

## To be or not to be a Specialist

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The volume of new information in radiology is large and the complexity of new technologies and procedures are increasing rapidly. The explosive growth has profoundly increased the level of sophistication in diagnosis and treatment. The increases in knowledge and breadth of practice have made it impossible for anyone person to practice at the 'state of the art' in all areas of radiology. A need has been created to achieve the highest possible levels of expertise to defend the boundaries of their practice.

If to specialize, will it be an organ system or technology-specific approach? The method of imaging can change over time. There are many examples where modality became obsolete or lost to another speciality. Mastering anatomy and disease processes affecting a particular organ system facilitate image interpretation a thorough understanding of an organ system makes it much simpler to apply established and future imaging techniques to a clinical problem. The benefits of specialization are the ability to handle the needs of organ-based subspecialty colleagues will be enhanced, the attraction of residents to academic careers and add to the body of knowledge of radiology with research and clinical papers and meeting the needs of clinical colleagues.

Patients benefit from higher quality clinical care to bear by speciality-trained radiologists. Speciality programs are focal points for research and innovation in the development of new procedures and technology. Besides the presence of speciality-trained radiologists has a positive impact on residency training programs. The greater the level of expertise, the more likely it that a given area of practice is retained within radiology. Opportunities for specialization attract high-quality students into radiology as well as provide a high level of career satisfaction for the graduates. The disadvantages of specialization are a longer training period with higher costs; require more people and complex departmental organization and extreme demands of a specialist's time.

The initial step may be the addition of an organ-based major area as part of the residency. The requirement is extra time on appropriate service, regular attendance at subspecialty clinical conferences promoting evidence-based medicine, a research or clinical paper, thesis on the same subject matter.

General radiology continues to constitute the bulk of the work in both academic and private centres. As long as the demand for general services is sufficient, obsolescence will not be a subject. A transient solution may be a hybrid system so that specialists maintain skills outside of their specific areas of interest. In private practice, there is frequently not enough work for a full rime specialist. They are required to provide general radiology cross coverage to retain flexibility.

Radiology is in a dynamic era of change. Specialization should be regarded as a positive force and direction in the natural evolution of the field. It promotes better care for patients, the development of innovative practice models and flexibility of programs to be tailored to their special circumstances and opportunities.