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### Danish Society of Radiology

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**The Danish Society of Radiology has been in operation since 1921, and counts over 500 active members. Approximately every certified radiologist in the country belongs to the society. The aim of the society is to promote science, education and collaboration inside the radiology profession. Our society is active in all areas of radiology, with a special emphasis not only on the education of radiologists but also on continual post-graduate education. We are members of the European Society of Radiology (ESR), International Society of Radiology and the Nordic Society of Medical Radiology. I have occupied the position of President of the society for the last three years, and will come to the end of my term in January 2007. I have been active in radiology since I obtained my specialist competence in 1989, and presently work as a consultant radiologist in Department of Radiology in the Musculoskeletal Radiology section at Rigshospitalet, Copenhagen.**

Probably our most significant responsibility is our role as advisory consultant to the National Board of Health. We collaborate with them in many ways, and one of the main tasks in the year to come, is to provide evidence-based recommendations of the placement of various imaging procedures, for example special interventional procedures considering the number of steps that are needed to perform a safe procedure. This issue is a current one now that Denmark is reorganising the health system, reducing the number of its counties. The National Health Board is to decide which hospital should provide specialised procedures. We will be making our recommendations on how to centralise each of the specialised modalities and interventional procedures and where these should be housed. This will no doubt continue to have implications for the provision of healthcare in Denmark for a long time to come, and our society aims to monitor the situation closely in order to assure that we are organised in the best possible way to meet the coming challenges.

Another way in which we collaborate with the National Health Board is in an advisory capacity on such issues as the education of radiologists. Our society provides theoretical training courses and advises on the curriculum. About 24 new radiologists are certified every year.

Each resident follows a course that lasts 6.5 years, the first 18 months of which is spent in general medical and surgical training (basic education). This is followed by a year in which they are introduced to their specialty area. They then pick their 'major', or main subject, and out of each group of trainees, and more than 20 every year will choose radiology as their subject. The emphasis in Denmark, in radiology training, is of course on clinical work. However, over the course of that education, over 210 hours will also be spent involved in theoretical training to back this up, in each of the different subspecialties. As with many countries in Europe, we have no final exams for trainees in radiology. Rather, we use the records of their clinical work in the radiological departments and of their centralised theory tests to get an overall picture of how each trainee is progressing. The National Board of Health has established a system with inspectors who have the task of evaluating the departments in respect to educational standards.

We are also actively involved in post-graduate, continuous education in defined subspecialties. Once a year a course is held over two and a half days on different subspecialties.

#### Working Groups

One of our various working groups that actively focus on the different hot topics that are affecting imaging professionals both in Denmark and across Europe is our special working group on teleradiology. Here at the Rigshospitalet we are providing teleradiology facilities for hospitals across the country including Greenland and the Faroe islands that have need of our services in order to produce reports on imaging exams. We generally receive images related to difficult or specialised problems that require our services. In this way, we have a good idea on a practical level, of the types of issues and conflicts that come into play in running this kind of service. For example, problems with standardisation, legal problems, image quality etc. Some of the main questions our working group addresses, such as what contract we should have with the referring doctor, and security issues, urgently need to be resolved. Other working groups within the Society are making recommendations for diagnosis of different diseases, for example how to choose the appropriate diagnostic modality and treatment for each patient.

The Society holds an Annual General Meeting in order to unite its members and discuss the most pressing issues of the day. The last meeting, which was held in Odense, 25-27 January 2006, covered the activities of each of these groups, as well as the main areas of radiology, film reading sessions, especially for the younger radiologists, a scientific session and a session focused on the political issues raised by Denmark's political reorganisation of the health system.

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