Medical imaging and interventional radiology are at the centre of current health care delivery and enable rapid, accurate diagnosis, effective prognostication, and safe and effective management of many conditions.

Group practice is the most practical means of managing the effective delivery of comprehensive imaging services. Most radiologists in Canada and America work in such collaborative teams. These practice models have developed organically as a way to provide a broad spectrum of radiology coverage and expertise, to cover call responsibilities, and to share limited resources.

Radiological services include complex imaging across multiple body systems and modalities, interventional radiology/neuroradiology services, on-call service, support of multi-disciplinary tumour boards and other hospital committees, and the maintenance of robust quality improvement and assurance programs. The provision of these services are important to radiology professionals, and are extremely important to the communities they serve.

Radiology groups understand local needs, and have the ability to hire and manage the right number and mix of general and subspecialty-trained radiologists to provide comprehensive radiology services. This model has also evolved as the only efficient and effective organizational structure to support the combination of clinical care, research and education. To deliver such broad-spectrum service seamlessly radiologists need to work together cooperatively, and to share the delivery of care in a manner that is considered fair amongst themselves. Group practice allows all this to happen.

The CAR strongly encourages government decision makers and health regions to recognize that a collaborative group practice model is the best way to deliver the key components of comprehensive medical imaging care. Broad-spectrum, high quality patient imaging care is best supported by the group practice model.