

McGill University
Department of Diagnostic Radiology
Fellowship in Musculoskeletal Radiology

Fellowship Director: Dr. Rehana Jaffer

Residency Program Director: Dr. Jana Taylor

Program Administrator: Cathy Torchia

General Overview

The fellowship is geared towards enriching the fellow's own experience and achievement as well as optimizing the functioning of the MSK section.

The fellowship is dedicated to imaging of the joints and soft tissues. The Bone fellow will be involved in many facets of Musculoskeletal Imaging including MRI, CT, US, Interventions and Consultations. Fellows are exposed to a large volume of diverse cases referred by orthopedics, oncology, rheumatology, sports medicine, general medicine and emergency medicine and are supervised by a dynamic group of subspecialized musculoskeletal radiologists. At the conclusion of the training, the fellow should be able to function autonomously in US scanning, CT and MR interpretation, as well as performing and managing interventional procedures.

The fellow functions as a junior attending, with progressive autonomy over the course of the year. He/she will be integrated into the teaching team: Teaching the residents basic interventional procedures, teaching residents/medical students at the viewer and in ultrasound, giving teaching rounds, participating in sarcoma rounds, as well as educating and advising consultants.

A commitment to participate in at least one research project is encouraged.

Duration: 1 Year

Objectives/Guidelines

The objective is to acquire as much experience and skills in ultrasound scanning and CT/MR interpretation as well as performing MSK related interventional procedures.

At the end of the fellowship, the fellow will be able to:

1. Detect any abnormality on CT, MRI and ultrasound and give a pertinent differential diagnosis and propose an appropriate management
2. Perform a variety of ultrasound and CT guided procedures safely

3. Prioritize and manage daily and on-call workload, as well as recognize and efficiently manage urgent cases
4. Serve as the first line consultant to referring clinicians
5. Serve as an integral member of the sarcoma multidisciplinary team, by participation in tumor boards
6. Be involved in residents' teaching, research projects and journal club

Structure

The daily activity in the Section is as follows:

CT

The fellow is responsible for:

- Reading emergency, inpatient and outpatient CTs (with progressive autonomy)
- Providing preliminary report of urgent findings to referring physician
- Screening the patient for possible allergy to iodine contrast, bleeding disorders (Before bone biopsy).
- Monitoring certain cases which includes the selection of appropriate slice locations, need for contrast, and protocoling.
- Obtaining pertinent information for film interpretation and maintaining order of reading room.
- Performing procedures under CT guidance with supervision of the MSK staff.

MRI

The fellow is responsible for:

- Monitoring day cases including screening for contraindications, adaptation of the standard protocols to the need of a particular pathology.
- Reviewing and reporting routine, urgent and day cases
- Managing urgent MRI requests

US

The fellow is responsible for:

- Receiving and interviewing the patient, performing the US exam and then reviewing case with the Bone staff.
- Reporting cases immediately after the exam is performed.
- Performing procedures under US guidance (with progressive autonomy)

Plain films

High volume of plain films done daily. Number of radiographs to be read by fellow will be decided together by attending and fellow on a day-to-day basis.

Arthrography

- These include arthrography of the hip, shoulder, elbow, knee, wrist and ankle. These procedures are performed by the fellows and residents.
- The films will be read with the Bone staff. The fellow will then dictate the final report.

Expected Caseload (average daily)

- **CT:10**
- **MR: 10**
- **US: 4**
- **Interventional Procedures: approximately 10-20 per week**

Evaluation

- The fellow is evaluated on a daily basis by the attending staff
- A formal written evaluation is completed every 3 months, using the CanMEDS roles scheme. The fellow will meet the Fellowship director of his section for direct feedback.