

1. Information Related to Course Content:

Clinical knowledge will be acquired by a variety of means, including close liaison with appropriate medical and surgical and radiological meetings. Multidisciplinary meetings should be emphasised.

The following inter-relationships are important:

- Vascular surgery
- Urology
- Neurological sciences
- Gastroenterology
- General surgery
- Oncology and Haematology

1. The trainee should be encouraged and given the opportunity to attend and lead appropriate clinico-radiological and multidisciplinary meetings.

2. The trainee should be encouraged to attend appropriate educational meetings and courses.

3. The trainee should participate in and initiate relevant clinical audit.

4. Trainees will be expected to be familiar with current interventional radiology literature.

5. The trainee should be encouraged to participate in research, and to pursue one or more projects up to and including publication. An understanding of the principles and techniques used in research, including the value of clinical trials and basic biostatistics, should be acquired. Presentation of research and audit results at state and national meetings would be encouraged.

6. The trainee should be knowledgeable in basics of angiographic equipment and radiation safety along with ICRP and AERB regulations

7. The trainee should continue to participate in the on-call rota, with appropriate consultant back up.

8. Acquisition of specific skills to enable:

- The conduct, supervision and accurate interpretation of all imaging techniques used to a high professional standard
- The safe and effective practice of interventional techniques in the appropriate body system(s)
- Good communication with patients and professional colleagues
- Accurate informed consent to be obtained
- Appropriate decisions about terminating the procedure for technical reasons or grounds of safety / comfort to the patient.

9. A clear understanding of the role of multidisciplinary meetings, including:

- Planning of investigations including the selection of appropriate tests and imaging techniques for a clinical problem
- Planning and outcomes of treatment
- Promoting an understanding of relevant pathology

10. Procedural competence will need to be reviewed at intervals, and this regular review should also assess the number of cases required in order to ensure competence.

11. Radiologists who devote essentially all their time to interventional radiology will be expected to undertake a wide range of complex procedures. Acquisition of the necessary expertise requires such trainees to undertake a proportionately larger number of interventional procedures.

12. All interventional radiologists must have a thorough knowledge of the techniques required to perform sedation and analgesia procedures, as well as patient monitoring throughout and following the procedures, and should be familiar with existing guidelines.

13. The trainee should be aware of local and national guidelines on consent, and be capable of obtaining informed patient consent for practical procedures.

2. Duration:

One Year (MD/DNB Radiodiagnosis) & Two Years for DMRD

3. Training Facilities:

Expert Faculties, Regular Training Sessions, Excellent Infrastructure

4. Teaching Faculty Details (Along with active registration No.)

Dr. Rahul Rajendra Arkar (MMC Reg. No. 2007/04/1105)

5. Infrastructure Facilities:

MRI (1.5T & 3T), CT Scan (16 Slice & 128 Slice), X-ray and Ultrasonography

6. Fees: Rs. 1,00,000/- (Rupees One Lakh Only)