

Volume 8 - Issue 3, 2008 - Imaging Leaders

Interview with Prof. James H Thrall, Radiologist-in-Chief, Massachusetts General Hospital

Interviewee

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Please Tell Us About Your Background in Radiology – What are the Highlights of Your Career in this Field?

I trained in radiology and nuclear medicine at Walter Reed Army Medical Centre and had the opportunity there to do research for the first time. I realised that I enjoyed it and when I left the army I returned to my alma mater, the University of Michigan, where I had a wonderful academic environment. I was active across the field of nuclear medicine publishing in diverse areas of nuclear cardiology, thyroid imaging, skeletal scintigraphy and hepatic scintigraphy among other topics.

To what do you attribute your continued success, and how would you advise other radiologists to advance their careers?

In 1983 I became Chairman of Radiology at the Henry Ford Hospital and in 1988 I came to Boston as Radiologist-in-Chief at the Massachusetts general Hospital and Professor of Radiology at Harvard Medical School. I have had the opportunity here to build a major radiology research programme and to also build a diversified radiology professional practice. I believe success in academic radiology is actually easy because there are so many opportunities to perform research. No one can possibly lack for interesting and important issues to study. So, it is really a matter of interest and energy and staying focused. Choosing a reasonably well-defined area in which to become expert is usually more productive than trying to do everything and will lead to more extramural recognition for a persons work.

In Your Opinion, Must one Necessarily Sacrifice Personal Time in Order to Achieve or Maximise Professional Success in Radiology?

The question rightly comes up whether one has to sacrifice personal time for academic success. Frankly, I do not know any successful academic person who works just 40 hours per week. Yet, many of them also seem to have time to do other things as well. My conclusion is that there is plenty of time to do both academic and personal things if we do not squander our time.

What were your most memorable achievements during your leadership of the American Roentgen Ray Society?

I served on the Executive Council of the American Roentgen Ray Society for 16 years and was always proud to be associated with both the Society and my fellow Council members. Working for the ARRS brought me together with other leaders in radiology and provided the opportunity for us to support our profession. I am most proud of having taken part in establishing several programmes designed to promote the careers of young radiologists such as the ARRS Scholars programme and the Figley and Rogers Fellowships in radiology journalism. I also was among the original organisations supporting the Academy of Radiology Research and the ARRS has been a supporter of the AFIP.

How do You Think the Use of Nighthawking and Overseas Radiology will Impact on the Future?

Nighthawking whether done in the US or overseas has been widely embraced by radiologists to help them deal with coverage. It has improved the quality of life for many groups and has helped alleviate manpower shortages. Long term there is a substantial risk that teleradiology will make people look at radiology professional services as a commodity that can be bought and sold and brokered by others. This will not be good for the profession.

Do You Think Today's Education Prepares Residents Adequately for the Challenges They will Face in Their Career? How

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Could this be Improved?

Radiology education is more than adequate in the sense of learning radiology but does not teach people how to navigate in the real world. We do not teach much about the business of medicine or radiology and it is often a shock to new radiologists when they go into practice how little they know about these issues.

What is One of Your Favourite Memories from Your Own Residency?

I loved my own residency. The day started with a teaching conference - a case review conference. We each had a chance to look at unknowns. I couldn't wait to get to the hospital and take a case.

How has the Role of Radiologists Changed Within the Hospital Environment, and What Changes do You See this Causing in the Years to Come?

The biggest change in radiology in the last 40 years is that instead of being ancillary to the care process we are in its critical path. Therefore, radiology is important to all the other specialties and to just about every patient with a serious illness. We need to take this central role seriously and make sure we are not a bottleneck in the care process.

Leadership is an Increasingly Frequent Buzzword for Radiologists - do You Think Their Type of Role Encourages Leadership on a Greater Scale?

Leadership has always been important but is even more so now because of radiology's central role in the care process. Everything happens faster today with less latitude for idiosyncrasy. Therefore, leaders must foster good practice cultures and understand the importance of thinking systemically and not transactionally.

What Three Key Pieces of Managerial Advice Would You Offer Other Radiological Chairmen to Help Them Balance Their Workloads?

My three keys to success are to engage everyone and celebrate their contributions rather than trying to do everything oneself, to solve problems systemically at their root causes and to periodically stop to reassess whether strategies and directions are still optimal.

Finally, if You had to Choose an Alternate Career, What Would that Be?

I have had the chance to be involved in a number of business activities related to our department and more generally in the medical vendor community. I wonder sometimes what it would have been like on that side of the fence.

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