day you are on angio):
  o Vascular access, angiography, fluid aspiration and drainage, tube placement in stomach (gastrostomy), kidney (nephrostomy)

• Learn how we work up requests for IR procedures and the factors that go into determining if a procedure is necessary and indicated, safe, and able to be performed.

• Learn the methods used to reduce radiation dose during fluoroscopic and CT interventions

• If on a two or four week rotation plan to function as a sub intern; assisting in workups, consents and taking part in procedures, rounding on patients.

Specific recommendations

• Attend the morning conference to discuss the day’s cases. This begins at 7:15 am in the small reading room near angio; anyone in the angio suite can direct you.
• If you are spending more than one day in angio:
  o In the afternoon before the next IR day, pick one case that you would like to be involved with that’s scheduled for the next day (check with the resident, fellow or NP/PA on the service) and participate in/do the patient work-up. Review the relevant patient history, allergies, medications, PMH, Labs and pertinent imaging studies. Understand the indications for the requested procedure and how it is performed. Write the pre-procedure note and have an attending review it and sign it
  • Put your initials on the angio board next to the cases you wish to participate in
  • Observe and/or participate in several additional IR cases from start to finish: Review the patient history, labs and relevant imaging, learn the indication for the procedure, learn the pre-procedure work up and patient preparation.
  • Follow the technologist and nurses as they set up the room, bring the patient in, position them and prep and drape the field. Understand the techniques used to perform the procedure.

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**Conferences**

There are multiple conferences per week where IR participates. If on a 2 or 4 week rotation, do try to attend some of these each week, attending all is not practical. We will be going and can provide directions.

• Tuesday morning 6:45, GI Tumor Board.
• Tuesday 8am, Dialysis Conference.
• Tuesday noon, Liver Tumor Conference.
• Thursday 7am, combined Urology/Radiology conference.
• Friday 7am combined Surgery, GI, Radiology conference.
• There are Radiology noon conferences. If you are on a 2 or 4 week IR rotation the topics may not be relevant. Also note that cases begin at 7:45 and continue until the days work is done. The only breaks during the day are gaps between cases, which we try to minimize.

John Gemery MD
Nancy McNulty MD
11/16/11