EUROPEAN CONGRESS OF RADIOLOGY 2017, VIENNA:

I was very fortunate enough to have the opportunity to attend the ECR in Vienna between 1st – 5th March 2017 to present work I did with Royal Hospital for Sick Children in Edinburgh (RHSC) on Neuroimaging in Non-Accidental Injury (NAI).

This was a special meeting for me to attend for two reasons – firstly having the opportunity to present my work abroad for the first time but also as a foundation trainee applying into radiology, it would introduce me to the career in broader context with regards to advancements and the challenges within it.

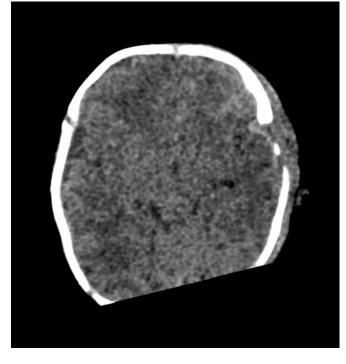
My work was an audit focused on joint guidelines from the Royal College of Radiologists/Royal College of Paediatrics and Child Health 2008 which states that all children under the age of one that were suspected to have endured physical abuse should have neuroimaging performed. This is the case as previous studies have indicated that the prevalence of significant findings is high despite normal neurological examination.

We retrospectively investigated all skeletal surveys performed on children less than 1 years of age for suspected non-accidental injury across South-East Scotland. We found that only 41/53 (77%) cases had appropriate neuroimaging (thus not achieving the target 100% according to guidance) with 15% of these having significant abnormality. These findings were presented at the Voice of EPoS Neuro session 38:

(http://ecronline.myesr.org/ecr2017/index.php?p=recording&t=recorded&lecture=neuroimagi ng-in-non-accidental-injury) These findings will also be presented locally at the RHSC Radiology meeting with the hope of increased concordance with guidance amongst practitioners and the eventual aim of reducing morbidity/mortality in these patients through early detection of significant abnormalities.

I was initially anxious prior to presenting but I found the event very fulfilling, particularly with experience in articulating an oral presentation to an international audience which I am sure will be of benefit in future conferences. I found networking with several of the attendees a particularly useful experience particularly discussing challenges and opportunities in the field, such as teleradiology, increasing workload demand, fellowships and research within the UK and beyond.

Whilst at the conference, I had ample opportunity to attend several other specialist sessions, some of which I may admit were beyond my level of training but others I found were



extremely inspirational and interesting. The ones of note included the interactive sessions in

emergency radiology where the audience voted on likely diagnosis after being presented real cases. This brought about certain spark within with regards to the excitement of problem-solving which integral to the job. On the other hand, I attended the lecture series on pitfalls in chest radiography which I found both informative about subtle signs but also eye-opening with regards to the avenues of potential mistakes that could be made. Altogether, it made me look forward to attaining the necessary skills in interpretation in future training but being aware of the possibility of error if not careful and thorough with approach.

I also had a brief opportunity to the visit the Expo and was also inspired with advancements in devices and services that were seen internationally such as the head CT scanner integrated within ambulances to increase the speed of neuroimaging for strokes with the potential for thrombolysis.

Finally, when not in conference, I had the opportunity to visit the several sites within Vienna including the architectural wonder of Schönnbrunn Palace and various eateries within the city.

I am delighted to say that the experience has aided in me in securing Radiology training within the UK in the forthcoming year and I would like to thank my supervisor Dr Simon McGurk and the Scottish Radiological Society for their generous support in achieving this. I look forward to attending future meetings of a similar nature as my training progresses.

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