

## The Royal Australian and New Zealand College of Radiologists®

The Faculty of Clinical Radiology

## **PROJECT 1 - MANDATORY PROJECT**

## (For transitioning trainees only – trainees that started from February 2022 onwards should refer to the Training Handbook for research project instructions)

What is it?	Project 1 is a junior level project in Clinical Radiology that transitioning trainees will undertake during the early years of training, which will include a critically appraised literature review.
What constitutes a suitable project?	Examples of suitable projects include:     writing a case series     undertaking a clinical audit or     completing a critical appraisal of published literature.
	Critical appraisal of published literature is NOT a CAT, which has a similar sounding name "Critically Appraised Topic".
	Critical appraisal of published literature is the appraisal of ALL the published literature on a specific area of imaging that does not lend itself to either systematic review or meta-analysis. An example would be a survey and tabulation of all reports of the effectiveness of percutaneous vertebroplasty. An audit or process improvement activity is preferred for Project 1.
	Suitable projects may be suggested by the training site Director of Research (if available), the project supervisor or the trainee.
What's Involved?	The 'Project 1 Proposal' is required to be completed and approved prior to the Project being started.
	For approval of a Project 1 Proposal, the trainee will need to create and complete the <i>CR Project 1 – Project 1 Proposal</i> form within the ePortfolio.
	After the trainee fills in the form, the trainee must assign it to their Director of Training (DoT) in the ePortfolio. If the DoT approves the proposal, the form must then be assigned to the RANZCR Specialty Training account in the ePortfolio.
	After the College receives approval of the proposal from the committee reviewers, College staff will approve the proposal in the ePortfolio from the Specialty Training account and send it to the trainee for finalisation.
	Following approval of the proposal, trainees have two options with regards to meeting the Project 1 assessment requirements.
	OPTION 1 Trainees that choose this option will be required to present their project locally or nationally by oral presentation or poster and should be formally assessed at a Network level. (Publication is an alternative to presentation).
	OPTION 2 Trainees that choose this option will be required to prepare an abstract of their project to be considered for oral or poster presentation as part of the 'Branch of Origins/National Trainee Presentation Event' (Information on the Branch of Origins/National Trainee Presentation Event is included in the Project 1 Information pack).
	Each project must have a consultant radiologist as a supervisor, who does not need to be the Director of Training. Each supervisor should manage no more than 2 trainees undertaking Project 1.



F	When is the	The Project 1 proposal must be submitted to the College for acceptance by end of
	Project 1	Phase 1 in the Training Program.
	proposal due?	
		If a trainee presents a Project 1 project prior to gaining College approval, the project will
		be rejected, and the trainee will be required to complete another project.
		be rejected, and the frames will be required to complete unother project.
	When is Project 1	Project 1 is due by the end of Phase 2 of training in the Training Program.
	due?	, , ,
_		Completion of Project 1 is a barrier to progression from Phase 1 to Phase 2 of the
	Meeting the	
	assessment	training program. Completion is the only requirement for progression.
	requirement	
	•	Trainees are responsible for providing assessors with the <u>assessor score sheets</u> and
		ensuring they are completed by two assessors. The assessors must return the
		completed score sheets to the trainees to upload to the ePortfolio. The College will then
		be able review the assessor score sheets.
		Two coopers about completed by consultants are required. Once there are
		Two assessor score sheets completed by consultants are required. Once these are
		approved, the status of this assessment will be deemed complete.
F	Additional	Project 1 is NOT the same as a systematic review, nor a meta-analysis.
		i loject i is ino i the same as a systematic review, not a meta-analysis.
	reference notes	
	on what	Differences are as follows:
	constitutes a	
	suitable project.	Systematic review: A systematic review is a literature review focused on a
	Sultable project.	
		research question that tries to identify, appraise, select and synthesize ALL
		high-quality research evidence relevant to that question. Usually this means
		EVERY item reported in a conference or published in any language that has
		some sort of controlled trial or series around a specific topic (e.g., Interactions
		of commonly used dietary supplements with cardiovascular drugs). Output is a
		recommendation for best evidence-based practice based on a truly
		comprehensive review of all relevant studies. Typically takes a year or two to
		complete, may or may not require detailed epidemiological analysis and
		biostatistics.
		2. Meta-analysis: Detailed analysis of high quality published randomised
		controlled trials to determine the best numerical estimate of effectiveness of a
		specific investigation or intervention (e.g., Survival benefit of breast cancer
		screening trials). Outcome is a numerical "current best estimate" of the
		effectiveness of such a test or intervention. Typically takes a year to complete
		and requires strong epidemiological background and statistical analysis.
		3. Critically appraised literature review: Evaluation of all published scientific
		literature around a specific topic to derive some analysis of the value and
		appropriate practice in the particular topic that is neither suitable for systematic
		review or meta-analysis (e.g., Complications resulting from RFA of liver
		masses). Output is a summary of the published literature findings and a
		recommendation for further action or protocol based on this review. Usually
		does NOT require detailed epidemiological expertise and biostatistics. 3-6
		months to complete part-time, depending on the area selected.
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