INTERNATIONAL DAY OF RADIOLOGY

NOVEMBER 8, 2017

EMERGENCYRADIOLOGY

IDOR2017.COM

International Day of Radiology 2017 Interview on Emergency Radiology Spain/Dr. Milagros Martí de Gracia

Dr. Milagros Martí de Gracia says her Madrid public hospital urgently needs updated or additional equipment to keep up with modern advances in radiology and improve workflow

European Society of Radiology: Could you please describe the role of the radiologist in a typical emergency department in your country?

Milagros Martí de Gracia: The emergency radiologist is responsible for the management of emergency-radiology activity not only from the emergency department, but also from many other institutions, and from other inpatient departments, as well. This includes reading CT scans and plain films and performing ultrasound studies. We also validate the resident's reports and review their performance, based on their years of experience. In some institutions, some interventional procedures and urgent MRI scans also are performed by the emergency radiologist.

ESR: What does a typical day in the emergency department look like for a radiologist? **MMG:** First thing every morning, the radiologist usually attends the department or hospital meeting.

During scheduled working hours, radiologists in the emergency unit report or review residents' preliminary reports.

Before referring physicians request ultrasound, CT or interventional procedures (sometimes even MRI), they consult with the radiologist. Also, interruptions by personnel, phones or beepers are frequent.

ESR: Teamwork is crucial in the emergency department. How is this accomplished in your department and who is involved?

MMG: At La Paz University Hospital, UAM, a Level I Trauma Centre, the team in the emergency-radiology department includes one or two radiology residents and one or two staff radiologists. Also, there are five or six radiology technicians and one nurse. Frequently, there are surgery and anaesthesia residents in the unit.

The emergency radiology department is located in the emergency unit, and we work in close, constant contact with emergency physicians, surgeons and intensive-care unit staff members.

ESR: How satisfied are you with the workflow and your role in your department? How do you think it could be improved?

MMG: I am very happy with my role, but the workflow and the physical environment of my workplace needs a lot of improvement. It is necessary to update and increase equipment to adapt to the changing demands of radiological care.

ESR: Which modalities are used for different emergencies? Could you please give an overview sorted by modalities?

MMG: We perform the following examinations each day: 300 to 350 plain films; 12to 20 ultrasounds; and 50 to 70 CTs.

ESR: Is teleradiology an issue in emergency radiology? If yes, how so, and how often is it used? **MMG:** No, we do not use teleradiology in Spain's public medical system. There are radiologists on duty around the clock at the hospital.

ESR: Are emergency radiologists active anywhere other than emergency departments? Do they have other non-emergency roles, or other emergency roles in other departments?

MMG: In my experience, they are not active elsewhere. An emergency radiologist is in the emergency unit during morning or evening shifts. At night, the shift is covered by radiologists from various fields who supervise the residents' activity.

ESR: Do you have direct contact with patients and if yes, what does it entail?

MMG: I have contact with patients when I perform ultrasonography. However, there are times when I have to explain procedural matters to patients, especially for interventional procedures.

ESR: How are radiologists in your country trained in emergency radiology? Is emergency radiology a recognised specialty in your country?

MMG: At my institution, residents have a three- to four-month training in the emergency unit, and also they are on call four to five days each month for the duration of their four-year residency.

In my country, emergency radiology is not a recognised specialty, but it is a special area of dedication in some institutions.

ESR: Please feel free to add any information and thoughts on this topic you would like to share. **MMG:** Currently, many Spanish hospitals don't have an emergency radiology unit. This situation is detrimental to patient care, as patients may not receive specific, comprehensive and urgent radiological attention, which is crucial for a prompt diagnosis and proper clinical care.

Dr. Milagros Martí de Gracia is the head of the emergency radiology unit at La Paz University Hospital, UAM, in Madrid, Spain. She is an expert in emergency radiology. She is the author or co-author of more than 30 peer-reviewed publications, and she also has written several chapters of books and presented more than 75 scientific posters and oral presentations at congresses. She has chaired the emergency subcommittee of the National Congress of the Sociedad Española de Radiología Médica (SERAM). For six consecutive meetings, she has been a member of the Scientific Committee on Emergency Radiology at the biennial SERAM Congress. She is currently a member of the



Drafting Committee of Radiology and president of the Spanish Society of Emergency Radiology (SERAU).