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Metaradiology: A New Specialty for Chairmen of Large Academic Departments

Author

Prof. Jarl Jakobsen

Chairman

Centre for Imaging and

Interventions

Rikshospitalet Radium Hospital

HF

Oslo, Norway

JARL.JAKOBSEN@RIKSHOSPITALET.NO

For many decades now, radiologists have been urged to forward the progress of radiology by keeping up-to-date with current literature and attending ongoing imaging gatherings to avoid becoming restricted in their view of what it takes to be an effective medical professional. This is especially true today, as Chairmen of imaging departments find their roles becoming increasingly demanding and complex. And sub-specialisation is nearly always required in large academic departments. How does the Chairman of a large academic department of radiology, keep in touch with what is happening at ground level in his department, yet also maintain strong leadership? In this paper, I present some thoughts on the role of today's Chairman, by exploring the term 'metaradiology'.

Why 'Metaradiology'?

Meta (Greek: 'about', 'beyond'), is a prefix used to indicate a concept which is one level of description higher than the original process or concept, used to analyse the latter. For example, 'metaphysics' refers to things beyond physics, rather than the science itself. 'Meta' therefore refers to, for example, the comprehensive overview needed by a Chairman in leading his department, maintaining a higher level of awareness of all the ongoing developments as well as the future of the department. This is in contrast to ongoing sub-specialisation. It is, in essence, a frame of reference that aids the Chairman to run his department the best he can without on one hand, losing touch with what's really happening on ground level or on the other hand, overdelegating. It also enables him/her to make the best strategy for the whole department, as the one with the broadest knowledge of what is going on in all the specialised areas.

From Radiologist to Chairman

Picture the following typical situation; a promising, engaged resident becomes a consultant, and afterwards, the best in his subspecialty. He or she may take an interest in research and receive a PhD. If he or she shows initiative in taking responsibility within the section to improve the way it works, in due time, this person can become head of the section. A few years after that he or she becomes head of the department. However, as with many parts of the career ladder, a few years later, they might find a younger subspecialty, which he or she previously led, due administration. The Chairman develops an inferiority complex and thus begins to become overinvolved, in order to demonstrate his or her power as head of the department. In fact, with the proper management practices in place, there is no need for a Chairman to either maintain absolute control over every level of operation or interaction in the department, or to lose touch with the reason for joining the science in the first place.

Role of the Metaradiologist

The science of radiology is based on a complex, multi-disciplinary integration between several units and functions. In essence, the radiologist and radiographer influence and are influenced by a wide variety of surrounding factors. Metaradiology involves integrating and balancing all these factors.

In my view, a meta-radiologist is not the practical, performing radiologist, but the leader and strategic head of all activities in the department. A meta-radiologist is not only in charge of conventional radiology, but also oversees many different fields: teleradiology, PACS, CT, US, PET/CT, etc. As well as retaining a meta-perspective over all relations inside and outside the department, between the patients, referring units and

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doctors, and the CEO. It also includes departmental resources within the radiology department such as Competence, Modalities, IT, Organisation, Personnel, Budget, Infrastructure, etc. Lastly, metaradiology incorporates the patient's perspective, mega-trends in imaging, managing academia in the department (following trends in research and education), political issues (within and outside the department) and turf battles, internationalisation and the best use of resources on a meta-level. All this cannot be undertaken by those engaged in very specific areas, e.g., developing new sequences in MRI.

Metastrategies

To enable such a higher analysis and overview of the department, it is essential for the Chairman to have a radiology advisory board that provides updates on the frontlines in the various subspecialties. This meeting place is not for discussion about resources (a holy place!). In this way, you are provided with accurate, informed viewpoints on the reality of the situation in every area of the department, without losing touch with what's going on or getting over-involved. Also advisable, is a clinical advisory board, which is a meeting between the main clinical heads (customers). In this way you can cover all the necessary ground, distilling the essential information and continuing to perform in the optimal way. Compulsory training for the metaradiologist, should include working with the following associations: MIR, AUR-E, ECR, RSNA, and general management competences for meta-radiologists should be covered through other courses and lectures. There is no doubt that a meta-radiologist needs to be informed by comprehensive training in management. The term metaradiology, covers knowledge about radiology and proper leadership and governance of a radiology department. Metaradiology is an approach that does not necessitate detailed knowledge or practical information about specific radiology procedures and interpretation of examinations, but rather methods for planning, modelling, organisational learning, education and research (associated sciences included).

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