

Effective for residents who enter training on or after July 1, 2022.

DEFINITION

Diagnostic Radiology is the medical specialty concerned with the use of imaging techniques in the study, diagnosis, and treatment of disease.

DIAGNOSTIC RADIOLOGY PRACTICE

Diagnostic radiologists provide and interpret medical imaging studies and image-guided diagnostic and therapeutic procedures of all organ systems, for patients of all ages and across the spectrum of care.

Diagnostic radiology studies and procedures are characterized by the physician integrating knowledge of anatomy with the pathology and/or pathophysiology of the underlying condition. Diagnostic radiologists advise other physicians regarding the selection of imaging studies and procedures. They gather clinical information and select the protocol to be used for the investigation. They guide technologists in the performance of investigations to optimize imaging quality. For some modalities, i.e., ultrasonography (US) and fluoroscopy, they may generate the image. They interpret imaging, correlate findings with clinical information and other imaging studies, and generate a report that includes an ordered differential diagnosis and management recommendations.

Diagnostic radiologists perform image-guided diagnostic and therapeutic procedures. They assess patients to determine suitability and eligibility for the procedure. They make a plan for the procedure, including the choice of imaging modality and approach, and choice of equipment. They provide pre- and post-procedural care, and perform the technical aspects of the procedure. They initiate or provide management for reactions, adverse events, or complications arising from a study or procedure.

Diagnostic radiologists participate in the organization and management of the workflow of a medical imaging department or facility. They prioritize requests for investigations and liaise with referring physicians. Diagnostic radiologists support the work of technologists and

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assist in their ongoing professional development. Diagnostic radiologists develop new and optimize existing protocols for imaging studies. They participate in multidisciplinary rounds, contributing their expertise to discussions and decisions regarding diagnosis, treatment, and follow-up.

Diagnostic radiologists practise in a variety of settings which include academic health centres, community and metropolitan hospitals, and free-standing diagnostic facilities. They may work in one or more practice setting, and may provide image interpretation remotely. The breadth of medical imaging has led to the delineation of distinct areas within the specialty. Many diagnostic radiologists undertake advanced training and/or focus their practice in one or more of these areas.

DIAGNOSTIC RADIOLOGY COMPETENCIES

Medical Expert

Definition:

As *Medical Experts*, diagnostic radiologists integrate all of the CanMEDS Roles, applying medical knowledge, clinical skills, and professional values in their provision of high-quality and safe patient-centred care. Medical Expert is the central physician Role in the CanMEDS Framework and defines the physician's clinical scope of practice.

Key and Enabling Competencies: Diagnostic radiologists are able to...

1. Practise medicine within their defined scope of practice and expertise

- 1.1. Demonstrate a commitment to high-quality care of their patients
- 1.2. Integrate the CanMEDS Intrinsic Roles into their practice of Diagnostic Radiology
- 1.3. Apply knowledge of the clinical and biomedical sciences relevant to Diagnostic Radiology
 - 1.3.1. Normal anatomy and variants at all ages, with emphasis on imaging applications
 - 1.3.2. Embryology
 - 1.3.3. Pathology, physiology, and pathophysiology relating to systems and conditions relevant to medical imaging studies and procedures
 - 1.3.4. Biological effects of radiation, magnetic fields, and ultrasound waves, and their safe use
 - 1.3.5. Imaging physics and equipment operation in:
 - 1.3.5.1. Radiography
 - 1.3.5.2. Fluoroscopy
 - 1.3.5.3. US
 - 1.3.5.4. Computed tomography (CT)
 - 1.3.5.5. Magnetic resonance imaging (MRI)
 - 1.3.5.6. Mammography and tomosynthesis

DIAGNOSTIC RADIOLOGY COMPETENCIES (2022)

- 1.3.5.7. Radionuclide imaging, including gamma cameras and positron emission tomography (PET)
- 1.3.6. Image generation in all imaging modalities, including
 - 1.3.6.1. Technical aspects
 - 1.3.6.2. Patient positioning
 - 1.3.6.3. Use of contrast media
 - 1.3.6.4. Limitations inherent to the modality
 - 1.3.6.5. Factors affecting the quality of the image
- 1.3.7. Computer applications relevant to Diagnostic Radiology
 - 1.3.7.1. Imaging informatics, including imaging systems, imaging standards, and interoperability
 - 1.3.7.2. Image analysis
 - 1.3.7.3. Image manipulation
 - 1.3.7.4. Computer-aided diagnosis, including the rudiments of integrating artificial intelligence and machine learning into computer-assisted diagnosis
- 1.3.8. Principles of use of all medical imaging modalities
 - 1.3.8.1. Clinical indications
 - 1.3.8.2. Integration of medical imaging into patient assessment and management
 - 1.3.8.3. Imaging techniques and protocols
 - 1.3.8.4. Modifications required due to patient factors, including age; atopy; body habitus; comorbidities, including renal dysfunction; medication use; and pregnancy
 - 1.3.8.5. Principles of image interpretation, including normal variants and imaging pitfalls
 - 1.3.8.6. Absolute contraindications, relative risks and benefits, and expected results and outcomes of imaging studies
- 1.3.9. Radiopathological correlation and appropriate imaging applications for the examination of the following:
 - 1.3.9.1. Abdomen and pelvis, including reproductive organs
 - 1.3.9.2. Breast
 - 1.3.9.3. Chest
 - 1.3.9.4. Head and neck
 - 1.3.9.5. Musculoskeletal system

DIAGNOSTIC RADIOLOGY COMPETENCIES (2022)

- 1.3.9.6. Neurologic system
- 1.3.9.7. Pregnancy
- 1.3.9.8. Vascular system and lymphatics

- 1.3.10. Indications and techniques for, and relative and absolute contraindications and alternatives to, image-guided procedures
 - 1.3.10.1. Joint aspiration and injection
 - 1.3.10.2. Lumbar puncture
 - 1.3.10.3. Percutaneous aspiration and/or drainage
 - 1.3.10.4. Percutaneous biopsy
 - 1.3.10.5. Pre-operative lesion localization
 - 1.3.10.6. Tube manipulation
 - 1.3.10.7. Vascular access, including peripheral and central line insertion

- 1.3.11. Pharmacology as applied to Diagnostic Radiology, including contrast media, sedation and analgesia, and medications used as part of or following imaging studies or diagnostic or therapeutic procedures

- 1.3.12. Adverse effects and complications of medical imaging studies and procedures, including the use of contrast media
 - 1.3.12.1. Clinical features
 - 1.3.12.2. Management
 - 1.3.12.3. Prevention and risk mitigation

- 1.3.13. Safety and protection as applied to all medical imaging modalities
 - 1.3.13.1. Regulations, federal, provincial, and territorial
 - 1.3.13.2. Workplace safety and personal protection
 - 1.3.13.3. The ALARA (As Low As Reasonably Achievable) principle

- 1.3.14. Quality control and testing of medical imaging equipment
- 1.3.15. Quality assurance and improvement of medical imaging services
- 1.3.16. Epidemiology, biostatistics, and decision analysis

- 1.4. Perform appropriately timed clinical assessments with recommendations that are presented in an organized manner
- 1.5. Carry out professional duties in the face of multiple competing demands
- 1.6. Recognize and respond to the complexity, uncertainty, and ambiguity inherent in diagnostic radiology practice

- 1.6.1. Convey diagnostic uncertainty and recommend additional studies when needed

2. Perform a patient-centred clinical assessment and establish a management plan

- 2.1. Prioritize issues to be addressed in a patient encounter
 - 2.1.1. Prioritize requests for medical imaging studies and procedures
- 2.2. Gather clinical information, which may include a focused history or chart review and a targeted physical exam, select appropriate investigations, and interpret the results for the purpose of diagnosis and management, disease prevention, and health promotion
 - 2.2.1. Gather a relevant clinical history
 - 2.2.2. Gather and interpret the clinical significance of physical examination findings
 - 2.2.3. Gather and interpret prior investigations, including relevant laboratory results and imaging investigations
 - 2.2.4. Synthesize findings from the clinical assessment and investigations
 - 2.2.5. Assess a patient's suitability to proceed with the medical imaging study or procedure
 - 2.2.5.1. Recognize when imaging study or procedure would be detrimental to the patient or cannot achieve the stated goals
 - 2.2.5.2. Minimize exposure to contrast media and radiation, particularly for pediatric patients and patients who are of child-bearing age, pregnant, or medically compromised
- 2.3. Provide diagnostic and prognostic information to help clinicians establish goals of care in collaboration with patients and their families¹, which may include slowing disease progression, treating symptoms, achieving cure, improving function, and palliation
 - 2.3.1. Ensure patients receive appropriate care at the end of life by collaborating with other professionals to ensure only appropriate medical imaging diagnostic and therapeutic procedures are performed
- 2.4. Establish a patient-centred management plan
 - 2.4.1. Advise referring physicians on the most appropriate investigation and/or sequence of investigations, taking into account relevant patient factors,

¹ Throughout this document, references to the patient's family are intended to include all those who are personally significant to the patient and are concerned with his or her care, including, according to the patient's circumstances, family members, partners, caregivers, legal guardians, and substitute decision-makers.

including comorbidities and positioning limitations, and explaining to patients as required

- 2.4.2. Integrate medical imaging studies and procedures into the patient care plan
- 2.4.3. Use pharmacologic agents, contrast media, and other techniques to optimize imaging studies
- 2.4.4. Develop plans for therapeutic procedures

3. Plan and perform procedures for the purpose of assessment and/or management

- 3.1. Determine the most appropriate procedures or therapies
 - 3.1.1. Identify patients with contraindications to the use of contrast media or with contraindications to a diagnostic or therapeutic procedure, and propose alternatives when appropriate
- 3.2. Obtain and document informed consent, explaining the risks and benefits of, the rationale for, and alternatives to a proposed procedure or therapy
- 3.3. Prioritize procedures or therapies, taking into account clinical urgency and available resources
- 3.4. Supervise and provide interpretation of medical imaging studies
 - 3.4.1. Protocol, troubleshoot, and optimize medical imaging studies
 - 3.4.2. Analyze and interpret medical imaging studies, incorporating clinical information and results of other diagnostic imaging investigations to arrive at a diagnosis
 - 3.4.2.1. Recognize when the findings of an imaging investigation require urgent communication with the referring physician
 - 3.4.2.2. Provide recommendations for follow-up imaging and/or other diagnostic investigations
- 3.5. Perform imaging studies and image-guided procedures in a skilful and safe manner, adapting to unanticipated findings or changing clinical circumstances
 - 3.5.1. Patient positioning for imaging investigations and procedures
 - 3.5.2. Ultrasound evaluation of the following:
 - 3.5.2.1. Abdomen and pelvis
 - 3.5.2.2. Breast
 - 3.5.2.3. Chest
 - 3.5.2.4. Head and neck
 - 3.5.2.5. Musculoskeletal system
 - 3.5.2.6. Pregnancy
 - 3.5.2.7. Vascular system

- 3.5.3. Fluoroscopy for
 - 3.5.3.1. Evaluation of the
 - 3.5.3.1.1. Chest
 - 3.5.3.1.2. Gastrointestinal system
 - 3.5.3.1.3. Genitourinary system
 - 3.5.3.1.4. Musculoskeletal system
 - 3.5.3.2. Guided manipulation of tubes and drains
- 3.5.4. Diagnostic aspiration and therapeutic drainage of fluid collections, abscesses, and body cavities and/or spaces
- 3.5.5. Image-guided biopsy
- 3.5.6. Image-guided localization
- 3.5.7. Lumbar puncture, diagnostic and therapeutic
- 3.5.8. Paracentesis, diagnostic and therapeutic
- 3.5.9. Thoracentesis, diagnostic and therapeutic

4. Establish plans for ongoing care and, when appropriate, timely consultation

- 4.1. Implement a patient-centred care plan that supports ongoing care, follow-up on investigations, response to treatment, and further consultation
 - 4.1.1. Recognize when the patient's best interests are served by discontinuing a study or procedure or by referring the patient to another physician, and respond appropriately
 - 4.1.2. Recognize and manage complications of medical imaging studies and procedures
 - 4.1.3. Ensure follow-up has been arranged for the results of a diagnostic procedure
 - 4.1.4. Determine the need and timing of referral to another imaging specialist

5. Actively contribute, as an individual and as a member of a team providing care, to the continuous improvement of health care quality and patient safety

- 5.1. Recognize and respond to harm from health care delivery, including patient safety incidents
- 5.2. Adopt strategies that promote patient safety and address human and system factors

- 5.2.1. Apply safe practices in the imaging suite to minimize occupational risk
- 5.2.2. Utilize the ALARA principle and promote its application to patient safety and occupational exposure

Communicator

Definition:

As *Communicators*, diagnostic radiologists form relationships with patients and their families that facilitate the gathering and sharing of essential information for effective health care.

Key and Enabling Competencies: Diagnostic radiologists are able to...

1. Establish professional therapeutic relationships with patients and their families

- 1.1. Communicate using a patient-centred approach that encourages patient trust and autonomy and is characterized by empathy, respect, and compassion
- 1.2. Optimize the physical environment for patient comfort, dignity, privacy, engagement, and safety
- 1.3. Recognize when the perspectives, values, or biases of patients, patients' families, physicians, or other health care professionals may have an impact on the quality of care, and modify the approach to the patient accordingly
- 1.4. Respond to a patient's non-verbal behaviours to enhance communication
- 1.5. Manage disagreements and emotionally charged conversations
- 1.6. Adapt to the unique needs and preferences of each patient and to the patient's clinical condition and circumstances

2. Elicit and synthesize accurate and relevant information

- 2.1. Use patient-centred interviewing skills to effectively gather relevant biomedical and psychosocial information
- 2.2. Seek and synthesize relevant information from other sources, including the health record and, with the patient's consent, the patient's family

3. Share health care information and plans with patients and their families

- 3.1. Share information and explanations that are clear, accurate, and timely, while assessing for patient and family understanding
 - 3.1.1. Share information about risks and benefits of, and alternatives to, imaging studies and procedures
 - 3.1.2. Convey the concept of relative risk, as it applies to radiation exposure, in discussion of investigations and procedures
 - 3.1.3. Convey imaging findings to patients and families clearly and compassionately

- 3.2. Disclose harmful patient safety incidents to patients and their families
 - 3.2.1. Communicate and document issues arising from a breach in quality or safety of medical imaging
- 4. Engage patients and their families in developing plans that reflect the patient's health care needs and goals**
 - 4.1. Facilitate discussions with patients and their families in a way that is respectful, non-judgmental, and culturally safe
 - 4.2. Assist patients and their families to identify, access, and make use of information and communication technologies to support their care and manage their health
 - 4.3. Use communication skills and strategies that help patients and their families make informed decisions regarding their health
- 5. Document and share written and electronic information about the medical encounter to optimize clinical decision-making, patient safety, confidentiality, and privacy**
 - 5.1. Document imaging studies and diagnostic and therapeutic procedures in an accurate, complete, timely, and accessible manner, in compliance with regulatory and legal requirements
 - 5.1.1. Develop and utilize a systematic method of reporting, integrating clinical and imaging information
 - 5.1.2. Convey emergent, urgent, and unexpected findings or results to the referring physician in a manner appropriate for the acuity of the finding
 - 5.1.3. Provide oral and written reports that address the clinical question and include relevant findings, most likely differential diagnoses, and, when indicated, recommend further testing and/or management
 - 5.1.4. Document procedures and their outcomes
 - 5.1.5. Ensure reports are distributed to the appropriate care providers
 - 5.2. Communicate effectively using a written health record, electronic medical record, or other digital technology
 - 5.3. Share information with patients and others in a manner that enhances understanding and that respects patient privacy and confidentiality

Collaborator

Definition:

As *Collaborators*, diagnostic radiologists work effectively with other health care professionals to provide safe, high-quality, patient-centred care.

Key and Enabling Competencies: Diagnostic radiologists are able to...

1. Work effectively with physicians and other colleagues in the health care professions

- 1.1. Establish and maintain positive relationships with physicians and other colleagues in the health care professions to support relationship-centred collaborative care
- 1.2. Negotiate overlapping and shared responsibilities with physicians and other colleagues in the health care professions in episodic and ongoing care
 - 1.2.1. Work effectively with technical staff
 - 1.2.2. Work effectively with nurses and administrative and managerial staff to maintain the quality of delivery of diagnostic radiology services
 - 1.2.3. Provide guidance to resolve clinical or imaging challenges
- 1.3. Engage in respectful shared decision-making with physicians and other colleagues in the health care professions
 - 1.3.1. Convey information to clinicians in a manner that enhances patient management
 - 1.3.2. Contribute effectively at multidisciplinary rounds, presenting and discussing imaging findings
 - 1.3.3. Support clinical colleagues in the development and implementation of a management plan

2. Work with physicians and other colleagues in the health care professions to promote understanding, manage differences, and resolve conflicts

- 2.1. Show respect toward collaborators
- 2.2. Implement strategies to promote understanding, manage differences, and resolve conflict in a manner that supports a collaborative culture

3. Hand over the care of a patient to another health care professional to facilitate continuity of safe patient care

- 3.1. Determine when care should be transferred to another physician or health care professional
 - 3.1.1. Determine when a patient should be transferred to another radiologist or centre with differing expertise

- 3.1.2. Identify patients that need referral and/or transport for emergent or urgent medical assistance and arrange for transfer to the appropriate medical provider or facility
- 3.2. Demonstrate safe handover of care, using both oral and written communication, during a patient transition to a different health care professional or setting
 - 3.2.1. Communicate with the physician receiving a patient in transfer or as a referral, providing a summary of relevant issues and/or plans for ongoing care

Leader

Definition:

As *Leaders*, diagnostic radiologists engage with others to contribute to a high-quality health care system and take responsibility for the delivery of excellent patient care through their activities as clinicians, administrators, scholars, or teachers.

Key and Enabling Competencies: Diagnostic radiologists are able to...

1. Contribute to the improvement of health care delivery in teams, organizations, and systems

- 1.1. Apply the science of quality improvement to systems of patient care
 - 1.1.1. Review results and outcomes from diagnostic and therapeutic procedures to monitor the quality of health service delivery
 - 1.1.2. Contribute to the identification of quality management or safety problems, the formulation and execution of a plan of action, and the assessment of that plan
- 1.2. Contribute to a culture that promotes patient safety
- 1.3. Analyze patient safety incidents to enhance systems of care
- 1.4. Use health informatics to improve the quality of patient care and optimize patient safety

2. Engage in the stewardship of health care resources

- 2.1. Allocate health care resources for optimal patient care
 - 2.1.1. Allocate imaging resources to achieve appropriate utilization of health care resources and wait time management
- 2.2. Apply evidence and management processes to achieve cost-appropriate care

3. Demonstrate leadership in health care systems

- 3.1. Demonstrate leadership skills to enhance health care
 - 3.1.1. Demonstrate an understanding of the basic principles of leadership, management, and administration of hospitals and imaging departments
 - 3.1.2. Demonstrate an understanding of the role of academic institutions and licensing bodies, and their interaction with physicians
- 3.2. Facilitate change in health care to enhance services and outcomes

4. Manage career planning, finances, and health human resources in personal practice(s)

- 4.1. Set priorities and manage time to integrate practice and personal life
- 4.2. Manage personal professional practice(s) and career
- 4.3. Implement processes to ensure personal practice improvement

Health Advocate

Definition:

As *Health Advocates*, diagnostic radiologists contribute their expertise and influence as they work with communities or patient populations to improve health. They work with those they serve to determine and understand needs, speak on behalf of others when required, and support the mobilization of resources to effect change.

Key and Enabling Competencies: Diagnostic Radiologists are able to...

1. Respond to an individual patient's health needs by advocating with the patient within and beyond the clinical environment

- 1.1. Work with patients to address determinants of health that affect them and their access to needed health services or resources
 - 1.1.1. Respond to individual patients' diagnostic and therapeutic needs and issues
- 1.2. Incorporate disease prevention, health promotion, and health surveillance into interactions with individual patients
 - 1.2.1. Counsel patients about the use and misuse of imaging, including radiation safety and the appropriate use of other modalities

2. Respond to the needs of the communities or populations they serve by advocating with them for system-level change in a socially accountable manner

- 2.1. Work with a community or population to identify the determinants of health that affect them

- 2.2. Improve clinical practice by applying a process of continuous quality improvement to disease prevention, health promotion, and health surveillance activities
- 2.3. Contribute to a process to improve health in the community or population they serve
 - 2.3.1. Advocate for resources for emerging imaging technology, including educational and research resources
 - 2.3.2. Communicate the benefits and risks of imaging investigation and treatment, including population screening

Scholar

Definition:

As *Scholars*, diagnostic radiologists demonstrate a lifelong commitment to excellence in practice through continuous learning, and by teaching others, evaluating evidence, and contributing to scholarship.

Key and Enabling Competencies: Diagnostic Radiologists are able to...

1. Engage in the continuous enhancement of their professional activities through ongoing learning

- 1.1. Develop, implement, monitor, and revise a personal learning plan to enhance professional practice
- 1.2. Identify opportunities for learning and improvement by regularly reflecting on and assessing their performance using various internal and external data sources
 - 1.2.1. Review patient outcomes and pathology findings as a source of information on personal performance
- 1.3. Engage in collaborative learning to continuously improve personal practice and contribute to collective improvements in practice

2. Teach students, residents, the public, and other health care professionals

- 2.1. Recognize the influence of role modelling and the impact of the formal, informal, and hidden curriculum on learners
- 2.2. Promote a safe and respectful learning environment
- 2.3. Ensure patient safety is maintained when learners are involved
- 2.4. Plan and deliver learning activities
- 2.5. Provide feedback to enhance learning and performance
- 2.6. Assess and evaluate learners, teachers, and programs in an educationally appropriate manner

3. Integrate best available evidence into practice

- 3.1. Recognize practice uncertainty and knowledge gaps in clinical and other professional encounters and generate focused questions that can address them
- 3.2. Identify, select, and navigate pre-appraised resources
- 3.3. Critically evaluate the integrity, reliability, and applicability of health-related research and literature
- 3.4. Integrate evidence into decision-making in their practice

4. Contribute to the creation and dissemination of knowledge and practices applicable to health

- 4.1. Demonstrate an understanding of the scientific principles of research and scholarly inquiry and the role of research evidence in health care
- 4.2. Identify ethical principles for research and incorporate them into obtaining informed consent, considering potential harms and benefits, and vulnerable populations
- 4.3. Contribute to the work of a research program
- 4.4. Pose questions amenable to scholarly investigation and select appropriate methods to address them
- 4.5. Summarize and communicate to professional and lay audiences, including patients and their families, the findings of relevant research and scholarly inquiry

Professional

Definition:

As *Professionals*, diagnostic radiologists are committed to the health and well-being of individual patients and society through ethical practice, high personal standards of behaviour, accountability to the profession and society, physician-led regulation, and maintenance of personal health.

Key and Enabling Competencies: Diagnostic radiologists are able to...

1. Demonstrate a commitment to patients by applying best practices and adhering to high ethical standards

- 1.1. Exhibit appropriate professional behaviours and relationships in all aspects of practice, demonstrating honesty, integrity, humility, commitment, compassion, respect, altruism, respect for diversity, and maintenance of confidentiality
- 1.2. Demonstrate a commitment to excellence in all aspects of practice
- 1.3. Recognize and respond to ethical issues encountered in practice
- 1.4. Recognize and manage conflicts of interest
- 1.5. Exhibit professional behaviours in the use of technology-enabled communication

2. Demonstrate a commitment to society by recognizing and responding to societal expectations in health care

- 2.1. Demonstrate accountability to patients, society, and the profession by responding to societal expectations of physicians
- 2.2. Demonstrate a commitment to patient safety and quality improvement

3. Demonstrate a commitment to the profession by adhering to standards and participating in physician-led regulation

- 3.1. Fulfil and adhere to professional and ethical codes, standards of practice, and laws governing practice
 - 3.1.1. Abide by guidelines on ethical interactions with industry, especially the pharmaceutical, device, and equipment industries, with respect to research, education, and clinical care
- 3.2. Recognize and respond to unprofessional and unethical behaviours in physicians and other colleagues in the health care professions
- 3.3. Participate in peer assessment and standard setting

4. Demonstrate a commitment to physician health and well-being to foster optimal patient care

- 4.1. Exhibit self-awareness and manage influences on personal well-being and professional performance
 - 4.1.1. Demonstrate a commitment to safe practices in Diagnostic Radiology to minimize occupational risk
- 4.2. Manage personal and professional demands for a sustainable practice throughout the physician life cycle
- 4.3. Promote a culture that recognizes, supports, and responds effectively to colleagues in need

This document is to be reviewed by the Specialty Committee in Diagnostic Radiology by December 31, 2023.

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