Dear ESR member,

The ESR Board of Directors proposes a survey to explore the opinions of the ESR full radiologist members concerning their perceptions of the current identity and role of the radiologist.

Two basic principles can be agreed:

- 1. The radiologist is and will remain the responsible medical professional with regards to medical imaging diagnostics and interventional procedures performed under the auspices of radiology departments.
- 2. Excellence in patient care and patient safety are central to our role.

Accepting these over-arching principles, we recognise that our profession evolves as technology and healthcare evolve, giving us opportunities, as well as perhaps raising concerns in relation to our role in patient care.

Here we explore our relationship and communications with professional colleagues and patients. This may change significantly as we move into the world of instant messaging, patient portals and patient involvement.

The interaction with clinical colleagues may be challenged in relation to turf battles and whether we see ourselves (and are seen) as technicians or as clinicians. Imaging and imaging-guided procedures are integral to medical education, research and healthcare management. What is our role in these important areas to ensure the development of high-quality services and care?

Delegation of some aspects of work to allied healthcare professionals has become part of teamwork and radiology is not immune. What are radiologists' opinions concerning skill mix in radiology?

This survey attempts to explore radiologists' opinions in relation to their identity with four main sections:

- 1. About you, your clinical role and your training.
- 2. About your role in patient and professional relationships.
- 3. About your role in education, research and management.
- 4. About delegation: what happens in your department and what is your opinion?

This is an in-depth survey and as such we understand it is somewhat longer, but seeing the importance of this topic, we kindly ask you to please take the time and provide us with your valuable input. The survey should take approximately 25-30 minutes and its results will be discussed during the ESR National Societies Committee meeting which will be held at the ECR 2020.

In order to express our appreciation for your support, we will offer 10 free registrations to ECR 2020 in

sections).	
Many thanks for your help!	
Kind regards, Andrea Rockall Chairperson of the ESR National Socie	ties Committee
What is the identity and role of the	e radiologist in 2020?
About you, your clinical role and you	r training
1. If you would like to participate in the praddress.      * 2. In which country do you practice?	ze draw (free ECR 2020 registration), please let us know your ema
* 3. How many years have you worked	as an accredited radiologist (after completion of specialist training)?
0-5	16-20
6-10 11-15	>20
* 4. What is your age?	
25-34 years	
35-44 years	
45-54 years	
55-64 years	
Age 65 or older	

The winners will be selected randomly among those who completed the survey (at least mandatory

a prize draw.

<ol><li>What is your gen</li></ol>	der?				
Male					
Female					
Prefer not to say					
* 6. How would you best	· describe vour pri	many practice se	utting?		
o. Flow would you best	Academic teaching hospital	Non-university or district general hospital with teaching	District general hospital (i.e. smaller/community hospital) without teaching	/ Private practice	Retired
Primary practice setting					
* 7. How would you best	,	Non-u distri Academic hos	iniversity or ct general District pital with hospital	general I without ching Private practice	Retired
Additional practice setting		0	0		0
* 8. Does your practice s (flexible working: could (part-time: less than st	include early/late	_			
	Yes		No	Don't	know
Flexible working for men				(	
Flexible working for women	$\bigcirc$		$\circ$	(	
Part-time working for men	0			(	
Part-time working for women	$\circ$		$\circ$	(	

. How would you best d					
	None	Low	Moderate	High	Very High
Plain film					
Mammography					
Ultrasound					
Radiographic screening					
СТ	$\circ$				
MRI	$\bigcirc$				
Nuclear medicine					
Interventional procedures (general)	$\bigcirc$	$\bigcirc$	$\circ$		$\bigcirc$
Interventional procedures (subspecialist)	$\circ$	0	0	0	0
0. How would you best	describe your o	own "organ-based Low	d or clinical" areas o	of practice?	Very High
O. How would you best  General					Very High
					Very High
General				High	Very High
General Neuro				High	Very High
General Neuro Head and Neck				High	Very High
General Neuro Head and Neck Pulmonary				High	Very High
General Neuro Head and Neck Pulmonary Cardiac				High	Very High
General Neuro Head and Neck Pulmonary Cardiac Breast				High	Very High
General Neuro Head and Neck Pulmonary Cardiac Breast Gastrointestinal				High	Very High
General Neuro Head and Neck Pulmonary Cardiac Breast Gastrointestinal Genitourinary				High	Very High
General Neuro Head and Neck Pulmonary Cardiac Breast Gastrointestinal Genitourinary Musculoskeletal				High	Very High
General Neuro Head and Neck Pulmonary Cardiac Breast Gastrointestinal Genitourinary Musculoskeletal Paediatric Imaging				High	Very High

	Strongly disagree	Disagree	Neutral	Agree	Strongly agree	Not applicab
Being a general radiologist	0	0	0	0	0	0
Being a specialized adiologist	$\bigcirc$	0	$\circ$	0	C	$\circ$
nteraction with colleagues in the radiology department	0	0	0	0	0	0
nteraction with clinical colleagues	$\bigcirc$	0	$\circ$	0	$\circ$	$\circ$
nvolvement in nultidisciplinary neetings/tumour board	0	0	0	0	0	0
nteraction with patients	$\circ$	$\bigcirc$	$\bigcirc$	$\circ$	$\circ$	
eaching						
Service evaluation and udit	$\bigcirc$	0	$\bigcirc$	0	0	$\circ$
erforming research						
nvolvement with ospital management	$\circ$	0		$\bigcirc$	$\circ$	$\circ$
, ,						
	_	like less	l would li	ke same	I would l	ike more
. What would you wis	_		I would li	ke same	I would I	ike more
evel of specialization	_		I would li	ke same	I would I	ike more
. What would you wis evel of specialization evel of workload nteraction with clinical	_		I would li	ke same	I would I	ike more
. What would you wis evel of specialization evel of workload nteraction with clinical olleagues	_		I would li	ke same	I would I	ike more
evel of specialization evel of workload nteraction with clinical olleagues nteraction with patients	_		I would li	ke same	I would I	ike more
evel of specialization evel of workload nteraction with clinical olleagues nteraction with patients reaching role	_		I would li	ke same	I would I	ike more
evel of specialization evel of workload nteraction with clinical olleagues nteraction with patients eaching role Role as esearcher/investigator	_		I would li	ke same	I would I	ike more
evel of specialization evel of workload nteraction with clinical olleagues nteraction with patients eaching role tole as esearcher/investigator tole as a dept/hospital nanager  13. What is the leve recognition of our ro	I would	of radiologists	n your institution	on? (Visibilit	y could include for	
2. What would you wis evel of specialization  evel of workload  nteraction with clinical colleagues  nteraction with patients  feaching role  Role as esearcher/investigator  Role as a dept/hospital manager	I would	of radiologists	n your institution	on? (Visibilit	y could include for	

14. Are you nappy with t	ne level of visibility of	of radiologists in your	institution?	
	Yes	Me	dium	No
With patients		(	C	
With clinicians		(	$\supset$	
With institution				
15. In your opinion, is vis to be a visible member o			ical service e.g. is it im	portant for radiologis
Strongly disagree	Disagree	Neutral	Agree	Strongly agree
16. In your institution:	Yes	No	Not Applicable	I don't know
Radiologists' names and/or expertise are listed on the hospital website	0	0		
Radiologists are listed as part of the specialist clinical care teams on website or letterhead	0	0	0	0
What is the identit	y and role of the ra	adiologist in 2020?		
About your training				
* 17. Did you undertak	e a period of clinical	training?		
Yes	·	ū		
No				
What is the identity	y and role of the ra	adiologist in 2020?		
* 18. At what stage of y	our training was this	s done?		
As undergraduate (m	_			
As clinical resident				
As radiology resident				

* 19. For now long altogether?
3 months
6 months
9 months
12 months
12-24 months
> 24 months
What is the identity and role of the radiologist in 2020?
* 20. Do you think radiologists should have a mandatory period of non-radiology clinical experience, either before or during radiology training?
Yes
○ No
What is the identity and role of the radiologist in 2020?
* 21. If yes, for how long?
3 to 6 months
9 to 12 months
12 to 24 months
> 24 months
What is the identity and role of the radiologist in 2020?
* 22. Did you undertake a period of clinical or experimental research?
Yes (formal, e.g. Master's degree or PhD)
Yes (informal)
○ No

* 23. If yes, for how long?
3 to 6 months
9 to 12 months
12 to 24 months
> 24 months
* 24. Was this a formal requirement of your training programme?
Yes
○ No
What is the identity and role of the radiologist in 2020?
* 25. Did you undertake a period of subspecialist training/clinical fellowship?
Yes
○ No
○ No
○ No
What is the identity and role of the radiologist in 2020?
What is the identity and role of the radiologist in 2020?
What is the identity and role of the radiologist in 2020?  * 26. If yes, for how long?
What is the identity and role of the radiologist in 2020?  * 26. If yes, for how long?  3 to 6 months
What is the identity and role of the radiologist in 2020?  * 26. If yes, for how long?  3 to 6 months  9 to 12 months
What is the identity and role of the radiologist in 2020?  * 26. If yes, for how long?  3 to 6 months  9 to 12 months  12 to 24 months
What is the identity and role of the radiologist in 2020?  * 26. If yes, for how long?  3 to 6 months  9 to 12 months  12 to 24 months  > 24 months

What is the ider	ntity and role of th	e radiologist in	2020?		
* 28. In your opinion	n, do you think it is ir	nportant for radio	ologists to have a	n area of subsp	ecialisation?
No, general work	is most in demand				
Yes					
Comment					
OO De constituted also	haadaan aan kaasaada	. 124		1	La vita (O
29. Do you think that		-	Neutral	-	Strongly agree
To your own perception	Strongly disagree	Disagree	Neutrai	Agree	Strongly agree
To your clinical colleagues	0	0	0	0	0
To patients					
*00 Danielani	of a man a time a transition of the				
* 30. Do you have in None	normatics training?				
Basic understand	lina				
Basic skills and tr					
	and training, including cod	dina/Al develonment	e e		
Advanced Skills a	ind training, including coo	amg/Ar development	3		
What is the ider	ntity and role of th	e radiologist in	2020?		
About your role in	patient and profes	ssional relation	ships		
31. How important do in your department?	you think the role o	of the radiologist	s in ensuring that	t patient experie	nce is satisfactory
Not important	Less important	Moderately in	iportant Im	nportant	Very important
P	ļ				, i

32. Do you think that i	ncreasing visibility v	vith patients would	l change you	ır identity as a radio	logist?
	Strongly disagree	Disagree	Neutral	Agree	Strongly agree
l would feel more like a clinician		$\circ$	$\bigcirc$	$\bigcirc$	$\circ$
The patient would see me as a clinical doctor	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$
I would feel more valued as part of the patient care delivery	0	0	0	0	0
3. In your opinion, ho linical care team?	ow important to your	job satisfaction is	it for you to	be seen by patients	s as part of the
Not important	Less important	Moderately impo	ortant	Important	Very important
omment					
Yes No Comment					
* 35. Do you regularl  Yes  No	y communicate with	ı patients clinically	(face to face	e) in your practice?	
	tity and role of the				
F YES (I do regula	rly communicate	with patients fac	ce to face)		

ultrasound? or interventional ocedures?  MR or CT unit? go through imaging sults? er (please comment)	Yes	No  O
or interventional ocedures?  MR or CT unit?  go through imaging sults?	<ul><li>O</li><li>O</li><li>O</li><li>O</li></ul>	
MR or CT unit?  go through imaging sults?	<ul><li>O</li><li>O</li><li>O</li></ul>	
go through imaging sults?	O	
sults?	$\bigcirc$	
er (please comment)		
37. Do you typically have sufficie	ent time to discuss the proced	ure with the patient?
Yes		
No		
Not applicable		
) riot applicasio		
38. Do you typically have sufficie	ent time to discuss the radiolo	gy findings with the patient?
Yes		
Sometimes		
Usually not		
Not applicable		
20. Do vou have enecific time for	this in your job plan or is it n	at raimburged (or provided for) in your system
	this in your job plan or is it is	ot reimbursed (or provided for) in your system
Yes		
No		
Not applicable		
Other (please comment)		
(J-1)		

* 40. Is there a specific/dedicated clinic room available in your department to discuss radiology findings?
Yes - highly adequate
Yes - not really adequate
○ No
Not applicable
* 41. Do you think it would be useful to be in the outpatient clinic or clinical department together with the clinicians to go through images with the patient?
Yes
O No
What is the identity and role of the radiologist in 2020?
42. If no, why not? Please indicate briefly in comment box.
What is the identity and role of the radiologist in 2020?
* 43. Do you think a trained radiological assistant (radiographer or radiology nurse) could help to describe procedure with the patient in order to improve patient experience as well as efficiency?
Yes
○ No
Comment
,
What is the identity and role of the radiologist in 2020?
IF NO (I do not regularly communicate with patients face to face

	ee/communicate with patients facents more and discussing their ima	e to face (e.g. mainly reporting on PACS), would ages/findings with them?
Yes		
O No		
What is the identity and	role of the radiologist in 2020	)?
45. If not, would you prefer no	t to see patients because:	
	Yes	No
Too time consuming		$\bigcirc$
This would not be reimbursed		
I think the clinician should give the result		
Comment		
What is the identity and	role of the radiologist in 2020	J?
* 46. Do you think providing	the findings directly to the patient	would be beneficial?
Yes		
No		
Comment		
* 47. Do you think providing	the findings directly to the patient	would be harmful?
Yes		
No		
Comment		

# What is the identity and role of the radiologist in 2020? \* 48. If yes, why? Could be distressing No relationship with patient Not able to discuss onward treatment therefore patient is left wondering what will happen Other (please comment) What is the identity and role of the radiologist in 2020? \* 49. Have you had any formal patient communication training? Yes No \* 50. Do you think that radiologists should be given formal communication training, customised to the radiology setting? (considering that the radiologist may have limited time in the e.g. ultrasound list, they cannot go into detail with patients but perhaps should have training in "catching" the patients first shock, preparing patient for the next steps but also finding a way that makes it easier for radiologists to know how to deal with delivering bad news?) Yes, radiologists should undertake formal communication training No, I do not think this is necessary What is the identity and role of the radiologist in 2020? \* 51. If yes, should radiologists be given formal communication training for: No For communication of bad news For communication of significant imaging findings:

In your opinion, how would you prefer to provide "non-distressing" patient findings?  Never Sometimes Often Usually patient in the partment face to face a email to the patient a secure patient portal referring clinician		Never	Sometimes	Often	Usually
In your opinion, how would you prefer to provide "non-distressing" patient findings?  Never Sometimes Often Usually patient in the partment face to face a email to the patient a secure patient portal referring clinician			$\circ$		
In your opinion, how would you prefer to provide "non-distressing" patient findings?  Never Sometimes Often Usually  patient in the expartment face to face a email to the patient   a secure patient portal	a email to the patient			$\bigcirc$	
In your opinion, how would you prefer to provide "non-distressing" patient findings?  Never Sometimes Often Usually opatient in the epartment face to face a email to the patient Often Of	ia secure patient portal				
Never Sometimes Often Usually to patient in the epartment face to face  Tia email to the patient  Tia secure patient portal  To referring clinician  Often  Usually  Often  Usually  Often  Often  Often  Usually  Often  Often  Often  Often  Usually  Often  Often  Often  Often  Often  Often  Often  Often  Usually  Often  O	o referring clinican			$\bigcirc$	
Never Sometimes Often Usually of patient in the epartment face to face in a email to the patient O O O O O O O O O O O O O O O O O O O	mment				
Never Sometimes Often Usually of patient in the expartment face to face is a email to the patient O O O O O O O O O O O O O O O O O O O					
Never Sometimes Often Usually to patient in the epartment face to face  Tia email to the patient  Tia secure patient portal  To referring clinician  Often  Usually  Often  Usually  Often  Often  Often  Usually  Often  Often  Often  Often  Usually  Often  Often  Often  Often  Often  Often  Often  Often  Usually  Often  O					
o patient in the epartment face to face  Tia email to the patient  Tia secure patient portal  O referring clinician					
To patient in the department face to face  /ia email to the patient  /ia secure patient portal  To referring clinician	B. In your opinion, how w	ould you prefer t	o provide "non-distressin	ng" patient findings?	
department face to face  /ia email to the patient  /ia secure patient portal  To referring clinician		Never	Sometimes	Often	Usually
/ia secure patient portal O O O O O O O O O O O O O O O O O O O					$\bigcirc$
To referring clinician	department face to face				
To referring clinician	department face to face  Via email to the patient	0	0	$\circ$	
omment		0	0	0	0
minent	via email to the patient	0	0	0	0
	via email to the patient	0	O O	O O	0
	Via email to the patient Via secure patient portal To referring clinician	0	O O O	O O	0
	Via email to the patient Via secure patient portal To referring clinician	0	0	O O	0
	Via email to the patient Via secure patient portal To referring clinician Comment			O O O	
* 54. Does your department undertake patient feedback questionnaires?	Via email to the patient Via secure patient portal To referring clinician Comment	ent undertake pa	atient feedback questionr	naires?	
* 54. Does your department undertake patient feedback questionnaires?  Yes	via email to the patient via secure patient portal To referring clinician comment * 54. Does your departm	ent undertake pa	atient feedback questionr	naires?	
	via email to the patient via secure patient portal To referring clinician comment  * 54. Does your departm Yes	ent undertake pa	atient feedback questionr	naires?	
Yes	via email to the patient via secure patient portal To referring clinician comment  * 54. Does your departm  Yes  No	ent undertake pa	atient feedback questionr	naires?	

discrepancies?				
We should have	opportunities to discuss dir	rectly with patient		
This should be do	one by the patients' clinical	doctor		
This should be do	one together by radiologist	and clinician		
No such commur	nication should take place			
Comment				
56. In your opinion, h	ow important is comn	nunicating errors in connec	ction with your role a	as a radiologist?  Very important
What is the ider	ntity and role of the	radiologist in 2020?		
	·	Tadiologist III 2020:		
nteraction with clir	nicians			
* 57. Do you feel pa cancer, neuro, mu	· · · · · · · · · · · · · · · · · · ·	ticular 'clinical team' such	as a specialist servi	ce (e.g. Gastrointestina
Yes				
Yes Somewhat				
Somewhat No	ı, do your clinical colle	eagues think of you as bei	ng part of their clinic	cal team?
Somewhat No	ı, do your clinical colle	eagues think of you as bei	ng part of their clinic	cal team?
Somewhat No  * 58. In your opinior	ı, do your clinical colle	eagues think of you as bei	ng part of their clinic	cal team?
Somewhat No  * 58. In your opinion Yes	ı, do your clinical colle	eagues think of you as bei	ng part of their clinic	cal team?

* 5		provide face to face	e or telephone opinions to	your clinical collea	agues?
(	Yes				
(	No				
\	What is the identity	and role of the	radiologist in 2020?		
* 60.	If yes, how important	is this to your prac	ctice?		
	Not important	Less important	Moderately important	Important	Very important
,	Albert is the cidentity	, and valoue the	redislagist in 20202		
\	what is the identity	and role of the	radiologist in 2020?		
* 61.	If not, how important	do you think this c	ould be to your practice?		
	Not important	Less important	Moderately important	Important	Very important
,	Mhat is the identity	and role of the	radiologist in 2020?		
\	What is the lucility	and role of the	radiologist ili 2020?		
* 6	62. Do you have regu	lar formally schedu	ıled weekly meetings (eg,	multidisciplinary c	ase reviews, tumour
b	ooards) with the clinic	al colleagues?			
(	Yes				
(	No				
\	What is the identity	and role of the	radiologist in 2020?		

No time to attend due		eetings with the clinical	colleagues, what is the	e reason?
Not reimbursed				
Other (please comme	ent)			
What is the identity	and role of the	radiologist in 2020?		
* 64. If yes, in which for In the form of tumour	rm? board/ multi-disciplinal	ry team meetings		
Both (tumour boards/	multi-disciplinary team	n meetings and informal)		
65. How important are th	ese to your praction	ce?		
Not important	Less important	Moderately important	Important	Very important
66. In which form are mu essential part of the radio		tings recognised by you	ır hospital/ department	t management as an
	`	Yes	N	0
Adequate time provided for preparation and review of external images?	(	0		
Adequate staffing and subspecialist competence (level III training) provided?	(	0		
Regularly reimbursed service in the budget?	(	0		

Von Lale 41-11	))?				
Yes: I do this alrea	ady				
Yes: I would like to	o do this more				
No: I do not think	this is the role of the rad	iologist			
* 68. Are you a sub-	specialist intervention	onal radiologist?			
Yes					
No					
What is the iden	itity and role of th	e radiologist in 20	1202 1202		
			<i>320</i> :		
n relation to interve	entional procedur	es			
69. Who typically o	lecides on the proce	edure in your depar	tment?		
Radiologist					
Referring clinician	1				
Together					
70. In your departmer	nt, do you feel you w	ork more as a			
	Strongly disagree	Disagree	Neutral	Agree	Strongly agree
Clinician					
Technician		$\bigcirc$			$\bigcirc$
<ol> <li>Do you feel that le pressure to perform a</li> </ol>	•	-	. , .	ners may at tir	nes feel under
Strongly disagree	Disagree	Neutral	А	gree	Strongly agree
	to have your own o	utnationt clinic?			
72. Would you like	to have your own o	atpatient chine:			
72. Would you like  I have one	to have your own o	dipatient cimic:			
		atpatient cimic:			

Not available but we		vailable but <i>would lik</i> have		eady available
$\circ$		$\circ$		$\bigcirc$
nt are there juni	or Interventional R	adiology (IR) trai	nees who are tr <i>a</i>	uining to become s
v and role of t	he radiologist in	20202		
ucation, resea	rch, manageme	nt and service	development	
you provide trair	ning to:			
Not important role	Less important role	Moderately important	Important role	Very important role
Not important role	Less important role		Important role	Very important role
Not important role	Less important role		Important role	Very important role
Not important role	Less important role		Important role	Very important role
Not important role	Less important role		Important role	Very important role
Not important role	Less important role		Important role	Very important role
Not important role	Less important role		Important role	Very important role
	nt are there junists?  y and role of the control of	nt are there junior Interventional R sts?	Not available but would not like have  O  Int are there junior Interventional Radiology (IR) traists?  y and role of the radiologist in 2020?  ucation, research, management and service	Not available but would not like have Already (IR) trainees who are training and role of the radiologist in 2020?  ucation, research, management and service development

* 77. How important do	you think formal tea	cher training is	?		
Not important	Less important	Moderately in	nportant Imp	oortant	Very important
Comment					
* 78. Do you think that	a teaching role impr	oves the visibilit	y and identity of ra	diologists?	
	Strongly disagree	Disagree	Neutral	Agree	Strongly agree
To the institution					
To clinical colleagues					
To patients	$\bigcirc$				
To public			$\bigcirc$		
* 79. Do you think re			brief training on Ar	tificial Intellige	ence (AI) computing
	software engineerin		ded in core curriculum		
	raining (ability to undertak			ilahla	
	aning (ability to undertar	(e) locussed on rad	lologists should be ava	lable	
O No					
	_	_	_		
What is the ider	ntity and role of the	e radiologist ir	2020?		
With regards to res	search				
* 80. What is your level	l of interest in taking	part in radiologi	cal research?		
No interest	Low interest	Mediu	n High	interest	Very high interest
* 04 Ave these servers			u dant O		
* 81. Are there opportu  No opportunities	nities to take part in	research in you		everal	Many opportunities
ivo opportunities	Little	Enoug	ii 56	:veiai	many opportunities

No Perhaps Yes  * 83. In your opinion, is re	esearch led by rac	liologists importa	ant to our identity	v as a profession?	
Not important	Less important	Moderately in	nportant I	mportant	Yery important
* 84. Research led by rad	diologists improve:	s the visibility an	d identity of radio	-	Totally agree
To olinical colleggues	Totally disagree	Disgaree	Neutrai	Agree	Totally agree
To clinical colleagues				0	0
To patients	Ō	0	<u> </u>	0	0
To media					$\circ$
* 85. In your opinion, do	you think research	should be part	of radiology train	ing?	
Basic understanding (methods, statistics and	Strongly disagree	Disagree	Neutral	Agree	Strongly agree
(methods, statistics and ethics)	Strongly disagree	Disagree	Neutral	Agree	Strongly agree
(methods, statistics and	Strongly disagree	Disagree	Neutral	Agree	Strongly agree
(methods, statistics and ethics)  Direct involvement in a	0	0	0	Agree	Strongly agree
(methods, statistics and ethics)  Direct involvement in a research project	ty and role of th	e radiologist in	2020?	Agree	Strongly agree
(methods, statistics and ethics)  Direct involvement in a research project  What is the identi  Management-related  * 86. Is the head of ra  Yes  No	ty and role of the	e radiologist in regards to you	2020?		

* 87. Do radiologists hav pathway?	e opportunities to dev	elop senior managem	ent roles to influence	e patient treatment
Strongly disagree	Disagree	Neutral	Agree	Strongly agree
* 88. Do radiologists have development?	e opportunities to dev	velop senior managem	ent roles to influence	e institutional
Strongly disagree	Disagree	Neutral	Agree	Strongly agree
* 89. Do radiologists hav	ve opportunities to dev	velop new diagnostic s	ervices?	
Strongly disagree	Disagree	Neutral	Agree	Strongly agree
* 90. Do radiologists hav	ve opportunities, with o	clinical colleagues, to c	levelop new therape	eutic services?
Strongly disagree	Disagree	Neutral	Agree	Strongly agree
* 91. How much disc  Full control  Advisory role only  No input (decisions	_	nave in your departmei	nt to purchase equip	oment?
92. Would you like what is your opinion  Proceed to the opt	n" (13 more questions)	section "Areas of dele or proceed to the end	-	ns in your department and wers?
Proceed to the end	d to submit answers			

Areas of delegation: What happens in your department and what is your opinion? (Optional section)

In this section, we would like to know your opinion on the delegation of some roles traditionally reserved for radiologists to other allied professionals.

No

Yes

$\sim$	1		o radiographers	4a.: a a II
uz	in valir	nanarimani ni	i raninarannare	Mancally.
JJ.	III VUUI	ucbartificit ut	, iadiodiabileis	typically.

Check for allergies/renal function?		0
Go through patient safety checklist for non- interventional CT and MRI?		C
Explain the contrast injection and potential risks?		
Explain the radiation exposure and potential risk?		C
Obtain informed consent for cross-sectional imaging?		
Perform ultrasonography?	$\circ$	
Perform venous access?	0	
Assess image quality autonomously before ending a CT examination?		
Assess image quality autonomously in order to end a MR examination?	0	0
Assess whether or not it is justified to end/ cancel an examination?		C
	currently, is <b>vetting</b> (checking if the indicedited radiologist or is there some delegated	cation is appropriate) of radiology requests gation to trained radiographic staff?
	Only radiologist	May be delegated to trained radiographer
Plain film	0	0
Ultrasound (US)	0	
СТ	0	0
MRI	0	<u>C</u>
Nuclear Medicine	0	0
Interventional Radiology	$\circ$	C

95. If radiographers ur formally regulated/cert	•		to training for the oriotic bo
Yes			
○ No			
Not applicable			
O			
96. What risks do you per	ceive related to non-radio	ologist vetting?	
	Low	Moderate	High
Repeat examination too soon	$\circ$	0	0
Un-necessary investigation	$\circ$	$\circ$	$\circ$
Wrong investigation			$\bigcirc$
Inappropriate CT/ MRI protocol	$\circ$	0	$\circ$
	s there some delegation t	naging protocol of radiology re to trained radiographic staff? May be delegated to trained	
51	Only radiologist	radiographer	Not done
Plain film	Only radiologist	0	Not done
Ultrasound (US)	Only radiologist	0	Not done
Ultrasound (US)	Only radiologist	0	Not done
Ultrasound (US) CT MRI	Only radiologist	0	Not done
Ultrasound (US) CT MRI Nuclear Medicine	Only radiologist	0	Not done
Ultrasound (US) CT MRI	Only radiologist	0	Not done  O
Ultrasound (US)  CT  MRI  Nuclear Medicine  Interventional Radiology (IR)		0	
Ultrasound (US)  CT  MRI  Nuclear Medicine  Interventional Radiology (IR)			
Ultrasound (US)  CT  MRI  Nuclear Medicine  Interventional Radiology (IR)  98. Are radiographers			
Ultrasound (US)  CT  MRI  Nuclear Medicine  Interventional Radiology (IR)  98. Are radiographers  Yes  No	in your department traine	cd in terminology related to anat	onmy and pathology?
Ultrasound (US)  CT  MRI  Nuclear Medicine  Interventional Radiology (IR)  98. Are radiographers  Yes  No	in your department traine		onmy and pathology?
Ultrasound (US)  CT  MRI  Nuclear Medicine  Interventional Radiology (IR)  98. Are radiographers  Yes  No  99. Do allied profession	in your department traine	cd in terminology related to anat	onmy and pathology?

nt?
ıg?

#### 104. What do you perceive are the drivers for radiographer skill-mix/delegation?

	Strongly disagree	Disagree	Neutral	Agree	Strongly agree	Not applicable / I don't know
Retention of excellent staff by increasing opportunities for professional development	0	0	0	0	0	0
Retention of staff by increasing responsibility and therefore pay enhancement/ improved professional status	$\circ$	0	$\circ$	$\circ$	0	0
Work-load pressure on radiologists	$\bigcirc$	$\circ$	0	$\circ$	0	0
Insufficient provision of radiologist numbers	$\bigcirc$	$\bigcirc$	$\bigcirc$		$\bigcirc$	$\bigcirc$
Backlog reporting						
De-skilling of junior  The need to train ra  Reports are not act  May create more w cysts/non worrisom	radiologists/lead diographers and ionable - may en ork - e.g. gynae u e cysts - as the s	ing to de-skilling in ensure quality me d up being re-scan	the longer term - trics are met/audit ned or re-reported g in general practi	e.g. in plain film by radiologist tioner's (GP) clir	reporting nics led to huge incre	
Less radiologists tra	ainea					
The fact that radiog	rapher reports ar	e not provided by	someone with full i	medical training		
The fact that radiog  Other (please comr		e not provided by s	someone with full I	medical training		

What is the identity and role of the radiologist in 2020?

Thank you very much for your time!

Please select Previous to go back to the survey or Done to submit your replies.