

# 2003 Chief Resident Survey

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# 2003 Chief Resident Survey

- Annual snapshot of radiology training programs
- Annual demographic information
- Rotating topics repeat every 4 years

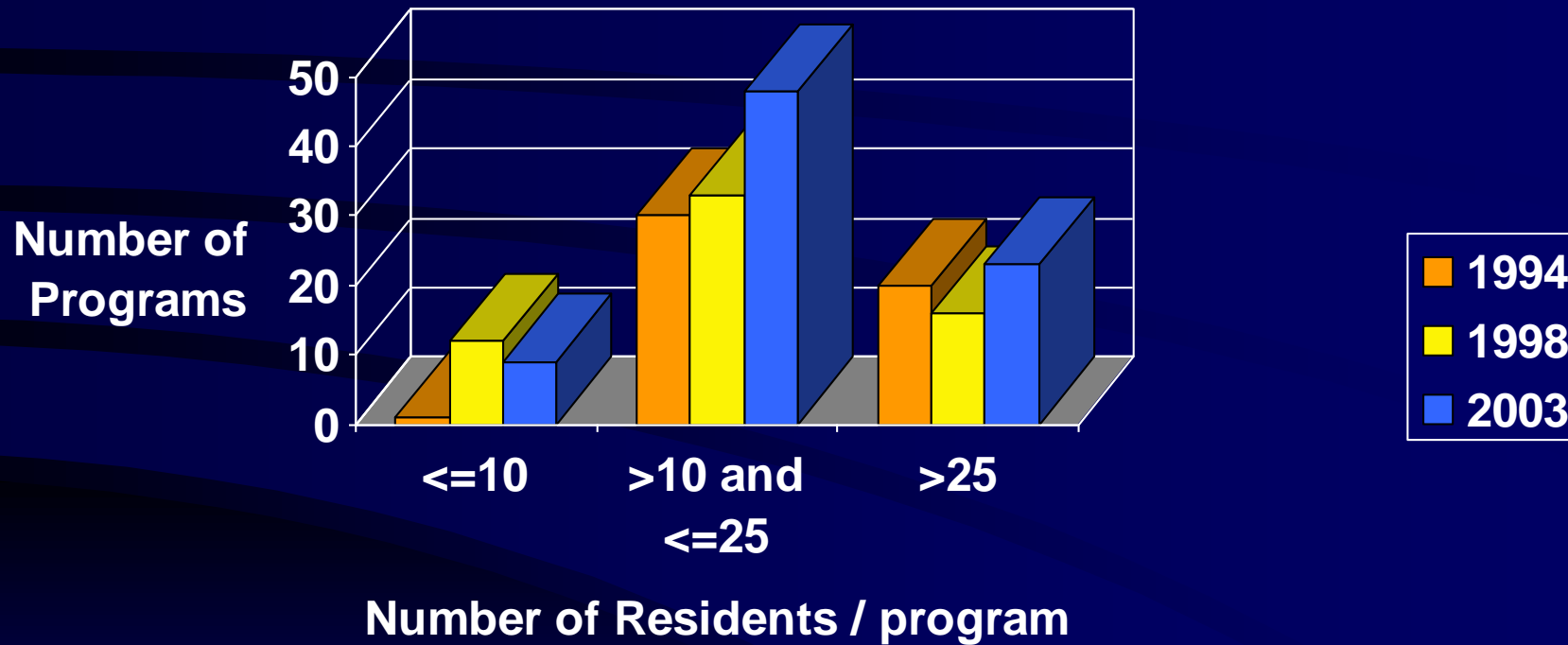
# Distribution and Response

- 193 Resident Training Programs
- 80 Responded = 41% response rate
- Increased response rate: 25% in 1999 & 2002
- New strategies to improve response rate
  - New online survey this year- ACR site
  - emailed survey to the APDR list of program directors

# Demographics

- Residency Program Average Size = 21.0
- Breakdown of Sizes:
  - Small Programs ( $\leq 10$ ) : 9
  - Medium Programs ( $>10$  and  $\leq 25$ ) : 48
  - Large Programs ( $>25$ ) : 23

# Program Size



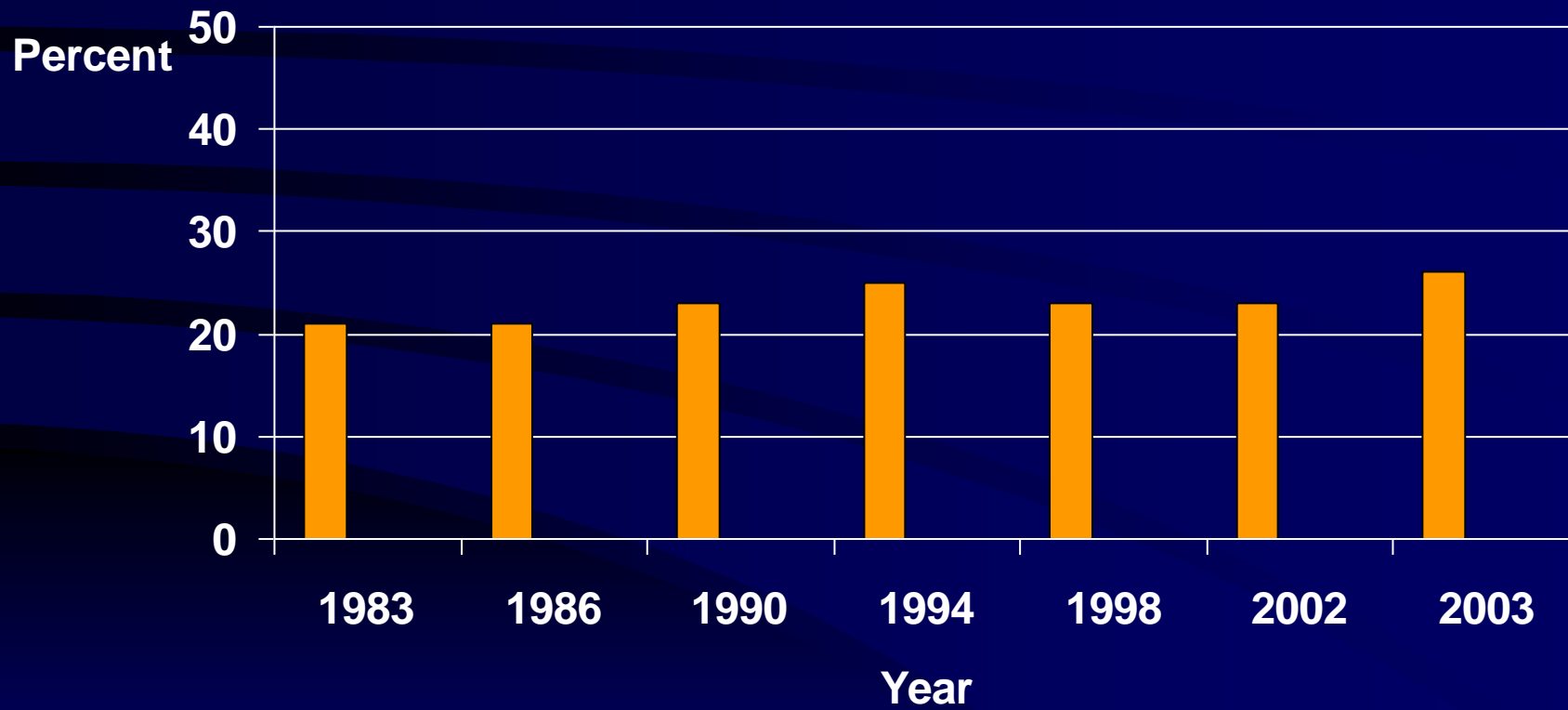
# Demographics: Women in Radiology

Percent Women : 26.2%

– Slight increase from 1998 (23%)

– Increase from 1986 (20%)

# Women in Radiology



# Demographics

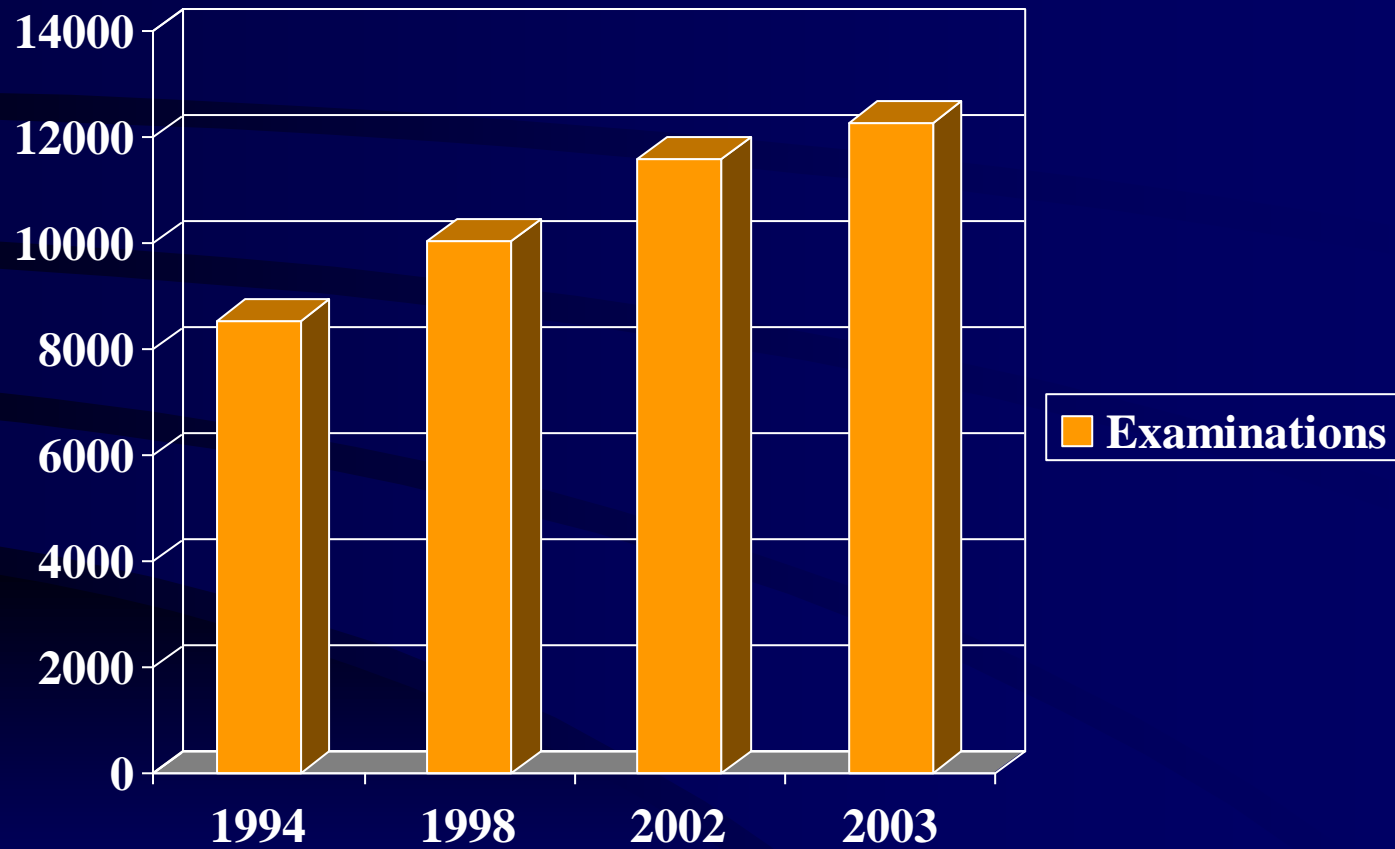
- Number of Faculty / Program
  - Average 30.6 (vs 41 in 2002 and 30.6 in 1998)
    - Range 5 - 150
  - Staff / Resident Ratio : 1.45
- Number of Fellows / Program
  - Average 5.6 (vs 6.5 in 2002 and 9.5 in 1998)
    - Range 0-30
  - Resident / Fellow Ratio : 3.7 (2.1 in 1998)



# Examinations

- Diagnostic Examinations
  - 12,275 examinations per resident (vs. 11,582 in 2002 and 10,035 in 1998)
  - Overall, 44% increase from 1994
    - 8,539 examinations per resident (1994)

# Examinations



# Attending In House Call Coverage

- In House Attending Coverage
  - 5-10pm: 45%
    - decreased from 62.5% in 2002
    - same as in 1998
  - 10pm-6am: 10%
    - increased from 4% in 2002 and 5% in 1998

# Benefits

- **Salary**

- First Year

- Average \$39,702 vs \$37,913 in 2002
    - Range 32K-50K

- Fourth Year

- Average \$45,522 vs \$43,130 in 2002
    - Range 37K-59K

# Benefits

- **Book and Travel Fund:**
  - 71% offer yearly benefit vs 92% in 2002
  - \$760 per resident vs \$1,243 in 2002 and \$651 in 1998
    - Range \$0 - \$2000
    - Benefits range from books, travel, and conferences

# Benefits

- **AFIP Coverage:**
  - 94% offer benefit
  - Majority cover 100% tuition (\$1200) with many providing additional money for housing, travel expenses, etc.
- **Additional Board Review Courses:** 30% cover tuition

# Rotating Topics

- Length of Training
- Timing of ABR Boards
- Resident Evaluations
- Economic Impact on Radiologic Education
- Moonlighting
- Research
- Perceived Practice Opportunities

# Length of Training

- 9% feel 4 years is too much
- 2% feel 4 years is too little
- 89% feel 4 years is appropriate length



# Length of Training

- Would you rather replace your 4th year with fellowship year?
  - 38% favor
  - 62% oppose

# Length of Training

- Do you think you benefit from your clinical internship as a radiologist?
  - only 55% feel clinical year beneficial
- 46% favor eliminating clinical year as requirement

# Timing of ABR Boards

- If the ABR boards were delayed to the first year after completion of residency:
  - 85% feel they would not be able to adequately prepare
  - 81% would not alter their work ethic as a fourth year
  - 58% would not change their fourth year schedule
  - 36% would change their decision to do a fellowship

# Resident Evaluations

- **100% of programs have written evaluations of their residents**

**\_\_\_\_\_ 70% *each rotation***

**10% quarterly**

**13% every 6 months**

**17% other (not specified)**

# Resident Evaluations

- **95% of programs make these evaluations available to the residents**
- **Direct feedback given in 97% of programs:**
  - 51% provide in person*
  - 15% in a written format**
  - 14% both in writing and in person**

# Resident Evaluations

- Evaluations written by:
  - program directors: 14%
  - faculty members: 60%*
  - section chiefs: 16%
  - section chiefs & faculty members: 10%

# Evaluations

- **95% of residents evaluate their programs**
- **94% of residents evaluate individual faculty**
  - **however, only 60% feel staff evaluations produce desirable changes**

# **Economic Impact on Radiologic Education**

- **Respondents asked how the past 4 years have affected:**
  - **Clinical volume**
  - **Number of hours spent performing clinical work**
  - **Number of didactic and case conferences**
  - **Amount of view-box teaching**



# Economic Impact on Radiologic Education

- 71% indicate the number of hours performing clinical work has increased (only 1% note a decrease)
- 86% indicate the volume of cases has increased

# Economic Impact on Radiologic Education

- 26% indicate a decrease in the number of didactic conferences (only 14% note an increase)
- 40% indicate a decrease in view box teaching (only 14% note an increase)

# Moonlighting

- **64% programs allow moonlighting (slight decrease since 1998)**
- **74% report moonlighting occurs (stable since 1998)**
- **In programs where moonlighting occurs, ~50% of residents participate**

# Research

- **25% programs require residents to do research (vs. 13% in 1998)**
- **18% programs neither encourage or discourage research (vs. 17% in 1998)**
- **90% programs require additional academic responsibilities of residents**
  - **Include: noon talks, teaching medical students, publications, exhibits, and didactic conferences**

# Research

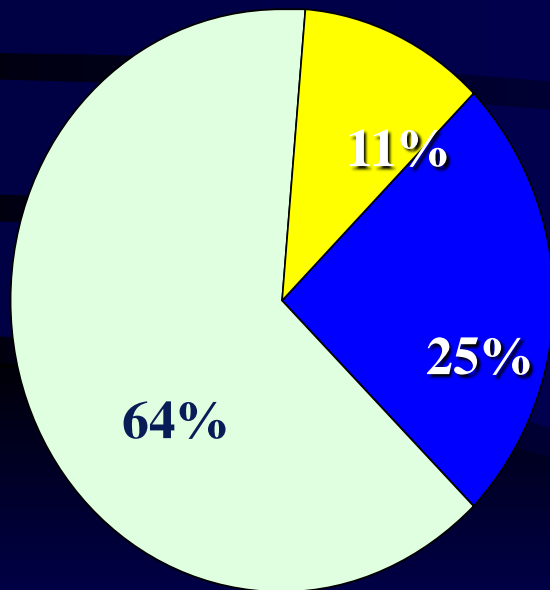
- 16% of residents have first author publications
- 23% of residents have presented a poster exhibit at a scientific meeting

# Perceived Practice Opportunities

- **85% felt the job market has improved (vs. 98% in 1999)**
- **Over 95% feel that starting salaries are stable or increased**
- **Over 95% feel that there are an equal number or more job opportunities than previous years**

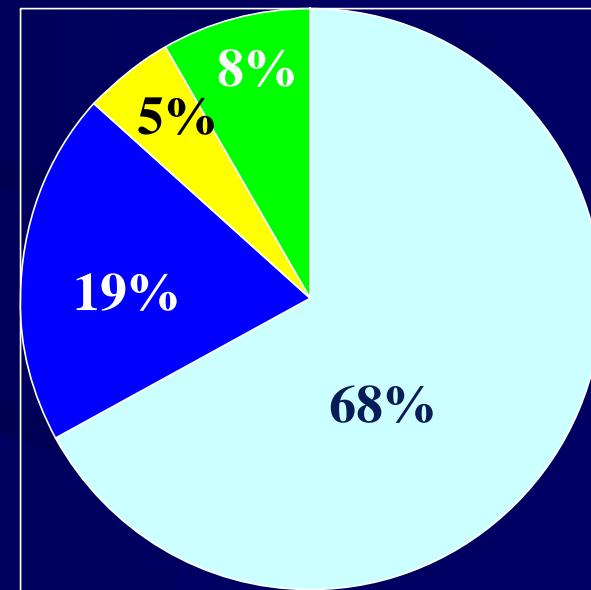
# Future Goals

- **74% of residents will pursue fellowship**  
– vs. 82% in 2002



■ Academics ■ Private Practice ■ Military

2002



■ Private ■ Academics ■ Military ■ Undecided

2003

# Summary

- Workload has increased at the expense of teaching
- Decrease in number of attendings and fellows
- Job market remains strong, with most residents continuing to opt for private practice
- Delaying boards would result in inadequate time for preparation, would not affect fourth year schedules or work ethic, and may alter residents choices for fellowship