Quality of radiology training in India

Sir,
It is an open secret that radiology training in India has a lot of scope for improvement. We conducted an anonymous voluntary online survey to assess the current quality of radiology training in India. The survey was created using Google forms (Alphabet Inc) and shared via email and social media platforms, predominantly WhatsApp. 210 trainees or recently trained radiologists replied to the survey. The number of radiology seats were variable amongst institutes with 30.1% institutes having <4 seats/year, 5–10 in 48.4% institutes and >10 in 21.5% institutes.

Average weekly time dedicated to lectures was zero in 28.2% institutes, 1 hour per week in 19.1%, 2–3 hours per week in 29.7% and 4 or more hours in 23% institutes. Unfortunately, only 28.7% responding radiologists said they had dedicated time and opportunity to attend the lectures. The remaining 71.3% could attend only if another resident/trainee radiologist was available to manage the work. Overall, 21.3% of respondents said they could attend lectures <25% of the time, 27.5% could attend 25–50% time, 24.6% could attend 50–75% time and 26.6% could attend >75% of the time.

With respect to conferences, 29.7% of residents attended five or more during the training period, 32.5% attended 3–4 and the remaining attended 0–2.

The respondents were also asked to grade the overall quality of academics during the training period on a scale of 1–10 with a maximum score of 7 by 17.2% radiologists followed by a score of 1 by 13.4%. The scores mainly ranged 1–7 by 82.2% of the radiologists in training. If 50% cut-off which we use for passing a radiologist in the final exam is also used for ‘passing’ a training programme, over half the programmes would fail.

The survey also gave a free text option to voice constructive suggestions with 69 responses. The details of the survey and the responses are available at the following link,
The survey is subject to certain limitations. Given that all the survey authors are Mumbai based, it could be presumed that the responses had a higher proportion of Mumbai-based radiologists, although the survey was widely distributed across radiologists practising throughout India. Furthermore, it was a relatively subjective survey and limited by the respondents’ ability for objective assessment of training programmes. However, it does reveal the sordid state of affairs in radiology training in India, as also the disparity amongst various radiology residency programmes, with some receiving excellent feedback and others clearly needing to focus more on residency training. While the immense workload in public hospitals and the resultant lack of time for dedicated teaching is often considered the reason for this, the respondents presumably included various DNB candidates from private institutes as well.

The survey demonstrates the need to create minimum basic standards of education in radiology training by the Indian Radiology and Imaging Association (IRIA) and the Medical Council of India (MCI), including perhaps mandatory minimum weekly hours of radiology teaching and dedicated time to attend lectures for the residents. This would help bridge the disparity we see in the survey and help ensure that radiology training institutes fulfil their duty to both the patients and the residents so as to ensure better-trained radiologists for the future.

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Conflicts of interest
There are no conflicts of interest.

Ankita Ahuja, Chinmay P Mehta¹, Palak B Popat, Akshay D Baheti
Department of Radiodiagnosis, Tata Memorial Hospital, ¹Department of Radiodiagnosis, Innovision Imaging, Mumbai, Maharashtra, India. E-mail: ankita.ahuja2588@gmail.com

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