DIRECTIONS TO SHADOW STATIONS (BioE 2630/16-725/18-791/42-735), revision 3/5/2019

Plan to arrive early. The UPMC complex is very confusing if you are not familiar with it.

*Dress and act appropriately for a professional clinical environment.* (Patients might think you are a doctor — don’t make the patient’s feel uncomfortable or in any way reduce their trust in UPMC.)

**Presbyterian Hospital:** **Neuroradiology, Body CT, Ultrasound, Thoracic (Chest) Imaging, Nuclear Medicine:**
Coming from 5th Ave, go up DeSoto Street. At the intersection of DeSoto and OHara, turn left. This is the main entrance and emergency entrance to Presbyterian (aka Presby, PUH). Enter the big auto revolving door marked with the blue sign "Main Entrance." Take the elevator up to the first floor of Presby. Follow the signs to radiology reception (it is very close). Ask at the front desk for directions to the appropriate reading room:

- Neuroradiology reading room - E124
- Nuclear Medicine reading room - E122
- Chest reading room - D129
- Abdominal Imaging (Body CT & Ultrasound) - D137/D135 (ultrasound is next to the MRI lounge)

Please note: **Do not ask the front desk for Body CT or Ultrasound:** both body CT and ultrasound are located in the abdominal reading room, and that is what you should ask for. Once in the abdominal reading room, then you should shadow the appropriate radiologists for either Body CT or for Ultrasound.

**Montefiore Hospital:** **Musculoskeletal (the Bone group):**
Coming from 5th Ave, go up Darraugh Street. Montefiore Hospital is on your left. When you reach the first parking lot, go through the parking lot and enter the hospital. At the surgical reception desk, ask for directions to the Radiology front desk, which is on the same floor. When you reach the Radiology front desk, ask for directions to the reading room. Be sure to sign in with their administrative assistant, Heather Duganieri; her office is right next to the reading room #538.

Other notes:

- At the radiology reception/front desk, just ask for directions to the reading room for your radiology department. The staff at the reception desk may or may not know about the shadow program, so just ask for the appropriate reading room. Again, if there are multiple reading rooms for different body parts, ask for abdominal (e.g., abdominal CT, abdominal ultrasound).
- Once in the reading room, introduce yourself to the residents and radiologist(s). All the attending radiologists should know that you are coming, but if not, introduce yourself and shadow them anyway.
- If no attending radiologist is present, then shadow the residents until (if ever) an attending shows up. Feel free to ask the residents questions while you watch what they do.
- Hopefully the attending will start the readout with the residents sometime between 8:30 - 9:00, but if you miss the readout, just mention in your report that the readout never happened between 8:30 - 9:30.
- When you introduce yourself, try to give the clinicians a sense of what you want to gain from this experience. I suggest telling them you want to know and understand:
  - What kinds of automated or semi-automated image analysis would be helpful to them?
  - What kind of output they would want from such systems?
  - The radiologist’s overall workflow for a patient? (but *not* PACS systems / image transfer)
  - How they analyze their images, including patient context, ambiguous pixel values, etc.?
  - A sense of the big-picture things that radiology residents end up learning?
- **Additional questions about data sharing, uncertainty, and ethics:**
  - When you find an anomaly in an image, how do you follow up or validate your findings?
  - How do you communicate the risk of false-positives or false-negatives to a patient?
  - How do you provide information to a patient when follow-up testing is still uncertain?
  - When you find a hard-to-interpret or medically interesting image, what is your capacity to bring in other experts or organizations to support research or consultation?
  - When involving experts, collaborators, or companies outside UPMC, what data sharing practices are you required follow? What de-identification procedures do you go through?