Session Number	Session Title	Start Date Time	End Date Time
M1-CAPP02	APP Involvement in Medical Management of Patients Undergoing Imaging-Based Procedures from Pre-Procedure Preparation through Post-Procedure Care	11/30/26 8:00 AM	11/30/26 9:00 AM
M1-CAPP02	APP Involvement in Medical Management of Patients Undergoing Imaging-Based Procedures from Pre-Procedure Preparation through Post-Procedure Care	11/30/26 8:00 AM	11/30/26 9:00 AM
M1-CAPP02	APP Involvement in Medical Management of Patients Undergoing Imaging-Based Procedures from Pre-Procedure Preparation through Post-Procedure Care	11/30/26 8:00 AM	11/30/26 9:00 AM
M3-CAPP07	APPs in Interventional Radiology: Vascular Access and Percutaneous Feeding Tubes	11/30/26 9:30 AM	11/30/26 10:30 AM
M3-CAPP07	APPs in Interventional Radiology: Vascular Access and Percutaneous Feeding Tubes	11/30/26 9:30 AM	11/30/26 10:30 AM
M3-CAPP07	APPs in Interventional Radiology: Vascular Access and Percutaneous Feeding Tubes	11/30/26 9:30 AM	11/30/26 10:30 AM

M3-CAPP07	APPs in Interventional Radiology: Vascular Access and Percutaneous Feeding Tubes	11/30/26 9:30 AM	11/30/26 10:30 AM
M6-CAPP05	Pediatric Fluoro Essentials for APPs and Other Imaging Professionals	11/30/26 1:30 PM	11/30/26 2:30 PM
M6-CAPP05	Pediatric Fluoro Essentials for APPs and Other Imaging Professionals	11/30/26 1:30 PM	11/30/26 2:30 PM
M6-CAPP05	Pediatric Fluoro Essentials for APPs and Other Imaging Professionals	11/30/26 1:30 PM	11/30/26 2:30 PM
M6-CAPP05	Pediatric Fluoro Essentials for APPs and Other Imaging Professionals	11/30/26 1:30 PM	11/30/26 2:30 PM
M6-CAPP05	Pediatric Fluoro Essentials for APPs and Other Imaging Professionals	11/30/26 1:30 PM	11/30/26 2:30 PM

S1-CAPP01	APP Roles within Radiology	11/29/26 9:00 AM	11/29/26 10:00 AM
S1-CAPP01	APP Roles within Radiology	11/29/26 9:00 AM	11/29/26 10:00 AM
S1-CAPP01	APP Roles within Radiology	11/29/26 9:00 AM	11/29/26 10:00 AM
S1-CAPP01	APP Roles within Radiology	11/29/26 9:00 AM	11/29/26 10:00 AM

S1-CAPP01	APP Roles within Radiology	11/29/26 9:00 AM	11/29/26 10:00 AM
S2-CAPP03	Sonography for APPs Part 1: A How to Education Session	11/29/26 10:30 AM	11/29/26 11:30 AM
S2-CAPP03	Sonography for APPs Part 1: A How to Education Session	11/29/26 10:30 AM	11/29/26 11:30 AM
S2-CAPP03	Sonography for APPs Part 1: A How to Education Session	11/29/26 10:30 AM	11/29/26 11:30 AM

S2-CAPP03	Sonography for APPs Part 1: A How to Education Session	11/29/26 10:30 AM	11/29/26 11:30 AM
S4-CAPP06	Fluoroscopy of the Adult Upper GI Tract for APPs and Other Imaging Professionals	11/29/26 1:00 PM	11/29/26 2:00 PM
S4-CAPP06	Fluoroscopy of the Adult Upper GI Tract for APPs and Other Imaging Professionals	11/29/26 1:00 PM	11/29/26 2:00 PM
S4-CAPP06	Fluoroscopy of the Adult Upper GI Tract for APPs and Other Imaging Professionals	11/29/26 1:00 PM	11/29/26 2:00 PM
S5-CAPP04	Sonography for APPs Part 2: Ultrasound-Guided MSK Procedures	11/29/26 2:30 PM	11/29/26 3:30 PM
S5-CAPP04	Sonography for APPs Part 2: Ultrasound-Guided MSK Procedures	11/29/26 2:30 PM	11/29/26 3:30 PM

S5-CAPP04	Sonography for APPs Part 2: Ultrasound-Guided MSK Procedures	11/29/26 2:30 PM	11/29/26 3:30 PM
M1-CAS03	The Frontier Practice: Turning Generative and Agentic AI into Real Practice Value (Sponsored by the RSNA Associated Sciences Consortium)	11/30/26 8:00 AM	11/30/26 9:00 AM
M1-CAS03	The Frontier Practice: Turning Generative and Agentic AI into Real Practice Value (Sponsored by the RSNA Associated Sciences Consortium)	11/30/26 8:00 AM	11/30/26 9:00 AM
M1-CAS03	The Frontier Practice: Turning Generative and Agentic AI into Real Practice Value (Sponsored by the RSNA Associated Sciences Consortium)	11/30/26 8:00 AM	11/30/26 9:00 AM

M3-CAS04	From Limited Practice to Advancing the Profession (Sponsored by the RSNA Associated Sciences Consortium)	11/30/26 9:30 AM	11/30/26 10:30 AM
M3-CAS04	From Limited Practice to Advancing the Profession (Sponsored by the RSNA Associated Sciences Consortium)	11/30/26 9:30 AM	11/30/26 10:30 AM
M3-CAS04	From Limited Practice to Advancing the Profession (Sponsored by the RSNA Associated Sciences Consortium)	11/30/26 9:30 AM	11/30/26 10:30 AM

M3-CAS04	From Limited Practice to Advancing the Profession (Sponsored by the RSNA Associated Sciences Consortium)	11/30/26 9:30 AM	11/30/26 10:30 AM
M4-CAS06	Bridging the Gap: Shaping the Future of Leadership in Diagnostic Imaging Services (Sponsored by the RSNA Associated Sciences Consortium)	11/30/26 11:00 AM	11/30/26 12:00 PM
M4-CAS06	Bridging the Gap: Shaping the Future of Leadership in Diagnostic Imaging Services (Sponsored by the RSNA Associated Sciences Consortium)	11/30/26 11:00 AM	11/30/26 12:00 PM

M4-CAS06	Bridging the Gap: Shaping the Future of Leadership in Diagnostic Imaging Services (Sponsored by the RSNA Associated Sciences Consortium)	11/30/26 11:00 AM	11/30/26 12:00 PM

M4-CAS06	Bridging the Gap: Shaping the Future of Leadership in Diagnostic Imaging Services (Sponsored by the RSNA Associated Sciences Consortium)	11/30/26 11:00 AM	11/30/26 12:00 PM

M6-CAS01	Vision of the Future: Panel Discussion as a Final ASC Presentation Part 1 (Sponsored by the RSNA Associated Sciences Consortium)	11/30/26 1:30 PM	11/30/26 2:30 PM

M6-CAS01	Vision of the Future: Panel Discussion as a Final ASC Presentation Part 1 (Sponsored by the RSNA Associated Sciences Consortium)	11/30/26 1:30 PM	11/30/26 2:30 PM

M6-CAS01	Vision of the Future: Panel Discussion as a Final ASC Presentation Part 1 (Sponsored by the RSNA Associated Sciences Consortium)	11/30/26 1:30 PM	11/30/26 2:30 PM
M7-CAS02	Vision of the Future: Panel Discussion as a Final ASC Presentation Part 2 (Sponsored by the RSNA Associated Sciences Consortium)	11/30/26 3:00 PM	11/30/26 4:00 PM
M7-CAS02	Vision of the Future: Panel Discussion as a Final ASC Presentation Part 2 (Sponsored by the RSNA Associated Sciences Consortium)	11/30/26 3:00 PM	11/30/26 4:00 PM
M7-CAS02	Vision of the Future: Panel Discussion as a Final ASC Presentation Part 2 (Sponsored by the RSNA Associated Sciences Consortium)	11/30/26 3:00 PM	11/30/26 4:00 PM
M7-CAS02	Vision of the Future: Panel Discussion as a Final ASC Presentation Part 2 (Sponsored by the RSNA Associated Sciences Consortium)	11/30/26 3:00 PM	11/30/26 4:00 PM

M7-CAS02	Vision of the Future: Panel Discussion as a Final ASC Presentation Part 2 (Sponsored by the RSNA Associated Sciences Consortium)	11/30/26 3:00 PM	11/30/26 4:00 PM
M8-CAS05	The ROI of AI: Making the Business Case (Sponsored by the RSNA Associated Sciences Consortium)	11/30/26 4:30 PM	11/30/26 5:30 PM
M8-CAS05	The ROI of AI: Making the Business Case (Sponsored by the RSNA Associated Sciences Consortium)	11/30/26 4:30 PM	11/30/26 5:30 PM
M8-CAS05	The ROI of AI: Making the Business Case (Sponsored by the RSNA Associated Sciences Consortium)	11/30/26 4:30 PM	11/30/26 5:30 PM
M8-CAS05	The ROI of AI: Making the Business Case (Sponsored by the RSNA Associated Sciences Consortium)	11/30/26 4:30 PM	11/30/26 5:30 PM
M8-CAS05	The ROI of AI: Making the Business Case (Sponsored by the RSNA Associated Sciences Consortium)	11/30/26 4:30 PM	11/30/26 5:30 PM
T1-CAS07	Cybersecurity (Sponsored by the RSNA Associated Sciences Consortium)	12/1/26 8:00 AM	12/1/26 9:00 AM
T1-CAS07	Cybersecurity (Sponsored by the RSNA Associated Sciences Consortium)	12/1/26 8:00 AM	12/1/26 9:00 AM

T1-CAS07	Cybersecurity (Sponsored by the RSNA Associated Sciences Consortium)	12/1/26 8:00 AM	12/1/26 9:00 AM
T3-CAS08	Sustainability Within Imaging: Design and Operations (Sponsored by the RSNA Associated Sciences Consortium)	12/1/26 9:30 AM	12/1/26 10:30 AM
T3-CAS08	Sustainability Within Imaging: Design and Operations (Sponsored by the RSNA Associated Sciences Consortium)	12/1/26 9:30 AM	12/1/26 10:30 AM

T3-CAS08	Sustainability Within Imaging: Design and Operations (Sponsored by the RSNA Associated Sciences Consortium)	12/1/26 9:30 AM	12/1/26 10:30 AM
T3-CAS08	Sustainability Within Imaging: Design and Operations (Sponsored by the RSNA Associated Sciences Consortium)	12/1/26 9:30 AM	12/1/26 10:30 AM
T3-CAS08	Sustainability Within Imaging: Design and Operations (Sponsored by the RSNA Associated Sciences Consortium)	12/1/26 9:30 AM	12/1/26 10:30 AM

T4-CRT01	ASRT@RSNA: Sustainability: Advancing the Health of Patients and the Planet	12/1/26 11:00 AM	12/1/26 12:00 PM
T4-CRT01	ASRT@RSNA: Sustainability: Advancing the Health of Patients and the Planet	12/1/26 11:00 AM	12/1/26 12:00 PM
T6-CRT02	ASRT@RSNA: Radiating Creativity: A Hands-On Tool for the Emotional Wellbeing of Radiologic Technologists	12/1/26 1:30 PM	12/1/26 2:30 PM
T6-CRT02	ASRT@RSNA: Radiating Creativity: A Hands-On Tool for the Emotional Wellbeing of Radiologic Technologists	12/1/26 1:30 PM	12/1/26 2:30 PM
T6-CRT02	ASRT@RSNA: Radiating Creativity: A Hands-On Tool for the Emotional Wellbeing of Radiologic Technologists	12/1/26 1:30 PM	12/1/26 2:30 PM
T7-CRT03	ASRT@RSNA: Undergraduate On-Campus Preparation of Radiography Students for Clinical Placement: An Australian Perspective	12/1/26 3:00 PM	12/1/26 4:00 PM

T7-CRT03	ASRT@RSNA: Undergraduate On-Campus Preparation of Radiography Students for Clinical Placement: An Australian Perspective	12/1/26 3:00 PM	12/1/26 4:00 PM
W1-CRT04	ASRT@RSNA: More Than Management: Building Clinical Leadership Capability in Imaging for Impact, Quality, and Personal Growth	12/2/26 8:00 AM	12/2/26 9:00 AM
W1-CRT04	ASRT@RSNA: More Than Management: Building Clinical Leadership Capability in Imaging for Impact, Quality, and Personal Growth	12/2/26 8:00 AM	12/2/26 9:00 AM
W3-CRT05	ASRT@RSNA: Artificial Intelligence and the Human Touch: Enhancing Patient Outcomes in Breast Imaging	12/2/26 9:30 AM	12/2/26 10:30 AM
W3-CRT05	ASRT@RSNA: Artificial Intelligence and the Human Touch: Enhancing Patient Outcomes in Breast Imaging	12/2/26 9:30 AM	12/2/26 10:30 AM

W4-CRT06	ASRT@RSNA: Emerging Extended Reality and Clinical Applications in Diagnostic Imaging	12/2/26 11:00 AM	12/2/26 12:00 PM

W4-CRT06	ASRT@RSNA: Emerging Extended Reality and Clinical Applications in Diagnostic Imaging	12/2/26 11:00 AM	12/2/26 12:00 PM

W4-CRT06	ASRT@RSNA: Emerging Extended Reality and Clinical Applications in Diagnostic Imaging	12/2/26 11:00 AM	12/2/26 12:00 PM
W6-CRT07	ASRT@RSNA: Lessons from the Incident Log	12/2/26 1:30 PM	12/2/26 2:30 PM
W6-CRT07	ASRT@RSNA: Lessons from the Incident Log	12/2/26 1:30 PM	12/2/26 2:30 PM

W7-CRT08	ASRT@RSNA: Magnetic Resonance Imaging Safety Evaluation Workflow in Practice	12/2/26 3:00 PM	12/2/26 4:00 PM
W7-CRT08	ASRT@RSNA: Magnetic Resonance Imaging Safety Evaluation Workflow in Practice	12/2/26 3:00 PM	12/2/26 4:00 PM
M1-CBR05	Multimodality AI-Enhanced Breast Imaging: Advancing Detection, Risk Stratification, and Diagnosis	11/30/26 8:00 AM	11/30/26 9:00 AM
M1-CBR05	Multimodality AI-Enhanced Breast Imaging: Advancing Detection, Risk Stratification, and Diagnosis	11/30/26 8:00 AM	11/30/26 9:00 AM
M1-CBR05	Multimodality AI-Enhanced Breast Imaging: Advancing Detection, Risk Stratification, and Diagnosis	11/30/26 8:00 AM	11/30/26 9:00 AM
M1-CBR05	Multimodality AI-Enhanced Breast Imaging: Advancing Detection, Risk Stratification, and Diagnosis	11/30/26 8:00 AM	11/30/26 9:00 AM

M1-CBR16	RSNA Hands-On Lab: Breast Ultrasound Guided Biopsy Techniques (Registration Fee Required)	11/30/26 8:30 AM	11/30/26 10:30 AM
M1-CBR16	RSNA Hands-On Lab: Breast Ultrasound Guided Biopsy Techniques (Registration Fee Required)	11/30/26 8:30 AM	11/30/26 10:30 AM
M1-CBR16	RSNA Hands-On Lab: Breast Ultrasound Guided Biopsy Techniques (Registration Fee Required)	11/30/26 8:30 AM	11/30/26 10:30 AM
M1-CBR16	RSNA Hands-On Lab: Breast Ultrasound Guided Biopsy Techniques (Registration Fee Required)	11/30/26 8:30 AM	11/30/26 10:30 AM
M1-CBR16	RSNA Hands-On Lab: Breast Ultrasound Guided Biopsy Techniques (Registration Fee Required)	11/30/26 8:30 AM	11/30/26 10:30 AM
M1-CBR16	RSNA Hands-On Lab: Breast Ultrasound Guided Biopsy Techniques (Registration Fee Required)	11/30/26 8:30 AM	11/30/26 10:30 AM
M1-CBR16	RSNA Hands-On Lab: Breast Ultrasound Guided Biopsy Techniques (Registration Fee Required)	11/30/26 8:30 AM	11/30/26 10:30 AM

M1-CBR16	RSNA Hands-On Lab: Breast Ultrasound Guided Biopsy Techniques (Registration Fee Required)	11/30/26 8:30 AM	11/30/26 10:30 AM
M1-CBR16	RSNA Hands-On Lab: Breast Ultrasound Guided Biopsy Techniques (Registration Fee Required)	11/30/26 8:30 AM	11/30/26 10:30 AM
M1-CBR16	RSNA Hands-On Lab: Breast Ultrasound Guided Biopsy Techniques (Registration Fee Required)	11/30/26 8:30 AM	11/30/26 10:30 AM
M1-CBR16	RSNA Hands-On Lab: Breast Ultrasound Guided Biopsy Techniques (Registration Fee Required)	11/30/26 8:30 AM	11/30/26 10:30 AM
M1-CBR16	RSNA Hands-On Lab: Breast Ultrasound Guided Biopsy Techniques (Registration Fee Required)	11/30/26 8:30 AM	11/30/26 10:30 AM
M1-CBR16	RSNA Hands-On Lab: Breast Ultrasound Guided Biopsy Techniques (Registration Fee Required)	11/30/26 8:30 AM	11/30/26 10:30 AM
M1-CBR16	RSNA Hands-On Lab: Breast Ultrasound Guided Biopsy Techniques (Registration Fee Required)	11/30/26 8:30 AM	11/30/26 10:30 AM

M1-CBR16	RSNA Hands-On Lab: Breast Ultrasound Guided Biopsy Techniques (Registration Fee Required)	11/30/26 8:30 AM	11/30/26 10:30 AM
M1-CBR16	RSNA Hands-On Lab: Breast Ultrasound Guided Biopsy Techniques (Registration Fee Required)	11/30/26 8:30 AM	11/30/26 10:30 AM
M1-CBR16	RSNA Hands-On Lab: Breast Ultrasound Guided Biopsy Techniques (Registration Fee Required)	11/30/26 8:30 AM	11/30/26 10:30 AM
M1-CBR16	RSNA Hands-On Lab: Breast Ultrasound Guided Biopsy Techniques (Registration Fee Required)	11/30/26 8:30 AM	11/30/26 10:30 AM
M1-CBR16	RSNA Hands-On Lab: Breast Ultrasound Guided Biopsy Techniques (Registration Fee Required)	11/30/26 8:30 AM	11/30/26 10:30 AM
M6-CBR04	AI in Mammography and Digital Breast Tomosynthesis: Real-World Performance, Implementation, and Future Directions	11/30/26 1:30 PM	11/30/26 2:30 PM
M6-CBR04	AI in Mammography and Digital Breast Tomosynthesis: Real-World Performance, Implementation, and Future Directions	11/30/26 1:30 PM	11/30/26 2:30 PM

M6-CBR04	AI in Mammography and Digital Breast Tomosynthesis: Real-World Performance, Implementation, and Future Directions	11/30/26 1:30 PM	11/30/26 2:30 PM
M6-CBR04	AI in Mammography and Digital Breast Tomosynthesis: Real-World Performance, Implementation, and Future Directions	11/30/26 1:30 PM	11/30/26 2:30 PM
M6-CBR17	RSNA Hands-On Lab: MRI-Guided Breast Biopsy (Registration Fee Required)	11/30/26 2:00 PM	11/30/26 4:00 PM
M6-CBR17	RSNA Hands-On Lab: MRI-Guided Breast Biopsy (Registration Fee Required)	11/30/26 2:00 PM	11/30/26 4:00 PM
M6-CBR17	RSNA Hands-On Lab: MRI-Guided Breast Biopsy (Registration Fee Required)	11/30/26 2:00 PM	11/30/26 4:00 PM

M6-CBR17	RSNA Hands-On Lab: MRI-Guided Breast Biopsy (Registration Fee Required)	11/30/26 2:00 PM	11/30/26 4:00 PM
M6-CBR17	RSNA Hands-On Lab: MRI-Guided Breast Biopsy (Registration Fee Required)	11/30/26 2:00 PM	11/30/26 4:00 PM
M6-CBR17	RSNA Hands-On Lab: MRI-Guided Breast Biopsy (Registration Fee Required)	11/30/26 2:00 PM	11/30/26 4:00 PM
M6-CBR17	RSNA Hands-On Lab: MRI-Guided Breast Biopsy (Registration Fee Required)	11/30/26 2:00 PM	11/30/26 4:00 PM
M6-CBR17	RSNA Hands-On Lab: MRI-Guided Breast Biopsy (Registration Fee Required)	11/30/26 2:00 PM	11/30/26 4:00 PM

M6-CBR17	RSNA Hands-On Lab: MRI-Guided Breast Biopsy (Registration Fee Required)	11/30/26 2:00 PM	11/30/26 4:00 PM
M6-CBR17	RSNA Hands-On Lab: MRI-Guided Breast Biopsy (Registration Fee Required)	11/30/26 2:00 PM	11/30/26 4:00 PM
M6-CBR17	RSNA Hands-On Lab: MRI-Guided Breast Biopsy (Registration Fee Required)	11/30/26 2:00 PM	11/30/26 4:00 PM
M6-CBR17	RSNA Hands-On Lab: MRI-Guided Breast Biopsy (Registration Fee Required)	11/30/26 2:00 PM	11/30/26 4:00 PM
M6-CBR17	RSNA Hands-On Lab: MRI-Guided Breast Biopsy (Registration Fee Required)	11/30/26 2:00 PM	11/30/26 4:00 PM

M6-CBR17	RSNA Hands-On Lab: MRI-Guided Breast Biopsy (Registration Fee Required)	11/30/26 2:00 PM	11/30/26 4:00 PM
M6-CBR17	RSNA Hands-On Lab: MRI-Guided Breast Biopsy (Registration Fee Required)	11/30/26 2:00 PM	11/30/26 4:00 PM
M6-CBR17	RSNA Hands-On Lab: MRI-Guided Breast Biopsy (Registration Fee Required)	11/30/26 2:00 PM	11/30/26 4:00 PM
M6-CBR17	RSNA Hands-On Lab: MRI-Guided Breast Biopsy (Registration Fee Required)	11/30/26 2:00 PM	11/30/26 4:00 PM
M6-CBR17	RSNA Hands-On Lab: MRI-Guided Breast Biopsy (Registration Fee Required)	11/30/26 2:00 PM	11/30/26 4:00 PM

M6-CBR17	RSNA Hands-On Lab: MRI-Guided Breast Biopsy (Registration Fee Required)	11/30/26 2:00 PM	11/30/26 4:00 PM
M6-CBR17	RSNA Hands-On Lab: MRI-Guided Breast Biopsy (Registration Fee Required)	11/30/26 2:00 PM	11/30/26 4:00 PM
M6-CBR17	RSNA Hands-On Lab: MRI-Guided Breast Biopsy (Registration Fee Required)	11/30/26 2:00 PM	11/30/26 4:00 PM
M6-CBR17	RSNA Hands-On Lab: MRI-Guided Breast Biopsy (Registration Fee Required)	11/30/26 2:00 PM	11/30/26 4:00 PM
M7-CBR07	Contrast-Enhanced Mammography in Clinical Practice: Screening, Diagnosis, and Expanding Access	11/30/26 3:00 PM	11/30/26 4:00 PM

M7-CBR07	Contrast-Enhanced Mammography in Clinical Practice: Screening, Diagnosis, and Expanding Access	11/30/26 3:00 PM	11/30/26 4:00 PM
M7-CBR07	Contrast-Enhanced Mammography in Clinical Practice: Screening, Diagnosis, and Expanding Access	11/30/26 3:00 PM	11/30/26 4:00 PM
M7-CBR07	Contrast-Enhanced Mammography in Clinical Practice: Screening, Diagnosis, and Expanding Access	11/30/26 3:00 PM	11/30/26 4:00 PM
R3-CBR13	High-Risk Breast Lesions Worldwide: What's New and What to Do	12/3/26 9:30 AM	12/3/26 10:30 AM

R3-CBR13	High-Risk Breast Lesions Worldwide: What's New and What to Do	12/3/26 9:30 AM	12/3/26 10:30 AM
R3-CBR13	High-Risk Breast Lesions Worldwide: What's New and What to Do	12/3/26 9:30 AM	12/3/26 10:30 AM
R3-CBR13	High-Risk Breast Lesions Worldwide: What's New and What to Do	12/3/26 9:30 AM	12/3/26 10:30 AM
R4-CBR14	DCIS- Update on Imaging, Management, and Evolving Strategies	12/3/26 11:00 AM	12/3/26 12:00 PM
R4-CBR14	DCIS- Update on Imaging, Management, and Evolving Strategies	12/3/26 11:00 AM	12/3/26 12:00 PM

R4-CBR14	DCIS- Update on Imaging, Management, and Evolving Strategies	12/3/26 11:00 AM	12/3/26 12:00 PM
R4-CBR14	DCIS- Update on Imaging, Management, and Evolving Strategies	12/3/26 11:00 AM	12/3/26 12:00 PM
R7-CBR15	Risk Stratification for Personalized Breast Cancer Screening: From Traditional to AI-Driven Imaging Approaches	12/3/26 3:00 PM	12/3/26 4:00 PM
R7-CBR15	Risk Stratification for Personalized Breast Cancer Screening: From Traditional to AI-Driven Imaging Approaches	12/3/26 3:00 PM	12/3/26 4:00 PM
R7-CBR15	Risk Stratification for Personalized Breast Cancer Screening: From Traditional to AI-Driven Imaging Approaches	12/3/26 3:00 PM	12/3/26 4:00 PM
R7-CBR15	Risk Stratification for Personalized Breast Cancer Screening: From Traditional to AI-Driven Imaging Approaches	12/3/26 3:00 PM	12/3/26 4:00 PM

S1-CBR01	Global Breast Cancer Screening: Fundamentals, Updates, and Emerging Technologies	11/29/26 9:00 AM	11/29/26 10:00 AM
S1-CBR01	Global Breast Cancer Screening: Fundamentals, Updates, and Emerging Technologies	11/29/26 9:00 AM	11/29/26 10:00 AM
S1-CBR01	Global Breast Cancer Screening: Fundamentals, Updates, and Emerging Technologies	11/29/26 9:00 AM	11/29/26 10:00 AM
S1-CBR01	Global Breast Cancer Screening: Fundamentals, Updates, and Emerging Technologies	11/29/26 9:00 AM	11/29/26 10:00 AM

S4-CBR02	Breast Cancer Screening Guidelines Worldwide: Initiation, Cessation, and Opportunistic Screening	11/29/26 1:00 PM	11/29/26 2:00 PM
S4-CBR02	Breast Cancer Screening Guidelines Worldwide: Initiation, Cessation, and Opportunistic Screening	11/29/26 1:00 PM	11/29/26 2:00 PM
S4-CBR02	Breast Cancer Screening Guidelines Worldwide: Initiation, Cessation, and Opportunistic Screening	11/29/26 1:00 PM	11/29/26 2:00 PM
S4-CBR02	Breast Cancer Screening Guidelines Worldwide: Initiation, Cessation, and Opportunistic Screening	11/29/26 1:00 PM	11/29/26 2:00 PM

S5-CBR03	Equity, Access, and Limitations in Breast Cancer Screening for Under-Represented Populations	11/29/26 2:30 PM	11/29/26 3:30 PM
S5-CBR03	Equity, Access, and Limitations in Breast Cancer Screening for Under-Represented Populations	11/29/26 2:30 PM	11/29/26 3:30 PM
S5-CBR03	Equity, Access, and Limitations in Breast Cancer Screening for Under-Represented Populations	11/29/26 2:30 PM	11/29/26 3:30 PM
S5-CBR03	Equity, Access, and Limitations in Breast Cancer Screening for Under-Represented Populations	11/29/26 2:30 PM	11/29/26 3:30 PM
T1-CBR06	Next-Generation Breast MRI: Advances in DCE, Diffusion Imaging, Novel Techniques and AI Integration	12/1/26 8:00 AM	12/1/26 9:00 AM

T1-CBR06	Next-Generation Breast MRI: Advances in DCE, Diffusion Imaging, Novel Techniques and AI Integration	12/1/26 8:00 AM	12/1/26 9:00 AM
T1-CBR06	Next-Generation Breast MRI: Advances in DCE, Diffusion Imaging, Novel Techniques and AI Integration	12/1/26 8:00 AM	12/1/26 9:00 AM
T1-CBR06	Next-Generation Breast MRI: Advances in DCE, Diffusion Imaging, Novel Techniques and AI Integration	12/1/26 8:00 AM	12/1/26 9:00 AM
T6-CBR08	From Imaging to Intervention: Case-Based Applications of CEM and Breast MRI	12/1/26 1:30 PM	12/1/26 2:30 PM
T6-CBR08	From Imaging to Intervention: Case-Based Applications of CEM and Breast MRI	12/1/26 1:30 PM	12/1/26 2:30 PM

T6-CBR08	From Imaging to Intervention: Case-Based Applications of CEM and Breast MRI	12/1/26 1:30 PM	12/1/26 2:30 PM
T6-CBR08	From Imaging to Intervention: Case-Based Applications of CEM and Breast MRI	12/1/26 1:30 PM	12/1/26 2:30 PM
T8-CBR09	Right Tool, Right Target: Multimodality Breast Imaging in the AI Era	12/1/26 4:30 PM	12/1/26 5:30 PM
T8-CBR09	Right Tool, Right Target: Multimodality Breast Imaging in the AI Era	12/1/26 4:30 PM	12/1/26 5:30 PM
T8-CBR09	Right Tool, Right Target: Multimodality Breast Imaging in the AI Era	12/1/26 4:30 PM	12/1/26 5:30 PM

T8-CBR09	Right Tool, Right Target: Multimodality Breast Imaging in the AI Era	12/1/26 4:30 PM	12/1/26 5:30 PM
W1-CBR10	Breast Imaging Best Practices and Reporting: Case-Based	12/2/26 8:00 AM	12/2/26 9:00 AM
W1-CBR10	Breast Imaging Best Practices and Reporting: Case-Based	12/2/26 8:00 AM	12/2/26 9:00 AM
W1-CBR10	Breast Imaging Best Practices and Reporting: Case-Based	12/2/26 8:00 AM	12/2/26 9:00 AM
W1-CBR10	Breast Imaging Best Practices and Reporting: Case-Based	12/2/26 8:00 AM	12/2/26 9:00 AM

W6-CBR11	Breast Imaging Interventions: Case-Based Essentials	12/2/26 1:30 PM	12/2/26 2:30 PM
W6-CBR11	Breast Imaging Interventions: Case-Based Essentials	12/2/26 1:30 PM	12/2/26 2:30 PM
W6-CBR11	Breast Imaging Interventions: Case-Based Essentials	12/2/26 1:30 PM	12/2/26 2:30 PM
W6-CBR11	Breast Imaging Interventions: Case-Based Essentials	12/2/26 1:30 PM	12/2/26 2:30 PM
W8-CBR12	Imaging Response Assessment and Minimally Invasive Therapies in Breast Cancer Treatment	12/2/26 4:30 PM	12/2/26 5:30 PM
W8-CBR12	Imaging Response Assessment and Minimally Invasive Therapies in Breast Cancer Treatment	12/2/26 4:30 PM	12/2/26 5:30 PM
W8-CBR12	Imaging Response Assessment and Minimally Invasive Therapies in Breast Cancer Treatment	12/2/26 4:30 PM	12/2/26 5:30 PM

W8-CBR12	Imaging Response Assessment and Minimally Invasive Therapies in Breast Cancer Treatment	12/2/26 4:30 PM	12/2/26 5:30 PM
M1-CCA09	Cardiac CT Mentored Case Review: Essentials for Coronary Imaging and Interpretation	11/30/26 8:00 AM	11/30/26 9:00 AM
M1-CCA09	Cardiac CT Mentored Case Review: Essentials for Coronary Imaging and Interpretation	11/30/26 8:00 AM	11/30/26 9:00 AM
M1-CCA09	Cardiac CT Mentored Case Review: Essentials for Coronary Imaging and Interpretation	11/30/26 8:00 AM	11/30/26 9:00 AM
M1-CCA09	Cardiac CT Mentored Case Review: Essentials for Coronary Imaging and Interpretation	11/30/26 8:00 AM	11/30/26 9:00 AM
M1-CCA09	Cardiac CT Mentored Case Review: Essentials for Coronary Imaging and Interpretation	11/30/26 8:00 AM	11/30/26 9:00 AM

M3-CCA10	Cardiac CT Mentored Case Review: Imaging Fundamentals of Coronary Atherosclerosis and Beyond	11/30/26 9:30 AM	11/30/26 10:30 AM
M3-CCA10	Cardiac CT Mentored Case Review: Imaging Fundamentals of Coronary Atherosclerosis and Beyond	11/30/26 9:30 AM	11/30/26 10:30 AM
M3-CCA10	Cardiac CT Mentored Case Review: Imaging Fundamentals of Coronary Atherosclerosis and Beyond	11/30/26 9:30 AM	11/30/26 10:30 AM
M3-CCA10	Cardiac CT Mentored Case Review: Imaging Fundamentals of Coronary Atherosclerosis and Beyond	11/30/26 9:30 AM	11/30/26 10:30 AM

M3-CCA10	Cardiac CT Mentored Case Review: Imaging Fundamentals of Coronary Atherosclerosis and Beyond	11/30/26 9:30 AM	11/30/26 10:30 AM
M3-CCA10	Cardiac CT Mentored Case Review: Imaging Fundamentals of Coronary Atherosclerosis and Beyond	11/30/26 9:30 AM	11/30/26 10:30 AM
M6-CCA11	Cardiac CT Mentored Case Review: Imaging for Structural Heart Interventions	11/30/26 1:30 PM	11/30/26 2:30 PM
M6-CCA11	Cardiac CT Mentored Case Review: Imaging for Structural Heart Interventions	11/30/26 1:30 PM	11/30/26 2:30 PM
M6-CCA11	Cardiac CT Mentored Case Review: Imaging for Structural Heart Interventions	11/30/26 1:30 PM	11/30/26 2:30 PM
M6-CCA11	Cardiac CT Mentored Case Review: Imaging for Structural Heart Interventions	11/30/26 1:30 PM	11/30/26 2:30 PM
M6-CCA11	Cardiac CT Mentored Case Review: Imaging for Structural Heart Interventions	11/30/26 1:30 PM	11/30/26 2:30 PM
M6-CCA11	Cardiac CT Mentored Case Review: Imaging for Structural Heart Interventions	11/30/26 1:30 PM	11/30/26 2:30 PM

M7-CCA12	Cardiac CT Mentored Case Review: Imaging of Heart	11/30/26 3:00 PM	11/30/26 4:00 PM
M7-CCA12	Cardiac CT Mentored Case Review: Imaging of Heart	11/30/26 3:00 PM	11/30/26 4:00 PM
M7-CCA12	Cardiac CT Mentored Case Review: Imaging of Heart	11/30/26 3:00 PM	11/30/26 4:00 PM
M7-CCA12	Cardiac CT Mentored Case Review: Imaging of Heart	11/30/26 3:00 PM	11/30/26 4:00 PM
M7-CCA12	Cardiac CT Mentored Case Review: Imaging of Heart	11/30/26 3:00 PM	11/30/26 4:00 PM
M7-CCA12	Cardiac CT Mentored Case Review: Imaging of Heart	11/30/26 3:00 PM	11/30/26 4:00 PM
R4-CCA06	Your Heart in Jeopardy! An Interactive Case Review	12/3/26 11:00 AM	12/3/26 12:00 PM

R4-CCA06	Your Heart in Jeopardy! An Interactive Case Review	12/3/26 11:00 AM	12/3/26 12:00 PM
R4-CCA06	Your Heart in Jeopardy! An Interactive Case Review	12/3/26 11:00 AM	12/3/26 12:00 PM
R4-CCA06	Your Heart in Jeopardy! An Interactive Case Review	12/3/26 11:00 AM	12/3/26 12:00 PM
R7-CCA08	Demystifying Cardiac Devices: What Device is That?	12/3/26 3:00 PM	12/3/26 4:00 PM
R7-CCA08	Demystifying Cardiac Devices: What Device is That?	12/3/26 3:00 PM	12/3/26 4:00 PM
R7-CCA08	Demystifying Cardiac Devices: What Device is That?	12/3/26 3:00 PM	12/3/26 4:00 PM
R7-CCA08	Demystifying Cardiac Devices: What Device is That?	12/3/26 3:00 PM	12/3/26 4:00 PM
R7-CCA08	Demystifying Cardiac Devices: What Device is That?	12/3/26 3:00 PM	12/3/26 4:00 PM
S1-CCA05	Cardiac Imaging in Private Practice: What the Radiologist Needs to Know	11/29/26 9:00 AM	11/29/26 10:00 AM
S1-CCA05	Cardiac Imaging in Private Practice: What the Radiologist Needs to Know	11/29/26 9:00 AM	11/29/26 10:00 AM

S1-CCA05	Cardiac Imaging in Private Practice: What the Radiologist Needs to Know	11/29/26 9:00 AM	11/29/26 10:00 AM
S1-CCA05	Cardiac Imaging in Private Practice: What the Radiologist Needs to Know	11/29/26 9:00 AM	11/29/26 10:00 AM
S1-CCA05	Cardiac Imaging in Private Practice: What the Radiologist Needs to Know	11/29/26 9:00 AM	11/29/26 10:00 AM
S4-CCA02	Practical Approaches to Transcatheter and Coronary Interventions	11/29/26 1:00 PM	11/29/26 2:00 PM
S4-CCA02	Practical Approaches to Transcatheter and Coronary Interventions	11/29/26 1:00 PM	11/29/26 2:00 PM
S4-CCA02	Practical Approaches to Transcatheter and Coronary Interventions	11/29/26 1:00 PM	11/29/26 2:00 PM
S4-CCA02	Practical Approaches to Transcatheter and Coronary Interventions	11/29/26 1:00 PM	11/29/26 2:00 PM
T3-CCA01	Updates in Cardiac CT 2026	12/1/26 9:30 AM	12/1/26 10:30 AM

T3-CCA01	Updates in Cardiac CT 2026	12/1/26 9:30 AM	12/1/26 10:30 AM
T3-CCA01	Updates in Cardiac CT 2026	12/1/26 9:30 AM	12/1/26 10:30 AM
T3-CCA01	Updates in Cardiac CT 2026	12/1/26 9:30 AM	12/1/26 10:30 AM
T3-CCA01	Updates in Cardiac CT 2026	12/1/26 9:30 AM	12/1/26 10:30 AM
T3-CCA01	Updates in Cardiac CT 2026	12/1/26 9:30 AM	12/1/26 10:30 AM
T8-CCA04	Updates in Cardiac MRI 2026	12/1/26 4:30 PM	12/1/26 5:30 PM
T8-CCA04	Updates in Cardiac MRI 2026	12/1/26 4:30 PM	12/1/26 5:30 PM

T8-CCA04	Updates in Cardiac MRI 2026	12/1/26 4:30 PM	12/1/26 5:30 PM
T8-CCA04	Updates in Cardiac MRI 2026	12/1/26 4:30 PM	12/1/26 5:30 PM
T8-CCA04	Updates in Cardiac MRI 2026	12/1/26 4:30 PM	12/1/26 5:30 PM
W6-CCA03	Cardiac MRI 101: Essentials of CMR	12/2/26 1:30 PM	12/2/26 2:30 PM
W6-CCA03	Cardiac MRI 101: Essentials of CMR	12/2/26 1:30 PM	12/2/26 2:30 PM
W6-CCA03	Cardiac MRI 101: Essentials of CMR	12/2/26 1:30 PM	12/2/26 2:30 PM

W6-CCA03	Cardiac MRI 101: Essentials of CMR	12/2/26 1:30 PM	12/2/26 2:30 PM
W6-CCA03	Cardiac MRI 101: Essentials of CMR	12/2/26 1:30 PM	12/2/26 2:30 PM
W6-CCA03	Cardiac MRI 101: Essentials of CMR	12/2/26 1:30 PM	12/2/26 2:30 PM
W8-CCA07	Cardiac MRI Case Based Review	12/2/26 4:30 PM	12/2/26 5:30 PM
W8-CCA07	Cardiac MRI Case Based Review	12/2/26 4:30 PM	12/2/26 5:30 PM
W8-CCA07	Cardiac MRI Case Based Review	12/2/26 4:30 PM	12/2/26 5:30 PM

W8-CCA07	Cardiac MRI Case Based Review	12/2/26 4:30 PM	12/2/26 5:30 PM
W8-CCA07	Cardiac MRI Case Based Review	12/2/26 4:30 PM	12/2/26 5:30 PM
M1-CCH09	Navigating Diffuse Lung Disease: Radiology as a Reflection of Anatomy, Physiology and Histology	11/30/26 8:00 AM	11/30/26 9:00 AM
M1-CCH09	Navigating Diffuse Lung Disease: Radiology as a Reflection of Anatomy, Physiology and Histology	11/30/26 8:00 AM	11/30/26 9:00 AM
M1-CCH09	Navigating Diffuse Lung Disease: Radiology as a Reflection of Anatomy, Physiology and Histology	11/30/26 8:00 AM	11/30/26 9:00 AM
M6-CCH05	Tips and Pearls for Interpretation of ICU Chest Radiographs and CT	11/30/26 1:30 PM	11/30/26 2:30 PM

M6-CCH05	Tips and Pearls for Interpretation of ICU Chest Radiographs and CT	11/30/26 1:30 PM	11/30/26 2:30 PM
M6-CCH05	Tips and Pearls for Interpretation of ICU Chest Radiographs and CT	11/30/26 1:30 PM	11/30/26 2:30 PM
M6-CCH05	Tips and Pearls for Interpretation of ICU Chest Radiographs and CT	11/30/26 1:30 PM	11/30/26 2:30 PM
M6-CCH05	Tips and Pearls for Interpretation of ICU Chest Radiographs and CT	11/30/26 1:30 PM	11/30/26 2:30 PM

M6-CCH05	Tips and Pearls for Interpretation of ICU Chest Radiographs and CT	11/30/26 1:30 PM	11/30/26 2:30 PM
R1-CCH08	Normal and Abnormal Post Treatment Findings in the Thorax: Case Based Review	12/3/26 8:00 AM	12/3/26 9:00 AM
R1-CCH08	Normal and Abnormal Post Treatment Findings in the Thorax: Case Based Review	12/3/26 8:00 AM	12/3/26 9:00 AM
R1-CCH08	Normal and Abnormal Post Treatment Findings in the Thorax: Case Based Review	12/3/26 8:00 AM	12/3/26 9:00 AM

R1-CCH08	Normal and Abnormal Post Treatment Findings in the Thorax: Case Based Review	12/3/26 8:00 AM	12/3/26 9:00 AM
R1-CCH08	Normal and Abnormal Post Treatment Findings in the Thorax: Case Based Review	12/3/26 8:00 AM	12/3/26 9:00 AM
R4-CCH14	Clinching the Diagnosis of Thoracic Imaging Zebras	12/3/26 11:00 AM	12/3/26 12:00 PM
R4-CCH14	Clinching the Diagnosis of Thoracic Imaging Zebras	12/3/26 11:00 AM	12/3/26 12:00 PM
R4-CCH14	Clinching the Diagnosis of Thoracic Imaging Zebras	12/3/26 11:00 AM	12/3/26 12:00 PM

R4-CCH14	Clinching the Diagnosis of Thoracic Imaging Zebras	12/3/26 11:00 AM	12/3/26 12:00 PM
R4-CCH14	Clinching the Diagnosis of Thoracic Imaging Zebras	12/3/26 11:00 AM	12/3/26 12:00 PM
R7-CCH03	Fundamentals and Updates of Diffuse Lung Diseases	12/3/26 3:00 PM	12/3/26 4:00 PM
R7-CCH03	Fundamentals and Updates of Diffuse Lung Diseases	12/3/26 3:00 PM	12/3/26 4:00 PM
R7-CCH03	Fundamentals and Updates of Diffuse Lung Diseases	12/3/26 3:00 PM	12/3/26 4:00 PM
R7-CCH03	Fundamentals and Updates of Diffuse Lung Diseases	12/3/26 3:00 PM	12/3/26 4:00 PM
R7-CCH03	Fundamentals and Updates of Diffuse Lung Diseases	12/3/26 3:00 PM	12/3/26 4:00 PM

S2-CCH01	Lung Cancer Screening Strategies and Challenges Across the Globe	11/29/26 10:30 AM	11/29/26 11:30 AM
S2-CCH01	Lung Cancer Screening Strategies and Challenges Across the Globe	11/29/26 10:30 AM	11/29/26 11:30 AM
S2-CCH01	Lung Cancer Screening Strategies and Challenges Across the Globe	11/29/26 10:30 AM	11/29/26 11:30 AM
S2-CCH01	Lung Cancer Screening Strategies and Challenges Across the Globe	11/29/26 10:30 AM	11/29/26 11:30 AM
S2-CCH01	Lung Cancer Screening Strategies and Challenges Across the Globe	11/29/26 10:30 AM	11/29/26 11:30 AM
S5-CCH02	Approach to Chest CT Interpretation: Differential Considerations	11/29/26 2:30 PM	11/29/26 3:30 PM
S5-CCH02	Approach to Chest CT Interpretation: Differential Considerations	11/29/26 2:30 PM	11/29/26 3:30 PM
S5-CCH02	Approach to Chest CT Interpretation: Differential Considerations	11/29/26 2:30 PM	11/29/26 3:30 PM

S5-CCH02	Approach to Chest CT Interpretation: Differential Considerations	11/29/26 2:30 PM	11/29/26 3:30 PM
S5-CCH02	Approach to Chest CT Interpretation: Differential Considerations	11/29/26 2:30 PM	11/29/26 3:30 PM
T1-CCH04	Guideline in Thoracic Imaging Every Radiologists Should Know	12/1/26 8:00 AM	12/1/26 9:00 AM
T1-CCH04	Guideline in Thoracic Imaging Every Radiologists Should Know	12/1/26 8:00 AM	12/1/26 9:00 AM
T1-CCH04	Guideline in Thoracic Imaging Every Radiologists Should Know	12/1/26 8:00 AM	12/1/26 9:00 AM
T1-CCH04	Guideline in Thoracic Imaging Every Radiologists Should Know	12/1/26 8:00 AM	12/1/26 9:00 AM
T1-CCH04	Guideline in Thoracic Imaging Every Radiologists Should Know	12/1/26 8:00 AM	12/1/26 9:00 AM

T7-CCH06	Deep Dive into Inhalational Lung Diseases	12/1/26 3:00 PM	12/1/26 4:00 PM
T7-CCH06	Deep Dive into Inhalational Lung Diseases	12/1/26 3:00 PM	12/1/26 4:00 PM
T7-CCH06	Deep Dive into Inhalational Lung Diseases	12/1/26 3:00 PM	12/1/26 4:00 PM
T7-CCH06	Deep Dive into Inhalational Lung Diseases	12/1/26 3:00 PM	12/1/26 4:00 PM
T7-CCH06	Deep Dive into Inhalational Lung Diseases	12/1/26 3:00 PM	12/1/26 4:00 PM

T8-CCH13	Clinical Applications of Cutting Edge Technologies in Thoracic Imaging and Intervention	12/1/26 4:30 PM	12/1/26 5:30 PM
T8-CCH13	Clinical Applications of Cutting Edge Technologies in Thoracic Imaging and Intervention	12/1/26 4:30 PM	12/1/26 5:30 PM
T8-CCH13	Clinical Applications of Cutting Edge Technologies in Thoracic Imaging and Intervention	12/1/26 4:30 PM	12/1/26 5:30 PM
T8-CCH13	Clinical Applications of Cutting Edge Technologies in Thoracic Imaging and Intervention	12/1/26 4:30 PM	12/1/26 5:30 PM
T8-CCH13	Clinical Applications of Cutting Edge Technologies in Thoracic Imaging and Intervention	12/1/26 4:30 PM	12/1/26 5:30 PM
W1-CCH10	Fundamentals and Updates on Pulmonary Vascular Imaging	12/2/26 8:00 AM	12/2/26 9:00 AM
W1-CCH10	Fundamentals and Updates on Pulmonary Vascular Imaging	12/2/26 8:00 AM	12/2/26 9:00 AM

W1-CCH10	Fundamentals and Updates on Pulmonary Vascular Imaging	12/2/26 8:00 AM	12/2/26 9:00 AM
W1-CCH10	Fundamentals and Updates on Pulmonary Vascular Imaging	12/2/26 8:00 AM	12/2/26 9:00 AM
W1-CCH10	Fundamentals and Updates on Pulmonary Vascular Imaging	12/2/26 8:00 AM	12/2/26 9:00 AM
W3-CCH12	Chest Imaging Jeopardy	12/2/26 9:30 AM	12/2/26 10:30 AM
W3-CCH12	Chest Imaging Jeopardy	12/2/26 9:30 AM	12/2/26 10:30 AM
W3-CCH12	Chest Imaging Jeopardy	12/2/26 9:30 AM	12/2/26 10:30 AM

W3-CCH12	Chest Imaging Jeopardy	12/2/26 9:30 AM	12/2/26 10:30 AM
W3-CCH12	Chest Imaging Jeopardy	12/2/26 9:30 AM	12/2/26 10:30 AM
W3-CCH12	Chest Imaging Jeopardy	12/2/26 9:30 AM	12/2/26 10:30 AM
W6-CCH07	Imaging of Thoracic Neoplasms: Case Based Review	12/2/26 1:30 PM	12/2/26 2:30 PM
W6-CCH07	Imaging of Thoracic Neoplasms: Case Based Review	12/2/26 1:30 PM	12/2/26 2:30 PM

W6-CCH07	Imaging of Thoracic Neoplasms: Case Based Review	12/2/26 1:30 PM	12/2/26 2:30 PM
W6-CCH07	Imaging of Thoracic Neoplasms: Case Based Review	12/2/26 1:30 PM	12/2/26 2:30 PM
W6-CCH07	Imaging of Thoracic Neoplasms: Case Based Review	12/2/26 1:30 PM	12/2/26 2:30 PM
W6-CCH07	Imaging of Thoracic Neoplasms: Case Based Review	12/2/26 1:30 PM	12/2/26 2:30 PM
W8-CCH11	Fundamentals of Lung Cancer Imaging: Staging, Restaging, and Biomarkers	12/2/26 4:30 PM	12/2/26 5:30 PM

W8-CCH11	Fundamentals of Lung Cancer Imaging: Staging, Restaging, and Biomarkers	12/2/26 4:30 PM	12/2/26 5:30 PM
W8-CCH11	Fundamentals of Lung Cancer Imaging: Staging, Restaging, and Biomarkers	12/2/26 4:30 PM	12/2/26 5:30 PM
W8-CCH11	Fundamentals of Lung Cancer Imaging: Staging, Restaging, and Biomarkers	12/2/26 4:30 PM	12/2/26 5:30 PM
W8-CCH11	Fundamentals of Lung Cancer Imaging: Staging, Restaging, and Biomarkers	12/2/26 4:30 PM	12/2/26 5:30 PM

M1-RCP08	New Radiology Trends in the Arab World (Pan Arab Association of Radiological Societies Session)	11/30/26 8:00 AM	11/30/26 9:00 AM
M1-RCP08	New Radiology Trends in the Arab World (Pan Arab Association of Radiological Societies Session)	11/30/26 8:00 AM	11/30/26 9:00 AM
M1-RCP08	New Radiology Trends in the Arab World (Pan Arab Association of Radiological Societies Session)	11/30/26 8:00 AM	11/30/26 9:00 AM
M1-RCP08	New Radiology Trends in the Arab World (Pan Arab Association of Radiological Societies Session)	11/30/26 8:00 AM	11/30/26 9:00 AM

M1-RCP08	New Radiology Trends in the Arab World (Pan Arab Association of Radiological Societies Session)	11/30/26 8:00 AM	11/30/26 9:00 AM
M1-RCP08	New Radiology Trends in the Arab World (Pan Arab Association of Radiological Societies Session)	11/30/26 8:00 AM	11/30/26 9:00 AM
M1-RCP08	New Radiology Trends in the Arab World (Pan Arab Association of Radiological Societies Session)	11/30/26 8:00 AM	11/30/26 9:00 AM
M1-RCP08	New Radiology Trends in the Arab World (Pan Arab Association of Radiological Societies Session)	11/30/26 8:00 AM	11/30/26 9:00 AM
M1-RCP19	Driving Change Through Implementation Science (Sponsored by the RSNA Health Equity Committee)	11/30/26 8:00 AM	11/30/26 9:00 AM

M1-RCP19	Driving Change Through Implementation Science (Sponsored by the RSNA Health Equity Committee)	11/30/26 8:00 AM	11/30/26 9:00 AM
M1-RCP19	Driving Change Through Implementation Science (Sponsored by the RSNA Health Equity Committee)	11/30/26 8:00 AM	11/30/26 9:00 AM
M1-RCP19	Driving Change Through Implementation Science (Sponsored by the RSNA Health Equity Committee)	11/30/26 8:00 AM	11/30/26 9:00 AM
M1-RCP19	Driving Change Through Implementation Science (Sponsored by the RSNA Health Equity Committee)	11/30/26 8:00 AM	11/30/26 9:00 AM
M1-RCP19	Driving Change Through Implementation Science (Sponsored by the RSNA Health Equity Committee)	11/30/26 8:00 AM	11/30/26 9:00 AM

M3-RCP16	Pathways to Leadership: Elevating Every Perspective in Radiology (Sponsored by the RSNA Committee on Diversity, Equity and Inclusion)	11/30/26 9:30 AM	11/30/26 10:30 AM
M3-RCP16	Pathways to Leadership: Elevating Every Perspective in Radiology (Sponsored by the RSNA Committee on Diversity, Equity and Inclusion)	11/30/26 9:30 AM	11/30/26 10:30 AM
M3-RCP16	Pathways to Leadership: Elevating Every Perspective in Radiology (Sponsored by the RSNA Committee on Diversity, Equity and Inclusion)	11/30/26 9:30 AM	11/30/26 10:30 AM
M3-RCP16	Pathways to Leadership: Elevating Every Perspective in Radiology (Sponsored by the RSNA Committee on Diversity, Equity and Inclusion)	11/30/26 9:30 AM	11/30/26 10:30 AM
M3-RCP16	Pathways to Leadership: Elevating Every Perspective in Radiology (Sponsored by the RSNA Committee on Diversity, Equity and Inclusion)	11/30/26 9:30 AM	11/30/26 10:30 AM
M3-RCP16	Pathways to Leadership: Elevating Every Perspective in Radiology (Sponsored by the RSNA Committee on Diversity, Equity and Inclusion)	11/30/26 9:30 AM	11/30/26 10:30 AM
M6-RCP03	Sesión del Colegio Interamericano de Radiología (CIR) en Español / Session of the Interamerican College of Radiology (CIR) in Spanish	11/30/26 1:30 PM	11/30/26 2:30 PM
M6-RCP03	Sesión del Colegio Interamericano de Radiología (CIR) en Español / Session of the Interamerican College of Radiology (CIR) in Spanish	11/30/26 1:30 PM	11/30/26 2:30 PM

M6-RCP03	Sesión del Colegio Interamericano de Radiología (CIR) en Español / Session of the Interamerican College of Radiology (CIR) in Spanish	11/30/26 1:30 PM	11/30/26 2:30 PM
M6-RCP03	Sesión del Colegio Interamericano de Radiología (CIR) en Español / Session of the Interamerican College of Radiology (CIR) in Spanish	11/30/26 1:30 PM	11/30/26 2:30 PM
M6-RCP03	Sesión del Colegio Interamericano de Radiología (CIR) en Español / Session of the Interamerican College of Radiology (CIR) in Spanish	11/30/26 1:30 PM	11/30/26 2:30 PM
M7-RCP15	RSNA 2026 Resident Competition (Hosted by the RadioGraphics Team)	11/30/26 3:00 PM	11/30/26 4:00 PM
M7-RCP15	RSNA 2026 Resident Competition (Hosted by the RadioGraphics Team)	11/30/26 3:00 PM	11/30/26 4:00 PM
M7-RCP21	From RVUs to ROI: The Radiologist's Guide to Financial Wellness (Sponsored by the RSNA Professionalism Committee)	11/30/26 3:00 PM	11/30/26 4:00 PM

M7-RCP21	From RVUs to ROI: The Radiologist's Guide to Financial Wellness (Sponsored by the RSNA Professionalism Committee)	11/30/26 3:00 PM	11/30/26 4:00 PM
M7-RCP21	From RVUs to ROI: The Radiologist's Guide to Financial Wellness (Sponsored by the RSNA Professionalism Committee)	11/30/26 3:00 PM	11/30/26 4:00 PM
M7-RCP21	From RVUs to ROI: The Radiologist's Guide to Financial Wellness (Sponsored by the RSNA Professionalism Committee)	11/30/26 3:00 PM	11/30/26 4:00 PM
M7-RCP21	From RVUs to ROI: The Radiologist's Guide to Financial Wellness (Sponsored by the RSNA Professionalism Committee)	11/30/26 3:00 PM	11/30/26 4:00 PM

M7-RCP21	From RVUs to ROI: The Radiologist's Guide to Financial Wellness (Sponsored by the RSNA Professionalism Committee)	11/30/26 3:00 PM	11/30/26 4:00 PM
M7-RCP37	Science Session Society STR	11/30/26 3:00 PM	11/30/26 4:00 PM
M7-RCP39	NIH/RSNA Fundamentals of Radiology Research: Stories of Success and Current Opportunities	11/30/26 3:00 PM	11/30/26 4:00 PM
M7-RCP39	NIH/RSNA Fundamentals of Radiology Research: Stories of Success and Current Opportunities	11/30/26 3:00 PM	11/30/26 4:00 PM
M7-RCP39	NIH/RSNA Fundamentals of Radiology Research: Stories of Success and Current Opportunities	11/30/26 3:00 PM	11/30/26 4:00 PM
M7-RCP39	NIH/RSNA Fundamentals of Radiology Research: Stories of Success and Current Opportunities	11/30/26 3:00 PM	11/30/26 4:00 PM
M7-RCP39	NIH/RSNA Fundamentals of Radiology Research: Stories of Success and Current Opportunities	11/30/26 3:00 PM	11/30/26 4:00 PM

R3-RCP38	Best of ASNR: Scientific Highlights in Neuroradiology	12/3/26 9:30 AM	12/3/26 10:30 AM

R3-RCP38	Best of ASNR: Scientific Highlights in Neuroradiology	12/3/26 9:30 AM	12/3/26 10:30 AM

R3-RCP38	Best of ASNR: Scientific Highlights in Neuroradiology	12/3/26 9:30 AM	12/3/26 10:30 AM

R3-RCP38	Best of ASNR: Scientific Highlights in Neuroradiology	12/3/26 9:30 AM	12/3/26 10:30 AM

R3-RCP38	Best of ASNR: Scientific Highlights in Neuroradiology	12/3/26 9:30 AM	12/3/26 10:30 AM

R3-RCP38	Best of ASNR: Scientific Highlights in Neuroradiology	12/3/26 9:30 AM	12/3/26 10:30 AM

R3-RCP38	Best of ASNR: Scientific Highlights in Neuroradiology	12/3/26 9:30 AM	12/3/26 10:30 AM

R3-RCP38	Best of ASNR: Scientific Highlights in Neuroradiology	12/3/26 9:30 AM	12/3/26 10:30 AM

R4-RCP13	Perspectives on Contract Review and Negotiation: What Lawyers Want Doctors to Know (Sponsored by the RSNA Resident and Fellow Committee)	12/3/26 11:00 AM	12/3/26 12:00 PM

R4-RCP13	Perspectives on Contract Review and Negotiation: What Lawyers Want Doctors to Know (Sponsored by the RSNA Resident and Fellow Committee)	12/3/26 11:00 AM	12/3/26 12:00 PM
S1-RCP22	Beyond Optics: Authentic Leadership, Workforce Well-Being, and the Future of Professionalism in Radiology (Sponsored by the RSNA Professionalism Committee)	11/29/26 9:00 AM	11/29/26 10:00 AM
S1-RCP22	Beyond Optics: Authentic Leadership, Workforce Well-Being, and the Future of Professionalism in Radiology (Sponsored by the RSNA Professionalism Committee)	11/29/26 9:00 AM	11/29/26 10:00 AM
S1-RCP22	Beyond Optics: Authentic Leadership, Workforce Well-Being, and the Future of Professionalism in Radiology (Sponsored by the RSNA Professionalism Committee)	11/29/26 9:00 AM	11/29/26 10:00 AM

S1-RCP22	Beyond Optics: Authentic Leadership, Workforce Well-Being, and the Future of Professionalism in Radiology (Sponsored by the RSNA Professionalism Committee)	11/29/26 9:00 AM	11/29/26 10:00 AM
S1-RCP22	Beyond Optics: Authentic Leadership, Workforce Well-Being, and the Future of Professionalism in Radiology (Sponsored by the RSNA Professionalism Committee)	11/29/26 9:00 AM	11/29/26 10:00 AM
S1-RCP25	Best of Radiology: Advances, Cardiothoracic, and Imaging Cancer: Editor Picks from the RSNA Suite Journals	11/29/26 9:00 AM	11/29/26 10:00 AM
S1-RCP25	Best of Radiology: Advances, Cardiothoracic, and Imaging Cancer: Editor Picks from the RSNA Suite Journals	11/29/26 9:00 AM	11/29/26 10:00 AM
S1-RCP25	Best of Radiology: Advances, Cardiothoracic, and Imaging Cancer: Editor Picks from the RSNA Suite Journals	11/29/26 9:00 AM	11/29/26 10:00 AM
S1-RCP25	Best of Radiology: Advances, Cardiothoracic, and Imaging Cancer: Editor Picks from the RSNA Suite Journals	11/29/26 9:00 AM	11/29/26 10:00 AM

S1-RCP25	Best of Radiology: Advances, Cardiothoracic, and Imaging Cancer: Editor Picks from the RSNA Suite Journals	11/29/26 9:00 AM	11/29/26 10:00 AM
S1-RCP25	Best of Radiology: Advances, Cardiothoracic, and Imaging Cancer: Editor Picks from the RSNA Suite Journals	11/29/26 9:00 AM	11/29/26 10:00 AM
S1-RCP27	Clinical Conundrums in MRI Safety (Sponsored by the RSNA Quality Improvement Committee)	11/29/26 9:00 AM	11/29/26 10:00 AM
S1-RCP27	Clinical Conundrums in MRI Safety (Sponsored by the RSNA Quality Improvement Committee)	11/29/26 9:00 AM	11/29/26 10:00 AM
S1-RCP27	Clinical Conundrums in MRI Safety (Sponsored by the RSNA Quality Improvement Committee)	11/29/26 9:00 AM	11/29/26 10:00 AM
S1-RCP27	Clinical Conundrums in MRI Safety (Sponsored by the RSNA Quality Improvement Committee)	11/29/26 9:00 AM	11/29/26 10:00 AM
S1-RCP27	Clinical Conundrums in MRI Safety (Sponsored by the RSNA Quality Improvement Committee)	11/29/26 9:00 AM	11/29/26 10:00 AM
S1-RCP27	Clinical Conundrums in MRI Safety (Sponsored by the RSNA Quality Improvement Committee)	11/29/26 9:00 AM	11/29/26 10:00 AM
S1-RCP27	Clinical Conundrums in MRI Safety (Sponsored by the RSNA Quality Improvement Committee)	11/29/26 9:00 AM	11/29/26 10:00 AM

S2-RCP23	Screening Patients for Cancer by Multi-cancer Detection (MCD) Tests: Is the Testing Ready for Prime Time? (Sponsored by the RSNA Public Information Committee)	11/29/26 10:30 AM	11/29/26 11:30 AM
S2-RCP23	Screening Patients for Cancer by Multi-cancer Detection (MCD) Tests: Is the Testing Ready for Prime Time? (Sponsored by the RSNA Public Information Committee)	11/29/26 10:30 AM	11/29/26 11:30 AM
S2-RCP23	Screening Patients for Cancer by Multi-cancer Detection (MCD) Tests: Is the Testing Ready for Prime Time? (Sponsored by the RSNA Public Information Committee)	11/29/26 10:30 AM	11/29/26 11:30 AM
S2-RCP23	Screening Patients for Cancer by Multi-cancer Detection (MCD) Tests: Is the Testing Ready for Prime Time? (Sponsored by the RSNA Public Information Committee)	11/29/26 10:30 AM	11/29/26 11:30 AM
S4-RCP10	RSNA Research Education Workshop: From Image to Impact: Translation of Imaging Science into Clinical Evidence (Sponsored by the RSNA Research Development Committee)	11/29/26 1:00 PM	11/29/26 3:30 PM

S4-RCP10	RSNA Research Education Workshop: From Image to Impact: Translation of Imaging Science into Clinical Evidence (Sponsored by the RSNA Research Development Committee)	11/29/26 1:00 PM	11/29/26 3:30 PM
S4-RCP10	RSNA Research Education Workshop: From Image to Impact: Translation of Imaging Science into Clinical Evidence (Sponsored by the RSNA Research Development Committee)	11/29/26 1:00 PM	11/29/26 3:30 PM
S4-RCP10	RSNA Research Education Workshop: From Image to Impact: Translation of Imaging Science into Clinical Evidence (Sponsored by the RSNA Research Development Committee)	11/29/26 1:00 PM	11/29/26 3:30 PM
S4-RCP10	RSNA Research Education Workshop: From Image to Impact: Translation of Imaging Science into Clinical Evidence (Sponsored by the RSNA Research Development Committee)	11/29/26 1:00 PM	11/29/26 3:30 PM
S4-RCP35	Science Session Journal	11/29/26 1:00 PM	11/29/26 2:00 PM
S5-RCP29	The QUIC Roadmap for Implementing Quantitative Ultrasound and MRI for Steatotic Liver Disease in Clinical Practice (Sponsored by the RSNA Quantitative Imaging Committee)	11/29/26 2:30 PM	11/29/26 3:30 PM
S5-RCP29	The QUIC Roadmap for Implementing Quantitative Ultrasound and MRI for Steatotic Liver Disease in Clinical Practice (Sponsored by the RSNA Quantitative Imaging Committee)	11/29/26 2:30 PM	11/29/26 3:30 PM

S5-RCP29	The QUIC Roadmap for Implementing Quantitative Ultrasound and MRI for Steatotic Liver Disease in Clinical Practice (Sponsored by the RSNA Quantitative Imaging Committee)	11/29/26 2:30 PM	11/29/26 3:30 PM
S5-RCP29	The QUIC Roadmap for Implementing Quantitative Ultrasound and MRI for Steatotic Liver Disease in Clinical Practice (Sponsored by the RSNA Quantitative Imaging Committee)	11/29/26 2:30 PM	11/29/26 3:30 PM
S5-RCP29	The QUIC Roadmap for Implementing Quantitative Ultrasound and MRI for Steatotic Liver Disease in Clinical Practice (Sponsored by the RSNA Quantitative Imaging Committee)	11/29/26 2:30 PM	11/29/26 3:30 PM
S5-RCP29	The QUIC Roadmap for Implementing Quantitative Ultrasound and MRI for Steatotic Liver Disease in Clinical Practice (Sponsored by the RSNA Quantitative Imaging Committee)	11/29/26 2:30 PM	11/29/26 3:30 PM
S5-RCP29	The QUIC Roadmap for Implementing Quantitative Ultrasound and MRI for Steatotic Liver Disease in Clinical Practice (Sponsored by the RSNA Quantitative Imaging Committee)	11/29/26 2:30 PM	11/29/26 3:30 PM
S5-RCP29	The QUIC Roadmap for Implementing Quantitative Ultrasound and MRI for Steatotic Liver Disease in Clinical Practice (Sponsored by the RSNA Quantitative Imaging Committee)	11/29/26 2:30 PM	11/29/26 3:30 PM

T1-RCP11	Creating Strategies and Efficiencies in Radiology in the Changing Health Care Landscape (Sponsored by the American Association for Women in Radiology)	12/1/26 8:00 AM	12/1/26 9:00 AM
T1-RCP11	Creating Strategies and Efficiencies in Radiology in the Changing Health Care Landscape (Sponsored by the American Association for Women in Radiology)	12/1/26 8:00 AM	12/1/26 9:00 AM
T1-RCP11	Creating Strategies and Efficiencies in Radiology in the Changing Health Care Landscape (Sponsored by the American Association for Women in Radiology)	12/1/26 8:00 AM	12/1/26 9:00 AM
T1-RCP12	How to Manage the Incidental Finding: Alternative Perspectives Across the Globe (Sponsored by the RSNA Regional Committee for Europe)	12/1/26 8:00 AM	12/1/26 9:00 AM
T1-RCP12	How to Manage the Incidental Finding: Alternative Perspectives Across the Globe (Sponsored by the RSNA Regional Committee for Europe)	12/1/26 8:00 AM	12/1/26 9:00 AM
T1-RCP12	How to Manage the Incidental Finding: Alternative Perspectives Across the Globe (Sponsored by the RSNA Regional Committee for Europe)	12/1/26 8:00 AM	12/1/26 9:00 AM

T1-RCP12	How to Manage the Incidental Finding: Alternative Perspectives Across the Globe (Sponsored by the RSNA Regional Committee for Europe)	12/1/26 8:00 AM	12/1/26 9:00 AM
T1-RCP12	How to Manage the Incidental Finding: Alternative Perspectives Across the Globe (Sponsored by the RSNA Regional Committee for Europe)	12/1/26 8:00 AM	12/1/26 9:00 AM
T1-RCP12	How to Manage the Incidental Finding: Alternative Perspectives Across the Globe (Sponsored by the RSNA Regional Committee for Europe)	12/1/26 8:00 AM	12/1/26 9:00 AM
T1-RCP12	How to Manage the Incidental Finding: Alternative Perspectives Across the Globe (Sponsored by the RSNA Regional Committee for Europe)	12/1/26 8:00 AM	12/1/26 9:00 AM
T1-RCP12	How to Manage the Incidental Finding: Alternative Perspectives Across the Globe (Sponsored by the RSNA Regional Committee for Europe)	12/1/26 8:00 AM	12/1/26 9:00 AM
T1-RCP12	How to Manage the Incidental Finding: Alternative Perspectives Across the Globe (Sponsored by the RSNA Regional Committee for Europe)	12/1/26 8:00 AM	12/1/26 9:00 AM
T1-RCP12	How to Manage the Incidental Finding: Alternative Perspectives Across the Globe (Sponsored by the RSNA Regional Committee for Europe)	12/1/26 8:00 AM	12/1/26 9:00 AM

T1-RCP33	The Decision Room: Multilevel Perspectives on New Technology Assessment from Champions to System Executives (Sponsored by the RSNA Research Development Committee)	12/1/26 8:00 AM	12/1/26 9:00 AM
T1-RCP33	The Decision Room: Multilevel Perspectives on New Technology Assessment from Champions to System Executives (Sponsored by the RSNA Research Development Committee)	12/1/26 8:00 AM	12/1/26 9:00 AM
T1-RCP33	The Decision Room: Multilevel Perspectives on New Technology Assessment from Champions to System Executives (Sponsored by the RSNA Research Development Committee)	12/1/26 8:00 AM	12/1/26 9:00 AM
T1-RCP33	The Decision Room: Multilevel Perspectives on New Technology Assessment from Champions to System Executives (Sponsored by the RSNA Research Development Committee)	12/1/26 8:00 AM	12/1/26 9:00 AM
T1-RCP33	The Decision Room: Multilevel Perspectives on New Technology Assessment from Champions to System Executives (Sponsored by the RSNA Research Development Committee)	12/1/26 8:00 AM	12/1/26 9:00 AM
T3-RCP02	China Presents: Development of Chinese Radiology - Today and Tomorrow	12/1/26 9:30 AM	12/1/26 10:30 AM
T3-RCP02	China Presents: Development of Chinese Radiology - Today and Tomorrow	12/1/26 9:30 AM	12/1/26 10:30 AM
T3-RCP02	China Presents: Development of Chinese Radiology - Today and Tomorrow	12/1/26 9:30 AM	12/1/26 10:30 AM

T3-RCP02	China Presents: Development of Chinese Radiology - Today and Tomorrow	12/1/26 9:30 AM	12/1/26 10:30 AM
T3-RCP02	China Presents: Development of Chinese Radiology - Today and Tomorrow	12/1/26 9:30 AM	12/1/26 10:30 AM
T3-RCP02	China Presents: Development of Chinese Radiology - Today and Tomorrow	12/1/26 9:30 AM	12/1/26 10:30 AM
T3-RCP18	Operationalizing Sustainable Radiology: A Practical How I Do It Session (Sponsored by the RSNA Environmental Sustainability Committee)	12/1/26 9:30 AM	12/1/26 10:30 AM
T3-RCP18	Operationalizing Sustainable Radiology: A Practical How I Do It Session (Sponsored by the RSNA Environmental Sustainability Committee)	12/1/26 9:30 AM	12/1/26 10:30 AM
T3-RCP18	Operationalizing Sustainable Radiology: A Practical How I Do It Session (Sponsored by the RSNA Environmental Sustainability Committee)	12/1/26 9:30 AM	12/1/26 10:30 AM

T3-RCP18	Operationalizing Sustainable Radiology: A Practical How I Do It Session (Sponsored by the RSNA Environmental Sustainability Committee)	12/1/26 9:30 AM	12/1/26 10:30 AM
T3-RCP18	Operationalizing Sustainable Radiology: A Practical How I Do It Session (Sponsored by the RSNA Environmental Sustainability Committee)	12/1/26 9:30 AM	12/1/26 10:30 AM
T3-RCP18	Operationalizing Sustainable Radiology: A Practical How I Do It Session (Sponsored by the RSNA Environmental Sustainability Committee)	12/1/26 9:30 AM	12/1/26 10:30 AM
T3-RCP40	What’s New in 2026: Discussing FDA’s Approach to Regulating AI-Enabled Devices in Radiology —Challenges, Innovations, and Future Directions	12/1/26 9:30 AM	12/1/26 10:30 AM

T3-RCP40	What’s New in 2026: Discussing FDA’s Approach to Regulating AI-Enabled Devices in Radiology —Challenges, Innovations, and Future Directions	12/1/26 9:30 AM	12/1/26 10:30 AM
T3-RCP40	What’s New in 2026: Discussing FDA’s Approach to Regulating AI-Enabled Devices in Radiology —Challenges, Innovations, and Future Directions	12/1/26 9:30 AM	12/1/26 10:30 AM
T3-RCP40	What’s New in 2026: Discussing FDA’s Approach to Regulating AI-Enabled Devices in Radiology —Challenges, Innovations, and Future Directions	12/1/26 9:30 AM	12/1/26 10:30 AM
T6-RCP30	Making AI Models and Datasets More Transparent: RSNA's ATLAS Hub (Sponsored by the RSNA Reporting Informatics Committee)	12/1/26 1:30 PM	12/1/26 2:30 PM
T6-RCP30	Making AI Models and Datasets More Transparent: RSNA's ATLAS Hub (Sponsored by the RSNA Reporting Informatics Committee)	12/1/26 1:30 PM	12/1/26 2:30 PM
T6-RCP30	Making AI Models and Datasets More Transparent: RSNA's ATLAS Hub (Sponsored by the RSNA Reporting Informatics Committee)	12/1/26 1:30 PM	12/1/26 2:30 PM

T6-RCP30	Making AI Models and Datasets More Transparent: RSNA's ATLAS Hub (Sponsored by the RSNA Reporting Informatics Committee)	12/1/26 1:30 PM	12/1/26 2:30 PM
T6-RCP30	Making AI Models and Datasets More Transparent: RSNA's ATLAS Hub (Sponsored by the RSNA Reporting Informatics Committee)	12/1/26 1:30 PM	12/1/26 2:30 PM
T6-RCP34	State-of-the-Art: Perspectives from China	12/1/26 1:30 PM	12/1/26 2:30 PM
T6-RCP34	State-of-the-Art: Perspectives from China	12/1/26 1:30 PM	12/1/26 2:30 PM
T6-RCP34	State-of-the-Art: Perspectives from China	12/1/26 1:30 PM	12/1/26 2:30 PM
T6-RCP34	State-of-the-Art: Perspectives from China	12/1/26 1:30 PM	12/1/26 2:30 PM
T6-RCP34	State-of-the-Art: Perspectives from China	12/1/26 1:30 PM	12/1/26 2:30 PM
T6-RCP34	State-of-the-Art: Perspectives from China	12/1/26 1:30 PM	12/1/26 2:30 PM
T6-RCP34	State-of-the-Art: Perspectives from China	12/1/26 1:30 PM	12/1/26 2:30 PM
T6-RCP34	State-of-the-Art: Perspectives from China	12/1/26 1:30 PM	12/1/26 2:30 PM
T6-RCP34	State-of-the-Art: Perspectives from China	12/1/26 1:30 PM	12/1/26 2:30 PM
T7-RCP01	Nigeria Presents: Swimming Against the Tide in the Ocean of Imaging: Our Past, Present and Future	12/1/26 3:00 PM	12/1/26 4:00 PM

T7-RCP01	Nigeria Presents: Swimming Against the Tide in the Ocean of Imaging: Our Past, Present and Future	12/1/26 3:00 PM	12/1/26 4:00 PM
T7-RCP01	Nigeria Presents: Swimming Against the Tide in the Ocean of Imaging: Our Past, Present and Future	12/1/26 3:00 PM	12/1/26 4:00 PM
T7-RCP01	Nigeria Presents: Swimming Against the Tide in the Ocean of Imaging: Our Past, Present and Future	12/1/26 3:00 PM	12/1/26 4:00 PM

T7-RCP01	Nigeria Presents: Swimming Against the Tide in the Ocean of Imaging: Our Past, Present and Future	12/1/26 3:00 PM	12/1/26 4:00 PM
T7-RCP01	Nigeria Presents: Swimming Against the Tide in the Ocean of Imaging: Our Past, Present and Future	12/1/26 3:00 PM	12/1/26 4:00 PM
T7-RCP01	Nigeria Presents: Swimming Against the Tide in the Ocean of Imaging: Our Past, Present and Future	12/1/26 3:00 PM	12/1/26 4:00 PM

T7-RCP24	RSNA Journals Reviewer Workshop	12/1/26 3:00 PM	12/1/26 4:00 PM
T7-RCP24	RSNA Journals Reviewer Workshop	12/1/26 3:00 PM	12/1/26 4:00 PM
T7-RCP24	RSNA Journals Reviewer Workshop	12/1/26 3:00 PM	12/1/26 4:00 PM
T7-RCP24	RSNA Journals Reviewer Workshop	12/1/26 3:00 PM	12/1/26 4:00 PM
T7-RCP24	RSNA Journals Reviewer Workshop	12/1/26 3:00 PM	12/1/26 4:00 PM
T7-RCP24	RSNA Journals Reviewer Workshop	12/1/26 3:00 PM	12/1/26 4:00 PM
T7-RCP24	RSNA Journals Reviewer Workshop	12/1/26 3:00 PM	12/1/26 4:00 PM
W1-RCP04	RSNA/ESR Symposium: Lung Cancer Screening: Advances in the United States and Europe: The State of Lung Cancer Screening in Europe and the United States	12/2/26 8:00 AM	12/2/26 9:00 AM
W1-RCP04	RSNA/ESR Symposium: Lung Cancer Screening: Advances in the United States and Europe: The State of Lung Cancer Screening in Europe and the United States	12/2/26 8:00 AM	12/2/26 9:00 AM

W1-RCP04	RSNA/ESR Symposium: Lung Cancer Screening: Advances in the United States and Europe: The State of Lung Cancer Screening in Europe and the United States	12/2/26 8:00 AM	12/2/26 9:00 AM
W1-RCP04	RSNA/ESR Symposium: Lung Cancer Screening: Advances in the United States and Europe: The State of Lung Cancer Screening in Europe and the United States	12/2/26 8:00 AM	12/2/26 9:00 AM
W1-RCP04	RSNA/ESR Symposium: Lung Cancer Screening: Advances in the United States and Europe: The State of Lung Cancer Screening in Europe and the United States	12/2/26 8:00 AM	12/2/26 9:00 AM
W1-RCP26	Deep Dive AI for QI - Human Factors and Workflow Design (Sponsored by the RSNA Quality Improvement Committee)	12/2/26 8:00 AM	12/2/26 9:00 AM
W1-RCP26	Deep Dive AI for QI - Human Factors and Workflow Design (Sponsored by the RSNA Quality Improvement Committee)	12/2/26 8:00 AM	12/2/26 9:00 AM

W1-RCP26	Deep Dive AI for QI - Human Factors and Workflow Design (Sponsored by the RSNA Quality Improvement Committee)	12/2/26 8:00 AM	12/2/26 9:00 AM
W1-RCP26	Deep Dive AI for QI - Human Factors and Workflow Design (Sponsored by the RSNA Quality Improvement Committee)	12/2/26 8:00 AM	12/2/26 9:00 AM
W1-RCP26	Deep Dive AI for QI - Human Factors and Workflow Design (Sponsored by the RSNA Quality Improvement Committee)	12/2/26 8:00 AM	12/2/26 9:00 AM
W1-RCP26	Deep Dive AI for QI - Human Factors and Workflow Design (Sponsored by the RSNA Quality Improvement Committee)	12/2/26 8:00 AM	12/2/26 9:00 AM

W1-RCP28	The QUIC Roadmap for Quantitative Imaging of Coronary Plaque: How and Why Radiologists Should Do It? (Sponsored by the RSNA Quantitative Imaging Committee)	12/2/26 8:00 AM	12/2/26 9:00 AM
W1-RCP28	The QUIC Roadmap for Quantitative Imaging of Coronary Plaque: How and Why Radiologists Should Do It? (Sponsored by the RSNA Quantitative Imaging Committee)	12/2/26 8:00 AM	12/2/26 9:00 AM
W1-RCP28	The QUIC Roadmap for Quantitative Imaging of Coronary Plaque: How and Why Radiologists Should Do It? (Sponsored by the RSNA Quantitative Imaging Committee)	12/2/26 8:00 AM	12/2/26 9:00 AM
W1-RCP28	The QUIC Roadmap for Quantitative Imaging of Coronary Plaque: How and Why Radiologists Should Do It? (Sponsored by the RSNA Quantitative Imaging Committee)	12/2/26 8:00 AM	12/2/26 9:00 AM
W1-RCP28	The QUIC Roadmap for Quantitative Imaging of Coronary Plaque: How and Why Radiologists Should Do It? (Sponsored by the RSNA Quantitative Imaging Committee)	12/2/26 8:00 AM	12/2/26 9:00 AM
W1-RCP28	The QUIC Roadmap for Quantitative Imaging of Coronary Plaque: How and Why Radiologists Should Do It? (Sponsored by the RSNA Quantitative Imaging Committee)	12/2/26 8:00 AM	12/2/26 9:00 AM

W3-RCP05	RSNA/ESR Symposium: Lung Cancer Screening: Advances in the United States and Europe: Managing Screen-Detected Incidental Nodules	12/2/26 9:30 AM	12/2/26 10:30 AM
W3-RCP05	RSNA/ESR Symposium: Lung Cancer Screening: Advances in the United States and Europe: Managing Screen-Detected Incidental Nodules	12/2/26 9:30 AM	12/2/26 10:30 AM
W3-RCP05	RSNA/ESR Symposium: Lung Cancer Screening: Advances in the United States and Europe: Managing Screen-Detected Incidental Nodules	12/2/26 9:30 AM	12/2/26 10:30 AM
W3-RCP05	RSNA/ESR Symposium: Lung Cancer Screening: Advances in the United States and Europe: Managing Screen-Detected Incidental Nodules	12/2/26 9:30 AM	12/2/26 10:30 AM
W3-RCP05	RSNA/ESR Symposium: Lung Cancer Screening: Advances in the United States and Europe: Managing Screen-Detected Incidental Nodules	12/2/26 9:30 AM	12/2/26 10:30 AM
W3-RCP05	RSNA/ESR Symposium: Lung Cancer Screening: Advances in the United States and Europe: Managing Screen-Detected Incidental Nodules	12/2/26 9:30 AM	12/2/26 10:30 AM

W3-RCP05	RSNA/ESR Symposium: Lung Cancer Screening: Advances in the United States and Europe: Managing Screen-Detected Incidental Nodules	12/2/26 9:30 AM	12/2/26 10:30 AM
W3-RCP36	Science Session Journal	12/2/26 9:30 AM	12/2/26 10:30 AM
W6-RCP06	RSNA/ESR Symposium: Lung Cancer Screening: Advances in the United States and Europe: Risk and QA	12/2/26 1:30 PM	12/2/26 2:30 PM
W6-RCP06	RSNA/ESR Symposium: Lung Cancer Screening: Advances in the United States and Europe: Risk and QA	12/2/26 1:30 PM	12/2/26 2:30 PM
W6-RCP06	RSNA/ESR Symposium: Lung Cancer Screening: Advances in the United States and Europe: Risk and QA	12/2/26 1:30 PM	12/2/26 2:30 PM
W6-RCP06	RSNA/ESR Symposium: Lung Cancer Screening: Advances in the United States and Europe: Risk and QA	12/2/26 1:30 PM	12/2/26 2:30 PM
W6-RCP06	RSNA/ESR Symposium: Lung Cancer Screening: Advances in the United States and Europe: Risk and QA	12/2/26 1:30 PM	12/2/26 2:30 PM

W6-RCP06	RSNA/ESR Symposium: Lung Cancer Screening: Advances in the United States and Europe: Risk and QA	12/2/26 1:30 PM	12/2/26 2:30 PM
W6-RCP09	AOSR-RSNA 2026 Joint Session: Hepatocellular Carcinoma: East Meets West	12/2/26 1:30 PM	12/2/26 2:30 PM
W6-RCP09	AOSR-RSNA 2026 Joint Session: Hepatocellular Carcinoma: East Meets West	12/2/26 1:30 PM	12/2/26 2:30 PM
W6-RCP09	AOSR-RSNA 2026 Joint Session: Hepatocellular Carcinoma: East Meets West	12/2/26 1:30 PM	12/2/26 2:30 PM
W6-RCP09	AOSR-RSNA 2026 Joint Session: Hepatocellular Carcinoma: East Meets West	12/2/26 1:30 PM	12/2/26 2:30 PM

W6-RCP09	AOSR-RSNA 2026 Joint Session: Hepatocellular Carcinoma: East Meets West	12/2/26 1:30 PM	12/2/26 2:30 PM
W6-RCP09	AOSR-RSNA 2026 Joint Session: Hepatocellular Carcinoma: East Meets West	12/2/26 1:30 PM	12/2/26 2:30 PM
W6-RCP31	From Model Building to Benchmarks: Building Robust, Reproducible Evaluation Frameworks for AI in Medical Imaging (Sponsored by the RSNA Reporting Informatics Committee)	12/2/26 1:30 PM	12/2/26 2:30 PM
W6-RCP31	From Model Building to Benchmarks: Building Robust, Reproducible Evaluation Frameworks for AI in Medical Imaging (Sponsored by the RSNA Reporting Informatics Committee)	12/2/26 1:30 PM	12/2/26 2:30 PM
W6-RCP31	From Model Building to Benchmarks: Building Robust, Reproducible Evaluation Frameworks for AI in Medical Imaging (Sponsored by the RSNA Reporting Informatics Committee)	12/2/26 1:30 PM	12/2/26 2:30 PM
W6-RCP31	From Model Building to Benchmarks: Building Robust, Reproducible Evaluation Frameworks for AI in Medical Imaging (Sponsored by the RSNA Reporting Informatics Committee)	12/2/26 1:30 PM	12/2/26 2:30 PM

W6-RCP31	From Model Building to Benchmarks: Building Robust, Reproducible Evaluation Frameworks for AI in Medical Imaging (Sponsored by the RSNA Reporting Informatics Committee)	12/2/26 1:30 PM	12/2/26 2:30 PM
W7-RCP07	RSNA/ESR Symposium: Lung Cancer Screening: Advances in the United States and Europe: Rising Tide	12/2/26 3:00 PM	12/2/26 4:00 PM
W7-RCP07	RSNA/ESR Symposium: Lung Cancer Screening: Advances in the United States and Europe: Rising Tide	12/2/26 3:00 PM	12/2/26 4:00 PM
W7-RCP07	RSNA/ESR Symposium: Lung Cancer Screening: Advances in the United States and Europe: Rising Tide	12/2/26 3:00 PM	12/2/26 4:00 PM
W7-RCP07	RSNA/ESR Symposium: Lung Cancer Screening: Advances in the United States and Europe: Rising Tide	12/2/26 3:00 PM	12/2/26 4:00 PM
W7-RCP07	RSNA/ESR Symposium: Lung Cancer Screening: Advances in the United States and Europe: Rising Tide	12/2/26 3:00 PM	12/2/26 4:00 PM

W8-RCP14	Mastering Mock Orals: Strategies and Exemplar Case-Taking Skills (Sponsored by the RSNA Resident and Fellow Committee)	12/2/26 4:30 PM	12/2/26 5:30 PM
W8-RCP14	Mastering Mock Orals: Strategies and Exemplar Case-Taking Skills (Sponsored by the RSNA Resident and Fellow Committee)	12/2/26 4:30 PM	12/2/26 5:30 PM
W8-RCP14	Mastering Mock Orals: Strategies and Exemplar Case-Taking Skills (Sponsored by the RSNA Resident and Fellow Committee)	12/2/26 4:30 PM	12/2/26 5:30 PM
W8-RCP14	Mastering Mock Orals: Strategies and Exemplar Case-Taking Skills (Sponsored by the RSNA Resident and Fellow Committee)	12/2/26 4:30 PM	12/2/26 5:30 PM

W8-RCP14	Mastering Mock Orals: Strategies and Exemplar Case-Taking Skills (Sponsored by the RSNA Resident and Fellow Committee)	12/2/26 4:30 PM	12/2/26 5:30 PM

W8-RCP14	Mastering Mock Orals: Strategies and Exemplar Case-Taking Skills (Sponsored by the RSNA Resident and Fellow Committee)	12/2/26 4:30 PM	12/2/26 5:30 PM
W8-RCP17	Empowering Workforce Inclusivity: Advancing Women in Leadership and Interventional Practice (Sponsored by the RSNA Committee on Diversity, Equity and Inclusion)	12/2/26 4:30 PM	12/2/26 5:30 PM
W8-RCP17	Empowering Workforce Inclusivity: Advancing Women in Leadership and Interventional Practice (Sponsored by the RSNA Committee on Diversity, Equity and Inclusion)	12/2/26 4:30 PM	12/2/26 5:30 PM
W8-RCP17	Empowering Workforce Inclusivity: Advancing Women in Leadership and Interventional Practice (Sponsored by the RSNA Committee on Diversity, Equity and Inclusion)	12/2/26 4:30 PM	12/2/26 5:30 PM

W8-RCP17	Empowering Workforce Inclusivity: Advancing Women in Leadership and Interventional Practice (Sponsored by the RSNA Committee on Diversity, Equity and Inclusion)	12/2/26 4:30 PM	12/2/26 5:30 PM
W8-RCP17	Empowering Workforce Inclusivity: Advancing Women in Leadership and Interventional Practice (Sponsored by the RSNA Committee on Diversity, Equity and Inclusion)	12/2/26 4:30 PM	12/2/26 5:30 PM
W8-RCP17	Empowering Workforce Inclusivity: Advancing Women in Leadership and Interventional Practice (Sponsored by the RSNA Committee on Diversity, Equity and Inclusion)	12/2/26 4:30 PM	12/2/26 5:30 PM
W8-RCP20	Saying the Hard Things Communication in Radiology (Sponsored by the RSNA Professionalism Committee)	12/2/26 4:30 PM	12/2/26 5:30 PM
W8-RCP20	Saying the Hard Things Communication in Radiology (Sponsored by the RSNA Professionalism Committee)	12/2/26 4:30 PM	12/2/26 5:30 PM
W8-RCP20	Saying the Hard Things Communication in Radiology (Sponsored by the RSNA Professionalism Committee)	12/2/26 4:30 PM	12/2/26 5:30 PM
W8-RCP20	Saying the Hard Things Communication in Radiology (Sponsored by the RSNA Professionalism Committee)	12/2/26 4:30 PM	12/2/26 5:30 PM

W8-RCP20	Saying the Hard Things Communication in Radiology (Sponsored by the RSNA Professionalism Committee)	12/2/26 4:30 PM	12/2/26 5:30 PM
W8-RCP20	Saying the Hard Things Communication in Radiology (Sponsored by the RSNA Professionalism Committee)	12/2/26 4:30 PM	12/2/26 5:30 PM
W8-RCP32	Clinical Radiology Research: A Win-Win Partnership Between Community and Academic Radiologists (Sponsored by the RSNA Research Development Committee)	12/2/26 4:30 PM	12/2/26 5:30 PM
W8-RCP32	Clinical Radiology Research: A Win-Win Partnership Between Community and Academic Radiologists (Sponsored by the RSNA Research Development Committee)	12/2/26 4:30 PM	12/2/26 5:30 PM

W8-RCP32	Clinical Radiology Research: A Win-Win Partnership Between Community and Academic Radiologists (Sponsored by the RSNA Research Development Committee)	12/2/26 4:30 PM	12/2/26 5:30 PM
W8-RCP32	Clinical Radiology Research: A Win-Win Partnership Between Community and Academic Radiologists (Sponsored by the RSNA Research Development Committee)	12/2/26 4:30 PM	12/2/26 5:30 PM
W8-RCP32	Clinical Radiology Research: A Win-Win Partnership Between Community and Academic Radiologists (Sponsored by the RSNA Research Development Committee)	12/2/26 4:30 PM	12/2/26 5:30 PM

M1-CER11	Pathways of Destruction: A Radiologist's Primer on Penetrating Trauma	11/30/26 8:00 AM	11/30/26 9:00 AM
M1-CER11	Pathways of Destruction: A Radiologist's Primer on Penetrating Trauma	11/30/26 8:00 AM	11/30/26 9:00 AM
M1-CER11	Pathways of Destruction: A Radiologist's Primer on Penetrating Trauma	11/30/26 8:00 AM	11/30/26 9:00 AM
M1-CER11	Pathways of Destruction: A Radiologist's Primer on Penetrating Trauma	11/30/26 8:00 AM	11/30/26 9:00 AM
M1-CER11	Pathways of Destruction: A Radiologist's Primer on Penetrating Trauma	11/30/26 8:00 AM	11/30/26 9:00 AM
M3-CER03	Emergency Radiology Jeopardy	11/30/26 9:30 AM	11/30/26 10:30 AM

M3-CER03	Emergency Radiology Jeopardy	11/30/26 9:30 AM	11/30/26 10:30 AM
M3-CER03	Emergency Radiology Jeopardy	11/30/26 9:30 AM	11/30/26 10:30 AM
M3-CER03	Emergency Radiology Jeopardy	11/30/26 9:30 AM	11/30/26 10:30 AM
M3-CER03	Emergency Radiology Jeopardy	11/30/26 9:30 AM	11/30/26 10:30 AM

M3-CER03	Emergency Radiology Jeopardy	11/30/26 9:30 AM	11/30/26 10:30 AM
M3-CER03	Emergency Radiology Jeopardy	11/30/26 9:30 AM	11/30/26 10:30 AM
M3-CER03	Emergency Radiology Jeopardy	11/30/26 9:30 AM	11/30/26 10:30 AM
M3-CER03	Emergency Radiology Jeopardy	11/30/26 9:30 AM	11/30/26 10:30 AM
M6-CER12	Traumatic Spinal Injury: Fractures, Instability and Cord Compromise	11/30/26 1:30 PM	11/30/26 2:30 PM

M6-CER12	Traumatic Spinal Injury: Fractures, Instability and Cord Compromise	11/30/26 1:30 PM	11/30/26 2:30 PM
M6-CER12	Traumatic Spinal Injury: Fractures, Instability and Cord Compromise	11/30/26 1:30 PM	11/30/26 2:30 PM
M6-CER12	Traumatic Spinal Injury: Fractures, Instability and Cord Compromise	11/30/26 1:30 PM	11/30/26 2:30 PM
M6-CER12	Traumatic Spinal Injury: Fractures, Instability and Cord Compromise	11/30/26 1:30 PM	11/30/26 2:30 PM
M7-CER14	Beyond Gray Scale: Multi-Energy CT in the ER	11/30/26 3:00 PM	11/30/26 4:00 PM
M7-CER14	Beyond Gray Scale: Multi-Energy CT in the ER	11/30/26 3:00 PM	11/30/26 4:00 PM

M7-CER14	Beyond Gray Scale: Multi-Energy CT in the ER	11/30/26 3:00 PM	11/30/26 4:00 PM
M7-CER14	Beyond Gray Scale: Multi-Energy CT in the ER	11/30/26 3:00 PM	11/30/26 4:00 PM
M7-CER14	Beyond Gray Scale: Multi-Energy CT in the ER	11/30/26 3:00 PM	11/30/26 4:00 PM
M7-CER14	Beyond Gray Scale: Multi-Energy CT in the ER	11/30/26 3:00 PM	11/30/26 4:00 PM

R1-CER06	Gastrointestinal Emergencies: What's Causing My Belly Pain?	12/3/26 8:00 AM	12/3/26 9:00 AM
R1-CER06	Gastrointestinal Emergencies: What's Causing My Belly Pain?	12/3/26 8:00 AM	12/3/26 9:00 AM
R1-CER06	Gastrointestinal Emergencies: What's Causing My Belly Pain?	12/3/26 8:00 AM	12/3/26 9:00 AM
R1-CER06	Gastrointestinal Emergencies: What's Causing My Belly Pain?	12/3/26 8:00 AM	12/3/26 9:00 AM

R1-CER06	Gastrointestinal Emergencies: What's Causing My Belly Pain?	12/3/26 8:00 AM	12/3/26 9:00 AM

R1-CER06	Gastrointestinal Emergencies: What's Causing My Belly Pain?	12/3/26 8:00 AM	12/3/26 9:00 AM
R4-CER01	Navigating GU and GYN Emergencies: Multi-Modality Imaging and Patient Management	12/3/26 11:00 AM	12/3/26 12:00 PM
R4-CER01	Navigating GU and GYN Emergencies: Multi-Modality Imaging and Patient Management	12/3/26 11:00 AM	12/3/26 12:00 PM
R4-CER01	Navigating GU and GYN Emergencies: Multi-Modality Imaging and Patient Management	12/3/26 11:00 AM	12/3/26 12:00 PM
R4-CER01	Navigating GU and GYN Emergencies: Multi-Modality Imaging and Patient Management	12/3/26 11:00 AM	12/3/26 12:00 PM
R4-CER01	Navigating GU and GYN Emergencies: Multi-Modality Imaging and Patient Management	12/3/26 11:00 AM	12/3/26 12:00 PM

R7-CER17	Blunt Thoracic Trauma: Basic Concepts and Challenges for Emergency Radiologists	12/3/26 3:00 PM	12/3/26 4:00 PM
R7-CER17	Blunt Thoracic Trauma: Basic Concepts and Challenges for Emergency Radiologists	12/3/26 3:00 PM	12/3/26 4:00 PM
R7-CER17	Blunt Thoracic Trauma: Basic Concepts and Challenges for Emergency Radiologists	12/3/26 3:00 PM	12/3/26 4:00 PM
R7-CER17	Blunt Thoracic Trauma: Basic Concepts and Challenges for Emergency Radiologists	12/3/26 3:00 PM	12/3/26 4:00 PM
R7-CER17	Blunt Thoracic Trauma: Basic Concepts and Challenges for Emergency Radiologists	12/3/26 3:00 PM	12/3/26 4:00 PM
R7-CER17	Blunt Thoracic Trauma: Basic Concepts and Challenges for Emergency Radiologists	12/3/26 3:00 PM	12/3/26 4:00 PM

S1-CER18	Acute Nontraumatic Thoracic Emergencies: Imaging Dilemmas	11/29/26 9:00 AM	11/29/26 10:00 AM
S1-CER18	Acute Nontraumatic Thoracic Emergencies: Imaging Dilemmas	11/29/26 9:00 AM	11/29/26 10:00 AM
S1-CER18	Acute Nontraumatic Thoracic Emergencies: Imaging Dilemmas	11/29/26 9:00 AM	11/29/26 10:00 AM
S1-CER18	Acute Nontraumatic Thoracic Emergencies: Imaging Dilemmas	11/29/26 9:00 AM	11/29/26 10:00 AM
S1-CER18	Acute Nontraumatic Thoracic Emergencies: Imaging Dilemmas	11/29/26 9:00 AM	11/29/26 10:00 AM
S1-CER18	Acute Nontraumatic Thoracic Emergencies: Imaging Dilemmas	11/29/26 9:00 AM	11/29/26 10:00 AM
S2-CER05	AI in Emergency Radiology: What Works, What Fails and Why	11/29/26 10:30 AM	11/29/26 11:30 AM
S2-CER05	AI in Emergency Radiology: What Works, What Fails and Why	11/29/26 10:30 AM	11/29/26 11:30 AM
S2-CER05	AI in Emergency Radiology: What Works, What Fails and Why	11/29/26 10:30 AM	11/29/26 11:30 AM

S2-CER05	AI in Emergency Radiology: What Works, What Fails and Why	11/29/26 10:30 AM	11/29/26 11:30 AM
S2-CER05	AI in Emergency Radiology: What Works, What Fails and Why	11/29/26 10:30 AM	11/29/26 11:30 AM
S4-CER08	Musculoskeletal Trauma in the Emergency Department: High Yield Imaging Patterns and Pitfalls	11/29/26 1:00 PM	11/29/26 2:00 PM
S4-CER08	Musculoskeletal Trauma in the Emergency Department: High Yield Imaging Patterns and Pitfalls	11/29/26 1:00 PM	11/29/26 2:00 PM
S4-CER08	Musculoskeletal Trauma in the Emergency Department: High Yield Imaging Patterns and Pitfalls	11/29/26 1:00 PM	11/29/26 2:00 PM
S4-CER08	Musculoskeletal Trauma in the Emergency Department: High Yield Imaging Patterns and Pitfalls	11/29/26 1:00 PM	11/29/26 2:00 PM
S4-CER08	Musculoskeletal Trauma in the Emergency Department: High Yield Imaging Patterns and Pitfalls	11/29/26 1:00 PM	11/29/26 2:00 PM

S5-CER09	From Hematuria to Hemorrhage: Understanding Genitourinary and Pelvic Trauma	11/29/26 2:30 PM	11/29/26 3:30 PM
S5-CER09	From Hematuria to Hemorrhage: Understanding Genitourinary and Pelvic Trauma	11/29/26 2:30 PM	11/29/26 3:30 PM
S5-CER09	From Hematuria to Hemorrhage: Understanding Genitourinary and Pelvic Trauma	11/29/26 2:30 PM	11/29/26 3:30 PM
S5-CER09	From Hematuria to Hemorrhage: Understanding Genitourinary and Pelvic Trauma	11/29/26 2:30 PM	11/29/26 3:30 PM
S5-CER09	From Hematuria to Hemorrhage: Understanding Genitourinary and Pelvic Trauma	11/29/26 2:30 PM	11/29/26 3:30 PM
T1-CER15	Emergency Radiology Beyond Image Interpretation: Medicolegal Expertise, Role Sustainability, and Quality Improvement	12/1/26 8:00 AM	12/1/26 9:00 AM

T1-CER15	Emergency Radiology Beyond Image Interpretation: Medicolegal Expertise, Role Sustainability, and Quality Improvement	12/1/26 8:00 AM	12/1/26 9:00 AM
T1-CER15	Emergency Radiology Beyond Image Interpretation: Medicolegal Expertise, Role Sustainability, and Quality Improvement	12/1/26 8:00 AM	12/1/26 9:00 AM
T1-CER15	Emergency Radiology Beyond Image Interpretation: Medicolegal Expertise, Role Sustainability, and Quality Improvement	12/1/26 8:00 AM	12/1/26 9:00 AM
T1-CER15	Emergency Radiology Beyond Image Interpretation: Medicolegal Expertise, Role Sustainability, and Quality Improvement	12/1/26 8:00 AM	12/1/26 9:00 AM

T6-CER13	Foot and Ankle Trauma: What the Emergency Radiologist Must Not Miss	12/1/26 1:30 PM	12/1/26 2:30 PM
T6-CER13	Foot and Ankle Trauma: What the Emergency Radiologist Must Not Miss	12/1/26 1:30 PM	12/1/26 2:30 PM
T6-CER13	Foot and Ankle Trauma: What the Emergency Radiologist Must Not Miss	12/1/26 1:30 PM	12/1/26 2:30 PM
T6-CER13	Foot and Ankle Trauma: What the Emergency Radiologist Must Not Miss	12/1/26 1:30 PM	12/1/26 2:30 PM
T6-CER13	Foot and Ankle Trauma: What the Emergency Radiologist Must Not Miss	12/1/26 1:30 PM	12/1/26 2:30 PM

T6-CER13	Foot and Ankle Trauma: What the Emergency Radiologist Must Not Miss	12/1/26 1:30 PM	12/1/26 2:30 PM
T8-CER10	Pediatric Trauma: Insights Through Case-Based Learning	12/1/26 4:30 PM	12/1/26 5:30 PM
T8-CER10	Pediatric Trauma: Insights Through Case-Based Learning	12/1/26 4:30 PM	12/1/26 5:30 PM
T8-CER10	Pediatric Trauma: Insights Through Case-Based Learning	12/1/26 4:30 PM	12/1/26 5:30 PM
T8-CER10	Pediatric Trauma: Insights Through Case-Based Learning	12/1/26 4:30 PM	12/1/26 5:30 PM
T8-CER10	Pediatric Trauma: Insights Through Case-Based Learning	12/1/26 4:30 PM	12/1/26 5:30 PM
W1-CER04	Crucial Cog in Wheel - Radiology's Role in Disaster Preparedness	12/2/26 8:00 AM	12/2/26 9:00 AM

W1-CER04	Crucial Cog in Wheel - Radiology's Role in Disaster Preparedness	12/2/26 8:00 AM	12/2/26 9:00 AM
W1-CER04	Crucial Cog in Wheel - Radiology's Role in Disaster Preparedness	12/2/26 8:00 AM	12/2/26 9:00 AM
W1-CER04	Crucial Cog in Wheel - Radiology's Role in Disaster Preparedness	12/2/26 8:00 AM	12/2/26 9:00 AM
W1-CER04	Crucial Cog in Wheel - Radiology's Role in Disaster Preparedness	12/2/26 8:00 AM	12/2/26 9:00 AM
W6-CER02	Challenging Cases in Emergency Radiology: Expert Panel Discussion - Audience Response	12/2/26 1:30 PM	12/2/26 2:30 PM
W6-CER02	Challenging Cases in Emergency Radiology: Expert Panel Discussion - Audience Response	12/2/26 1:30 PM	12/2/26 2:30 PM
W6-CER02	Challenging Cases in Emergency Radiology: Expert Panel Discussion - Audience Response	12/2/26 1:30 PM	12/2/26 2:30 PM
W6-CER02	Challenging Cases in Emergency Radiology: Expert Panel Discussion - Audience Response	12/2/26 1:30 PM	12/2/26 2:30 PM
W6-CER02	Challenging Cases in Emergency Radiology: Expert Panel Discussion - Audience Response	12/2/26 1:30 PM	12/2/26 2:30 PM

W6-CER02	Challenging Cases in Emergency Radiology: Expert Panel Discussion - Audience Response	12/2/26 1:30 PM	12/2/26 2:30 PM
W7-CER16	Forensic Radiology and Post Portem CT in the ER/Trauma Setting	12/2/26 3:00 PM	12/2/26 4:00 PM
W7-CER16	Forensic Radiology and Post Portem CT in the ER/Trauma Setting	12/2/26 3:00 PM	12/2/26 4:00 PM
W7-CER16	Forensic Radiology and Post Portem CT in the ER/Trauma Setting	12/2/26 3:00 PM	12/2/26 4:00 PM
W7-CER16	Forensic Radiology and Post Portem CT in the ER/Trauma Setting	12/2/26 3:00 PM	12/2/26 4:00 PM
W7-CER16	Forensic Radiology and Post Portem CT in the ER/Trauma Setting	12/2/26 3:00 PM	12/2/26 4:00 PM
W8-CER07	Abdominal Trauma	12/2/26 4:30 PM	12/2/26 5:30 PM

W8-CER07	Abdominal Trauma	12/2/26 4:30 PM	12/2/26 5:30 PM
W8-CER07	Abdominal Trauma	12/2/26 4:30 PM	12/2/26 5:30 PM
W8-CER07	Abdominal Trauma	12/2/26 4:30 PM	12/2/26 5:30 PM
W8-CER07	Abdominal Trauma	12/2/26 4:30 PM	12/2/26 5:30 PM
W8-CER07	Abdominal Trauma	12/2/26 4:30 PM	12/2/26 5:30 PM
M1-CGI03	Acute GI Imaging: From Principles to Practice	11/30/26 8:00 AM	11/30/26 9:00 AM
M1-CGI03	Acute GI Imaging: From Principles to Practice	11/30/26 8:00 AM	11/30/26 9:00 AM

M1-CGI03	Acute GI Imaging: From Principles to Practice	11/30/26 8:00 AM	11/30/26 9:00 AM
M1-CGI03	Acute GI Imaging: From Principles to Practice	11/30/26 8:00 AM	11/30/26 9:00 AM
M1-CGI03	Acute GI Imaging: From Principles to Practice	11/30/26 8:00 AM	11/30/26 9:00 AM
M1-CGI03	Acute GI Imaging: From Principles to Practice	11/30/26 8:00 AM	11/30/26 9:00 AM
M6-CGI14	Gastrointestinal Vascular: What the Radiologist Needs to Know	11/30/26 1:30 PM	11/30/26 2:30 PM
M6-CGI14	Gastrointestinal Vascular: What the Radiologist Needs to Know	11/30/26 1:30 PM	11/30/26 2:30 PM
M6-CGI14	Gastrointestinal Vascular: What the Radiologist Needs to Know	11/30/26 1:30 PM	11/30/26 2:30 PM
M6-CGI14	Gastrointestinal Vascular: What the Radiologist Needs to Know	11/30/26 1:30 PM	11/30/26 2:30 PM

M6-CGI14	Gastrointestinal Vascular: What the Radiologist Needs to Know	11/30/26 1:30 PM	11/30/26 2:30 PM
M6-CGI14	Gastrointestinal Vascular: What the Radiologist Needs to Know	11/30/26 1:30 PM	11/30/26 2:30 PM
M7-CGI04	Gastrointestinal Missed Cases: Learn from Our (and Others) Mistakes	11/30/26 3:00 PM	11/30/26 4:00 PM
M7-CGI04	Gastrointestinal Missed Cases: Learn from Our (and Others) Mistakes	11/30/26 3:00 PM	11/30/26 4:00 PM
M7-CGI04	Gastrointestinal Missed Cases: Learn from Our (and Others) Mistakes	11/30/26 3:00 PM	11/30/26 4:00 PM
M7-CGI04	Gastrointestinal Missed Cases: Learn from Our (and Others) Mistakes	11/30/26 3:00 PM	11/30/26 4:00 PM
M7-CGI04	Gastrointestinal Missed Cases: Learn from Our (and Others) Mistakes	11/30/26 3:00 PM	11/30/26 4:00 PM
R1-CGI06	Gallbladder and Biliary Tract: Expert Perspectives	12/3/26 8:00 AM	12/3/26 9:00 AM
R1-CGI06	Gallbladder and Biliary Tract: Expert Perspectives	12/3/26 8:00 AM	12/3/26 9:00 AM
R1-CGI06	Gallbladder and Biliary Tract: Expert Perspectives	12/3/26 8:00 AM	12/3/26 9:00 AM

R1-CGI06	Gallbladder and Biliary Tract: Expert Perspectives	12/3/26 8:00 AM	12/3/26 9:00 AM
R1-CGI06	Gallbladder and Biliary Tract: Expert Perspectives	12/3/26 8:00 AM	12/3/26 9:00 AM
R4-CGI09	Focal Liver Lesions: Beyond the Basics	12/3/26 11:00 AM	12/3/26 12:00 PM
R4-CGI09	Focal Liver Lesions: Beyond the Basics	12/3/26 11:00 AM	12/3/26 12:00 PM
R4-CGI09	Focal Liver Lesions: Beyond the Basics	12/3/26 11:00 AM	12/3/26 12:00 PM
R4-CGI09	Focal Liver Lesions: Beyond the Basics	12/3/26 11:00 AM	12/3/26 12:00 PM
R4-CGI09	Focal Liver Lesions: Beyond the Basics	12/3/26 11:00 AM	12/3/26 12:00 PM
R7-CGI12	Rectal Cancer Imaging: Expert Perspectives	12/3/26 3:00 PM	12/3/26 4:00 PM
R7-CGI12	Rectal Cancer Imaging: Expert Perspectives	12/3/26 3:00 PM	12/3/26 4:00 PM
R7-CGI12	Rectal Cancer Imaging: Expert Perspectives	12/3/26 3:00 PM	12/3/26 4:00 PM
R7-CGI12	Rectal Cancer Imaging: Expert Perspectives	12/3/26 3:00 PM	12/3/26 4:00 PM
R7-CGI12	Rectal Cancer Imaging: Expert Perspectives	12/3/26 3:00 PM	12/3/26 4:00 PM
S1-CGI01	GI/GU Jeopardy	11/29/26 9:00 AM	11/29/26 10:00 AM

S1-CGI01	GI/GU Jeopardy	11/29/26 9:00 AM	11/29/26 10:00 AM
S1-CGI01	GI/GU Jeopardy	11/29/26 9:00 AM	11/29/26 10:00 AM
S1-CGI01	GI/GU Jeopardy	11/29/26 9:00 AM	11/29/26 10:00 AM
S1-CGI01	GI/GU Jeopardy	11/29/26 9:00 AM	11/29/26 10:00 AM
S1-CGI01	GI/GU Jeopardy	11/29/26 9:00 AM	11/29/26 10:00 AM
S1-CGI01	GI/GU Jeopardy	11/29/26 9:00 AM	11/29/26 10:00 AM
S1-CGI01	GI/GU Jeopardy	11/29/26 9:00 AM	11/29/26 10:00 AM
S2-CGI10	Liver Transplant Imaging: Bridging Fundamentals and Innovation	11/29/26 10:30 AM	11/29/26 11:30 AM
S2-CGI10	Liver Transplant Imaging: Bridging Fundamentals and Innovation	11/29/26 10:30 AM	11/29/26 11:30 AM

S2-CGI10	Liver Transplant Imaging: Bridging Fundamentals and Innovation	11/29/26 10:30 AM	11/29/26 11:30 AM
S2-CGI10	Liver Transplant Imaging: Bridging Fundamentals and Innovation	11/29/26 10:30 AM	11/29/26 11:30 AM
S2-CGI10	Liver Transplant Imaging: Bridging Fundamentals and Innovation	11/29/26 10:30 AM	11/29/26 11:30 AM
S4-CGI15	Case-Based Review of Peritoneum, Mesentery, Spleen and Beyond	11/29/26 1:00 PM	11/29/26 2:00 PM
S4-CGI15	Case-Based Review of Peritoneum, Mesentery, Spleen and Beyond	11/29/26 1:00 PM	11/29/26 2:00 PM

S4-CGI15	Case-Based Review of Peritoneum, Mesentery, Spleen and Beyond	11/29/26 1:00 PM	11/29/26 2:00 PM
S4-CGI15	Case-Based Review of Peritoneum, Mesentery, Spleen and Beyond	11/29/26 1:00 PM	11/29/26 2:00 PM
S4-CGI15	Case-Based Review of Peritoneum, Mesentery, Spleen and Beyond	11/29/26 1:00 PM	11/29/26 2:00 PM
S4-CGI15	Case-Based Review of Peritoneum, Mesentery, Spleen and Beyond	11/29/26 1:00 PM	11/29/26 2:00 PM

T3-CGI11	Response Assessment in GI Malignancies: Cutting-Edge Advances	12/1/26 9:30 AM	12/1/26 10:30 AM
T3-CGI11	Response Assessment in GI Malignancies: Cutting-Edge Advances	12/1/26 9:30 AM	12/1/26 10:30 AM
T3-CGI11	Response Assessment in GI Malignancies: Cutting-Edge Advances	12/1/26 9:30 AM	12/1/26 10:30 AM
T3-CGI11	Response Assessment in GI Malignancies: Cutting-Edge Advances	12/1/26 9:30 AM	12/1/26 10:30 AM
T3-CGI11	Response Assessment in GI Malignancies: Cutting-Edge Advances	12/1/26 9:30 AM	12/1/26 10:30 AM
T3-CGI11	Response Assessment in GI Malignancies: Cutting-Edge Advances	12/1/26 9:30 AM	12/1/26 10:30 AM

T6-CGI08	Diffuse Liver Disease: Novel Techniques and Frontiers in Imaging	12/1/26 1:30 PM	12/1/26 2:30 PM
T6-CGI08	Diffuse Liver Disease: Novel Techniques and Frontiers in Imaging	12/1/26 1:30 PM	12/1/26 2:30 PM
T6-CGI08	Diffuse Liver Disease: Novel Techniques and Frontiers in Imaging	12/1/26 1:30 PM	12/1/26 2:30 PM
T6-CGI08	Diffuse Liver Disease: Novel Techniques and Frontiers in Imaging	12/1/26 1:30 PM	12/1/26 2:30 PM

T6-CGI08	Diffuse Liver Disease: Novel Techniques and Frontiers in Imaging	12/1/26 1:30 PM	12/1/26 2:30 PM
T6-CGI08	Diffuse Liver Disease: Novel Techniques and Frontiers in Imaging	12/1/26 1:30 PM	12/1/26 2:30 PM
T6-CGI16	RSNA Hands-On Lab: Ultrasound Liver Elastography and Quantitative Ultrasound for Liver Fat Content (Registration Fee Required)	12/1/26 2:00 PM	12/1/26 4:00 PM
T6-CGI16	RSNA Hands-On Lab: Ultrasound Liver Elastography and Quantitative Ultrasound for Liver Fat Content (Registration Fee Required)	12/1/26 2:00 PM	12/1/26 4:00 PM
T6-CGI16	RSNA Hands-On Lab: Ultrasound Liver Elastography and Quantitative Ultrasound for Liver Fat Content (Registration Fee Required)	12/1/26 2:00 PM	12/1/26 4:00 PM
T6-CGI16	RSNA Hands-On Lab: Ultrasound Liver Elastography and Quantitative Ultrasound for Liver Fat Content (Registration Fee Required)	12/1/26 2:00 PM	12/1/26 4:00 PM

T6-CGI16	RSNA Hands-On Lab: Ultrasound Liver Elastography and Quantitative Ultrasound for Liver Fat Content (Registration Fee Required)	12/1/26 2:00 PM	12/1/26 4:00 PM
T6-CGI16	RSNA Hands-On Lab: Ultrasound Liver Elastography and Quantitative Ultrasound for Liver Fat Content (Registration Fee Required)	12/1/26 2:00 PM	12/1/26 4:00 PM
T6-CGI16	RSNA Hands-On Lab: Ultrasound Liver Elastography and Quantitative Ultrasound for Liver Fat Content (Registration Fee Required)	12/1/26 2:00 PM	12/1/26 4:00 PM
T6-CGI16	RSNA Hands-On Lab: Ultrasound Liver Elastography and Quantitative Ultrasound for Liver Fat Content (Registration Fee Required)	12/1/26 2:00 PM	12/1/26 4:00 PM
T6-CGI16	RSNA Hands-On Lab: Ultrasound Liver Elastography and Quantitative Ultrasound for Liver Fat Content (Registration Fee Required)	12/1/26 2:00 PM	12/1/26 4:00 PM
T6-CGI16	RSNA Hands-On Lab: Ultrasound Liver Elastography and Quantitative Ultrasound for Liver Fat Content (Registration Fee Required)	12/1/26 2:00 PM	12/1/26 4:00 PM
T6-CGI16	RSNA Hands-On Lab: Ultrasound Liver Elastography and Quantitative Ultrasound for Liver Fat Content (Registration Fee Required)	12/1/26 2:00 PM	12/1/26 4:00 PM

T6-CGI16	RSNA Hands-On Lab: Ultrasound Liver Elastography and Quantitative Ultrasound for Liver Fat Content (Registration Fee Required)	12/1/26 2:00 PM	12/1/26 4:00 PM
T6-CGI16	RSNA Hands-On Lab: Ultrasound Liver Elastography and Quantitative Ultrasound for Liver Fat Content (Registration Fee Required)	12/1/26 2:00 PM	12/1/26 4:00 PM
T6-CGI16	RSNA Hands-On Lab: Ultrasound Liver Elastography and Quantitative Ultrasound for Liver Fat Content (Registration Fee Required)	12/1/26 2:00 PM	12/1/26 4:00 PM
T6-CGI16	RSNA Hands-On Lab: Ultrasound Liver Elastography and Quantitative Ultrasound for Liver Fat Content (Registration Fee Required)	12/1/26 2:00 PM	12/1/26 4:00 PM
T6-CGI16	RSNA Hands-On Lab: Ultrasound Liver Elastography and Quantitative Ultrasound for Liver Fat Content (Registration Fee Required)	12/1/26 2:00 PM	12/1/26 4:00 PM
T6-CGI16	RSNA Hands-On Lab: Ultrasound Liver Elastography and Quantitative Ultrasound for Liver Fat Content (Registration Fee Required)	12/1/26 2:00 PM	12/1/26 4:00 PM
T8-CGI07	Pancreatic Tumor Imaging: State of the Art and Emerging Trends	12/1/26 4:30 PM	12/1/26 5:30 PM

T8-CGI07	Pancreatic Tumor Imaging: State of the Art and Emerging Trends	12/1/26 4:30 PM	12/1/26 5:30 PM
T8-CGI07	Pancreatic Tumor Imaging: State of the Art and Emerging Trends	12/1/26 4:30 PM	12/1/26 5:30 PM
T8-CGI07	Pancreatic Tumor Imaging: State of the Art and Emerging Trends	12/1/26 4:30 PM	12/1/26 5:30 PM
T8-CGI07	Pancreatic Tumor Imaging: State of the Art and Emerging Trends	12/1/26 4:30 PM	12/1/26 5:30 PM
T8-CGI07	Pancreatic Tumor Imaging: State of the Art and Emerging Trends	12/1/26 4:30 PM	12/1/26 5:30 PM
W1-CGI05	Fundamentals of Post Operative GI Imaging	12/2/26 8:00 AM	12/2/26 9:00 AM

W1-CGI05	Fundamentals of Post Operative GI Imaging	12/2/26 8:00 AM	12/2/26 9:00 AM
W1-CGI05	Fundamentals of Post Operative GI Imaging	12/2/26 8:00 AM	12/2/26 9:00 AM
W1-CGI05	Fundamentals of Post Operative GI Imaging	12/2/26 8:00 AM	12/2/26 9:00 AM
W1-CGI05	Fundamentals of Post Operative GI Imaging	12/2/26 8:00 AM	12/2/26 9:00 AM
W6-CGI02	Gastrointestinal Tract: Advances in Imaging from Esophagus to Rectum	12/2/26 1:30 PM	12/2/26 2:30 PM

W6-CGI02	Gastrointestinal Tract: Advances in Imaging from Esophagus to Rectum	12/2/26 1:30 PM	12/2/26 2:30 PM
W6-CGI02	Gastrointestinal Tract: Advances in Imaging from Esophagus to Rectum	12/2/26 1:30 PM	12/2/26 2:30 PM
W6-CGI02	Gastrointestinal Tract: Advances in Imaging from Esophagus to Rectum	12/2/26 1:30 PM	12/2/26 2:30 PM
W6-CGI02	Gastrointestinal Tract: Advances in Imaging from Esophagus to Rectum	12/2/26 1:30 PM	12/2/26 2:30 PM
W6-CGI02	Gastrointestinal Tract: Advances in Imaging from Esophagus to Rectum	12/2/26 1:30 PM	12/2/26 2:30 PM

W8-CGI13	Inflammatory Bowel Disease: Emerging Trends and Cutting-Edge Advances	12/2/26 4:30 PM	12/2/26 5:30 PM
W8-CGI13	Inflammatory Bowel Disease: Emerging Trends and Cutting-Edge Advances	12/2/26 4:30 PM	12/2/26 5:30 PM
W8-CGI13	Inflammatory Bowel Disease: Emerging Trends and Cutting-Edge Advances	12/2/26 4:30 PM	12/2/26 5:30 PM
W8-CGI13	Inflammatory Bowel Disease: Emerging Trends and Cutting-Edge Advances	12/2/26 4:30 PM	12/2/26 5:30 PM
W8-CGI13	Inflammatory Bowel Disease: Emerging Trends and Cutting-Edge Advances	12/2/26 4:30 PM	12/2/26 5:30 PM
W8-CGI13	Inflammatory Bowel Disease: Emerging Trends and Cutting-Edge Advances	12/2/26 4:30 PM	12/2/26 5:30 PM
M3-CGU03	Pondering Protocols- Advanced Kidney and Prostate Debate	11/30/26 9:30 AM	11/30/26 10:30 AM
M3-CGU03	Pondering Protocols- Advanced Kidney and Prostate Debate	11/30/26 9:30 AM	11/30/26 10:30 AM

M3-CGU03	Pondering Protocols- Advanced Kidney and Prostate Debate	11/30/26 9:30 AM	11/30/26 10:30 AM
M3-CGU03	Pondering Protocols- Advanced Kidney and Prostate Debate	11/30/26 9:30 AM	11/30/26 10:30 AM
M3-CGU03	Pondering Protocols- Advanced Kidney and Prostate Debate	11/30/26 9:30 AM	11/30/26 10:30 AM
M3-CGU03	Pondering Protocols- Advanced Kidney and Prostate Debate	11/30/26 9:30 AM	11/30/26 10:30 AM
M6-CGU09	RSNA Hands-On Lab: Prostate MRI: Beginner (Registration Fee Required)	11/30/26 1:30 PM	11/30/26 3:00 PM

M6-CGU09	RSNA Hands-On Lab: Prostate MRI: Beginner (Registration Fee Required)	11/30/26 1:30 PM	11/30/26 3:00 PM
M6-CGU09	RSNA Hands-On Lab: Prostate MRI: Beginner (Registration Fee Required)	11/30/26 1:30 PM	11/30/26 3:00 PM
M6-CGU09	RSNA Hands-On Lab: Prostate MRI: Beginner (Registration Fee Required)	11/30/26 1:30 PM	11/30/26 3:00 PM

M6-CGU09	RSNA Hands-On Lab: Prostate MRI: Beginner (Registration Fee Required)	11/30/26 1:30 PM	11/30/26 3:00 PM
M6-CGU09	RSNA Hands-On Lab: Prostate MRI: Beginner (Registration Fee Required)	11/30/26 1:30 PM	11/30/26 3:00 PM
M6-CGU09	RSNA Hands-On Lab: Prostate MRI: Beginner (Registration Fee Required)	11/30/26 1:30 PM	11/30/26 3:00 PM

M6-CGU09	RSNA Hands-On Lab: Prostate MRI: Beginner (Registration Fee Required)	11/30/26 1:30 PM	11/30/26 3:00 PM
M6-CGU09	RSNA Hands-On Lab: Prostate MRI: Beginner (Registration Fee Required)	11/30/26 1:30 PM	11/30/26 3:00 PM
M6-CGU09	RSNA Hands-On Lab: Prostate MRI: Beginner (Registration Fee Required)	11/30/26 1:30 PM	11/30/26 3:00 PM

M6-CGU09	RSNA Hands-On Lab: Prostate MRI: Beginner (Registration Fee Required)	11/30/26 1:30 PM	11/30/26 3:00 PM
M6-CGU09	RSNA Hands-On Lab: Prostate MRI: Beginner (Registration Fee Required)	11/30/26 1:30 PM	11/30/26 3:00 PM
M6-CGU09	RSNA Hands-On Lab: Prostate MRI: Beginner (Registration Fee Required)	11/30/26 1:30 PM	11/30/26 3:00 PM

M6-CGU09	RSNA Hands-On Lab: Prostate MRI: Beginner (Registration Fee Required)	11/30/26 1:30 PM	11/30/26 3:00 PM
M6-CGU09	RSNA Hands-On Lab: Prostate MRI: Beginner (Registration Fee Required)	11/30/26 1:30 PM	11/30/26 3:00 PM
M6-CGU09	RSNA Hands-On Lab: Prostate MRI: Beginner (Registration Fee Required)	11/30/26 1:30 PM	11/30/26 3:00 PM

M6-CGU09	RSNA Hands-On Lab: Prostate MRI: Beginner (Registration Fee Required)	11/30/26 1:30 PM	11/30/26 3:00 PM
M6-CGU09	RSNA Hands-On Lab: Prostate MRI: Beginner (Registration Fee Required)	11/30/26 1:30 PM	11/30/26 3:00 PM
M6-CGU09	RSNA Hands-On Lab: Prostate MRI: Beginner (Registration Fee Required)	11/30/26 1:30 PM	11/30/26 3:00 PM

M6-CGU09	RSNA Hands-On Lab: Prostate MRI: Beginner (Registration Fee Required)	11/30/26 1:30 PM	11/30/26 3:00 PM
M6-CGU09	RSNA Hands-On Lab: Prostate MRI: Beginner (Registration Fee Required)	11/30/26 1:30 PM	11/30/26 3:00 PM
M6-CGU09	RSNA Hands-On Lab: Prostate MRI: Beginner (Registration Fee Required)	11/30/26 1:30 PM	11/30/26 3:00 PM

M6-CGU09	RSNA Hands-On Lab: Prostate MRI: Beginner (Registration Fee Required)	11/30/26 1:30 PM	11/30/26 3:00 PM
M7-CGU02	Interactive GU: Advanced Cases: Kidney, Prostate, Male GU	11/30/26 3:00 PM	11/30/26 4:00 PM
M7-CGU02	Interactive GU: Advanced Cases: Kidney, Prostate, Male GU	11/30/26 3:00 PM	11/30/26 4:00 PM
M7-CGU02	Interactive GU: Advanced Cases: Kidney, Prostate, Male GU	11/30/26 3:00 PM	11/30/26 4:00 PM
M7-CGU02	Interactive GU: Advanced Cases: Kidney, Prostate, Male GU	11/30/26 3:00 PM	11/30/26 4:00 PM
M7-CGU02	Interactive GU: Advanced Cases: Kidney, Prostate, Male GU	11/30/26 3:00 PM	11/30/26 4:00 PM
R3-CGU08	Peer Learning: Misses and Misinterpretations in Everyday GU Radiology	12/3/26 9:30 AM	12/3/26 10:30 AM

R3-CGU08	Peer Learning: Misses and Misinterpretations in Everyday GU Radiology	12/3/26 9:30 AM	12/3/26 10:30 AM
R3-CGU08	Peer Learning: Misses and Misinterpretations in Everyday GU Radiology	12/3/26 9:30 AM	12/3/26 10:30 AM
R3-CGU08	Peer Learning: Misses and Misinterpretations in Everyday GU Radiology	12/3/26 9:30 AM	12/3/26 10:30 AM
R3-CGU08	Peer Learning: Misses and Misinterpretations in Everyday GU Radiology	12/3/26 9:30 AM	12/3/26 10:30 AM
R3-CGU08	Peer Learning: Misses and Misinterpretations in Everyday GU Radiology	12/3/26 9:30 AM	12/3/26 10:30 AM
S2-CGU01	Interactive Fundamental GU Cases: Bladder, Adrenal and Retroperitoneum	11/29/26 10:30 AM	11/29/26 11:30 AM

S2-CGU01	Interactive Fundamental GU Cases: Bladder, Adrenal and Retroperitoneum	11/29/26 10:30 AM	11/29/26 11:30 AM
S2-CGU01	Interactive Fundamental GU Cases: Bladder, Adrenal and Retroperitoneum	11/29/26 10:30 AM	11/29/26 11:30 AM
S2-CGU01	Interactive Fundamental GU Cases: Bladder, Adrenal and Retroperitoneum	11/29/26 10:30 AM	11/29/26 11:30 AM
S2-CGU01	Interactive Fundamental GU Cases: Bladder, Adrenal and Retroperitoneum	11/29/26 10:30 AM	11/29/26 11:30 AM
T1-CGU04	CT and MR Contrast Media: Controversies and Conundrums	12/1/26 8:00 AM	12/1/26 9:00 AM
T1-CGU04	CT and MR Contrast Media: Controversies and Conundrums	12/1/26 8:00 AM	12/1/26 9:00 AM
T1-CGU04	CT and MR Contrast Media: Controversies and Conundrums	12/1/26 8:00 AM	12/1/26 9:00 AM
T1-CGU04	CT and MR Contrast Media: Controversies and Conundrums	12/1/26 8:00 AM	12/1/26 9:00 AM
T1-CGU04	CT and MR Contrast Media: Controversies and Conundrums	12/1/26 8:00 AM	12/1/26 9:00 AM

T1-CGU04	CT and MR Contrast Media: Controversies and Conundrums	12/1/26 8:00 AM	12/1/26 9:00 AM
T1-CGU04	CT and MR Contrast Media: Controversies and Conundrums	12/1/26 8:00 AM	12/1/26 9:00 AM
T2-CGU10	RSNA Hands-On Lab: Prostate MRI: Advanced (Registration Fee Required)	12/1/26 9:00 AM	12/1/26 10:30 AM
T2-CGU10	RSNA Hands-On Lab: Prostate MRI: Advanced (Registration Fee Required)	12/1/26 9:00 AM	12/1/26 10:30 AM

T2-CGU10	RSNA Hands-On Lab: Prostate MRI: Advanced (Registration Fee Required)	12/1/26 9:00 AM	12/1/26 10:30 AM
T2-CGU10	RSNA Hands-On Lab: Prostate MRI: Advanced (Registration Fee Required)	12/1/26 9:00 AM	12/1/26 10:30 AM
T2-CGU10	RSNA Hands-On Lab: Prostate MRI: Advanced (Registration Fee Required)	12/1/26 9:00 AM	12/1/26 10:30 AM

T2-CGU10	RSNA Hands-On Lab: Prostate MRI: Advanced (Registration Fee Required)	12/1/26 9:00 AM	12/1/26 10:30 AM
T2-CGU10	RSNA Hands-On Lab: Prostate MRI: Advanced (Registration Fee Required)	12/1/26 9:00 AM	12/1/26 10:30 AM
T2-CGU10	RSNA Hands-On Lab: Prostate MRI: Advanced (Registration Fee Required)	12/1/26 9:00 AM	12/1/26 10:30 AM

T2-CGU10	RSNA Hands-On Lab: Prostate MRI: Advanced (Registration Fee Required)	12/1/26 9:00 AM	12/1/26 10:30 AM
T2-CGU10	RSNA Hands-On Lab: Prostate MRI: Advanced (Registration Fee Required)	12/1/26 9:00 AM	12/1/26 10:30 AM
T2-CGU10	RSNA Hands-On Lab: Prostate MRI: Advanced (Registration Fee Required)	12/1/26 9:00 AM	12/1/26 10:30 AM

T2-CGU10	RSNA Hands-On Lab: Prostate MRI: Advanced (Registration Fee Required)	12/1/26 9:00 AM	12/1/26 10:30 AM
T2-CGU10	RSNA Hands-On Lab: Prostate MRI: Advanced (Registration Fee Required)	12/1/26 9:00 AM	12/1/26 10:30 AM
T2-CGU10	RSNA Hands-On Lab: Prostate MRI: Advanced (Registration Fee Required)	12/1/26 9:00 AM	12/1/26 10:30 AM

T2-CGU10	RSNA Hands-On Lab: Prostate MRI: Advanced (Registration Fee Required)	12/1/26 9:00 AM	12/1/26 10:30 AM
T2-CGU10	RSNA Hands-On Lab: Prostate MRI: Advanced (Registration Fee Required)	12/1/26 9:00 AM	12/1/26 10:30 AM
T2-CGU10	RSNA Hands-On Lab: Prostate MRI: Advanced (Registration Fee Required)	12/1/26 9:00 AM	12/1/26 10:30 AM

T2-CGU10	RSNA Hands-On Lab: Prostate MRI: Advanced (Registration Fee Required)	12/1/26 9:00 AM	12/1/26 10:30 AM
T2-CGU10	RSNA Hands-On Lab: Prostate MRI: Advanced (Registration Fee Required)	12/1/26 9:00 AM	12/1/26 10:30 AM
T2-CGU10	RSNA Hands-On Lab: Prostate MRI: Advanced (Registration Fee Required)	12/1/26 9:00 AM	12/1/26 10:30 AM

T2-CGU10	RSNA Hands-On Lab: Prostate MRI: Advanced (Registration Fee Required)	12/1/26 9:00 AM	12/1/26 10:30 AM
T2-CGU10	RSNA Hands-On Lab: Prostate MRI: Advanced (Registration Fee Required)	12/1/26 9:00 AM	12/1/26 10:30 AM
T2-CGU10	RSNA Hands-On Lab: Prostate MRI: Advanced (Registration Fee Required)	12/1/26 9:00 AM	12/1/26 10:30 AM

T8-CGU05	Prostate Cancer - Learning from the Experts	12/1/26 4:30 PM	12/1/26 5:30 PM
T8-CGU05	Prostate Cancer - Learning from the Experts	12/1/26 4:30 PM	12/1/26 5:30 PM
T8-CGU05	Prostate Cancer - Learning from the Experts	12/1/26 4:30 PM	12/1/26 5:30 PM
T8-CGU05	Prostate Cancer - Learning from the Experts	12/1/26 4:30 PM	12/1/26 5:30 PM
T8-CGU05	Prostate Cancer - Learning from the Experts	12/1/26 4:30 PM	12/1/26 5:30 PM
T8-CGU05	Prostate Cancer - Learning from the Experts	12/1/26 4:30 PM	12/1/26 5:30 PM
W3-CGU06	Fundamentals of Renal Mass Evaluation	12/2/26 9:30 AM	12/2/26 10:30 AM
W3-CGU06	Fundamentals of Renal Mass Evaluation	12/2/26 9:30 AM	12/2/26 10:30 AM

W3-CGU06	Fundamentals of Renal Mass Evaluation	12/2/26 9:30 AM	12/2/26 10:30 AM
W3-CGU06	Fundamentals of Renal Mass Evaluation	12/2/26 9:30 AM	12/2/26 10:30 AM
W3-CGU06	Fundamentals of Renal Mass Evaluation	12/2/26 9:30 AM	12/2/26 10:30 AM
W3-CGU06	Fundamentals of Renal Mass Evaluation	12/2/26 9:30 AM	12/2/26 10:30 AM
W8-CGU07	All About the Adrenal: Fundamentals of Imaging and Interventions	12/2/26 4:30 PM	12/2/26 5:30 PM
W8-CGU07	All About the Adrenal: Fundamentals of Imaging and Interventions	12/2/26 4:30 PM	12/2/26 5:30 PM
W8-CGU07	All About the Adrenal: Fundamentals of Imaging and Interventions	12/2/26 4:30 PM	12/2/26 5:30 PM

W8-CGU07	All About the Adrenal: Fundamentals of Imaging and Interventions	12/2/26 4:30 PM	12/2/26 5:30 PM
W8-CGU07	All About the Adrenal: Fundamentals of Imaging and Interventions	12/2/26 4:30 PM	12/2/26 5:30 PM
W8-CGU07	All About the Adrenal: Fundamentals of Imaging and Interventions	12/2/26 4:30 PM	12/2/26 5:30 PM
M3-CHN04	What do Head & Neck Surgical, Radiation, and Medical Oncologists Want to Know From the Radiologist? Basics to Advanced	11/30/26 9:30 AM	11/30/26 10:30 AM
M3-CHN04	What do Head & Neck Surgical, Radiation, and Medical Oncologists Want to Know From the Radiologist? Basics to Advanced	11/30/26 9:30 AM	11/30/26 10:30 AM
M3-CHN04	What do Head & Neck Surgical, Radiation, and Medical Oncologists Want to Know From the Radiologist? Basics to Advanced	11/30/26 9:30 AM	11/30/26 10:30 AM

M3-CHN04	What do Head & Neck Surgical, Radiation, and Medical Oncologists Want to Know From the Radiologist? Basics to Advanced	11/30/26 9:30 AM	11/30/26 10:30 AM
M3-CHN04	What do Head & Neck Surgical, Radiation, and Medical Oncologists Want to Know From the Radiologist? Basics to Advanced	11/30/26 9:30 AM	11/30/26 10:30 AM
M3-CHN04	What do Head & Neck Surgical, Radiation, and Medical Oncologists Want to Know From the Radiologist? Basics to Advanced	11/30/26 9:30 AM	11/30/26 10:30 AM
M3-CHN04	What do Head & Neck Surgical, Radiation, and Medical Oncologists Want to Know From the Radiologist? Basics to Advanced	11/30/26 9:30 AM	11/30/26 10:30 AM
M7-CHN02	Why Anatomy Matters in Head and Neck Imaging: An Illustrative Case Based Core Review	11/30/26 3:00 PM	11/30/26 4:00 PM
M7-CHN02	Why Anatomy Matters in Head and Neck Imaging: An Illustrative Case Based Core Review	11/30/26 3:00 PM	11/30/26 4:00 PM

M7-CHN02	Why Anatomy Matters in Head and Neck Imaging: An Illustrative Case Based Core Review	11/30/26 3:00 PM	11/30/26 4:00 PM
M7-CHN02	Why Anatomy Matters in Head and Neck Imaging: An Illustrative Case Based Core Review	11/30/26 3:00 PM	11/30/26 4:00 PM
M7-CHN02	Why Anatomy Matters in Head and Neck Imaging: An Illustrative Case Based Core Review	11/30/26 3:00 PM	11/30/26 4:00 PM
R3-CHN06	Advanced Head and Neck Cases that Made Experts Go "Hmmm..."	12/3/26 9:30 AM	12/3/26 10:30 AM
R3-CHN06	Advanced Head and Neck Cases that Made Experts Go "Hmmm..."	12/3/26 9:30 AM	12/3/26 10:30 AM
R3-CHN06	Advanced Head and Neck Cases that Made Experts Go "Hmmm..."	12/3/26 9:30 AM	12/3/26 10:30 AM
R3-CHN06	Advanced Head and Neck Cases that Made Experts Go "Hmmm..."	12/3/26 9:30 AM	12/3/26 10:30 AM
R3-CHN06	Advanced Head and Neck Cases that Made Experts Go "Hmmm..."	12/3/26 9:30 AM	12/3/26 10:30 AM

R6-CHN10	Case Based Core Review of AJCC9 Head and Neck Cancer Updates: What You Need to Know and Nothing More	12/3/26 1:30 PM	12/3/26 2:30 PM
R6-CHN10	Case Based Core Review of AJCC9 Head and Neck Cancer Updates: What You Need to Know and Nothing More	12/3/26 1:30 PM	12/3/26 2:30 PM
R6-CHN10	Case Based Core Review of AJCC9 Head and Neck Cancer Updates: What You Need to Know and Nothing More	12/3/26 1:30 PM	12/3/26 2:30 PM
R6-CHN10	Case Based Core Review of AJCC9 Head and Neck Cancer Updates: What You Need to Know and Nothing More	12/3/26 1:30 PM	12/3/26 2:30 PM
R6-CHN10	Case Based Core Review of AJCC9 Head and Neck Cancer Updates: What You Need to Know and Nothing More	12/3/26 1:30 PM	12/3/26 2:30 PM
S2-CHN01	Can't See, Can't Talk, and Can't Move/Feel My Face: A Symptoms Based Core Review of Cranial Nerve Anatomy & Pathology	11/29/26 10:30 AM	11/29/26 11:30 AM
S2-CHN01	Can't See, Can't Talk, and Can't Move/Feel My Face: A Symptoms Based Core Review of Cranial Nerve Anatomy & Pathology	11/29/26 10:30 AM	11/29/26 11:30 AM
S2-CHN01	Can't See, Can't Talk, and Can't Move/Feel My Face: A Symptoms Based Core Review of Cranial Nerve Anatomy & Pathology	11/29/26 10:30 AM	11/29/26 11:30 AM

S2-CHN01	Can't See, Can't Talk, and Can't Move/Feel My Face: A Symptoms Based Core Review of Cranial Nerve Anatomy & Pathology	11/29/26 10:30 AM	11/29/26 11:30 AM
S2-CHN01	Can't See, Can't Talk, and Can't Move/Feel My Face: A Symptoms Based Core Review of Cranial Nerve Anatomy & Pathology	11/29/26 10:30 AM	11/29/26 11:30 AM
S4-CHN03	Differentiating Benign and Malignant Mimics in the Head and Neck (Core)	11/29/26 1:00 PM	11/29/26 2:00 PM
S4-CHN03	Differentiating Benign and Malignant Mimics in the Head and Neck (Core)	11/29/26 1:00 PM	11/29/26 2:00 PM
S4-CHN03	Differentiating Benign and Malignant Mimics in the Head and Neck (Core)	11/29/26 1:00 PM	11/29/26 2:00 PM
S4-CHN03	Differentiating Benign and Malignant Mimics in the Head and Neck (Core)	11/29/26 1:00 PM	11/29/26 2:00 PM
S4-CHN03	Differentiating Benign and Malignant Mimics in the Head and Neck (Core)	11/29/26 1:00 PM	11/29/26 2:00 PM

T3-CHN08	Perioperative Imaging in the Head and Neck: How Radiologists Add Advanced Value	12/1/26 9:30 AM	12/1/26 10:30 AM
T3-CHN08	Perioperative Imaging in the Head and Neck: How Radiologists Add Advanced Value	12/1/26 9:30 AM	12/1/26 10:30 AM
T3-CHN08	Perioperative Imaging in the Head and Neck: How Radiologists Add Advanced Value	12/1/26 9:30 AM	12/1/26 10:30 AM
T3-CHN08	Perioperative Imaging in the Head and Neck: How Radiologists Add Advanced Value	12/1/26 9:30 AM	12/1/26 10:30 AM
T3-CHN08	Perioperative Imaging in the Head and Neck: How Radiologists Add Advanced Value	12/1/26 9:30 AM	12/1/26 10:30 AM

T7-CHN09	Practical Workshops on How to Handle Tricky/Advanced Neuroradiology and Head and Neck Exams	12/1/26 3:00 PM	12/1/26 4:00 PM
T7-CHN09	Practical Workshops on How to Handle Tricky/Advanced Neuroradiology and Head and Neck Exams	12/1/26 3:00 PM	12/1/26 4:00 PM
T7-CHN09	Practical Workshops on How to Handle Tricky/Advanced Neuroradiology and Head and Neck Exams	12/1/26 3:00 PM	12/1/26 4:00 PM
T7-CHN09	Practical Workshops on How to Handle Tricky/Advanced Neuroradiology and Head and Neck Exams	12/1/26 3:00 PM	12/1/26 4:00 PM
T7-CHN09	Practical Workshops on How to Handle Tricky/Advanced Neuroradiology and Head and Neck Exams	12/1/26 3:00 PM	12/1/26 4:00 PM
T8-CHN07	Core Knowledge of the Skull Base: More than Just Foramina	12/1/26 4:30 PM	12/1/26 5:30 PM
T8-CHN07	Core Knowledge of the Skull Base: More than Just Foramina	12/1/26 4:30 PM	12/1/26 5:30 PM

T8-CHN07	Core Knowledge of the Skull Base: More than Just Foramina	12/1/26 4:30 PM	12/1/26 5:30 PM
T8-CHN07	Core Knowledge of the Skull Base: More than Just Foramina	12/1/26 4:30 PM	12/1/26 5:30 PM
T8-CHN07	Core Knowledge of the Skull Base: More than Just Foramina	12/1/26 4:30 PM	12/1/26 5:30 PM
W1-CHN11	Core Imaging of Head and Neck Emergencies	12/2/26 8:00 AM	12/2/26 9:00 AM
W1-CHN11	Core Imaging of Head and Neck Emergencies	12/2/26 8:00 AM	12/2/26 9:00 AM
W1-CHN11	Core Imaging of Head and Neck Emergencies	12/2/26 8:00 AM	12/2/26 9:00 AM
W1-CHN11	Core Imaging of Head and Neck Emergencies	12/2/26 8:00 AM	12/2/26 9:00 AM

W1-CHN11	Core Imaging of Head and Neck Emergencies	12/2/26 8:00 AM	12/2/26 9:00 AM
W7-CHN05	All About Temporal Bone Pathologies: A Case/Symptoms Based Core Session	12/2/26 3:00 PM	12/2/26 4:00 PM
W7-CHN05	All About Temporal Bone Pathologies: A Case/Symptoms Based Core Session	12/2/26 3:00 PM	12/2/26 4:00 PM
W7-CHN05	All About Temporal Bone Pathologies: A Case/Symptoms Based Core Session	12/2/26 3:00 PM	12/2/26 4:00 PM
W7-CHN05	All About Temporal Bone Pathologies: A Case/Symptoms Based Core Session	12/2/26 3:00 PM	12/2/26 4:00 PM
W7-CHN05	All About Temporal Bone Pathologies: A Case/Symptoms Based Core Session	12/2/26 3:00 PM	12/2/26 4:00 PM
M1-CIN06	2026 Year in Review of AI Models in Radiology	11/30/26 8:00 AM	11/30/26 9:00 AM
M1-CIN06	2026 Year in Review of AI Models in Radiology	11/30/26 8:00 AM	11/30/26 9:00 AM
M1-CIN06	2026 Year in Review of AI Models in Radiology	11/30/26 8:00 AM	11/30/26 9:00 AM
M1-CIN06	2026 Year in Review of AI Models in Radiology	11/30/26 8:00 AM	11/30/26 9:00 AM
M1-CIN06	2026 Year in Review of AI Models in Radiology	11/30/26 8:00 AM	11/30/26 9:00 AM
M1-CIN21	RSNA Deep Learning Lab: An Introduction to Foundation Models in Medical Imaging (Registration Fee Required)	11/30/26 8:00 AM	11/30/26 9:00 AM

M1-CIN21	RSNA Deep Learning Lab: An Introduction to Foundation Models in Medical Imaging (Registration Fee Required)	11/30/26 8:00 AM	11/30/26 9:00 AM
M1-CIN21	RSNA Deep Learning Lab: An Introduction to Foundation Models in Medical Imaging (Registration Fee Required)	11/30/26 8:00 AM	11/30/26 9:00 AM
M3-CIN22	RSNA Deep Learning Lab: How to Evaluate a Deep Learning Model for Deployment in Real Practice (Registration Fee Required)	11/30/26 9:30 AM	11/30/26 10:30 AM
M3-CIN22	RSNA Deep Learning Lab: How to Evaluate a Deep Learning Model for Deployment in Real Practice (Registration Fee Required)	11/30/26 9:30 AM	11/30/26 10:30 AM
M6-CIN02	Practical AI for Radiology: Foundations & High-Value Use Cases	11/30/26 1:30 PM	11/30/26 2:30 PM
M6-CIN02	Practical AI for Radiology: Foundations & High-Value Use Cases	11/30/26 1:30 PM	11/30/26 2:30 PM
M6-CIN02	Practical AI for Radiology: Foundations & High-Value Use Cases	11/30/26 1:30 PM	11/30/26 2:30 PM

M6-CIN02	Practical AI for Radiology: Foundations & High-Value Use Cases	11/30/26 1:30 PM	11/30/26 2:30 PM
M7-CIN03	Practical AI for Radiology: Procurement, Implementation & Safe Clinical Use	11/30/26 3:00 PM	11/30/26 4:00 PM
M7-CIN03	Practical AI for Radiology: Procurement, Implementation & Safe Clinical Use	11/30/26 3:00 PM	11/30/26 4:00 PM
M7-CIN03	Practical AI for Radiology: Procurement, Implementation & Safe Clinical Use	11/30/26 3:00 PM	11/30/26 4:00 PM
M7-CIN03	Practical AI for Radiology: Procurement, Implementation & Safe Clinical Use	11/30/26 3:00 PM	11/30/26 4:00 PM
M8-CIN04	Practical AI for Radiology: Monitoring, Managing & Sustaining AI Programs	11/30/26 4:30 PM	11/30/26 5:30 PM
M8-CIN04	Practical AI for Radiology: Monitoring, Managing & Sustaining AI Programs	11/30/26 4:30 PM	11/30/26 5:30 PM
M8-CIN04	Practical AI for Radiology: Monitoring, Managing & Sustaining AI Programs	11/30/26 4:30 PM	11/30/26 5:30 PM
M8-CIN04	Practical AI for Radiology: Monitoring, Managing & Sustaining AI Programs	11/30/26 4:30 PM	11/30/26 5:30 PM
R1-CIN14	The Business of Radiology AI: Procurement, Pricing Models, and Proof	12/3/26 8:00 AM	12/3/26 9:00 AM

R1-CIN14	The Business of Radiology AI: Procurement, Pricing Models, and Proof	12/3/26 8:00 AM	12/3/26 9:00 AM
R1-CIN14	The Business of Radiology AI: Procurement, Pricing Models, and Proof	12/3/26 8:00 AM	12/3/26 9:00 AM
R1-CIN14	The Business of Radiology AI: Procurement, Pricing Models, and Proof	12/3/26 8:00 AM	12/3/26 9:00 AM

R4-CIN15	Back to Basics: Data Misrepresentation and AI Algorithmic Solution (Sponsored by the RSNA Health Equity Committee)	12/3/26 11:00 AM	12/3/26 12:00 PM

R4-CIN15	Back to Basics: Data Misrepresentation and AI Algorithmic Solution (Sponsored by the RSNA Health Equity Committee)	12/3/26 11:00 AM	12/3/26 12:00 PM

R4-CIN15	Back to Basics: Data Misrepresentation and AI Algorithmic Solution (Sponsored by the RSNA Health Equity Committee)	12/3/26 11:00 AM	12/3/26 12:00 PM

R4-CIN15	Back to Basics: Data Misrepresentation and AI Algorithmic Solution (Sponsored by the RSNA Health Equity Committee)	12/3/26 11:00 AM	12/3/26 12:00 PM

R4-CIN15	Back to Basics: Data Misrepresentation and AI Algorithmic Solution (Sponsored by the RSNA Health Equity Committee)	12/3/26 11:00 AM	12/3/26 12:00 PM
R6-CIN17	Contested Ground: Debating the Future of Artificial Intelligence in Radiology (Sponsored by the RSNA Government Relations Committee)	12/3/26 1:30 PM	12/3/26 2:30 PM

R6-CIN17	Contested Ground: Debating the Future of Artificial Intelligence in Radiology (Sponsored by the RSNA Government Relations Committee)	12/3/26 1:30 PM	12/3/26 2:30 PM
R6-CIN17	Contested Ground: Debating the Future of Artificial Intelligence in Radiology (Sponsored by the RSNA Government Relations Committee)	12/3/26 1:30 PM	12/3/26 2:30 PM
R6-CIN17	Contested Ground: Debating the Future of Artificial Intelligence in Radiology (Sponsored by the RSNA Government Relations Committee)	12/3/26 1:30 PM	12/3/26 2:30 PM
R6-CIN17	Contested Ground: Debating the Future of Artificial Intelligence in Radiology (Sponsored by the RSNA Government Relations Committee)	12/3/26 1:30 PM	12/3/26 2:30 PM

R7-CIN18	Rethinking 3D Printing in Radiology: Where It Fits, When It Does Not and How It Survives (Sponsored by the RSNA 3D Printing Special Interest Group)	12/3/26 3:00 PM	12/3/26 4:00 PM
R7-CIN18	Rethinking 3D Printing in Radiology: Where It Fits, When It Does Not and How It Survives (Sponsored by the RSNA 3D Printing Special Interest Group)	12/3/26 3:00 PM	12/3/26 4:00 PM
R7-CIN18	Rethinking 3D Printing in Radiology: Where It Fits, When It Does Not and How It Survives (Sponsored by the RSNA 3D Printing Special Interest Group)	12/3/26 3:00 PM	12/3/26 4:00 PM
R7-CIN18	Rethinking 3D Printing in Radiology: Where It Fits, When It Does Not and How It Survives (Sponsored by the RSNA 3D Printing Special Interest Group)	12/3/26 3:00 PM	12/3/26 4:00 PM

R7-CIN18	Rethinking 3D Printing in Radiology: Where It Fits, When It Does Not and How It Survives (Sponsored by the RSNA 3D Printing Special Interest Group)	12/3/26 3:00 PM	12/3/26 4:00 PM
R7-CIN18	Rethinking 3D Printing in Radiology: Where It Fits, When It Does Not and How It Survives (Sponsored by the RSNA 3D Printing Special Interest Group)	12/3/26 3:00 PM	12/3/26 4:00 PM
R7-CIN18	Rethinking 3D Printing in Radiology: Where It Fits, When It Does Not and How It Survives (Sponsored by the RSNA 3D Printing Special Interest Group)	12/3/26 3:00 PM	12/3/26 4:00 PM
S1-CIN05	Metrics, Momentum, and Mission: Maximizing Benefits of AI in Care Delivery (Sponsored by the RSNA Research Development Committee)	11/29/26 9:00 AM	11/29/26 10:00 AM
S1-CIN05	Metrics, Momentum, and Mission: Maximizing Benefits of AI in Care Delivery (Sponsored by the RSNA Research Development Committee)	11/29/26 9:00 AM	11/29/26 10:00 AM
S1-CIN05	Metrics, Momentum, and Mission: Maximizing Benefits of AI in Care Delivery (Sponsored by the RSNA Research Development Committee)	11/29/26 9:00 AM	11/29/26 10:00 AM

S1-CIN05	Metrics, Momentum, and Mission: Maximizing Benefits of AI in Care Delivery (Sponsored by the RSNA Research Development Committee)	11/29/26 9:00 AM	11/29/26 10:00 AM
S1-CIN05	Metrics, Momentum, and Mission: Maximizing Benefits of AI in Care Delivery (Sponsored by the RSNA Research Development Committee)	11/29/26 9:00 AM	11/29/26 10:00 AM
S2-CIN01	Deep Dive QI for AI: Governance, Evaluation, and Post-Deployment Monitoring (Sponsored by the RSNA Quality Improvement Committee)	11/29/26 10:30 AM	11/29/26 11:30 AM
S2-CIN01	Deep Dive QI for AI: Governance, Evaluation, and Post-Deployment Monitoring (Sponsored by the RSNA Quality Improvement Committee)	11/29/26 10:30 AM	11/29/26 11:30 AM
S2-CIN01	Deep Dive QI for AI: Governance, Evaluation, and Post-Deployment Monitoring (Sponsored by the RSNA Quality Improvement Committee)	11/29/26 10:30 AM	11/29/26 11:30 AM
S2-CIN01	Deep Dive QI for AI: Governance, Evaluation, and Post-Deployment Monitoring (Sponsored by the RSNA Quality Improvement Committee)	11/29/26 10:30 AM	11/29/26 11:30 AM
S2-CIN01	Deep Dive QI for AI: Governance, Evaluation, and Post-Deployment Monitoring (Sponsored by the RSNA Quality Improvement Committee)	11/29/26 10:30 AM	11/29/26 11:30 AM

S2-CIN01	Deep Dive QI for AI: Governance, Evaluation, and Post-Deployment Monitoring (Sponsored by the RSNA Quality Improvement Committee)	11/29/26 10:30 AM	11/29/26 11:30 AM
S2-CIN19	RSNA Deep Learning Lab: A Low-Code Introduction to AI Agents in Radiology (Registration Fee Required)	11/29/26 10:30 AM	11/29/26 11:30 AM
S2-CIN19	RSNA Deep Learning Lab: A Low-Code Introduction to AI Agents in Radiology (Registration Fee Required)	11/29/26 10:30 AM	11/29/26 11:30 AM
S2-CIN19	RSNA Deep Learning Lab: A Low-Code Introduction to AI Agents in Radiology (Registration Fee Required)	11/29/26 10:30 AM	11/29/26 11:30 AM
S5-CIN16	Under the Hood: Informatics Standards that Make Radiology the Center of Care (Sponsored by the RSNA Radiology Informatics Council)	11/29/26 2:30 PM	11/29/26 3:30 PM

S5-CIN16	Under the Hood: Informatics Standards that Make Radiology the Center of Care (Sponsored by the RSNA Radiology Informatics Council)	11/29/26 2:30 PM	11/29/26 3:30 PM

S5-CIN16	Under the Hood: Informatics Standards that Make Radiology the Center of Care (Sponsored by the RSNA Radiology Informatics Council)	11/29/26 2:30 PM	11/29/26 3:30 PM

S5-CIN20	RSNA Deep Learning Lab: Building Production-Ready Agentic AI Applications - A Review of the State of the Art in Radiology (Registration Fee Required)	11/29/26 2:30 PM	11/29/26 3:30 PM

S5-CIN20	RSNA Deep Learning Lab: Building Production-Ready Agentic AI Applications - A Review of the State of the Art in Radiology (Registration Fee Required)	11/29/26 2:30 PM	11/29/26 3:30 PM

T1-CIN07	From Interpretation to Implementation: Bridging the Gap Between Clinical Problems and AI Predictions	12/1/26 8:00 AM	12/1/26 9:00 AM
T1-CIN07	From Interpretation to Implementation: Bridging the Gap Between Clinical Problems and AI Predictions	12/1/26 8:00 AM	12/1/26 9:00 AM
T1-CIN07	From Interpretation to Implementation: Bridging the Gap Between Clinical Problems and AI Predictions	12/1/26 8:00 AM	12/1/26 9:00 AM
T1-CIN07	From Interpretation to Implementation: Bridging the Gap Between Clinical Problems and AI Predictions	12/1/26 8:00 AM	12/1/26 9:00 AM
T3-CIN08	Automatic Radiology Report Generation with Generative AI - Redefining the Radiologist' Workflow	12/1/26 9:30 AM	12/1/26 10:30 AM
T3-CIN08	Automatic Radiology Report Generation with Generative AI - Redefining the Radiologist' Workflow	12/1/26 9:30 AM	12/1/26 10:30 AM
T3-CIN08	Automatic Radiology Report Generation with Generative AI - Redefining the Radiologist' Workflow	12/1/26 9:30 AM	12/1/26 10:30 AM
T3-CIN08	Automatic Radiology Report Generation with Generative AI - Redefining the Radiologist' Workflow	12/1/26 9:30 AM	12/1/26 10:30 AM
T3-CIN08	Automatic Radiology Report Generation with Generative AI - Redefining the Radiologist' Workflow	12/1/26 9:30 AM	12/1/26 10:30 AM
T3-CIN08	Automatic Radiology Report Generation with Generative AI - Redefining the Radiologist' Workflow	12/1/26 9:30 AM	12/1/26 10:30 AM
T6-CIN09	Leveraging AI for High Value Imaging	12/1/26 1:30 PM	12/1/26 2:30 PM
T6-CIN09	Leveraging AI for High Value Imaging	12/1/26 1:30 PM	12/1/26 2:30 PM

T6-CIN09	Leveraging AI for High Value Imaging	12/1/26 1:30 PM	12/1/26 2:30 PM
T6-CIN09	Leveraging AI for High Value Imaging	12/1/26 1:30 PM	12/1/26 2:30 PM
T6-CIN09	Leveraging AI for High Value Imaging	12/1/26 1:30 PM	12/1/26 2:30 PM
T6-CIN23	RSNA Deep Learning Lab: Vibe Coding 101: Building Radiology Applications Without Programming Experience (Registration Fee Required)	12/1/26 1:30 PM	12/1/26 2:30 PM
T6-CIN23	RSNA Deep Learning Lab: Vibe Coding 101: Building Radiology Applications Without Programming Experience (Registration Fee Required)	12/1/26 1:30 PM	12/1/26 2:30 PM
T6-CIN23	RSNA Deep Learning Lab: Vibe Coding 101: Building Radiology Applications Without Programming Experience (Registration Fee Required)	12/1/26 1:30 PM	12/1/26 2:30 PM

T6-CIN23	RSNA Deep Learning Lab: Vibe Coding 101: Building Radiology Applications Without Programming Experience (Registration Fee Required)	12/1/26 1:30 PM	12/1/26 2:30 PM
T8-CIN10	Impact of AI on the Radiology Workforce	12/1/26 4:30 PM	12/1/26 5:30 PM
T8-CIN10	Impact of AI on the Radiology Workforce	12/1/26 4:30 PM	12/1/26 5:30 PM
T8-CIN10	Impact of AI on the Radiology Workforce	12/1/26 4:30 PM	12/1/26 5:30 PM
T8-CIN10	Impact of AI on the Radiology Workforce	12/1/26 4:30 PM	12/1/26 5:30 PM
T8-CIN10	Impact of AI on the Radiology Workforce	12/1/26 4:30 PM	12/1/26 5:30 PM
T8-CIN24	RSNA Deep Learning Lab: Leveraging Pretrained Embedding Models for Your Data and Use Cases (Registration Fee Required)	12/1/26 4:30 PM	12/1/26 5:30 PM
T8-CIN24	RSNA Deep Learning Lab: Leveraging Pretrained Embedding Models for Your Data and Use Cases (Registration Fee Required)	12/1/26 4:30 PM	12/1/26 5:30 PM
W1-CIN11	How to Prepare For, Survive, and Recover From Your Next Cyberattack	12/2/26 8:00 AM	12/2/26 9:00 AM
W1-CIN11	How to Prepare For, Survive, and Recover From Your Next Cyberattack	12/2/26 8:00 AM	12/2/26 9:00 AM
W1-CIN11	How to Prepare For, Survive, and Recover From Your Next Cyberattack	12/2/26 8:00 AM	12/2/26 9:00 AM
W1-CIN11	How to Prepare For, Survive, and Recover From Your Next Cyberattack	12/2/26 8:00 AM	12/2/26 9:00 AM

W1-CIN25	RSNA Deep Learning Lab: How to Fine Tune a Large Language Model (Registration Fee Required)	12/2/26 8:00 AM	12/2/26 9:00 AM
W1-CIN25	RSNA Deep Learning Lab: How to Fine Tune a Large Language Model (Registration Fee Required)	12/2/26 8:00 AM	12/2/26 9:00 AM
W1-CIN25	RSNA Deep Learning Lab: How to Fine Tune a Large Language Model (Registration Fee Required)	12/2/26 8:00 AM	12/2/26 9:00 AM

W3-CIN26	RSNA Deep Learning Lab: An Introduction to Sourcing and Preprocessing Medical Imaging Data for Vision-Language Models (Registration Fee Required)	12/2/26 9:30 AM	12/2/26 10:30 AM
W3-CIN26	RSNA Deep Learning Lab: An Introduction to Sourcing and Preprocessing Medical Imaging Data for Vision-Language Models (Registration Fee Required)	12/2/26 9:30 AM	12/2/26 10:30 AM
W3-CIN26	RSNA Deep Learning Lab: An Introduction to Sourcing and Preprocessing Medical Imaging Data for Vision-Language Models (Registration Fee Required)	12/2/26 9:30 AM	12/2/26 10:30 AM
W3-CIN26	RSNA Deep Learning Lab: An Introduction to Sourcing and Preprocessing Medical Imaging Data for Vision-Language Models (Registration Fee Required)	12/2/26 9:30 AM	12/2/26 10:30 AM
W6-CIN12	Imaging Biomarkers at Scale: Building Programs That Actually Deliver Care	12/2/26 1:30 PM	12/2/26 2:30 PM

W6-CIN12	Imaging Biomarkers at Scale: Building Programs That Actually Deliver Care	12/2/26 1:30 PM	12/2/26 2:30 PM
W6-CIN12	Imaging Biomarkers at Scale: Building Programs That Actually Deliver Care	12/2/26 1:30 PM	12/2/26 2:30 PM
W6-CIN12	Imaging Biomarkers at Scale: Building Programs That Actually Deliver Care	12/2/26 1:30 PM	12/2/26 2:30 PM
W6-CIN12	Imaging Biomarkers at Scale: Building Programs That Actually Deliver Care	12/2/26 1:30 PM	12/2/26 2:30 PM
W8-CIN13	From Dictation to Drafts: LLMs in Radiology Reporting - What Worked, What Broke, What’s Next	12/2/26 4:30 PM	12/2/26 5:30 PM

W8-CIN13	From Dictation to Drafts: LLMs in Radiology Reporting - What Worked, What Broke, What's Next	12/2/26 4:30 PM	12/2/26 5:30 PM
W8-CIN13	From Dictation to Drafts: LLMs in Radiology Reporting - What Worked, What Broke, What's Next	12/2/26 4:30 PM	12/2/26 5:30 PM
W8-CIN13	From Dictation to Drafts: LLMs in Radiology Reporting - What Worked, What Broke, What's Next	12/2/26 4:30 PM	12/2/26 5:30 PM
W8-CIN13	From Dictation to Drafts: LLMs in Radiology Reporting - What Worked, What Broke, What's Next	12/2/26 4:30 PM	12/2/26 5:30 PM

M1-CIR01	Breast Cryoablation: From Patient Selection to Long-Term Follow-Up	11/30/26 8:00 AM	11/30/26 9:00 AM
M1-CIR01	Breast Cryoablation: From Patient Selection to Long-Term Follow-Up	11/30/26 8:00 AM	11/30/26 9:00 AM
M1-CIR01	Breast Cryoablation: From Patient Selection to Long-Term Follow-Up	11/30/26 8:00 AM	11/30/26 9:00 AM

M1-CIR01	Breast Cryoablation: From Patient Selection to Long-Term Follow-Up	11/30/26 8:00 AM	11/30/26 9:00 AM
M1-CIR01	Breast Cryoablation: From Patient Selection to Long-Term Follow-Up	11/30/26 8:00 AM	11/30/26 9:00 AM
M1-CIR01	Breast Cryoablation: From Patient Selection to Long-Term Follow-Up	11/30/26 8:00 AM	11/30/26 9:00 AM

M3-CIR10	My Most Feared Complications and How I Managed Them: Case Based Review	11/30/26 9:30 AM	11/30/26 10:30 AM
M3-CIR10	My Most Feared Complications and How I Managed Them: Case Based Review	11/30/26 9:30 AM	11/30/26 10:30 AM
M3-CIR10	My Most Feared Complications and How I Managed Them: Case Based Review	11/30/26 9:30 AM	11/30/26 10:30 AM
M3-CIR10	My Most Feared Complications and How I Managed Them: Case Based Review	11/30/26 9:30 AM	11/30/26 10:30 AM

M3-CIR10	My Most Feared Complications and How I Managed Them: Case Based Review	11/30/26 9:30 AM	11/30/26 10:30 AM
M7-CIR09	Multidisciplinary Management of Patients With Neuroendocrine Liver Metastasis in 2026	11/30/26 3:00 PM	11/30/26 4:00 PM
M7-CIR09	Multidisciplinary Management of Patients With Neuroendocrine Liver Metastasis in 2026	11/30/26 3:00 PM	11/30/26 4:00 PM
M7-CIR09	Multidisciplinary Management of Patients With Neuroendocrine Liver Metastasis in 2026	11/30/26 3:00 PM	11/30/26 4:00 PM

M7-CIR09	Multidisciplinary Management of Patients With Neuroendocrine Liver Metastasis in 2026	11/30/26 3:00 PM	11/30/26 4:00 PM
M7-CIR09	Multidisciplinary Management of Patients With Neuroendocrine Liver Metastasis in 2026	11/30/26 3:00 PM	11/30/26 4:00 PM
M7-CIR09	Multidisciplinary Management of Patients With Neuroendocrine Liver Metastasis in 2026	11/30/26 3:00 PM	11/30/26 4:00 PM
R3-CIR05	Embolization in Trauma: Choosing the Right Agent	12/3/26 9:30 AM	12/3/26 10:30 AM

R3-CIR05	Embolization in Trauma: Choosing the Right Agent	12/3/26 9:30 AM	12/3/26 10:30 AM
R3-CIR05	Embolization in Trauma: Choosing the Right Agent	12/3/26 9:30 AM	12/3/26 10:30 AM
R3-CIR05	Embolization in Trauma: Choosing the Right Agent	12/3/26 9:30 AM	12/3/26 10:30 AM
R3-CIR05	Embolization in Trauma: Choosing the Right Agent	12/3/26 9:30 AM	12/3/26 10:30 AM
R3-CIR05	Embolization in Trauma: Choosing the Right Agent	12/3/26 9:30 AM	12/3/26 10:30 AM

R7-CIR06	Portal Hypertension & TIPS in Modern Practice	12/3/26 3:00 PM	12/3/26 4:00 PM
R7-CIR06	Portal Hypertension & TIPS in Modern Practice	12/3/26 3:00 PM	12/3/26 4:00 PM
R7-CIR06	Portal Hypertension & TIPS in Modern Practice	12/3/26 3:00 PM	12/3/26 4:00 PM
R7-CIR06	Portal Hypertension & TIPS in Modern Practice	12/3/26 3:00 PM	12/3/26 4:00 PM
R7-CIR06	Portal Hypertension & TIPS in Modern Practice	12/3/26 3:00 PM	12/3/26 4:00 PM
R7-CIR06	Portal Hypertension & TIPS in Modern Practice	12/3/26 3:00 PM	12/3/26 4:00 PM

S1-CIR11	Image-Guided Biopsies in the Era of Precision Medicine: Basic and Advanced Principles	11/29/26 9:00 AM	11/29/26 10:00 AM
S1-CIR11	Image-Guided Biopsies in the Era of Precision Medicine: Basic and Advanced Principles	11/29/26 9:00 AM	11/29/26 10:00 AM
S1-CIR11	Image-Guided Biopsies in the Era of Precision Medicine: Basic and Advanced Principles	11/29/26 9:00 AM	11/29/26 10:00 AM
S1-CIR11	Image-Guided Biopsies in the Era of Precision Medicine: Basic and Advanced Principles	11/29/26 9:00 AM	11/29/26 10:00 AM

S1-CIR11	Image-Guided Biopsies in the Era of Precision Medicine: Basic and Advanced Principles	11/29/26 9:00 AM	11/29/26 10:00 AM
S1-CIR11	Image-Guided Biopsies in the Era of Precision Medicine: Basic and Advanced Principles	11/29/26 9:00 AM	11/29/26 10:00 AM
S5-CIR04	Immuno-Oncology and Locoregional Therapy in HCC (Translational Science and Clinical Evidence)	11/29/26 2:30 PM	11/29/26 3:30 PM
S5-CIR04	Immuno-Oncology and Locoregional Therapy in HCC (Translational Science and Clinical Evidence)	11/29/26 2:30 PM	11/29/26 3:30 PM

S5-CIR04	Immuno-Oncology and Locoregional Therapy in HCC (Translational Science and Clinical Evidence)	11/29/26 2:30 PM	11/29/26 3:30 PM
S5-CIR04	Immuno-Oncology and Locoregional Therapy in HCC (Translational Science and Clinical Evidence)	11/29/26 2:30 PM	11/29/26 3:30 PM
S5-CIR04	Immuno-Oncology and Locoregional Therapy in HCC (Translational Science and Clinical Evidence)	11/29/26 2:30 PM	11/29/26 3:30 PM
S5-CIR04	Immuno-Oncology and Locoregional Therapy in HCC (Translational Science and Clinical Evidence)	11/29/26 2:30 PM	11/29/26 3:30 PM
T1-CIR03	Imaging and Treatment Updates in Liver Cancer	12/1/26 8:00 AM	12/1/26 9:00 AM

T1-CIR03	Imaging and Treatment Updates in Liver Cancer	12/1/26 8:00 AM	12/1/26 9:00 AM
T1-CIR03	Imaging and Treatment Updates in Liver Cancer	12/1/26 8:00 AM	12/1/26 9:00 AM
T1-CIR03	Imaging and Treatment Updates in Liver Cancer	12/1/26 8:00 AM	12/1/26 9:00 AM
T1-CIR03	Imaging and Treatment Updates in Liver Cancer	12/1/26 8:00 AM	12/1/26 9:00 AM
T1-CIR03	Imaging and Treatment Updates in Liver Cancer	12/1/26 8:00 AM	12/1/26 9:00 AM

T8-CIR08	Image Guided Therapies for the Management of Thyroid Disease	12/1/26 4:30 PM	12/1/26 5:30 PM
T8-CIR08	Image Guided Therapies for the Management of Thyroid Disease	12/1/26 4:30 PM	12/1/26 5:30 PM
T8-CIR08	Image Guided Therapies for the Management of Thyroid Disease	12/1/26 4:30 PM	12/1/26 5:30 PM
T8-CIR08	Image Guided Therapies for the Management of Thyroid Disease	12/1/26 4:30 PM	12/1/26 5:30 PM
T8-CIR08	Image Guided Therapies for the Management of Thyroid Disease	12/1/26 4:30 PM	12/1/26 5:30 PM
T8-CIR08	Image Guided Therapies for the Management of Thyroid Disease	12/1/26 4:30 PM	12/1/26 5:30 PM

W1-CIR02	Response Assessment After Interventional Oncology Procedures: Imaging Criteria, Pitfalls, and Outcomes	12/2/26 8:00 AM	12/2/26 9:00 AM
W1-CIR02	Response Assessment After Interventional Oncology Procedures: Imaging Criteria, Pitfalls, and Outcomes	12/2/26 8:00 AM	12/2/26 9:00 AM
W1-CIR02	Response Assessment After Interventional Oncology Procedures: Imaging Criteria, Pitfalls, and Outcomes	12/2/26 8:00 AM	12/2/26 9:00 AM

W1-CIR02	Response Assessment After Interventional Oncology Procedures: Imaging Criteria, Pitfalls, and Outcomes	12/2/26 8:00 AM	12/2/26 9:00 AM
W1-CIR02	Response Assessment After Interventional Oncology Procedures: Imaging Criteria, Pitfalls, and Outcomes	12/2/26 8:00 AM	12/2/26 9:00 AM
W1-CIR02	Response Assessment After Interventional Oncology Procedures: Imaging Criteria, Pitfalls, and Outcomes	12/2/26 8:00 AM	12/2/26 9:00 AM

W8-CIR07	Image Guided Therapies for Chronic Musculoskeletal Pain	12/2/26 4:30 PM	12/2/26 5:30 PM
W8-CIR07	Image Guided Therapies for Chronic Musculoskeletal Pain	12/2/26 4:30 PM	12/2/26 5:30 PM
W8-CIR07	Image Guided Therapies for Chronic Musculoskeletal Pain	12/2/26 4:30 PM	12/2/26 5:30 PM
W8-CIR07	Image Guided Therapies for Chronic Musculoskeletal Pain	12/2/26 4:30 PM	12/2/26 5:30 PM

W8-CIR07	Image Guided Therapies for Chronic Musculoskeletal Pain	12/2/26 4:30 PM	12/2/26 5:30 PM
W8-CIR07	Image Guided Therapies for Chronic Musculoskeletal Pain	12/2/26 4:30 PM	12/2/26 5:30 PM
M1-CMK03	Foundations of Knee Imaging	11/30/26 8:00 AM	11/30/26 9:00 AM
M1-CMK03	Foundations of Knee Imaging	11/30/26 8:00 AM	11/30/26 9:00 AM
M1-CMK03	Foundations of Knee Imaging	11/30/26 8:00 AM	11/30/26 9:00 AM
M1-CMK03	Foundations of Knee Imaging	11/30/26 8:00 AM	11/30/26 9:00 AM
M1-CMK03	Foundations of Knee Imaging	11/30/26 8:00 AM	11/30/26 9:00 AM

M3-CMK10	Peripheral Nerve Imaging Beyond Entrapment: Imaging-Driven Diagnosis and Therapeutic Decision-Making	11/30/26 9:30 AM	11/30/26 10:30 AM
M3-CMK10	Peripheral Nerve Imaging Beyond Entrapment: Imaging-Driven Diagnosis and Therapeutic Decision-Making	11/30/26 9:30 AM	11/30/26 10:30 AM
M3-CMK10	Peripheral Nerve Imaging Beyond Entrapment: Imaging-Driven Diagnosis and Therapeutic Decision-Making	11/30/26 9:30 AM	11/30/26 10:30 AM
M3-CMK10	Peripheral Nerve Imaging Beyond Entrapment: Imaging-Driven Diagnosis and Therapeutic Decision-Making	11/30/26 9:30 AM	11/30/26 10:30 AM
M3-CMK10	Peripheral Nerve Imaging Beyond Entrapment: Imaging-Driven Diagnosis and Therapeutic Decision-Making	11/30/26 9:30 AM	11/30/26 10:30 AM

M3-CMK10	Peripheral Nerve Imaging Beyond Entrapment: Imaging-Driven Diagnosis and Therapeutic Decision-Making	11/30/26 9:30 AM	11/30/26 10:30 AM
M6-CMK15	Musculoskeletal Ultrasound: Normal Appearances, Pathologic Conditions and Hands-On Demo (Elbow, Hand and Wrist, Nerves of the Foot and Ankle)	11/30/26 1:30 PM	11/30/26 3:00 PM
M6-CMK15	Musculoskeletal Ultrasound: Normal Appearances, Pathologic Conditions and Hands-On Demo (Elbow, Hand and Wrist, Nerves of the Foot and Ankle)	11/30/26 1:30 PM	11/30/26 3:00 PM
M6-CMK15	Musculoskeletal Ultrasound: Normal Appearances, Pathologic Conditions and Hands-On Demo (Elbow, Hand and Wrist, Nerves of the Foot and Ankle)	11/30/26 1:30 PM	11/30/26 3:00 PM
M6-CMK15	Musculoskeletal Ultrasound: Normal Appearances, Pathologic Conditions and Hands-On Demo (Elbow, Hand and Wrist, Nerves of the Foot and Ankle)	11/30/26 1:30 PM	11/30/26 3:00 PM
M6-CMK15	Musculoskeletal Ultrasound: Normal Appearances, Pathologic Conditions and Hands-On Demo (Elbow, Hand and Wrist, Nerves of the Foot and Ankle)	11/30/26 1:30 PM	11/30/26 3:00 PM
M6-CMK15	Musculoskeletal Ultrasound: Normal Appearances, Pathologic Conditions and Hands-On Demo (Elbow, Hand and Wrist, Nerves of the Foot and Ankle)	11/30/26 1:30 PM	11/30/26 3:00 PM

M6-CMK15	Musculoskeletal Ultrasound: Normal Appearances, Pathologic Conditions and Hands-On Demo (Elbow, Hand and Wrist, Nerves of the Foot and Ankle)	11/30/26 1:30 PM	11/30/26 3:00 PM
M6-CMK15	Musculoskeletal Ultrasound: Normal Appearances, Pathologic Conditions and Hands-On Demo (Elbow, Hand and Wrist, Nerves of the Foot and Ankle)	11/30/26 1:30 PM	11/30/26 3:00 PM
R1-CMK07	Imaging of the Wrist/Hand: Case-Based Essentials	12/3/26 8:00 AM	12/3/26 9:00 AM
R1-CMK07	Imaging of the Wrist/Hand: Case-Based Essentials	12/3/26 8:00 AM	12/3/26 9:00 AM
R1-CMK07	Imaging of the Wrist/Hand: Case-Based Essentials	12/3/26 8:00 AM	12/3/26 9:00 AM
R1-CMK07	Imaging of the Wrist/Hand: Case-Based Essentials	12/3/26 8:00 AM	12/3/26 9:00 AM

R1-CMK07	Imaging of the Wrist/Hand: Case-Based Essentials	12/3/26 8:00 AM	12/3/26 9:00 AM
R4-CMK04	Essentials of Hip Imaging	12/3/26 11:00 AM	12/3/26 12:00 PM
R4-CMK04	Essentials of Hip Imaging	12/3/26 11:00 AM	12/3/26 12:00 PM
R4-CMK04	Essentials of Hip Imaging	12/3/26 11:00 AM	12/3/26 12:00 PM
R4-CMK04	Essentials of Hip Imaging	12/3/26 11:00 AM	12/3/26 12:00 PM
R4-CMK04	Essentials of Hip Imaging	12/3/26 11:00 AM	12/3/26 12:00 PM
R7-CMK14	Metal Imaging: Multimodal Evaluation of Normal Appearances and Complications	12/3/26 3:00 PM	12/3/26 4:00 PM
R7-CMK14	Metal Imaging: Multimodal Evaluation of Normal Appearances and Complications	12/3/26 3:00 PM	12/3/26 4:00 PM

R7-CMK14	Metal Imaging: Multimodal Evaluation of Normal Appearances and Complications	12/3/26 3:00 PM	12/3/26 4:00 PM
R7-CMK14	Metal Imaging: Multimodal Evaluation of Normal Appearances and Complications	12/3/26 3:00 PM	12/3/26 4:00 PM
R7-CMK14	Metal Imaging: Multimodal Evaluation of Normal Appearances and Complications	12/3/26 3:00 PM	12/3/26 4:00 PM
S1-CMK01	Essentials of Shoulder Imaging	11/29/26 9:00 AM	11/29/26 10:00 AM
S1-CMK01	Essentials of Shoulder Imaging	11/29/26 9:00 AM	11/29/26 10:00 AM
S1-CMK01	Essentials of Shoulder Imaging	11/29/26 9:00 AM	11/29/26 10:00 AM
S1-CMK01	Essentials of Shoulder Imaging	11/29/26 9:00 AM	11/29/26 10:00 AM
S1-CMK01	Essentials of Shoulder Imaging	11/29/26 9:00 AM	11/29/26 10:00 AM
S2-CMK02	Advanced Shoulder Imaging: What you Should Know	11/29/26 10:30 AM	11/29/26 11:30 AM
S2-CMK02	Advanced Shoulder Imaging: What you Should Know	11/29/26 10:30 AM	11/29/26 11:30 AM

S2-CMK02	Advanced Shoulder Imaging: What you Should Know	11/29/26 10:30 AM	11/29/26 11:30 AM
S2-CMK02	Advanced Shoulder Imaging: What you Should Know	11/29/26 10:30 AM	11/29/26 11:30 AM
S2-CMK02	Advanced Shoulder Imaging: What you Should Know	11/29/26 10:30 AM	11/29/26 11:30 AM
S5-CMK05	Fundamentals of Imaging the Ankle and Foot	11/29/26 2:30 PM	11/29/26 3:30 PM
S5-CMK05	Fundamentals of Imaging the Ankle and Foot	11/29/26 2:30 PM	11/29/26 3:30 PM
S5-CMK05	Fundamentals of Imaging the Ankle and Foot	11/29/26 2:30 PM	11/29/26 3:30 PM
S5-CMK05	Fundamentals of Imaging the Ankle and Foot	11/29/26 2:30 PM	11/29/26 3:30 PM
S5-CMK05	Fundamentals of Imaging the Ankle and Foot	11/29/26 2:30 PM	11/29/26 3:30 PM
T1-CMK11	Case-Based Review of Musculoskeletal Tumor Imaging Concepts	12/1/26 8:00 AM	12/1/26 9:00 AM

T1-CMK11	Case-Based Review of Musculoskeletal Tumor Imaging Concepts	12/1/26 8:00 AM	12/1/26 9:00 AM
T1-CMK11	Case-Based Review of Musculoskeletal Tumor Imaging Concepts	12/1/26 8:00 AM	12/1/26 9:00 AM
T1-CMK11	Case-Based Review of Musculoskeletal Tumor Imaging Concepts	12/1/26 8:00 AM	12/1/26 9:00 AM
T1-CMK11	Case-Based Review of Musculoskeletal Tumor Imaging Concepts	12/1/26 8:00 AM	12/1/26 9:00 AM
T1-CMK17	RSNA Hands-On Lab: Musculoskeletal Ultrasound of the Shoulder: Dynamic Assessment Techniques and Review of Interventional Procedures (Registration Fee Required)	12/1/26 8:30 AM	12/1/26 10:00 AM
T1-CMK17	RSNA Hands-On Lab: Musculoskeletal Ultrasound of the Shoulder: Dynamic Assessment Techniques and Review of Interventional Procedures (Registration Fee Required)	12/1/26 8:30 AM	12/1/26 10:00 AM

T1-CMK17	RSNA Hands-On Lab: Musculoskeletal Ultrasound of the Shoulder: Dynamic Assessment Techniques and Review of Interventional Procedures (Registration Fee Required)	12/1/26 8:30 AM	12/1/26 10:00 AM
T1-CMK17	RSNA Hands-On Lab: Musculoskeletal Ultrasound of the Shoulder: Dynamic Assessment Techniques and Review of Interventional Procedures (Registration Fee Required)	12/1/26 8:30 AM	12/1/26 10:00 AM
T1-CMK17	RSNA Hands-On Lab: Musculoskeletal Ultrasound of the Shoulder: Dynamic Assessment Techniques and Review of Interventional Procedures (Registration Fee Required)	12/1/26 8:30 AM	12/1/26 10:00 AM
T1-CMK17	RSNA Hands-On Lab: Musculoskeletal Ultrasound of the Shoulder: Dynamic Assessment Techniques and Review of Interventional Procedures (Registration Fee Required)	12/1/26 8:30 AM	12/1/26 10:00 AM
T1-CMK17	RSNA Hands-On Lab: Musculoskeletal Ultrasound of the Shoulder: Dynamic Assessment Techniques and Review of Interventional Procedures (Registration Fee Required)	12/1/26 8:30 AM	12/1/26 10:00 AM
T1-CMK17	RSNA Hands-On Lab: Musculoskeletal Ultrasound of the Shoulder: Dynamic Assessment Techniques and Review of Interventional Procedures (Registration Fee Required)	12/1/26 8:30 AM	12/1/26 10:00 AM

T1-CMK17	RSNA Hands-On Lab: Musculoskeletal Ultrasound of the Shoulder: Dynamic Assessment Techniques and Review of Interventional Procedures (Registration Fee Required)	12/1/26 8:30 AM	12/1/26 10:00 AM
T1-CMK17	RSNA Hands-On Lab: Musculoskeletal Ultrasound of the Shoulder: Dynamic Assessment Techniques and Review of Interventional Procedures (Registration Fee Required)	12/1/26 8:30 AM	12/1/26 10:00 AM
T1-CMK17	RSNA Hands-On Lab: Musculoskeletal Ultrasound of the Shoulder: Dynamic Assessment Techniques and Review of Interventional Procedures (Registration Fee Required)	12/1/26 8:30 AM	12/1/26 10:00 AM
T1-CMK17	RSNA Hands-On Lab: Musculoskeletal Ultrasound of the Shoulder: Dynamic Assessment Techniques and Review of Interventional Procedures (Registration Fee Required)	12/1/26 8:30 AM	12/1/26 10:00 AM
T1-CMK17	RSNA Hands-On Lab: Musculoskeletal Ultrasound of the Shoulder: Dynamic Assessment Techniques and Review of Interventional Procedures (Registration Fee Required)	12/1/26 8:30 AM	12/1/26 10:00 AM
T1-CMK17	RSNA Hands-On Lab: Musculoskeletal Ultrasound of the Shoulder: Dynamic Assessment Techniques and Review of Interventional Procedures (Registration Fee Required)	12/1/26 8:30 AM	12/1/26 10:00 AM

T1-CMK17	RSNA Hands-On Lab: Musculoskeletal Ultrasound of the Shoulder: Dynamic Assessment Techniques and Review of Interventional Procedures (Registration Fee Required)	12/1/26 8:30 AM	12/1/26 10:00 AM
T1-CMK17	RSNA Hands-On Lab: Musculoskeletal Ultrasound of the Shoulder: Dynamic Assessment Techniques and Review of Interventional Procedures (Registration Fee Required)	12/1/26 8:30 AM	12/1/26 10:00 AM
T1-CMK17	RSNA Hands-On Lab: Musculoskeletal Ultrasound of the Shoulder: Dynamic Assessment Techniques and Review of Interventional Procedures (Registration Fee Required)	12/1/26 8:30 AM	12/1/26 10:00 AM
T1-CMK17	RSNA Hands-On Lab: Musculoskeletal Ultrasound of the Shoulder: Dynamic Assessment Techniques and Review of Interventional Procedures (Registration Fee Required)	12/1/26 8:30 AM	12/1/26 10:00 AM
T1-CMK17	RSNA Hands-On Lab: Musculoskeletal Ultrasound of the Shoulder: Dynamic Assessment Techniques and Review of Interventional Procedures (Registration Fee Required)	12/1/26 8:30 AM	12/1/26 10:00 AM
T6-CMK16	Multimodality Imaging of Skeletal Muscle: From Edema to Etiology	12/1/26 1:30 PM	12/1/26 2:30 PM

T6-CMK16	Multimodality Imaging of Skeletal Muscle: From Edema to Etiology	12/1/26 1:30 PM	12/1/26 2:30 PM
T6-CMK16	Multimodality Imaging of Skeletal Muscle: From Edema to Etiology	12/1/26 1:30 PM	12/1/26 2:30 PM
T6-CMK16	Multimodality Imaging of Skeletal Muscle: From Edema to Etiology	12/1/26 1:30 PM	12/1/26 2:30 PM
T6-CMK16	Multimodality Imaging of Skeletal Muscle: From Edema to Etiology	12/1/26 1:30 PM	12/1/26 2:30 PM
T6-CMK16	Multimodality Imaging of Skeletal Muscle: From Edema to Etiology	12/1/26 1:30 PM	12/1/26 2:30 PM
T8-CMK08	Essentials of Elbow Imaging	12/1/26 4:30 PM	12/1/26 5:30 PM
T8-CMK08	Essentials of Elbow Imaging	12/1/26 4:30 PM	12/1/26 5:30 PM
T8-CMK08	Essentials of Elbow Imaging	12/1/26 4:30 PM	12/1/26 5:30 PM

T8-CMK08	Essentials of Elbow Imaging	12/1/26 4:30 PM	12/1/26 5:30 PM
T8-CMK08	Essentials of Elbow Imaging	12/1/26 4:30 PM	12/1/26 5:30 PM
W1-CMK06	Advanced Imaging of the Foot/Ankle	12/2/26 8:00 AM	12/2/26 9:00 AM
W1-CMK06	Advanced Imaging of the Foot/Ankle	12/2/26 8:00 AM	12/2/26 9:00 AM
W1-CMK06	Advanced Imaging of the Foot/Ankle	12/2/26 8:00 AM	12/2/26 9:00 AM
W1-CMK06	Advanced Imaging of the Foot/Ankle	12/2/26 8:00 AM	12/2/26 9:00 AM
W1-CMK06	Advanced Imaging of the Foot/Ankle	12/2/26 8:00 AM	12/2/26 9:00 AM
W3-CMK09	When Do I Prefer Ultrasound to MRI?	12/2/26 9:30 AM	12/2/26 10:30 AM
W3-CMK09	When Do I Prefer Ultrasound to MRI?	12/2/26 9:30 AM	12/2/26 10:30 AM

W3-CMK09	When Do I Prefer Ultrasound to MRI?	12/2/26 9:30 AM	12/2/26 10:30 AM
W3-CMK09	When Do I Prefer Ultrasound to MRI?	12/2/26 9:30 AM	12/2/26 10:30 AM
W3-CMK09	When Do I Prefer Ultrasound to MRI?	12/2/26 9:30 AM	12/2/26 10:30 AM
W3-CMK09	When Do I Prefer Ultrasound to MRI?	12/2/26 9:30 AM	12/2/26 10:30 AM
W3-CMK09	When Do I Prefer Ultrasound to MRI?	12/2/26 9:30 AM	12/2/26 10:30 AM
W6-CMK12	Case-Based Essentials of Arthritis Imaging	12/2/26 1:30 PM	12/2/26 2:30 PM
W6-CMK12	Case-Based Essentials of Arthritis Imaging	12/2/26 1:30 PM	12/2/26 2:30 PM
W6-CMK12	Case-Based Essentials of Arthritis Imaging	12/2/26 1:30 PM	12/2/26 2:30 PM
W6-CMK12	Case-Based Essentials of Arthritis Imaging	12/2/26 1:30 PM	12/2/26 2:30 PM
W8-CMK13	Fundamentals of Musculoskeletal Infection Imaging	12/2/26 4:30 PM	12/2/26 5:30 PM

W8-CMK13	Fundamentals of Musculoskeletal Infection Imaging	12/2/26 4:30 PM	12/2/26 5:30 PM
W8-CMK13	Fundamentals of Musculoskeletal Infection Imaging	12/2/26 4:30 PM	12/2/26 5:30 PM
W8-CMK13	Fundamentals of Musculoskeletal Infection Imaging	12/2/26 4:30 PM	12/2/26 5:30 PM
W8-CMK13	Fundamentals of Musculoskeletal Infection Imaging	12/2/26 4:30 PM	12/2/26 5:30 PM
W8-CMK13	Fundamentals of Musculoskeletal Infection Imaging	12/2/26 4:30 PM	12/2/26 5:30 PM
M1-CMS04	Elastography: US or MRI, What is the Right Choice?	11/30/26 8:00 AM	11/30/26 9:00 AM
M1-CMS04	Elastography: US or MRI, What is the Right Choice?	11/30/26 8:00 AM	11/30/26 9:00 AM

M1-CMS04	Elastography: US or MRI, What is the Right Choice?	11/30/26 8:00 AM	11/30/26 9:00 AM
M1-CMS04	Elastography: US or MRI, What is the Right Choice?	11/30/26 8:00 AM	11/30/26 9:00 AM
M1-CMS04	Elastography: US or MRI, What is the Right Choice?	11/30/26 8:00 AM	11/30/26 9:00 AM
R1-CMS05	Whole-Body MRI: Evidence-Based Oncology vs. Opportunistic Screening	12/3/26 8:00 AM	12/3/26 9:00 AM
R1-CMS05	Whole-Body MRI: Evidence-Based Oncology vs. Opportunistic Screening	12/3/26 8:00 AM	12/3/26 9:00 AM

R1-CMS05	Whole-Body MRI: Evidence-Based Oncology vs. Opportunistic Screening	12/3/26 8:00 AM	12/3/26 9:00 AM
R1-CMS05	Whole-Body MRI: Evidence-Based Oncology vs. Opportunistic Screening	12/3/26 8:00 AM	12/3/26 9:00 AM
R1-CMS05	Whole-Body MRI: Evidence-Based Oncology vs. Opportunistic Screening	12/3/26 8:00 AM	12/3/26 9:00 AM

R1-CMS05	Whole-Body MRI: Evidence-Based Oncology vs. Opportunistic Screening	12/3/26 8:00 AM	12/3/26 9:00 AM
R7-CMS08	CEUS vs MRI: Practical Decision-Making Across Organ Systems	12/3/26 3:00 PM	12/3/26 4:00 PM
R7-CMS08	CEUS vs MRI: Practical Decision-Making Across Organ Systems	12/3/26 3:00 PM	12/3/26 4:00 PM
R7-CMS08	CEUS vs MRI: Practical Decision-Making Across Organ Systems	12/3/26 3:00 PM	12/3/26 4:00 PM

R7-CMS08	CEUS vs MRI: Practical Decision-Making Across Organ Systems	12/3/26 3:00 PM	12/3/26 4:00 PM
R7-CMS08	CEUS vs MRI: Practical Decision-Making Across Organ Systems	12/3/26 3:00 PM	12/3/26 4:00 PM
R7-CMS08	CEUS vs MRI: Practical Decision-Making Across Organ Systems	12/3/26 3:00 PM	12/3/26 4:00 PM
S1-CMS09	RSNA Hands-On Lab: Training for Contrast Enhanced Ultrasound for on Label and Off Label Uses (Registration Fee Required)	11/29/26 9:30 AM	11/29/26 11:30 AM
S1-CMS09	RSNA Hands-On Lab: Training for Contrast Enhanced Ultrasound for on Label and Off Label Uses (Registration Fee Required)	11/29/26 9:30 AM	11/29/26 11:30 AM
S1-CMS09	RSNA Hands-On Lab: Training for Contrast Enhanced Ultrasound for on Label and Off Label Uses (Registration Fee Required)	11/29/26 9:30 AM	11/29/26 11:30 AM

S1-CMS09	RSNA Hands-On Lab: Training for Contrast Enhanced Ultrasound for on Label and Off Label Uses (Registration Fee Required)	11/29/26 9:30 AM	11/29/26 11:30 AM
S1-CMS09	RSNA Hands-On Lab: Training for Contrast Enhanced Ultrasound for on Label and Off Label Uses (Registration Fee Required)	11/29/26 9:30 AM	11/29/26 11:30 AM
S1-CMS09	RSNA Hands-On Lab: Training for Contrast Enhanced Ultrasound for on Label and Off Label Uses (Registration Fee Required)	11/29/26 9:30 AM	11/29/26 11:30 AM
S1-CMS09	RSNA Hands-On Lab: Training for Contrast Enhanced Ultrasound for on Label and Off Label Uses (Registration Fee Required)	11/29/26 9:30 AM	11/29/26 11:30 AM
S1-CMS09	RSNA Hands-On Lab: Training for Contrast Enhanced Ultrasound for on Label and Off Label Uses (Registration Fee Required)	11/29/26 9:30 AM	11/29/26 11:30 AM
S1-CMS09	RSNA Hands-On Lab: Training for Contrast Enhanced Ultrasound for on Label and Off Label Uses (Registration Fee Required)	11/29/26 9:30 AM	11/29/26 11:30 AM
S1-CMS09	RSNA Hands-On Lab: Training for Contrast Enhanced Ultrasound for on Label and Off Label Uses (Registration Fee Required)	11/29/26 9:30 AM	11/29/26 11:30 AM
S1-CMS09	RSNA Hands-On Lab: Training for Contrast Enhanced Ultrasound for on Label and Off Label Uses (Registration Fee Required)	11/29/26 9:30 AM	11/29/26 11:30 AM

S1-CMS09	RSNA Hands-On Lab: Training for Contrast Enhanced Ultrasound for on Label and Off Label Uses (Registration Fee Required)	11/29/26 9:30 AM	11/29/26 11:30 AM
S1-CMS09	RSNA Hands-On Lab: Training for Contrast Enhanced Ultrasound for on Label and Off Label Uses (Registration Fee Required)	11/29/26 9:30 AM	11/29/26 11:30 AM
S1-CMS09	RSNA Hands-On Lab: Training for Contrast Enhanced Ultrasound for on Label and Off Label Uses (Registration Fee Required)	11/29/26 9:30 AM	11/29/26 11:30 AM
S1-CMS09	RSNA Hands-On Lab: Training for Contrast Enhanced Ultrasound for on Label and Off Label Uses (Registration Fee Required)	11/29/26 9:30 AM	11/29/26 11:30 AM
S1-CMS09	RSNA Hands-On Lab: Training for Contrast Enhanced Ultrasound for on Label and Off Label Uses (Registration Fee Required)	11/29/26 9:30 AM	11/29/26 11:30 AM
S1-CMS09	RSNA Hands-On Lab: Training for Contrast Enhanced Ultrasound for on Label and Off Label Uses (Registration Fee Required)	11/29/26 9:30 AM	11/29/26 11:30 AM
S1-CMS09	RSNA Hands-On Lab: Training for Contrast Enhanced Ultrasound for on Label and Off Label Uses (Registration Fee Required)	11/29/26 9:30 AM	11/29/26 11:30 AM
S1-CMS09	RSNA Hands-On Lab: Training for Contrast Enhanced Ultrasound for on Label and Off Label Uses (Registration Fee Required)	11/29/26 9:30 AM	11/29/26 11:30 AM

S2-CMS01	Head-to-Toe Immune-Mediated Disorders: Imaging Patterns in Autoimmune Diseases	11/29/26 10:30 AM	11/29/26 11:30 AM
S2-CMS01	Head-to-Toe Immune-Mediated Disorders: Imaging Patterns in Autoimmune Diseases	11/29/26 10:30 AM	11/29/26 11:30 AM
S2-CMS01	Head-to-Toe Immune-Mediated Disorders: Imaging Patterns in Autoimmune Diseases	11/29/26 10:30 AM	11/29/26 11:30 AM
S2-CMS01	Head-to-Toe Immune-Mediated Disorders: Imaging Patterns in Autoimmune Diseases	11/29/26 10:30 AM	11/29/26 11:30 AM
S2-CMS01	Head-to-Toe Immune-Mediated Disorders: Imaging Patterns in Autoimmune Diseases	11/29/26 10:30 AM	11/29/26 11:30 AM
S4-CMS07	Immunotherapy Imaging: What Every Radiologist Needs to Know	11/29/26 1:00 PM	11/29/26 2:00 PM

S4-CMS07	Immunotherapy Imaging: What Every Radiologist Needs to Know	11/29/26 1:00 PM	11/29/26 2:00 PM

S4-CMS07	Immunotherapy Imaging: What Every Radiologist Needs to Know	11/29/26 1:00 PM	11/29/26 2:00 PM

S4-CMS07	Immunotherapy Imaging: What Every Radiologist Needs to Know	11/29/26 1:00 PM	11/29/26 2:00 PM

S4-CMS07	Immunotherapy Imaging: What Every Radiologist Needs to Know	11/29/26 1:00 PM	11/29/26 2:00 PM

S4-CMS07	Immunotherapy Imaging: What Every Radiologist Needs to Know	11/29/26 1:00 PM	11/29/26 2:00 PM

T1-CMS02	Forensic Radiology: Imaging at the Intersection of Medicine and Law	12/1/26 8:00 AM	12/1/26 9:00 AM

T1-CMS02	Forensic Radiology: Imaging at the Intersection of Medicine and Law	12/1/26 8:00 AM	12/1/26 9:00 AM

T1-CMS02	Forensic Radiology: Imaging at the Intersection of Medicine and Law	12/1/26 8:00 AM	12/1/26 9:00 AM

T1-CMS02	Forensic Radiology: Imaging at the Intersection of Medicine and Law	12/1/26 8:00 AM	12/1/26 9:00 AM

T1-CMS02	Forensic Radiology: Imaging at the Intersection of Medicine and Law	12/1/26 8:00 AM	12/1/26 9:00 AM

T1-CMS02	Forensic Radiology: Imaging at the Intersection of Medicine and Law	12/1/26 8:00 AM	12/1/26 9:00 AM
T8-CMS03	Photon-Counting CT: From Physics to Clinical Practice	12/1/26 4:30 PM	12/1/26 5:30 PM
T8-CMS03	Photon-Counting CT: From Physics to Clinical Practice	12/1/26 4:30 PM	12/1/26 5:30 PM
T8-CMS03	Photon-Counting CT: From Physics to Clinical Practice	12/1/26 4:30 PM	12/1/26 5:30 PM

T8-CMS03	Photon-Counting CT: From Physics to Clinical Practice	12/1/26 4:30 PM	12/1/26 5:30 PM
T8-CMS03	Photon-Counting CT: From Physics to Clinical Practice	12/1/26 4:30 PM	12/1/26 5:30 PM
T8-CMS03	Photon-Counting CT: From Physics to Clinical Practice	12/1/26 4:30 PM	12/1/26 5:30 PM
W1-CMS10	RSNA Hands-On Lab: High-Fidelity Simulation Training on Contrast Reaction Management (Registration Fee Required)	12/2/26 8:30 AM	12/2/26 10:30 AM
W1-CMS10	RSNA Hands-On Lab: High-Fidelity Simulation Training on Contrast Reaction Management (Registration Fee Required)	12/2/26 8:30 AM	12/2/26 10:30 AM

W1-CMS10	RSNA Hands-On Lab: High-Fidelity Simulation Training on Contrast Reaction Management (Registration Fee Required)	12/2/26 8:30 AM	12/2/26 10:30 AM
W1-CMS10	RSNA Hands-On Lab: High-Fidelity Simulation Training on Contrast Reaction Management (Registration Fee Required)	12/2/26 8:30 AM	12/2/26 10:30 AM
W1-CMS10	RSNA Hands-On Lab: High-Fidelity Simulation Training on Contrast Reaction Management (Registration Fee Required)	12/2/26 8:30 AM	12/2/26 10:30 AM
W1-CMS10	RSNA Hands-On Lab: High-Fidelity Simulation Training on Contrast Reaction Management (Registration Fee Required)	12/2/26 8:30 AM	12/2/26 10:30 AM
W1-CMS10	RSNA Hands-On Lab: High-Fidelity Simulation Training on Contrast Reaction Management (Registration Fee Required)	12/2/26 8:30 AM	12/2/26 10:30 AM
W1-CMS10	RSNA Hands-On Lab: High-Fidelity Simulation Training on Contrast Reaction Management (Registration Fee Required)	12/2/26 8:30 AM	12/2/26 10:30 AM

W1-CMS10	RSNA Hands-On Lab: High-Fidelity Simulation Training on Contrast Reaction Management (Registration Fee Required)	12/2/26 8:30 AM	12/2/26 10:30 AM
W1-CMS10	RSNA Hands-On Lab: High-Fidelity Simulation Training on Contrast Reaction Management (Registration Fee Required)	12/2/26 8:30 AM	12/2/26 10:30 AM
W1-CMS10	RSNA Hands-On Lab: High-Fidelity Simulation Training on Contrast Reaction Management (Registration Fee Required)	12/2/26 8:30 AM	12/2/26 10:30 AM
W1-CMS10	RSNA Hands-On Lab: High-Fidelity Simulation Training on Contrast Reaction Management (Registration Fee Required)	12/2/26 8:30 AM	12/2/26 10:30 AM
W1-CMS10	RSNA Hands-On Lab: High-Fidelity Simulation Training on Contrast Reaction Management (Registration Fee Required)	12/2/26 8:30 AM	12/2/26 10:30 AM
W1-CMS10	RSNA Hands-On Lab: High-Fidelity Simulation Training on Contrast Reaction Management (Registration Fee Required)	12/2/26 8:30 AM	12/2/26 10:30 AM

W1-CMS10	RSNA Hands-On Lab: High-Fidelity Simulation Training on Contrast Reaction Management (Registration Fee Required)	12/2/26 8:30 AM	12/2/26 10:30 AM
W1-CMS10	RSNA Hands-On Lab: High-Fidelity Simulation Training on Contrast Reaction Management (Registration Fee Required)	12/2/26 8:30 AM	12/2/26 10:30 AM
W1-CMS10	RSNA Hands-On Lab: High-Fidelity Simulation Training on Contrast Reaction Management (Registration Fee Required)	12/2/26 8:30 AM	12/2/26 10:30 AM
W1-CMS10	RSNA Hands-On Lab: High-Fidelity Simulation Training on Contrast Reaction Management (Registration Fee Required)	12/2/26 8:30 AM	12/2/26 10:30 AM
W1-CMS10	RSNA Hands-On Lab: High-Fidelity Simulation Training on Contrast Reaction Management (Registration Fee Required)	12/2/26 8:30 AM	12/2/26 10:30 AM
W1-CMS10	RSNA Hands-On Lab: High-Fidelity Simulation Training on Contrast Reaction Management (Registration Fee Required)	12/2/26 8:30 AM	12/2/26 10:30 AM

W1-CMS10	RSNA Hands-On Lab: High-Fidelity Simulation Training on Contrast Reaction Management (Registration Fee Required)	12/2/26 8:30 AM	12/2/26 10:30 AM
W1-CMS10	RSNA Hands-On Lab: High-Fidelity Simulation Training on Contrast Reaction Management (Registration Fee Required)	12/2/26 8:30 AM	12/2/26 10:30 AM
W1-CMS10	RSNA Hands-On Lab: High-Fidelity Simulation Training on Contrast Reaction Management (Registration Fee Required)	12/2/26 8:30 AM	12/2/26 10:30 AM
W1-CMS10	RSNA Hands-On Lab: High-Fidelity Simulation Training on Contrast Reaction Management (Registration Fee Required)	12/2/26 8:30 AM	12/2/26 10:30 AM
W1-CMS10	RSNA Hands-On Lab: High-Fidelity Simulation Training on Contrast Reaction Management (Registration Fee Required)	12/2/26 8:30 AM	12/2/26 10:30 AM
W1-CMS10	RSNA Hands-On Lab: High-Fidelity Simulation Training on Contrast Reaction Management (Registration Fee Required)	12/2/26 8:30 AM	12/2/26 10:30 AM

W6-CMS06	Imaging Paraneoplastic Syndromes: The Last Differential Diagnosis	12/2/26 1:30 PM	12/2/26 2:30 PM
W6-CMS06	Imaging Paraneoplastic Syndromes: The Last Differential Diagnosis	12/2/26 1:30 PM	12/2/26 2:30 PM
W6-CMS06	Imaging Paraneoplastic Syndromes: The Last Differential Diagnosis	12/2/26 1:30 PM	12/2/26 2:30 PM
W6-CMS06	Imaging Paraneoplastic Syndromes: The Last Differential Diagnosis	12/2/26 1:30 PM	12/2/26 2:30 PM
W6-CMS06	Imaging Paraneoplastic Syndromes: The Last Differential Diagnosis	12/2/26 1:30 PM	12/2/26 2:30 PM

W6-CMS06	Imaging Paraneoplastic Syndromes: The Last Differential Diagnosis	12/2/26 1:30 PM	12/2/26 2:30 PM
M3-CNMMI07	New Trends in PET-CT Imaging of Infection and Inflammation	11/30/26 9:30 AM	11/30/26 10:30 AM

M3-CNMMI07	New Trends in PET-CT Imaging of Infection and Inflammation	11/30/26 9:30 AM	11/30/26 10:30 AM

M3-CNMMI07	New Trends in PET-CT Imaging of Infection and Inflammation	11/30/26 9:30 AM	11/30/26 10:30 AM

M3-CNMMI07	New Trends in PET-CT Imaging of Infection and Inflammation	11/30/26 9:30 AM	11/30/26 10:30 AM

M3-CNMMI07	New Trends in PET-CT Imaging of Infection and Inflammation	11/30/26 9:30 AM	11/30/26 10:30 AM
M8-CNMMI01	Update in Nuclear Medicine for Womens Imaging	11/30/26 4:30 PM	11/30/26 5:30 PM

M8-CNMMI01	Update in Nuclear Medicine for Womens Imaging	11/30/26 4:30 PM	11/30/26 5:30 PM
M8-CNMMI01	Update in Nuclear Medicine for Womens Imaging	11/30/26 4:30 PM	11/30/26 5:30 PM
M8-CNMMI01	Update in Nuclear Medicine for Womens Imaging	11/30/26 4:30 PM	11/30/26 5:30 PM
R3-CNMMI06	Advances in Pediatric Molecular Imaging and New Trends in Pediatric Theranostics	12/3/26 9:30 AM	12/3/26 10:30 AM
R3-CNMMI06	Advances in Pediatric Molecular Imaging and New Trends in Pediatric Theranostics	12/3/26 9:30 AM	12/3/26 10:30 AM

R3-CNMMI06	Advances in Pediatric Molecular Imaging and New Trends in Pediatric Theranostics	12/3/26 9:30 AM	12/3/26 10:30 AM
R3-CNMMI06	Advances in Pediatric Molecular Imaging and New Trends in Pediatric Theranostics	12/3/26 9:30 AM	12/3/26 10:30 AM
R3-CNMMI06	Advances in Pediatric Molecular Imaging and New Trends in Pediatric Theranostics	12/3/26 9:30 AM	12/3/26 10:30 AM
R7-CNMMI08	Integrating Quantification into Clinical Molecular Imaging of the Brain	12/3/26 3:00 PM	12/3/26 4:00 PM
R7-CNMMI08	Integrating Quantification into Clinical Molecular Imaging of the Brain	12/3/26 3:00 PM	12/3/26 4:00 PM
R7-CNMMI08	Integrating Quantification into Clinical Molecular Imaging of the Brain	12/3/26 3:00 PM	12/3/26 4:00 PM
R7-CNMMI08	Integrating Quantification into Clinical Molecular Imaging of the Brain	12/3/26 3:00 PM	12/3/26 4:00 PM
R7-CNMMI08	Integrating Quantification into Clinical Molecular Imaging of the Brain	12/3/26 3:00 PM	12/3/26 4:00 PM

S1-CNMMI04	Updates in Multimodality Head and Neck Imaging: Focus on Thyroid and Parathyroid Disease	11/29/26 9:00 AM	11/29/26 10:00 AM
S1-CNMMI04	Updates in Multimodality Head and Neck Imaging: Focus on Thyroid and Parathyroid Disease	11/29/26 9:00 AM	11/29/26 10:00 AM
S1-CNMMI04	Updates in Multimodality Head and Neck Imaging: Focus on Thyroid and Parathyroid Disease	11/29/26 9:00 AM	11/29/26 10:00 AM
S1-CNMMI04	Updates in Multimodality Head and Neck Imaging: Focus on Thyroid and Parathyroid Disease	11/29/26 9:00 AM	11/29/26 10:00 AM
S1-CNMMI04	Updates in Multimodality Head and Neck Imaging: Focus on Thyroid and Parathyroid Disease	11/29/26 9:00 AM	11/29/26 10:00 AM
S5-CNMMI02	Update on PSMA PET/CT and Theranostics in Latin America and United States	11/29/26 2:30 PM	11/29/26 3:30 PM

S5-CNMMI02	Update on PSMA PET/CT and Theranostics in Latin America and United States	11/29/26 2:30 PM	11/29/26 3:30 PM

S5-CNMMI02	Update on PSMA PET/CT and Theranostics in Latin America and United States	11/29/26 2:30 PM	11/29/26 3:30 PM

S5-CNMMI02	Update on PSMA PET/CT and Theranostics in Latin America and United States	11/29/26 2:30 PM	11/29/26 3:30 PM
T1-CNMMI09	Case-based Review of Molecular Imaging of Neurodegenerative Disorders	12/1/26 8:00 AM	12/1/26 9:00 AM
T1-CNMMI09	Case-based Review of Molecular Imaging of Neurodegenerative Disorders	12/1/26 8:00 AM	12/1/26 9:00 AM
T1-CNMMI09	Case-based Review of Molecular Imaging of Neurodegenerative Disorders	12/1/26 8:00 AM	12/1/26 9:00 AM
T1-CNMMI09	Case-based Review of Molecular Imaging of Neurodegenerative Disorders	12/1/26 8:00 AM	12/1/26 9:00 AM
T3-CNMMI10	Case-based Review of PET for Patient Selection and Monitoring Response to PSMA-targeted Therapy	12/1/26 9:30 AM	12/1/26 10:30 AM
T3-CNMMI10	Case-based Review of PET for Patient Selection and Monitoring Response to PSMA-targeted Therapy	12/1/26 9:30 AM	12/1/26 10:30 AM
T3-CNMMI10	Case-based Review of PET for Patient Selection and Monitoring Response to PSMA-targeted Therapy	12/1/26 9:30 AM	12/1/26 10:30 AM

T3-CNMMI10	Case-based Review of PET for Patient Selection and Monitoring Response to PSMA-targeted Therapy	12/1/26 9:30 AM	12/1/26 10:30 AM
T6-CNMMI11	Case-based Review of Principles of PET Imaging in Lymphoproliferative Disorders	12/1/26 1:30 PM	12/1/26 2:30 PM
T6-CNMMI11	Case-based Review of Principles of PET Imaging in Lymphoproliferative Disorders	12/1/26 1:30 PM	12/1/26 2:30 PM
T6-CNMMI11	Case-based Review of Principles of PET Imaging in Lymphoproliferative Disorders	12/1/26 1:30 PM	12/1/26 2:30 PM
T6-CNMMI11	Case-based Review of Principles of PET Imaging in Lymphoproliferative Disorders	12/1/26 1:30 PM	12/1/26 2:30 PM
T7-CNMMI12	Case-based Review of Essentials of PET for Gastrointestinal and Genitourinary Malignancies	12/1/26 3:00 PM	12/1/26 4:00 PM
T7-CNMMI12	Case-based Review of Essentials of PET for Gastrointestinal and Genitourinary Malignancies	12/1/26 3:00 PM	12/1/26 4:00 PM

T7-CNMMI12	Case-based Review of Essentials of PET for Gastrointestinal and Genitourinary Malignancies	12/1/26 3:00 PM	12/1/26 4:00 PM
T7-CNMMI12	Case-based Review of Essentials of PET for Gastrointestinal and Genitourinary Malignancies	12/1/26 3:00 PM	12/1/26 4:00 PM
W3-CNMMI03	Emerging Trends in Theranostics for Neuroendocrine Tumors and Novel Agents	12/2/26 9:30 AM	12/2/26 10:30 AM

W3-CNMMI03	Emerging Trends in Theranostics for Neuroendocrine Tumors and Novel Agents	12/2/26 9:30 AM	12/2/26 10:30 AM

W3-CNMMI03	Emerging Trends in Theranostics for Neuroendocrine Tumors and Novel Agents	12/2/26 9:30 AM	12/2/26 10:30 AM

W3-CNMMI03	Emerging Trends in Theranostics for Neuroendocrine Tumors and Novel Agents	12/2/26 9:30 AM	12/2/26 10:30 AM

W3-CNMMI03	Emerging Trends in Theranostics for Neuroendocrine Tumors and Novel Agents	12/2/26 9:30 AM	12/2/26 10:30 AM

W7-CNMMI05	Innovations in AI and Novel Methods in Molecular Imaging	12/2/26 3:00 PM	12/2/26 4:00 PM
W7-CNMMI05	Innovations in AI and Novel Methods in Molecular Imaging	12/2/26 3:00 PM	12/2/26 4:00 PM
W7-CNMMI05	Innovations in AI and Novel Methods in Molecular Imaging	12/2/26 3:00 PM	12/2/26 4:00 PM
W7-CNMMI05	Innovations in AI and Novel Methods in Molecular Imaging	12/2/26 3:00 PM	12/2/26 4:00 PM

W7-CNMMI05	Innovations in AI and Novel Methods in Molecular Imaging	12/2/26 3:00 PM	12/2/26 4:00 PM
M1-CNPM01	Can We Save Academic Radiology?	11/30/26 8:00 AM	11/30/26 9:00 AM
M1-CNPM01	Can We Save Academic Radiology?	11/30/26 8:00 AM	11/30/26 9:00 AM
M1-CNPM01	Can We Save Academic Radiology?	11/30/26 8:00 AM	11/30/26 9:00 AM
M1-CNPM01	Can We Save Academic Radiology?	11/30/26 8:00 AM	11/30/26 9:00 AM
M3-CNPM06	Residency 2.0: Innovative Residency Curricula	11/30/26 9:30 AM	11/30/26 10:30 AM
M3-CNPM06	Residency 2.0: Innovative Residency Curricula	11/30/26 9:30 AM	11/30/26 10:30 AM

M3-CNPM06	Residency 2.0: Innovative Residency Curricula	11/30/26 9:30 AM	11/30/26 10:30 AM
M3-CNPM06	Residency 2.0: Innovative Residency Curricula	11/30/26 9:30 AM	11/30/26 10:30 AM
M3-CNPM06	Residency 2.0: Innovative Residency Curricula	11/30/26 9:30 AM	11/30/26 10:30 AM
M3-CNPM06	Residency 2.0: Innovative Residency Curricula	11/30/26 9:30 AM	11/30/26 10:30 AM
M7-CNPM11	In a World of High RVUs is Quality in Freefall? Rapid Fire Solutions to Maintain the Quality Mission (Sponsored by the RSNA Quality Improvement Committee)	11/30/26 3:00 PM	11/30/26 4:00 PM

M7-CNPM11	In a World of High RVUs is Quality in Freefall? Rapid Fire Solutions to Maintain the Quality Mission (Sponsored by the RSNA Quality Improvement Committee)	11/30/26 3:00 PM	11/30/26 4:00 PM
M7-CNPM11	In a World of High RVUs is Quality in Freefall? Rapid Fire Solutions to Maintain the Quality Mission (Sponsored by the RSNA Quality Improvement Committee)	11/30/26 3:00 PM	11/30/26 4:00 PM
M7-CNPM11	In a World of High RVUs is Quality in Freefall? Rapid Fire Solutions to Maintain the Quality Mission (Sponsored by the RSNA Quality Improvement Committee)	11/30/26 3:00 PM	11/30/26 4:00 PM
M7-CNPM11	In a World of High RVUs is Quality in Freefall? Rapid Fire Solutions to Maintain the Quality Mission (Sponsored by the RSNA Quality Improvement Committee)	11/30/26 3:00 PM	11/30/26 4:00 PM
M7-CNPM11	In a World of High RVUs is Quality in Freefall? Rapid Fire Solutions to Maintain the Quality Mission (Sponsored by the RSNA Quality Improvement Committee)	11/30/26 3:00 PM	11/30/26 4:00 PM
M7-CNPM11	In a World of High RVUs is Quality in Freefall? Rapid Fire Solutions to Maintain the Quality Mission (Sponsored by the RSNA Quality Improvement Committee)	11/30/26 3:00 PM	11/30/26 4:00 PM
M7-CNPM11	In a World of High RVUs is Quality in Freefall? Rapid Fire Solutions to Maintain the Quality Mission (Sponsored by the RSNA Quality Improvement Committee)	11/30/26 3:00 PM	11/30/26 4:00 PM

M8-CNPM16	Advocacy in Action: Advancing Radiology Through RSNA Government Relations (Sponsored by the RSNA Government Relations Committee)	11/30/26 4:30 PM	11/30/26 5:30 PM
M8-CNPM16	Advocacy in Action: Advancing Radiology Through RSNA Government Relations (Sponsored by the RSNA Government Relations Committee)	11/30/26 4:30 PM	11/30/26 5:30 PM
M8-CNPM16	Advocacy in Action: Advancing Radiology Through RSNA Government Relations (Sponsored by the RSNA Government Relations Committee)	11/30/26 4:30 PM	11/30/26 5:30 PM
M8-CNPM16	Advocacy in Action: Advancing Radiology Through RSNA Government Relations (Sponsored by the RSNA Government Relations Committee)	11/30/26 4:30 PM	11/30/26 5:30 PM

M8-CNPM16	Advocacy in Action: Advancing Radiology Through RSNA Government Relations (Sponsored by the RSNA Government Relations Committee)	11/30/26 4:30 PM	11/30/26 5:30 PM
R1-CNPM14	Unwrapping the Past: How Forensic Imaging Reveals the Secrets of Mummies	12/3/26 8:00 AM	12/3/26 9:00 AM
R1-CNPM14	Unwrapping the Past: How Forensic Imaging Reveals the Secrets of Mummies	12/3/26 8:00 AM	12/3/26 9:00 AM
R1-CNPM14	Unwrapping the Past: How Forensic Imaging Reveals the Secrets of Mummies	12/3/26 8:00 AM	12/3/26 9:00 AM
R1-CNPM14	Unwrapping the Past: How Forensic Imaging Reveals the Secrets of Mummies	12/3/26 8:00 AM	12/3/26 9:00 AM

R1-CNPM14	Unwrapping the Past: How Forensic Imaging Reveals the Secrets of Mummies	12/3/26 8:00 AM	12/3/26 9:00 AM
R1-CNPM14	Unwrapping the Past: How Forensic Imaging Reveals the Secrets of Mummies	12/3/26 8:00 AM	12/3/26 9:00 AM
R7-CNPM15	Loneliness and Radiology: How Humanities Can Enhance Connection and Well-Being (Sponsored by the RSNA Professionalism Committee)	12/3/26 3:00 PM	12/3/26 4:00 PM
R7-CNPM15	Loneliness and Radiology: How Humanities Can Enhance Connection and Well-Being (Sponsored by the RSNA Professionalism Committee)	12/3/26 3:00 PM	12/3/26 4:00 PM

R7-CNPM15	Loneliness and Radiology: How Humanities Can Enhance Connection and Well-Being (Sponsored by the RSNA Professionalism Committee)	12/3/26 3:00 PM	12/3/26 4:00 PM
R7-CNPM15	Loneliness and Radiology: How Humanities Can Enhance Connection and Well-Being (Sponsored by the RSNA Professionalism Committee)	12/3/26 3:00 PM	12/3/26 4:00 PM
R7-CNPM15	Loneliness and Radiology: How Humanities Can Enhance Connection and Well-Being (Sponsored by the RSNA Professionalism Committee)	12/3/26 3:00 PM	12/3/26 4:00 PM
R7-CNPM15	Loneliness and Radiology: How Humanities Can Enhance Connection and Well-Being (Sponsored by the RSNA Professionalism Committee)	12/3/26 3:00 PM	12/3/26 4:00 PM

S1-CNPM09	Ensuring Access to Radiology for Individuals of Different Abilities (Sponsored by the RSNA Health Equity Committee and RSNA Committee on Diversity, Equity & Inclusion)	11/29/26 9:00 AM	11/29/26 10:00 AM
S1-CNPM09	Ensuring Access to Radiology for Individuals of Different Abilities (Sponsored by the RSNA Health Equity Committee and RSNA Committee on Diversity, Equity & Inclusion)	11/29/26 9:00 AM	11/29/26 10:00 AM
S1-CNPM09	Ensuring Access to Radiology for Individuals of Different Abilities (Sponsored by the RSNA Health Equity Committee and RSNA Committee on Diversity, Equity & Inclusion)	11/29/26 9:00 AM	11/29/26 10:00 AM
S1-CNPM09	Ensuring Access to Radiology for Individuals of Different Abilities (Sponsored by the RSNA Health Equity Committee and RSNA Committee on Diversity, Equity & Inclusion)	11/29/26 9:00 AM	11/29/26 10:00 AM
S1-CNPM09	Ensuring Access to Radiology for Individuals of Different Abilities (Sponsored by the RSNA Health Equity Committee and RSNA Committee on Diversity, Equity & Inclusion)	11/29/26 9:00 AM	11/29/26 10:00 AM
S1-CNPM09	Ensuring Access to Radiology for Individuals of Different Abilities (Sponsored by the RSNA Health Equity Committee and RSNA Committee on Diversity, Equity & Inclusion)	11/29/26 9:00 AM	11/29/26 10:00 AM

S2-CNPM08	Academic Care Without Walls: Strengthening Integrated Care Networks Across Academic and Community Sites (Sponsored by the RSNA Health Equity Committee)	11/29/26 10:30 AM	11/29/26 11:30 AM
S2-CNPM08	Academic Care Without Walls: Strengthening Integrated Care Networks Across Academic and Community Sites (Sponsored by the RSNA Health Equity Committee)	11/29/26 10:30 AM	11/29/26 11:30 AM
S2-CNPM08	Academic Care Without Walls: Strengthening Integrated Care Networks Across Academic and Community Sites (Sponsored by the RSNA Health Equity Committee)	11/29/26 10:30 AM	11/29/26 11:30 AM

S2-CNPM08	Academic Care Without Walls: Strengthening Integrated Care Networks Across Academic and Community Sites (Sponsored by the RSNA Health Equity Committee)	11/29/26 10:30 AM	11/29/26 11:30 AM
S2-CNPM08	Academic Care Without Walls: Strengthening Integrated Care Networks Across Academic and Community Sites (Sponsored by the RSNA Health Equity Committee)	11/29/26 10:30 AM	11/29/26 11:30 AM
S2-CNPM08	Academic Care Without Walls: Strengthening Integrated Care Networks Across Academic and Community Sites (Sponsored by the RSNA Health Equity Committee)	11/29/26 10:30 AM	11/29/26 11:30 AM
S4-CNPM02	Is Low-Field the Solution to MRI Access in Africa?	11/29/26 1:00 PM	11/29/26 2:00 PM
S4-CNPM02	Is Low-Field the Solution to MRI Access in Africa?	11/29/26 1:00 PM	11/29/26 2:00 PM

S4-CNPM02	Is Low-Field the Solution to MRI Access in Africa?	11/29/26 1:00 PM	11/29/26 2:00 PM
S4-CNPM02	Is Low-Field the Solution to MRI Access in Africa?	11/29/26 1:00 PM	11/29/26 2:00 PM
S5-CNPM03	The Human Side of Radiology	11/29/26 2:30 PM	11/29/26 3:30 PM
S5-CNPM03	The Human Side of Radiology	11/29/26 2:30 PM	11/29/26 3:30 PM
S5-CNPM03	The Human Side of Radiology	11/29/26 2:30 PM	11/29/26 3:30 PM
S5-CNPM03	The Human Side of Radiology	11/29/26 2:30 PM	11/29/26 3:30 PM

S5-CNPM03	The Human Side of Radiology	11/29/26 2:30 PM	11/29/26 3:30 PM
S5-CNPM03	The Human Side of Radiology	11/29/26 2:30 PM	11/29/26 3:30 PM
T3-CNPM17	Preparing for the 2026 Radiology Job Market: Tools for Success (Sponsored by the RSNA Resident and Fellow Committee)	12/1/26 9:30 AM	12/1/26 10:30 AM
T3-CNPM17	Preparing for the 2026 Radiology Job Market: Tools for Success (Sponsored by the RSNA Resident and Fellow Committee)	12/1/26 9:30 AM	12/1/26 10:30 AM

T3-CNPM17	Preparing for the 2026 Radiology Job Market: Tools for Success (Sponsored by the RSNA Resident and Fellow Committee)	12/1/26 9:30 AM	12/1/26 10:30 AM
T3-CNPM17	Preparing for the 2026 Radiology Job Market: Tools for Success (Sponsored by the RSNA Resident and Fellow Committee)	12/1/26 9:30 AM	12/1/26 10:30 AM
T3-CNPM17	Preparing for the 2026 Radiology Job Market: Tools for Success (Sponsored by the RSNA Resident and Fellow Committee)	12/1/26 9:30 AM	12/1/26 10:30 AM
T3-CNPM17	Preparing for the 2026 Radiology Job Market: Tools for Success (Sponsored by the RSNA Resident and Fellow Committee)	12/1/26 9:30 AM	12/1/26 10:30 AM

T3-CNPM17	Preparing for the 2026 Radiology Job Market: Tools for Success (Sponsored by the RSNA Resident and Fellow Committee)	12/1/26 9:30 AM	12/1/26 10:30 AM
T3-CNPM17	Preparing for the 2026 Radiology Job Market: Tools for Success (Sponsored by the RSNA Resident and Fellow Committee)	12/1/26 9:30 AM	12/1/26 10:30 AM
T3-CNPM17	Preparing for the 2026 Radiology Job Market: Tools for Success (Sponsored by the RSNA Resident and Fellow Committee)	12/1/26 9:30 AM	12/1/26 10:30 AM
T3-CNPM17	Preparing for the 2026 Radiology Job Market: Tools for Success (Sponsored by the RSNA Resident and Fellow Committee)	12/1/26 9:30 AM	12/1/26 10:30 AM

T6-CNPM10	AI and Patient Care in Radiology: Promise, Practice, and Pitfalls (Sponsored by the RSNA Public Information Committee)	12/1/26 1:30 PM	12/1/26 2:30 PM
T6-CNPM10	AI and Patient Care in Radiology: Promise, Practice, and Pitfalls (Sponsored by the RSNA Public Information Committee)	12/1/26 1:30 PM	12/1/26 2:30 PM
T6-CNPM10	AI and Patient Care in Radiology: Promise, Practice, and Pitfalls (Sponsored by the RSNA Public Information Committee)	12/1/26 1:30 PM	12/1/26 2:30 PM
T6-CNPM10	AI and Patient Care in Radiology: Promise, Practice, and Pitfalls (Sponsored by the RSNA Public Information Committee)	12/1/26 1:30 PM	12/1/26 2:30 PM
T8-CNPM12	Elevating Excellence: Cultivating Radiology Faculty for the Next Era (Sponsored by the RSNA Research Development Committee)	12/1/26 4:30 PM	12/1/26 5:30 PM
T8-CNPM12	Elevating Excellence: Cultivating Radiology Faculty for the Next Era (Sponsored by the RSNA Research Development Committee)	12/1/26 4:30 PM	12/1/26 5:30 PM
T8-CNPM12	Elevating Excellence: Cultivating Radiology Faculty for the Next Era (Sponsored by the RSNA Research Development Committee)	12/1/26 4:30 PM	12/1/26 5:30 PM

T8-CNPM12	Elevating Excellence: Cultivating Radiology Faculty for the Next Era (Sponsored by the RSNA Research Development Committee)	12/1/26 4:30 PM	12/1/26 5:30 PM
T8-CNPM12	Elevating Excellence: Cultivating Radiology Faculty for the Next Era (Sponsored by the RSNA Research Development Committee)	12/1/26 4:30 PM	12/1/26 5:30 PM
W3-CNPM05	How to Recruit Radiologists in the Current Job Market	12/2/26 9:30 AM	12/2/26 10:30 AM
W3-CNPM05	How to Recruit Radiologists in the Current Job Market	12/2/26 9:30 AM	12/2/26 10:30 AM
W3-CNPM05	How to Recruit Radiologists in the Current Job Market	12/2/26 9:30 AM	12/2/26 10:30 AM
W3-CNPM05	How to Recruit Radiologists in the Current Job Market	12/2/26 9:30 AM	12/2/26 10:30 AM
W6-CNPM04	The Power of International Radiologist Advocacy	12/2/26 1:30 PM	12/2/26 2:30 PM
W6-CNPM04	The Power of International Radiologist Advocacy	12/2/26 1:30 PM	12/2/26 2:30 PM

W6-CNPM04	The Power of International Radiologist Advocacy	12/2/26 1:30 PM	12/2/26 2:30 PM
W6-CNPM04	The Power of International Radiologist Advocacy	12/2/26 1:30 PM	12/2/26 2:30 PM
W7-CNPM07	Federal Policy in Practice: How Washington is Shaping Radiology (Sponsored by the RSNA Government Relations Committee)	12/2/26 3:00 PM	12/2/26 4:00 PM
W7-CNPM07	Federal Policy in Practice: How Washington is Shaping Radiology (Sponsored by the RSNA Government Relations Committee)	12/2/26 3:00 PM	12/2/26 4:00 PM
W7-CNPM07	Federal Policy in Practice: How Washington is Shaping Radiology (Sponsored by the RSNA Government Relations Committee)	12/2/26 3:00 PM	12/2/26 4:00 PM

W7-CNPM07	Federal Policy in Practice: How Washington is Shaping Radiology (Sponsored by the RSNA Government Relations Committee)	12/2/26 3:00 PM	12/2/26 4:00 PM
W8-CNPM13	Right Study, Right Dose: Patient-First Strategies to Reduce Contrast and Environmental Impact (Sponsored by the RSNA Public Information Committee)	12/2/26 4:30 PM	12/2/26 5:30 PM
W8-CNPM13	Right Study, Right Dose: Patient-First Strategies to Reduce Contrast and Environmental Impact (Sponsored by the RSNA Public Information Committee)	12/2/26 4:30 PM	12/2/26 5:30 PM
W8-CNPM13	Right Study, Right Dose: Patient-First Strategies to Reduce Contrast and Environmental Impact (Sponsored by the RSNA Public Information Committee)	12/2/26 4:30 PM	12/2/26 5:30 PM

W8-CNPM13	Right Study, Right Dose: Patient-First Strategies to Reduce Contrast and Environmental Impact (Sponsored by the RSNA Public Information Committee)	12/2/26 4:30 PM	12/2/26 5:30 PM
M1-CNR13	A Crown of Thorns: Managing a Busy Neuroradiology Practice	11/30/26 8:00 AM	11/30/26 9:00 AM
M1-CNR13	A Crown of Thorns: Managing a Busy Neuroradiology Practice	11/30/26 8:00 AM	11/30/26 9:00 AM

M1-CNR13	A Crown of Thorns: Managing a Busy Neuroradiology Practice	11/30/26 8:00 AM	11/30/26 9:00 AM
M1-CNR13	A Crown of Thorns: Managing a Busy Neuroradiology Practice	11/30/26 8:00 AM	11/30/26 9:00 AM
M1-CNR13	A Crown of Thorns: Managing a Busy Neuroradiology Practice	11/30/26 8:00 AM	11/30/26 9:00 AM

M3-CNR04	Neuro 911: Non-Traumatic Spine Emergencies	11/30/26 9:30 AM	11/30/26 10:30 AM
M3-CNR04	Neuro 911: Non-Traumatic Spine Emergencies	11/30/26 9:30 AM	11/30/26 10:30 AM
M3-CNR04	Neuro 911: Non-Traumatic Spine Emergencies	11/30/26 9:30 AM	11/30/26 10:30 AM
M3-CNR04	Neuro 911: Non-Traumatic Spine Emergencies	11/30/26 9:30 AM	11/30/26 10:30 AM

M3-CNR04	Neuro 911: Non-Traumatic Spine Emergencies	11/30/26 9:30 AM	11/30/26 10:30 AM
M6-CNR11	Silent Intruders: Cracking the Code of CNS Infections	11/30/26 1:30 PM	11/30/26 2:30 PM
M6-CNR11	Silent Intruders: Cracking the Code of CNS Infections	11/30/26 1:30 PM	11/30/26 2:30 PM
M6-CNR11	Silent Intruders: Cracking the Code of CNS Infections	11/30/26 1:30 PM	11/30/26 2:30 PM
M6-CNR11	Silent Intruders: Cracking the Code of CNS Infections	11/30/26 1:30 PM	11/30/26 2:30 PM
M6-CNR11	Silent Intruders: Cracking the Code of CNS Infections	11/30/26 1:30 PM	11/30/26 2:30 PM

R1-CNR12	Education Byte by Byte: Current and Future Perspectives of Digital Education	12/3/26 8:00 AM	12/3/26 9:00 AM
R1-CNR12	Education Byte by Byte: Current and Future Perspectives of Digital Education	12/3/26 8:00 AM	12/3/26 9:00 AM
R1-CNR12	Education Byte by Byte: Current and Future Perspectives of Digital Education	12/3/26 8:00 AM	12/3/26 9:00 AM

R1-CNR12	Education Byte by Byte: Current and Future Perspectives of Digital Education	12/3/26 8:00 AM	12/3/26 9:00 AM
R1-CNR12	Education Byte by Byte: Current and Future Perspectives of Digital Education	12/3/26 8:00 AM	12/3/26 9:00 AM
R4-CNR15	Imaging Dementia in Practice: What Radiologists Need to Know in the Anti-Amyloid Era	12/3/26 11:00 AM	12/3/26 12:00 PM

R4-CNR15	Imaging Dementia in Practice: What Radiologists Need to Know in the Anti-Amyloid Era	12/3/26 11:00 AM	12/3/26 12:00 PM
R4-CNR15	Imaging Dementia in Practice: What Radiologists Need to Know in the Anti-Amyloid Era	12/3/26 11:00 AM	12/3/26 12:00 PM
R4-CNR15	Imaging Dementia in Practice: What Radiologists Need to Know in the Anti-Amyloid Era	12/3/26 11:00 AM	12/3/26 12:00 PM
R4-CNR15	Imaging Dementia in Practice: What Radiologists Need to Know in the Anti-Amyloid Era	12/3/26 11:00 AM	12/3/26 12:00 PM

R7-CNR09	Help, Altered Mental Status! SOS Differential Based on Key Neuroimaging Patterns!	12/3/26 3:00 PM	12/3/26 4:00 PM
R7-CNR09	Help, Altered Mental Status! SOS Differential Based on Key Neuroimaging Patterns!	12/3/26 3:00 PM	12/3/26 4:00 PM
R7-CNR09	Help, Altered Mental Status! SOS Differential Based on Key Neuroimaging Patterns!	12/3/26 3:00 PM	12/3/26 4:00 PM
R7-CNR09	Help, Altered Mental Status! SOS Differential Based on Key Neuroimaging Patterns!	12/3/26 3:00 PM	12/3/26 4:00 PM
R7-CNR09	Help, Altered Mental Status! SOS Differential Based on Key Neuroimaging Patterns!	12/3/26 3:00 PM	12/3/26 4:00 PM
S1-CNR05	Not All Strokes Are Created Equal: A Comprehensive Approach Across the Stroke Imaging Spectrum	11/29/26 9:00 AM	11/29/26 10:00 AM

S1-CNR05	Not All Strokes Are Created Equal: A Comprehensive Approach Across the Stroke Imaging Spectrum	11/29/26 9:00 AM	11/29/26 10:00 AM
S1-CNR05	Not All Strokes Are Created Equal: A Comprehensive Approach Across the Stroke Imaging Spectrum	11/29/26 9:00 AM	11/29/26 10:00 AM
S1-CNR05	Not All Strokes Are Created Equal: A Comprehensive Approach Across the Stroke Imaging Spectrum	11/29/26 9:00 AM	11/29/26 10:00 AM
S1-CNR05	Not All Strokes Are Created Equal: A Comprehensive Approach Across the Stroke Imaging Spectrum	11/29/26 9:00 AM	11/29/26 10:00 AM

S2-CNR07	Protocol Makeover: Neuro Edition	11/29/26 10:30 AM	11/29/26 11:30 AM
S2-CNR07	Protocol Makeover: Neuro Edition	11/29/26 10:30 AM	11/29/26 11:30 AM
S2-CNR07	Protocol Makeover: Neuro Edition	11/29/26 10:30 AM	11/29/26 11:30 AM
S2-CNR07	Protocol Makeover: Neuro Edition	11/29/26 10:30 AM	11/29/26 11:30 AM
S2-CNR07	Protocol Makeover: Neuro Edition	11/29/26 10:30 AM	11/29/26 11:30 AM

S5-CNR06	TONS of Neurovascular Pathology: Temporal Bone, Orbit, Neck, and Spine	11/29/26 2:30 PM	11/29/26 3:30 PM
S5-CNR06	TONS of Neurovascular Pathology: Temporal Bone, Orbit, Neck, and Spine	11/29/26 2:30 PM	11/29/26 3:30 PM
S5-CNR06	TONS of Neurovascular Pathology: Temporal Bone, Orbit, Neck, and Spine	11/29/26 2:30 PM	11/29/26 3:30 PM
S5-CNR06	TONS of Neurovascular Pathology: Temporal Bone, Orbit, Neck, and Spine	11/29/26 2:30 PM	11/29/26 3:30 PM
S5-CNR06	TONS of Neurovascular Pathology: Temporal Bone, Orbit, Neck, and Spine	11/29/26 2:30 PM	11/29/26 3:30 PM
T1-CNR08	New Frontiers in Advanced Cerebrovascular Imaging: Evidence, Limitations, and Future Directions	12/1/26 8:00 AM	12/1/26 9:00 AM

T1-CNR08	New Frontiers in Advanced Cerebrovascular Imaging: Evidence, Limitations, and Future Directions	12/1/26 8:00 AM	12/1/26 9:00 AM
T1-CNR08	New Frontiers in Advanced Cerebrovascular Imaging: Evidence, Limitations, and Future Directions	12/1/26 8:00 AM	12/1/26 9:00 AM
T1-CNR08	New Frontiers in Advanced Cerebrovascular Imaging: Evidence, Limitations, and Future Directions	12/1/26 8:00 AM	12/1/26 9:00 AM
T1-CNR08	New Frontiers in Advanced Cerebrovascular Imaging: Evidence, Limitations, and Future Directions	12/1/26 8:00 AM	12/1/26 9:00 AM

T6-CNR01	Novel Imaging Biomarkers in the 2024 McDonald Criteria for Multiple Sclerosis: Central Vein Sign and Paramagnetic Rim Lesions	12/1/26 1:30 PM	12/1/26 2:30 PM
T6-CNR01	Novel Imaging Biomarkers in the 2024 McDonald Criteria for Multiple Sclerosis: Central Vein Sign and Paramagnetic Rim Lesions	12/1/26 1:30 PM	12/1/26 2:30 PM
T6-CNR01	Novel Imaging Biomarkers in the 2024 McDonald Criteria for Multiple Sclerosis: Central Vein Sign and Paramagnetic Rim Lesions	12/1/26 1:30 PM	12/1/26 2:30 PM
T6-CNR01	Novel Imaging Biomarkers in the 2024 McDonald Criteria for Multiple Sclerosis: Central Vein Sign and Paramagnetic Rim Lesions	12/1/26 1:30 PM	12/1/26 2:30 PM
T6-CNR01	Novel Imaging Biomarkers in the 2024 McDonald Criteria for Multiple Sclerosis: Central Vein Sign and Paramagnetic Rim Lesions	12/1/26 1:30 PM	12/1/26 2:30 PM
T8-CNR03	Spinal CSF Leaks: How to Practice Like the Experts	12/1/26 4:30 PM	12/1/26 5:30 PM

T8-CNR03	Spinal CSF Leaks: How to Practice Like the Experts	12/1/26 4:30 PM	12/1/26 5:30 PM
T8-CNR03	Spinal CSF Leaks: How to Practice Like the Experts	12/1/26 4:30 PM	12/1/26 5:30 PM
T8-CNR03	Spinal CSF Leaks: How to Practice Like the Experts	12/1/26 4:30 PM	12/1/26 5:30 PM
T8-CNR03	Spinal CSF Leaks: How to Practice Like the Experts	12/1/26 4:30 PM	12/1/26 5:30 PM
W1-CNR02	Growth Mindset: Hot Topics in Pediatric Neuroimaging	12/2/26 8:00 AM	12/2/26 9:00 AM
W1-CNR02	Growth Mindset: Hot Topics in Pediatric Neuroimaging	12/2/26 8:00 AM	12/2/26 9:00 AM

W1-CNR02	Growth Mindset: Hot Topics in Pediatric Neuroimaging	12/2/26 8:00 AM	12/2/26 9:00 AM
W1-CNR02	Growth Mindset: Hot Topics in Pediatric Neuroimaging	12/2/26 8:00 AM	12/2/26 9:00 AM
W1-CNR02	Growth Mindset: Hot Topics in Pediatric Neuroimaging	12/2/26 8:00 AM	12/2/26 9:00 AM
W6-CNR14	The Doppelgangers: Tips for Differentiating Between Nonaggressive and Aggressive Dural-Based and Skull Base Tumors	12/2/26 1:30 PM	12/2/26 2:30 PM
W6-CNR14	The Doppelgangers: Tips for Differentiating Between Nonaggressive and Aggressive Dural-Based and Skull Base Tumors	12/2/26 1:30 PM	12/2/26 2:30 PM
W6-CNR14	The Doppelgangers: Tips for Differentiating Between Nonaggressive and Aggressive Dural-Based and Skull Base Tumors	12/2/26 1:30 PM	12/2/26 2:30 PM
W6-CNR14	The Doppelgangers: Tips for Differentiating Between Nonaggressive and Aggressive Dural-Based and Skull Base Tumors	12/2/26 1:30 PM	12/2/26 2:30 PM

W6-CNR14	The Doppelgangers: Tips for Differentiating Between Nonaggressive and Aggressive Dural-Based and Skull Base Tumors	12/2/26 1:30 PM	12/2/26 2:30 PM
W8-CNR10	Help Please! Mind-Bending Neuroradiology Cases!	12/2/26 4:30 PM	12/2/26 5:30 PM
W8-CNR10	Help Please! Mind-Bending Neuroradiology Cases!	12/2/26 4:30 PM	12/2/26 5:30 PM
W8-CNR10	Help Please! Mind-Bending Neuroradiology Cases!	12/2/26 4:30 PM	12/2/26 5:30 PM
W8-CNR10	Help Please! Mind-Bending Neuroradiology Cases!	12/2/26 4:30 PM	12/2/26 5:30 PM
W8-CNR10	Help Please! Mind-Bending Neuroradiology Cases!	12/2/26 4:30 PM	12/2/26 5:30 PM
M1-COB02	Oh MY, Fibroids and Adenomyosis, Polyps and Hyperplasia	11/30/26 8:00 AM	11/30/26 9:00 AM

M1-COB02	Oh MY, Fibroids and Adenomyosis, Polyps and Hyperplasia	11/30/26 8:00 AM	11/30/26 9:00 AM
M1-COB02	Oh MY, Fibroids and Adenomyosis, Polyps and Hyperplasia	11/30/26 8:00 AM	11/30/26 9:00 AM
M1-COB02	Oh MY, Fibroids and Adenomyosis, Polyps and Hyperplasia	11/30/26 8:00 AM	11/30/26 9:00 AM
M1-COB02	Oh MY, Fibroids and Adenomyosis, Polyps and Hyperplasia	11/30/26 8:00 AM	11/30/26 9:00 AM
M6-COB03	Ovarian Lesion Imaging: Risk Assessment Using US and MRI	11/30/26 1:30 PM	11/30/26 2:30 PM
M6-COB03	Ovarian Lesion Imaging: Risk Assessment Using US and MRI	11/30/26 1:30 PM	11/30/26 2:30 PM
M6-COB03	Ovarian Lesion Imaging: Risk Assessment Using US and MRI	11/30/26 1:30 PM	11/30/26 2:30 PM
M6-COB03	Ovarian Lesion Imaging: Risk Assessment Using US and MRI	11/30/26 1:30 PM	11/30/26 2:30 PM
M6-COB03	Ovarian Lesion Imaging: Risk Assessment Using US and MRI	11/30/26 1:30 PM	11/30/26 2:30 PM
M6-COB03	Ovarian Lesion Imaging: Risk Assessment Using US and MRI	11/30/26 1:30 PM	11/30/26 2:30 PM
R3-COB04	First Trimester Imaging: Essentials, Pitfalls, and Beyond	12/3/26 9:30 AM	12/3/26 10:30 AM

R3-COB04	First Trimester Imaging: Essentials, Pitfalls, and Beyond	12/3/26 9:30 AM	12/3/26 10:30 AM

R3-COB04	First Trimester Imaging: Essentials, Pitfalls, and Beyond	12/3/26 9:30 AM	12/3/26 10:30 AM

R3-COB04	First Trimester Imaging: Essentials, Pitfalls, and Beyond	12/3/26 9:30 AM	12/3/26 10:30 AM

R3-COB04	First Trimester Imaging: Essentials, Pitfalls, and Beyond	12/3/26 9:30 AM	12/3/26 10:30 AM
R7-COB08	Ovarian Cancer: From Start to Finish	12/3/26 3:00 PM	12/3/26 4:00 PM
R7-COB08	Ovarian Cancer: From Start to Finish	12/3/26 3:00 PM	12/3/26 4:00 PM
R7-COB08	Ovarian Cancer: From Start to Finish	12/3/26 3:00 PM	12/3/26 4:00 PM
R7-COB08	Ovarian Cancer: From Start to Finish	12/3/26 3:00 PM	12/3/26 4:00 PM
R7-COB08	Ovarian Cancer: From Start to Finish	12/3/26 3:00 PM	12/3/26 4:00 PM
S1-COB10	Tips to Tackle the Dreaded Cases on the Worklist	11/29/26 9:00 AM	11/29/26 10:00 AM
S1-COB10	Tips to Tackle the Dreaded Cases on the Worklist	11/29/26 9:00 AM	11/29/26 10:00 AM

S1-COB10	Tips to Tackle the Dreaded Cases on the Worklist	11/29/26 9:00 AM	11/29/26 10:00 AM
S1-COB10	Tips to Tackle the Dreaded Cases on the Worklist	11/29/26 9:00 AM	11/29/26 10:00 AM
S1-COB10	Tips to Tackle the Dreaded Cases on the Worklist	11/29/26 9:00 AM	11/29/26 10:00 AM
S5-COB01	Advanced Endometriosis	11/29/26 2:30 PM	11/29/26 3:30 PM
S5-COB01	Advanced Endometriosis	11/29/26 2:30 PM	11/29/26 3:30 PM

S5-COB01	Advanced Endometriosis	11/29/26 2:30 PM	11/29/26 3:30 PM
S5-COB01	Advanced Endometriosis	11/29/26 2:30 PM	11/29/26 3:30 PM
S5-COB01	Advanced Endometriosis	11/29/26 2:30 PM	11/29/26 3:30 PM
S5-COB01	Advanced Endometriosis	11/29/26 2:30 PM	11/29/26 3:30 PM

T1-COB05	It's All About the Adnexa: Acute Pelvic Pain in the Nonpregnant Patient	12/1/26 8:00 AM	12/1/26 9:00 AM
T1-COB05	It's All About the Adnexa: Acute Pelvic Pain in the Nonpregnant Patient	12/1/26 8:00 AM	12/1/26 9:00 AM
T1-COB05	It's All About the Adnexa: Acute Pelvic Pain in the Nonpregnant Patient	12/1/26 8:00 AM	12/1/26 9:00 AM
T1-COB05	It's All About the Adnexa: Acute Pelvic Pain in the Nonpregnant Patient	12/1/26 8:00 AM	12/1/26 9:00 AM
T1-COB05	It's All About the Adnexa: Acute Pelvic Pain in the Nonpregnant Patient	12/1/26 8:00 AM	12/1/26 9:00 AM
T6-COB06	Cervical and Endometrial Cancer: Guiding Treatment	12/1/26 1:30 PM	12/1/26 2:30 PM
T6-COB06	Cervical and Endometrial Cancer: Guiding Treatment	12/1/26 1:30 PM	12/1/26 2:30 PM
T6-COB06	Cervical and Endometrial Cancer: Guiding Treatment	12/1/26 1:30 PM	12/1/26 2:30 PM
T6-COB06	Cervical and Endometrial Cancer: Guiding Treatment	12/1/26 1:30 PM	12/1/26 2:30 PM
T6-COB06	Cervical and Endometrial Cancer: Guiding Treatment	12/1/26 1:30 PM	12/1/26 2:30 PM
W1-COB09	Hindsight is 20/20: How to Avoid Diagnostic Traps in OBGYN Imaging	12/2/26 8:00 AM	12/2/26 9:00 AM
W1-COB09	Hindsight is 20/20: How to Avoid Diagnostic Traps in OBGYN Imaging	12/2/26 8:00 AM	12/2/26 9:00 AM
W1-COB09	Hindsight is 20/20: How to Avoid Diagnostic Traps in OBGYN Imaging	12/2/26 8:00 AM	12/2/26 9:00 AM

W1-COB09	Hindsight is 20/20: How to Avoid Diagnostic Traps in OBGYN Imaging	12/2/26 8:00 AM	12/2/26 9:00 AM
W1-COB09	Hindsight is 20/20: How to Avoid Diagnostic Traps in OBGYN Imaging	12/2/26 8:00 AM	12/2/26 9:00 AM
W7-COB07	Elevate Your Expertise: Advanced Imaging Techniques in Second and Third Trimester Fetal Assessment and Beyond	12/2/26 3:00 PM	12/2/26 4:00 PM
W7-COB07	Elevate Your Expertise: Advanced Imaging Techniques in Second and Third Trimester Fetal Assessment and Beyond	12/2/26 3:00 PM	12/2/26 4:00 PM
W7-COB07	Elevate Your Expertise: Advanced Imaging Techniques in Second and Third Trimester Fetal Assessment and Beyond	12/2/26 3:00 PM	12/2/26 4:00 PM
W7-COB07	Elevate Your Expertise: Advanced Imaging Techniques in Second and Third Trimester Fetal Assessment and Beyond	12/2/26 3:00 PM	12/2/26 4:00 PM

W7-COB07	Elevate Your Expertise: Advanced Imaging Techniques in Second and Third Trimester Fetal Assessment and Beyond	12/2/26 3:00 PM	12/2/26 4:00 PM
M3-CPD04	Fundamentals of Everyday Incidental Findings in Pediatric Neuroradiology	11/30/26 9:30 AM	11/30/26 10:30 AM
M3-CPD04	Fundamentals of Everyday Incidental Findings in Pediatric Neuroradiology	11/30/26 9:30 AM	11/30/26 10:30 AM
M3-CPD04	Fundamentals of Everyday Incidental Findings in Pediatric Neuroradiology	11/30/26 9:30 AM	11/30/26 10:30 AM
M3-CPD04	Fundamentals of Everyday Incidental Findings in Pediatric Neuroradiology	11/30/26 9:30 AM	11/30/26 10:30 AM
M3-CPD04	Fundamentals of Everyday Incidental Findings in Pediatric Neuroradiology	11/30/26 9:30 AM	11/30/26 10:30 AM
M3-CPD04	Fundamentals of Everyday Incidental Findings in Pediatric Neuroradiology	11/30/26 9:30 AM	11/30/26 10:30 AM
M7-CPD01	Essentials of Imaging Sports Injuries in the Pediatric Athlete	11/30/26 3:00 PM	11/30/26 4:00 PM

M7-CPD01	Essentials of Imaging Sports Injuries in the Pediatric Athlete	11/30/26 3:00 PM	11/30/26 4:00 PM
M7-CPD01	Essentials of Imaging Sports Injuries in the Pediatric Athlete	11/30/26 3:00 PM	11/30/26 4:00 PM
M7-CPD01	Essentials of Imaging Sports Injuries in the Pediatric Athlete	11/30/26 3:00 PM	11/30/26 4:00 PM
M7-CPD01	Essentials of Imaging Sports Injuries in the Pediatric Athlete	11/30/26 3:00 PM	11/30/26 4:00 PM
M7-CPD01	Essentials of Imaging Sports Injuries in the Pediatric Athlete	11/30/26 3:00 PM	11/30/26 4:00 PM
R1-CPD03	Case Based Review of Pediatric Infectious Emergencies	12/3/26 8:00 AM	12/3/26 9:00 AM
R1-CPD03	Case Based Review of Pediatric Infectious Emergencies	12/3/26 8:00 AM	12/3/26 9:00 AM

R1-CPD03	Case Based Review of Pediatric Infectious Emergencies	12/3/26 8:00 AM	12/3/26 9:00 AM
R1-CPD03	Case Based Review of Pediatric Infectious Emergencies	12/3/26 8:00 AM	12/3/26 9:00 AM
R1-CPD03	Case Based Review of Pediatric Infectious Emergencies	12/3/26 8:00 AM	12/3/26 9:00 AM
R1-CPD03	Case Based Review of Pediatric Infectious Emergencies	12/3/26 8:00 AM	12/3/26 9:00 AM
R7-CPD09	Essentials of the NICU: Common Findings and Critical Mistakes	12/3/26 3:00 PM	12/3/26 4:00 PM
R7-CPD09	Essentials of the NICU: Common Findings and Critical Mistakes	12/3/26 3:00 PM	12/3/26 4:00 PM

R7-CPD09	Essentials of the NICU: Common Findings and Critical Mistakes	12/3/26 3:00 PM	12/3/26 4:00 PM
R7-CPD09	Essentials of the NICU: Common Findings and Critical Mistakes	12/3/26 3:00 PM	12/3/26 4:00 PM
R7-CPD09	Essentials of the NICU: Common Findings and Critical Mistakes	12/3/26 3:00 PM	12/3/26 4:00 PM
R7-CPD09	Essentials of the NICU: Common Findings and Critical Mistakes	12/3/26 3:00 PM	12/3/26 4:00 PM
S1-CPD02	From Fundamentals to Frontiers: Imaging the Developing Skeleton	11/29/26 9:00 AM	11/29/26 10:00 AM
S1-CPD02	From Fundamentals to Frontiers: Imaging the Developing Skeleton	11/29/26 9:00 AM	11/29/26 10:00 AM

S1-CPD02	From Fundamentals to Frontiers: Imaging the Developing Skeleton	11/29/26 9:00 AM	11/29/26 10:00 AM
S1-CPD02	From Fundamentals to Frontiers: Imaging the Developing Skeleton	11/29/26 9:00 AM	11/29/26 10:00 AM
S1-CPD02	From Fundamentals to Frontiers: Imaging the Developing Skeleton	11/29/26 9:00 AM	11/29/26 10:00 AM
S1-CPD02	From Fundamentals to Frontiers: Imaging the Developing Skeleton	11/29/26 9:00 AM	11/29/26 10:00 AM
S4-CPD12	RSNA Hands-On Lab: Pediatric MSK Ultrasound: Upper Extremity (Registration Fee Required)	11/29/26 1:30 PM	11/29/26 3:30 PM
S4-CPD12	RSNA Hands-On Lab: Pediatric MSK Ultrasound: Upper Extremity (Registration Fee Required)	11/29/26 1:30 PM	11/29/26 3:30 PM
S4-CPD12	RSNA Hands-On Lab: Pediatric MSK Ultrasound: Upper Extremity (Registration Fee Required)	11/29/26 1:30 PM	11/29/26 3:30 PM

S4-CPD12	RSNA Hands-On Lab: Pediatric MSK Ultrasound: Upper Extremity (Registration Fee Required)	11/29/26 1:30 PM	11/29/26 3:30 PM
S4-CPD12	RSNA Hands-On Lab: Pediatric MSK Ultrasound: Upper Extremity (Registration Fee Required)	11/29/26 1:30 PM	11/29/26 3:30 PM
S4-CPD12	RSNA Hands-On Lab: Pediatric MSK Ultrasound: Upper Extremity (Registration Fee Required)	11/29/26 1:30 PM	11/29/26 3:30 PM
S4-CPD12	RSNA Hands-On Lab: Pediatric MSK Ultrasound: Upper Extremity (Registration Fee Required)	11/29/26 1:30 PM	11/29/26 3:30 PM
S4-CPD12	RSNA Hands-On Lab: Pediatric MSK Ultrasound: Upper Extremity (Registration Fee Required)	11/29/26 1:30 PM	11/29/26 3:30 PM
S4-CPD12	RSNA Hands-On Lab: Pediatric MSK Ultrasound: Upper Extremity (Registration Fee Required)	11/29/26 1:30 PM	11/29/26 3:30 PM
S4-CPD12	RSNA Hands-On Lab: Pediatric MSK Ultrasound: Upper Extremity (Registration Fee Required)	11/29/26 1:30 PM	11/29/26 3:30 PM

S4-CPD12	RSNA Hands-On Lab: Pediatric MSK Ultrasound: Upper Extremity (Registration Fee Required)	11/29/26 1:30 PM	11/29/26 3:30 PM
S4-CPD12	RSNA Hands-On Lab: Pediatric MSK Ultrasound: Upper Extremity (Registration Fee Required)	11/29/26 1:30 PM	11/29/26 3:30 PM
S4-CPD12	RSNA Hands-On Lab: Pediatric MSK Ultrasound: Upper Extremity (Registration Fee Required)	11/29/26 1:30 PM	11/29/26 3:30 PM
S5-CPD10	Fundamentals of Problem Solving in Pediatric Thoracic Imaging	11/29/26 2:30 PM	11/29/26 3:30 PM
S5-CPD10	Fundamentals of Problem Solving in Pediatric Thoracic Imaging	11/29/26 2:30 PM	11/29/26 3:30 PM
S5-CPD10	Fundamentals of Problem Solving in Pediatric Thoracic Imaging	11/29/26 2:30 PM	11/29/26 3:30 PM

S5-CPD10	Fundamentals of Problem Solving in Pediatric Thoracic Imaging	11/29/26 2:30 PM	11/29/26 3:30 PM
S5-CPD10	Fundamentals of Problem Solving in Pediatric Thoracic Imaging	11/29/26 2:30 PM	11/29/26 3:30 PM
S5-CPD10	Fundamentals of Problem Solving in Pediatric Thoracic Imaging	11/29/26 2:30 PM	11/29/26 3:30 PM
T3-CPD07	From Principles to Practice: Fetal Imaging and Prenatal Surgery	12/1/26 9:30 AM	12/1/26 10:30 AM
T3-CPD07	From Principles to Practice: Fetal Imaging and Prenatal Surgery	12/1/26 9:30 AM	12/1/26 10:30 AM
T3-CPD07	From Principles to Practice: Fetal Imaging and Prenatal Surgery	12/1/26 9:30 AM	12/1/26 10:30 AM
T3-CPD07	From Principles to Practice: Fetal Imaging and Prenatal Surgery	12/1/26 9:30 AM	12/1/26 10:30 AM

T3-CPD07	From Principles to Practice: Fetal Imaging and Prenatal Surgery	12/1/26 9:30 AM	12/1/26 10:30 AM
T3-CPD07	From Principles to Practice: Fetal Imaging and Prenatal Surgery	12/1/26 9:30 AM	12/1/26 10:30 AM
T6-CPD11	Pediatric Radiology Jeopardy	12/1/26 1:30 PM	12/1/26 2:30 PM
T6-CPD11	Pediatric Radiology Jeopardy	12/1/26 1:30 PM	12/1/26 2:30 PM
T6-CPD11	Pediatric Radiology Jeopardy	12/1/26 1:30 PM	12/1/26 2:30 PM
T6-CPD11	Pediatric Radiology Jeopardy	12/1/26 1:30 PM	12/1/26 2:30 PM
T6-CPD11	Pediatric Radiology Jeopardy	12/1/26 1:30 PM	12/1/26 2:30 PM
T6-CPD11	Pediatric Radiology Jeopardy	12/1/26 1:30 PM	12/1/26 2:30 PM
T6-CPD11	Pediatric Radiology Jeopardy	12/1/26 1:30 PM	12/1/26 2:30 PM
T6-CPD11	Pediatric Radiology Jeopardy	12/1/26 1:30 PM	12/1/26 2:30 PM

T8-CPD05	The Changing Paradigm in Pediatric GYN Imaging: Congenital Anomalies to Endometriosis	12/1/26 4:30 PM	12/1/26 5:30 PM
T8-CPD05	The Changing Paradigm in Pediatric GYN Imaging: Congenital Anomalies to Endometriosis	12/1/26 4:30 PM	12/1/26 5:30 PM
T8-CPD05	The Changing Paradigm in Pediatric GYN Imaging: Congenital Anomalies to Endometriosis	12/1/26 4:30 PM	12/1/26 5:30 PM
T8-CPD05	The Changing Paradigm in Pediatric GYN Imaging: Congenital Anomalies to Endometriosis	12/1/26 4:30 PM	12/1/26 5:30 PM
T8-CPD05	The Changing Paradigm in Pediatric GYN Imaging: Congenital Anomalies to Endometriosis	12/1/26 4:30 PM	12/1/26 5:30 PM
T8-CPD05	The Changing Paradigm in Pediatric GYN Imaging: Congenital Anomalies to Endometriosis	12/1/26 4:30 PM	12/1/26 5:30 PM
W3-CPD06	Advanced Pediatric Tumor Staging: Guidelines and Measurements	12/2/26 9:30 AM	12/2/26 10:30 AM
W3-CPD06	Advanced Pediatric Tumor Staging: Guidelines and Measurements	12/2/26 9:30 AM	12/2/26 10:30 AM

W3-CPD06	Advanced Pediatric Tumor Staging: Guidelines and Measurements	12/2/26 9:30 AM	12/2/26 10:30 AM
W3-CPD06	Advanced Pediatric Tumor Staging: Guidelines and Measurements	12/2/26 9:30 AM	12/2/26 10:30 AM
W3-CPD06	Advanced Pediatric Tumor Staging: Guidelines and Measurements	12/2/26 9:30 AM	12/2/26 10:30 AM
W6-CPD08	Connecting Core Concepts to Clinical Practice: Pediatric Cardiovascular Imaging	12/2/26 1:30 PM	12/2/26 2:30 PM
W6-CPD08	Connecting Core Concepts to Clinical Practice: Pediatric Cardiovascular Imaging	12/2/26 1:30 PM	12/2/26 2:30 PM
W6-CPD08	Connecting Core Concepts to Clinical Practice: Pediatric Cardiovascular Imaging	12/2/26 1:30 PM	12/2/26 2:30 PM
W6-CPD08	Connecting Core Concepts to Clinical Practice: Pediatric Cardiovascular Imaging	12/2/26 1:30 PM	12/2/26 2:30 PM

W6-CPD08	Connecting Core Concepts to Clinical Practice: Pediatric Cardiovascular Imaging	12/2/26 1:30 PM	12/2/26 2:30 PM
W6-CPD08	Connecting Core Concepts to Clinical Practice: Pediatric Cardiovascular Imaging	12/2/26 1:30 PM	12/2/26 2:30 PM
M1-CPH09	CBCT in the Clinic: Current State and Future Opportunities	11/30/26 8:00 AM	11/30/26 9:00 AM
M1-CPH09	CBCT in the Clinic: Current State and Future Opportunities	11/30/26 8:00 AM	11/30/26 9:00 AM
M1-CPH09	CBCT in the Clinic: Current State and Future Opportunities	11/30/26 8:00 AM	11/30/26 9:00 AM
M1-CPH09	CBCT in the Clinic: Current State and Future Opportunities	11/30/26 8:00 AM	11/30/26 9:00 AM
M6-CPH15	AAPM/RSNA Basic Physics Lecture for the RT: Implementing a Successful and Sustainable MR Safety Program	11/30/26 1:30 PM	11/30/26 2:30 PM
M6-CPH15	AAPM/RSNA Basic Physics Lecture for the RT: Implementing a Successful and Sustainable MR Safety Program	11/30/26 1:30 PM	11/30/26 2:30 PM
M6-CPH15	AAPM/RSNA Basic Physics Lecture for the RT: Implementing a Successful and Sustainable MR Safety Program	11/30/26 1:30 PM	11/30/26 2:30 PM

M7-CPH16	Best of AAPM Summer School: MR Artifacts Demystified	11/30/26 3:00 PM	11/30/26 4:00 PM
M7-CPH16	Best of AAPM Summer School: MR Artifacts Demystified	11/30/26 3:00 PM	11/30/26 4:00 PM
M7-CPH16	Best of AAPM Summer School: MR Artifacts Demystified	11/30/26 3:00 PM	11/30/26 4:00 PM
M7-CPH16	Best of AAPM Summer School: MR Artifacts Demystified	11/30/26 3:00 PM	11/30/26 4:00 PM
M7-CPH16	Best of AAPM Summer School: MR Artifacts Demystified	11/30/26 3:00 PM	11/30/26 4:00 PM
M8-CPH11	Breast Acoustic Computed Tomography and Photoacoustic Imaging: New Ultrasound Imaging Technologies	11/30/26 4:30 PM	11/30/26 5:30 PM
M8-CPH11	Breast Acoustic Computed Tomography and Photoacoustic Imaging: New Ultrasound Imaging Technologies	11/30/26 4:30 PM	11/30/26 5:30 PM
M8-CPH11	Breast Acoustic Computed Tomography and Photoacoustic Imaging: New Ultrasound Imaging Technologies	11/30/26 4:30 PM	11/30/26 5:30 PM

R1-CPH12	It’s Rad! Making the most out of Structured Radiation Dose Indices for Digital Radiography	12/3/26 8:00 AM	12/3/26 9:00 AM
R1-CPH12	It’s Rad! Making the most out of Structured Radiation Dose Indices for Digital Radiography	12/3/26 8:00 AM	12/3/26 9:00 AM
R1-CPH12	It’s Rad! Making the most out of Structured Radiation Dose Indices for Digital Radiography	12/3/26 8:00 AM	12/3/26 9:00 AM
R1-CPH12	It’s Rad! Making the most out of Structured Radiation Dose Indices for Digital Radiography	12/3/26 8:00 AM	12/3/26 9:00 AM
R1-CPH12	It’s Rad! Making the most out of Structured Radiation Dose Indices for Digital Radiography	12/3/26 8:00 AM	12/3/26 9:00 AM
R4-CPH03	Accelerating MRI: Practical Strategies for Radiologists and Clinical Physicists to Cut Scan Time	12/3/26 11:00 AM	12/3/26 12:00 PM

R4-CPH03	Accelerating MRI: Practical Strategies for Radiologists and Clinical Physicists to Cut Scan Time	12/3/26 11:00 AM	12/3/26 12:00 PM
R4-CPH03	Accelerating MRI: Practical Strategies for Radiologists and Clinical Physicists to Cut Scan Time	12/3/26 11:00 AM	12/3/26 12:00 PM
R4-CPH03	Accelerating MRI: Practical Strategies for Radiologists and Clinical Physicists to Cut Scan Time	12/3/26 11:00 AM	12/3/26 12:00 PM
R7-CPH01	Now You Have a Photon Counting Detector CT: Best Practices for Maximizing Image Quality and Clinical Benefits	12/3/26 3:00 PM	12/3/26 4:00 PM
R7-CPH01	Now You Have a Photon Counting Detector CT: Best Practices for Maximizing Image Quality and Clinical Benefits	12/3/26 3:00 PM	12/3/26 4:00 PM
R7-CPH01	Now You Have a Photon Counting Detector CT: Best Practices for Maximizing Image Quality and Clinical Benefits	12/3/26 3:00 PM	12/3/26 4:00 PM
R7-CPH01	Now You Have a Photon Counting Detector CT: Best Practices for Maximizing Image Quality and Clinical Benefits	12/3/26 3:00 PM	12/3/26 4:00 PM

R7-CPH01	Now You Have a Photon Counting Detector CT: Best Practices for Maximizing Image Quality and Clinical Benefits	12/3/26 3:00 PM	12/3/26 4:00 PM
S2-CPH08	The Future of Medical Display QA: Bridging the Gap between Theory and Practice	11/29/26 10:30 AM	11/29/26 11:30 AM
S2-CPH08	The Future of Medical Display QA: Bridging the Gap between Theory and Practice	11/29/26 10:30 AM	11/29/26 11:30 AM
S2-CPH08	The Future of Medical Display QA: Bridging the Gap between Theory and Practice	11/29/26 10:30 AM	11/29/26 11:30 AM

S2-CPH08	The Future of Medical Display QA: Bridging the Gap between Theory and Practice	11/29/26 10:30 AM	11/29/26 11:30 AM
S2-CPH08	The Future of Medical Display QA: Bridging the Gap between Theory and Practice	11/29/26 10:30 AM	11/29/26 11:30 AM
S4-CPH13	AAPM/RSNA Physics Tutorial 1: Artificial Intelligence in Mammography - From Algorithm Outputs to Clinical Outcomes	11/29/26 1:00 PM	11/29/26 2:00 PM
S4-CPH13	AAPM/RSNA Physics Tutorial 1: Artificial Intelligence in Mammography - From Algorithm Outputs to Clinical Outcomes	11/29/26 1:00 PM	11/29/26 2:00 PM
S4-CPH13	AAPM/RSNA Physics Tutorial 1: Artificial Intelligence in Mammography - From Algorithm Outputs to Clinical Outcomes	11/29/26 1:00 PM	11/29/26 2:00 PM

S5-CPH05	Technical Advances and Statistical Considerations for Quantitative CT and MRI	11/29/26 2:30 PM	11/29/26 3:30 PM
S5-CPH05	Technical Advances and Statistical Considerations for Quantitative CT and MRI	11/29/26 2:30 PM	11/29/26 3:30 PM
S5-CPH05	Technical Advances and Statistical Considerations for Quantitative CT and MRI	11/29/26 2:30 PM	11/29/26 3:30 PM
S5-CPH05	Technical Advances and Statistical Considerations for Quantitative CT and MRI	11/29/26 2:30 PM	11/29/26 3:30 PM
S5-CPH05	Technical Advances and Statistical Considerations for Quantitative CT and MRI	11/29/26 2:30 PM	11/29/26 3:30 PM

S5-CPH14	AAPM/RSNA Physics Tutorial 2: Contrast Enhanced Breast Imaging	11/29/26 2:30 PM	11/29/26 3:30 PM
S5-CPH14	AAPM/RSNA Physics Tutorial 2: Contrast Enhanced Breast Imaging	11/29/26 2:30 PM	11/29/26 3:30 PM
S5-CPH14	AAPM/RSNA Physics Tutorial 2: Contrast Enhanced Breast Imaging	11/29/26 2:30 PM	11/29/26 3:30 PM
T6-CPH02	State-Of-The-Art and Future Advances in Breast Imaging	12/1/26 1:30 PM	12/1/26 2:30 PM
T6-CPH02	State-Of-The-Art and Future Advances in Breast Imaging	12/1/26 1:30 PM	12/1/26 2:30 PM

T6-CPH02	State-Of-The-Art and Future Advances in Breast Imaging	12/1/26 1:30 PM	12/1/26 2:30 PM
T6-CPH02	State-Of-The-Art and Future Advances in Breast Imaging	12/1/26 1:30 PM	12/1/26 2:30 PM
T8-CPH04	Radiation and Medical Imaging: Best Practices for Communicating Risk	12/1/26 4:30 PM	12/1/26 5:30 PM
T8-CPH04	Radiation and Medical Imaging: Best Practices for Communicating Risk	12/1/26 4:30 PM	12/1/26 5:30 PM
T8-CPH04	Radiation and Medical Imaging: Best Practices for Communicating Risk	12/1/26 4:30 PM	12/1/26 5:30 PM

T8-CPH04	Radiation and Medical Imaging: Best Practices for Communicating Risk	12/1/26 4:30 PM	12/1/26 5:30 PM
T8-CPH04	Radiation and Medical Imaging: Best Practices for Communicating Risk	12/1/26 4:30 PM	12/1/26 5:30 PM
W1-CPH06	Whole Body MRI: A Precision Prevention and Early Detection Analytic	12/2/26 8:00 AM	12/2/26 9:00 AM
W1-CPH06	Whole Body MRI: A Precision Prevention and Early Detection Analytic	12/2/26 8:00 AM	12/2/26 9:00 AM
W1-CPH06	Whole Body MRI: A Precision Prevention and Early Detection Analytic	12/2/26 8:00 AM	12/2/26 9:00 AM

W1-CPH06	Whole Body MRI: A Precision Prevention and Early Detection Analytic	12/2/26 8:00 AM	12/2/26 9:00 AM
W3-CPH10	From FDA Clearance to Clinical Reality: Deploying AI Safely Across Imaging Practice	12/2/26 9:30 AM	12/2/26 10:30 AM
W3-CPH10	From FDA Clearance to Clinical Reality: Deploying AI Safely Across Imaging Practice	12/2/26 9:30 AM	12/2/26 10:30 AM
W3-CPH10	From FDA Clearance to Clinical Reality: Deploying AI Safely Across Imaging Practice	12/2/26 9:30 AM	12/2/26 10:30 AM
W3-CPH10	From FDA Clearance to Clinical Reality: Deploying AI Safely Across Imaging Practice	12/2/26 9:30 AM	12/2/26 10:30 AM
W8-CPH07	Opportunities in Opportunistic CT: Emerging Techniques and Benefits	12/2/26 4:30 PM	12/2/26 5:30 PM

W8-CPH07	Opportunities in Opportunistic CT: Emerging Techniques and Benefits	12/2/26 4:30 PM	12/2/26 5:30 PM
W8-CPH07	Opportunities in Opportunistic CT: Emerging Techniques and Benefits	12/2/26 4:30 PM	12/2/26 5:30 PM
W8-CPH07	Opportunities in Opportunistic CT: Emerging Techniques and Benefits	12/2/26 4:30 PM	12/2/26 5:30 PM
M3-CRS03	Douglas W. MacEwan Rising Star Track: Difficult Conversations Made Easier - Toolbox for Early Career Radiologists	11/30/26 9:30 AM	11/30/26 10:30 AM
M3-CRS03	Douglas W. MacEwan Rising Star Track: Difficult Conversations Made Easier - Toolbox for Early Career Radiologists	11/30/26 9:30 AM	11/30/26 10:30 AM
M3-CRS03	Douglas W. MacEwan Rising Star Track: Difficult Conversations Made Easier - Toolbox for Early Career Radiologists	11/30/26 9:30 AM	11/30/26 10:30 AM
M3-CRS03	Douglas W. MacEwan Rising Star Track: Difficult Conversations Made Easier - Toolbox for Early Career Radiologists	11/30/26 9:30 AM	11/30/26 10:30 AM

M3-CRS03	Douglas W. MacEwan Rising Star Track: Difficult Conversations Made Easier - Toolbox for Early Career Radiologists	11/30/26 9:30 AM	11/30/26 10:30 AM
M3-CRS03	Douglas W. MacEwan Rising Star Track: Difficult Conversations Made Easier - Toolbox for Early Career Radiologists	11/30/26 9:30 AM	11/30/26 10:30 AM
M3-CRS03	Douglas W. MacEwan Rising Star Track: Difficult Conversations Made Easier - Toolbox for Early Career Radiologists	11/30/26 9:30 AM	11/30/26 10:30 AM
R3-CRS02	Douglas W. MacEwan Rising Star Track: Presenting Effectively - Strategies for Engaging Your Audience and Improving Teaching Skills	12/3/26 9:30 AM	12/3/26 10:30 AM
R3-CRS02	Douglas W. MacEwan Rising Star Track: Presenting Effectively - Strategies for Engaging Your Audience and Improving Teaching Skills	12/3/26 9:30 AM	12/3/26 10:30 AM

R3-CRS02	Douglas W. MacEwan Rising Star Track: Presenting Effectively - Strategies for Engaging Your Audience and Improving Teaching Skills	12/3/26 9:30 AM	12/3/26 10:30 AM
R3-CRS02	Douglas W. MacEwan Rising Star Track: Presenting Effectively - Strategies for Engaging Your Audience and Improving Teaching Skills	12/3/26 9:30 AM	12/3/26 10:30 AM
R3-CRS02	Douglas W. MacEwan Rising Star Track: Presenting Effectively - Strategies for Engaging Your Audience and Improving Teaching Skills	12/3/26 9:30 AM	12/3/26 10:30 AM
S2-CRS05	Douglas W. MacEwan Rising Star Track: Pearls and Pitfalls in Radiology - Learning from Missed and Misinterpreted Cases	11/29/26 10:30 AM	11/29/26 11:30 AM
S2-CRS05	Douglas W. MacEwan Rising Star Track: Pearls and Pitfalls in Radiology - Learning from Missed and Misinterpreted Cases	11/29/26 10:30 AM	11/29/26 11:30 AM

S2-CRS05	Douglas W. MacEwan Rising Star Track: Pearls and Pitfalls in Radiology - Learning from Missed and Misinterpreted Cases	11/29/26 10:30 AM	11/29/26 11:30 AM
S2-CRS05	Douglas W. MacEwan Rising Star Track: Pearls and Pitfalls in Radiology - Learning from Missed and Misinterpreted Cases	11/29/26 10:30 AM	11/29/26 11:30 AM
T3-CRS04	Douglas W. MacEwan Rising Star Track: Radiology in the Metaverse	12/1/26 9:30 AM	12/1/26 10:30 AM
T3-CRS04	Douglas W. MacEwan Rising Star Track: Radiology in the Metaverse	12/1/26 9:30 AM	12/1/26 10:30 AM
T3-CRS04	Douglas W. MacEwan Rising Star Track: Radiology in the Metaverse	12/1/26 9:30 AM	12/1/26 10:30 AM
T3-CRS04	Douglas W. MacEwan Rising Star Track: Radiology in the Metaverse	12/1/26 9:30 AM	12/1/26 10:30 AM

T3-CRS04	Douglas W. MacEwan Rising Star Track: Radiology in the Metaverse	12/1/26 9:30 AM	12/1/26 10:30 AM
T3-CRS04	Douglas W. MacEwan Rising Star Track: Radiology in the Metaverse	12/1/26 9:30 AM	12/1/26 10:30 AM
T3-CRS04	Douglas W. MacEwan Rising Star Track: Radiology in the Metaverse	12/1/26 9:30 AM	12/1/26 10:30 AM
T3-CRS04	Douglas W. MacEwan Rising Star Track: Radiology in the Metaverse	12/1/26 9:30 AM	12/1/26 10:30 AM
W3-CRS01	Douglas W. MacEwan Rising Star Track: Mock Deposition - Medicolegal Essentials for Early-Career Radiologists	12/2/26 9:30 AM	12/2/26 10:30 AM
W3-CRS01	Douglas W. MacEwan Rising Star Track: Mock Deposition - Medicolegal Essentials for Early-Career Radiologists	12/2/26 9:30 AM	12/2/26 10:30 AM

W3-CRS01	Douglas W. MacEwan Rising Star Track: Mock Deposition - Medicolegal Essentials for Early-Career Radiologists	12/2/26 9:30 AM	12/2/26 10:30 AM
W3-CRS01	Douglas W. MacEwan Rising Star Track: Mock Deposition - Medicolegal Essentials for Early-Career Radiologists	12/2/26 9:30 AM	12/2/26 10:30 AM
W3-CRS01	Douglas W. MacEwan Rising Star Track: Mock Deposition - Medicolegal Essentials for Early-Career Radiologists	12/2/26 9:30 AM	12/2/26 10:30 AM
M1-CRO07	Hot Topics on Imaging and Therapeutic Advances in Brain Tumors: What Clinicians and Radiologists "Need to Know" to Care for Brain Tumor Patients	11/30/26 8:00 AM	11/30/26 9:00 AM
M1-CRO07	Hot Topics on Imaging and Therapeutic Advances in Brain Tumors: What Clinicians and Radiologists "Need to Know" to Care for Brain Tumor Patients	11/30/26 8:00 AM	11/30/26 9:00 AM
M1-CRO07	Hot Topics on Imaging and Therapeutic Advances in Brain Tumors: What Clinicians and Radiologists "Need to Know" to Care for Brain Tumor Patients	11/30/26 8:00 AM	11/30/26 9:00 AM

M1-CRO07	Hot Topics on Imaging and Therapeutic Advances in Brain Tumors: What Clinicians and Radiologists "Need to Know" to Care for Brain Tumor Patients	11/30/26 8:00 AM	11/30/26 9:00 AM
M6-CRO01	Multidisciplinary Masterclass: Learn What Your Clinicians Need to Know for Their Head & Neck Cancer Patients	11/30/26 1:30 PM	11/30/26 2:30 PM
M6-CRO01	Multidisciplinary Masterclass: Learn What Your Clinicians Need to Know for Their Head & Neck Cancer Patients	11/30/26 1:30 PM	11/30/26 2:30 PM
M6-CRO01	Multidisciplinary Masterclass: Learn What Your Clinicians Need to Know for Their Head & Neck Cancer Patients	11/30/26 1:30 PM	11/30/26 2:30 PM
M6-CRO01	Multidisciplinary Masterclass: Learn What Your Clinicians Need to Know for Their Head & Neck Cancer Patients	11/30/26 1:30 PM	11/30/26 2:30 PM
M6-CRO01	Multidisciplinary Masterclass: Learn What Your Clinicians Need to Know for Their Head & Neck Cancer Patients	11/30/26 1:30 PM	11/30/26 2:30 PM
R3-CRO03	Musculoskeletal Oncology Tumor Board (Interactive)	12/3/26 9:30 AM	12/3/26 10:30 AM
R3-CRO03	Musculoskeletal Oncology Tumor Board (Interactive)	12/3/26 9:30 AM	12/3/26 10:30 AM
R3-CRO03	Musculoskeletal Oncology Tumor Board (Interactive)	12/3/26 9:30 AM	12/3/26 10:30 AM
R3-CRO03	Musculoskeletal Oncology Tumor Board (Interactive)	12/3/26 9:30 AM	12/3/26 10:30 AM

R6-CRO09	Contemporary Management of Rectal Cancer: A Multidisciplinary Case-Based Review	12/3/26 1:30 PM	12/3/26 2:30 PM
R6-CRO09	Contemporary Management of Rectal Cancer: A Multidisciplinary Case-Based Review	12/3/26 1:30 PM	12/3/26 2:30 PM
R6-CRO09	Contemporary Management of Rectal Cancer: A Multidisciplinary Case-Based Review	12/3/26 1:30 PM	12/3/26 2:30 PM

R6-CRO09	Contemporary Management of Rectal Cancer: A Multidisciplinary Case-Based Review	12/3/26 1:30 PM	12/3/26 2:30 PM
R6-CRO09	Contemporary Management of Rectal Cancer: A Multidisciplinary Case-Based Review	12/3/26 1:30 PM	12/3/26 2:30 PM
S1-CRO02	Anatomical Basis of Radiation Ablation of Neurologic Conditions	11/29/26 9:00 AM	11/29/26 10:00 AM
S1-CRO02	Anatomical Basis of Radiation Ablation of Neurologic Conditions	11/29/26 9:00 AM	11/29/26 10:00 AM
S1-CRO02	Anatomical Basis of Radiation Ablation of Neurologic Conditions	11/29/26 9:00 AM	11/29/26 10:00 AM
S1-CRO02	Anatomical Basis of Radiation Ablation of Neurologic Conditions	11/29/26 9:00 AM	11/29/26 10:00 AM
S5-CRO04	Multi-Disciplinary Tumor Board for Prostate Cancer: Imaging to Guide Treatment Management	11/29/26 2:30 PM	11/29/26 3:30 PM

S5-CRO04	Multi-Disciplinary Tumor Board for Prostate Cancer: Imaging to Guide Treatment Management	11/29/26 2:30 PM	11/29/26 3:30 PM
S5-CRO04	Multi-Disciplinary Tumor Board for Prostate Cancer: Imaging to Guide Treatment Management	11/29/26 2:30 PM	11/29/26 3:30 PM
S5-CRO04	Multi-Disciplinary Tumor Board for Prostate Cancer: Imaging to Guide Treatment Management	11/29/26 2:30 PM	11/29/26 3:30 PM
S5-CRO04	Multi-Disciplinary Tumor Board for Prostate Cancer: Imaging to Guide Treatment Management	11/29/26 2:30 PM	11/29/26 3:30 PM
T1-CRO06	Imaging to Intervention: Breast Cancer Case Conference	12/1/26 8:00 AM	12/1/26 9:00 AM
T1-CRO06	Imaging to Intervention: Breast Cancer Case Conference	12/1/26 8:00 AM	12/1/26 9:00 AM
T1-CRO06	Imaging to Intervention: Breast Cancer Case Conference	12/1/26 8:00 AM	12/1/26 9:00 AM
T1-CRO06	Imaging to Intervention: Breast Cancer Case Conference	12/1/26 8:00 AM	12/1/26 9:00 AM

T1-CRO06	Imaging to Intervention: Breast Cancer Case Conference	12/1/26 8:00 AM	12/1/26 9:00 AM
T1-CRO06	Imaging to Intervention: Breast Cancer Case Conference	12/1/26 8:00 AM	12/1/26 9:00 AM
T8-CRO10	Case-Based Review of Imaging in the Management of Lymphoma: From Diagnosis to Treatment Response	12/1/26 4:30 PM	12/1/26 5:30 PM
T8-CRO10	Case-Based Review of Imaging in the Management of Lymphoma: From Diagnosis to Treatment Response	12/1/26 4:30 PM	12/1/26 5:30 PM
T8-CRO10	Case-Based Review of Imaging in the Management of Lymphoma: From Diagnosis to Treatment Response	12/1/26 4:30 PM	12/1/26 5:30 PM

T8-CRO10	Case-Based Review of Imaging in the Management of Lymphoma: From Diagnosis to Treatment Response	12/1/26 4:30 PM	12/1/26 5:30 PM
T8-CRO10	Case-Based Review of Imaging in the Management of Lymphoma: From Diagnosis to Treatment Response	12/1/26 4:30 PM	12/1/26 5:30 PM
W1-CRO08	Multi-Disciplinary Tumor Board for Pediatric Abdominal Tumors	12/2/26 8:00 AM	12/2/26 9:00 AM
W1-CRO08	Multi-Disciplinary Tumor Board for Pediatric Abdominal Tumors	12/2/26 8:00 AM	12/2/26 9:00 AM
W1-CRO08	Multi-Disciplinary Tumor Board for Pediatric Abdominal Tumors	12/2/26 8:00 AM	12/2/26 9:00 AM
W7-CRO05	Multidisciplinary Masterclass: Learn What Your Clinicians Need to Know for Their Thoracic Malignancy Patients	12/2/26 3:00 PM	12/2/26 4:00 PM

W7-CRO05	Multidisciplinary Masterclass: Learn What Your Clinicians Need to Know for Their Thoracic Malignancy Patients	12/2/26 3:00 PM	12/2/26 4:00 PM
W7-CRO05	Multidisciplinary Masterclass: Learn What Your Clinicians Need to Know for Their Thoracic Malignancy Patients	12/2/26 3:00 PM	12/2/26 4:00 PM
W7-CRO05	Multidisciplinary Masterclass: Learn What Your Clinicians Need to Know for Their Thoracic Malignancy Patients	12/2/26 3:00 PM	12/2/26 4:00 PM
W7-CRO05	Multidisciplinary Masterclass: Learn What Your Clinicians Need to Know for Their Thoracic Malignancy Patients	12/2/26 3:00 PM	12/2/26 4:00 PM
M1-CVA03	Essentials of Aortic Dissection Imaging	11/30/26 8:00 AM	11/30/26 9:00 AM

M1-CVA03	Essentials of Aortic Dissection Imaging	11/30/26 8:00 AM	11/30/26 9:00 AM
M1-CVA03	Essentials of Aortic Dissection Imaging	11/30/26 8:00 AM	11/30/26 9:00 AM
M1-CVA03	Essentials of Aortic Dissection Imaging	11/30/26 8:00 AM	11/30/26 9:00 AM

M1-CVA03	Essentials of Aortic Dissection Imaging	11/30/26 8:00 AM	11/30/26 9:00 AM
M1-CVA03	Essentials of Aortic Dissection Imaging	11/30/26 8:00 AM	11/30/26 9:00 AM
M7-CVA04	Cutting-Edge Advances in Vascular Imaging	11/30/26 3:00 PM	11/30/26 4:00 PM

M7-CVA04	Cutting-Edge Advances in Vascular Imaging	11/30/26 3:00 PM	11/30/26 4:00 PM
M7-CVA04	Cutting-Edge Advances in Vascular Imaging	11/30/26 3:00 PM	11/30/26 4:00 PM
M7-CVA04	Cutting-Edge Advances in Vascular Imaging	11/30/26 3:00 PM	11/30/26 4:00 PM

M7-CVA04	Cutting-Edge Advances in Vascular Imaging	11/30/26 3:00 PM	11/30/26 4:00 PM

M7-CVA04	Cutting-Edge Advances in Vascular Imaging	11/30/26 3:00 PM	11/30/26 4:00 PM

R3-CVA07	Simplifying Interesting Vascular Cases	12/3/26 9:30 AM	12/3/26 10:30 AM

R3-CVA07	Simplifying Interesting Vascular Cases	12/3/26 9:30 AM	12/3/26 10:30 AM

R3-CVA07	Simplifying Interesting Vascular Cases	12/3/26 9:30 AM	12/3/26 10:30 AM

R3-CVA07	Simplifying Interesting Vascular Cases	12/3/26 9:30 AM	12/3/26 10:30 AM

R3-CVA07	Simplifying Interesting Vascular Cases	12/3/26 9:30 AM	12/3/26 10:30 AM

R3-CVA07	Simplifying Interesting Vascular Cases	12/3/26 9:30 AM	12/3/26 10:30 AM
R6-CVA08	Uncommon Vascular Disease: What the Radiologist Needs to Know	12/3/26 1:30 PM	12/3/26 2:30 PM
R6-CVA08	Uncommon Vascular Disease: What the Radiologist Needs to Know	12/3/26 1:30 PM	12/3/26 2:30 PM

R6-CVA08	Uncommon Vascular Disease: What the Radiologist Needs to Know	12/3/26 1:30 PM	12/3/26 2:30 PM
R6-CVA08	Uncommon Vascular Disease: What the Radiologist Needs to Know	12/3/26 1:30 PM	12/3/26 2:30 PM
R6-CVA08	Uncommon Vascular Disease: What the Radiologist Needs to Know	12/3/26 1:30 PM	12/3/26 2:30 PM

R6-CVA08	Uncommon Vascular Disease: What the Radiologist Needs to Know	12/3/26 1:30 PM	12/3/26 2:30 PM
S1-CVA02	Fundamentals of Peripheral Vascular Imaging	11/29/26 9:00 AM	11/29/26 10:00 AM
S1-CVA02	Fundamentals of Peripheral Vascular Imaging	11/29/26 9:00 AM	11/29/26 10:00 AM
S1-CVA02	Fundamentals of Peripheral Vascular Imaging	11/29/26 9:00 AM	11/29/26 10:00 AM

S1-CVA02	Fundamentals of Peripheral Vascular Imaging	11/29/26 9:00 AM	11/29/26 10:00 AM
S1-CVA02	Fundamentals of Peripheral Vascular Imaging	11/29/26 9:00 AM	11/29/26 10:00 AM
S1-CVA02	Fundamentals of Peripheral Vascular Imaging	11/29/26 9:00 AM	11/29/26 10:00 AM
T3-CVA05	Core Concepts in Abdominopelvic Vascular Disease	12/1/26 9:30 AM	12/1/26 10:30 AM

T3-CVA05	Core Concepts in Abdominopelvic Vascular Disease	12/1/26 9:30 AM	12/1/26 10:30 AM

T3-CVA05	Core Concepts in Abdominopelvic Vascular Disease	12/1/26 9:30 AM	12/1/26 10:30 AM

T3-CVA05	Core Concepts in Abdominopelvic Vascular Disease	12/1/26 9:30 AM	12/1/26 10:30 AM

T3-CVA05	Core Concepts in Abdominopelvic Vascular Disease	12/1/26 9:30 AM	12/1/26 10:30 AM

T3-CVA05	Core Concepts in Abdominopelvic Vascular Disease	12/1/26 9:30 AM	12/1/26 10:30 AM
T7-CVA01	From Imaging to Impact: The Post Surgical Aorta	12/1/26 3:00 PM	12/1/26 4:00 PM
T7-CVA01	From Imaging to Impact: The Post Surgical Aorta	12/1/26 3:00 PM	12/1/26 4:00 PM
T7-CVA01	From Imaging to Impact: The Post Surgical Aorta	12/1/26 3:00 PM	12/1/26 4:00 PM

T7-CVA01	From Imaging to Impact: The Post Surgical Aorta	12/1/26 3:00 PM	12/1/26 4:00 PM
T7-CVA01	From Imaging to Impact: The Post Surgical Aorta	12/1/26 3:00 PM	12/1/26 4:00 PM
T7-CVA01	From Imaging to Impact: The Post Surgical Aorta	12/1/26 3:00 PM	12/1/26 4:00 PM
W7-CVA06	Case-Based Review: 30 Aortic Imaging Cases!	12/2/26 3:00 PM	12/2/26 4:00 PM

W7-CVA06	Case-Based Review: 30 Aortic Imaging Cases!	12/2/26 3:00 PM	12/2/26 4:00 PM

W7-CVA06	Case-Based Review: 30 Aortic Imaging Cases!	12/2/26 3:00 PM	12/2/26 4:00 PM

W7-CVA06	Case-Based Review: 30 Aortic Imaging Cases!	12/2/26 3:00 PM	12/2/26 4:00 PM

W7-CVA06	Case-Based Review: 30 Aortic Imaging Cases!	12/2/26 3:00 PM	12/2/26 4:00 PM

First Name	Last Name	Degree	Overall Learning Objectives
Shellie	Pike	RT,RRA	1) Examine how various APPs manage patients throughout imaging procedures. 2) Discuss pre-procedure patient workup including relevant lab studies, allergies/premedication, medications, anticoagulation, performance of H&Ps, and procedure consent. 3) Review medications and contrast agents used in imaging suites. Look at APP involvement in rounding, consulting and post-procedure patient management.
Elizabeth	Eslich	RRA, RT	1) Examine how various APPs manage patients throughout imaging procedures. 2) Discuss pre-procedure patient workup including relevant lab studies, allergies/premedication, medications, anticoagulation, performance of H&Ps, and procedure consent. 3) Review medications and contrast agents used in imaging suites. Look at APP involvement in rounding, consulting and post-procedure patient management.
Colin	Reeder		1) Examine how various APPs manage patients throughout imaging procedures. 2) Discuss pre-procedure patient workup including relevant lab studies, allergies/premedication, medications, anticoagulation, performance of H&Ps, and procedure consent. 3) Review medications and contrast agents used in imaging suites. Look at APP involvement in rounding, consulting and post-procedure patient management.
Judith	Lotti		1) Review need to know essentials for vascular access including a general overview, techniques, seeing the needle, troubleshooting, variant anatomy, and complications. 2) Discuss percutaneous feeding tubes with examination of placement procedures, tube types, tube management, pre-procedure work-up, and follow-up care.
Carlos	Giron	PA-C	1) Review need to know essentials for vascular access including a general overview, techniques, seeing the needle, troubleshooting, variant anatomy, and complications. 2) Discuss percutaneous feeding tubes with examination of placement procedures, tube types, tube management, pre-procedure work-up, and follow-up care.
Sabala	Mandava	MD	1) Review need to know essentials for vascular access including a general overview, techniques, seeing the needle, troubleshooting, variant anatomy, and complications. 2) Discuss percutaneous feeding tubes with examination of placement procedures, tube types, tube management, pre-procedure work-up, and follow-up care.

Christopher	Davis	RT,DSc	1) Review need to know essentials for vascular access including a general overview, techniques, seeing the needle, troubleshooting, variant anatomy, and complications. 2) Discuss percutaneous feeding tubes with examination of placement procedures, tube types, tube management, pre-procedure work-up, and follow-up care.
Jason	Lee	DSc,MSc	1) Examine common fluoroscopy procedures performed in the pediatric setting as well as modality selection for various signs and symptoms. 2) Review relevant anatomy, common pathologies, and noninterpretive skills such as pediatric patient care and communication. 3) Discuss fluoroscopy safety and dose reduction strategies utilized in pediatric imaging settings.
Jessica	St Aubin		1) Examine common fluoroscopy procedures performed in the pediatric setting as well as modality selection for various signs and symptoms. 2) Review relevant anatomy, common pathologies, and noninterpretive skills such as pediatric patient care and communication. 3) Discuss fluoroscopy safety and dose reduction strategies utilized in pediatric imaging settings.
Tracey	Mehlman	MD	1) Examine common fluoroscopy procedures performed in the pediatric setting as well as modality selection for various signs and symptoms. 2) Review relevant anatomy, common pathologies, and noninterpretive skills such as pediatric patient care and communication. 3) Discuss fluoroscopy safety and dose reduction strategies utilized in pediatric imaging settings.
Leslie	Jones	ARRT,RRA	1) Examine common fluoroscopy procedures performed in the pediatric setting as well as modality selection for various signs and symptoms. 2) Review relevant anatomy, common pathologies, and noninterpretive skills such as pediatric patient care and communication. 3) Discuss fluoroscopy safety and dose reduction strategies utilized in pediatric imaging settings.
R. Paul	Guillerman	MD	1) Examine common fluoroscopy procedures performed in the pediatric setting as well as modality selection for various signs and symptoms. 2) Review relevant anatomy, common pathologies, and noninterpretive skills such as pediatric patient care and communication. 3) Discuss fluoroscopy safety and dose reduction strategies utilized in pediatric imaging settings.

Leslie	Partridge	MS,RRA	1) Identify the varying role and functions of advanced practice providers (APPS) within a radiology department. 2) Discuss APP practice as it applies to patient care and interactions before, during and after imaging procedures. 3) Examine collaborative processes between radiologists and APPs focusing on communication, workflow, benefits and challenges. 4) Discuss how APPs and radiologists develop confidence and trust with each other in order to benefit daily workflows, establish productive work environments, and support patient access to imaging procedures.
Sabala	Mandava	MD	1) Identify the varying role and functions of advanced practice providers (APPS) within a radiology department. 2) Discuss APP practice as it applies to patient care and interactions before, during and after imaging procedures. 3) Examine collaborative processes between radiologists and APPs focusing on communication, workflow, benefits and challenges. 4) Discuss how APPs and radiologists develop confidence and trust with each other in order to benefit daily workflows, establish productive work environments, and support patient access to imaging procedures.
Courtney	Watson		1) Identify the varying role and functions of advanced practice providers (APPS) within a radiology department. 2) Discuss APP practice as it applies to patient care and interactions before, during and after imaging procedures. 3) Examine collaborative processes between radiologists and APPs focusing on communication, workflow, benefits and challenges. 4) Discuss how APPs and radiologists develop confidence and trust with each other in order to benefit daily workflows, establish productive work environments, and support patient access to imaging procedures.
Jessica	Wallace	RN	1) Identify the varying role and functions of advanced practice providers (APPS) within a radiology department. 2) Discuss APP practice as it applies to patient care and interactions before, during and after imaging procedures. 3) Examine collaborative processes between radiologists and APPs focusing on communication, workflow, benefits and challenges. 4) Discuss how APPs and radiologists develop confidence and trust with each other in order to benefit daily workflows, establish productive work environments, and support patient access to imaging procedures.

Kevin	Duncan	RDMS,RRA	1) Identify the varying role and functions of advanced practice providers (APPS) within a radiology department. 2) Discuss APP practice as it applies to patient care and interactions before, during and after imaging procedures. 3) Examine collaborative processes between radiologists and APPs focusing on communication, workflow, benefits and challenges. 4) Discuss how APPs and radiologists develop confidence and trust with each other in order to benefit daily workflows, establish productive work environments, and support patient access to imaging procedures.
Elizabeth	Eslich	RRA, RT	1) Define essential ultrasound terms (orientation, gain, depth, Doppler basics) and apply them to optimize a simple image. 2) Describe common ultrasound-guided procedure types and indications at a high level (what/why) and recognize when ultrasound guidance adds safety/value. 3) Compare needle guidance approaches (in-plane vs out-of-plane conceptually) and identify basic strategies to keep the needle visible. 4) List sterile field essentials for ultrasound-guided procedures (probe covers, gel considerations, setup workflow).
Heather	Berge	MS, RRA	1) Define essential ultrasound terms (orientation, gain, depth, Doppler basics) and apply them to optimize a simple image. 2) Describe common ultrasound-guided procedure types and indications at a high level (what/why) and recognize when ultrasound guidance adds safety/value. 3) Compare needle guidance approaches (in-plane vs out-of-plane conceptually) and identify basic strategies to keep the needle visible. 4) List sterile field essentials for ultrasound-guided procedures (probe covers, gel considerations, setup workflow).
Tyler	Mason	MBA,ARRT	1) Define essential ultrasound terms (orientation, gain, depth, Doppler basics) and apply them to optimize a simple image. 2) Describe common ultrasound-guided procedure types and indications at a high level (what/why) and recognize when ultrasound guidance adds safety/value. 3) Compare needle guidance approaches (in-plane vs out-of-plane conceptually) and identify basic strategies to keep the needle visible. 4) List sterile field essentials for ultrasound-guided procedures (probe covers, gel considerations, setup workflow).

Brian	Adams	PA-C	1) Define essential ultrasound terms (orientation, gain, depth, Doppler basics) and apply them to optimize a simple image. 2) Describe common ultrasound-guided procedure types and indications at a high level (what/why) and recognize when ultrasound guidance adds safety/value. 3) Compare needle guidance approaches (in-plane vs out-of-plane conceptually) and identify basic strategies to keep the needle visible. 4) List sterile field essentials for ultrasound-guided procedures (probe covers, gel considerations, setup workflow).
Shellie	Pike	RT,RRA	1) Review various fluoroscopy studies of the Upper GI tract in adults. 2) Procedure-based discussions may include contrast agents, patient preparation, and variations made for post-operative exams. 3) Discuss routine anatomy, variant anatomy, common pathologies, and classic findings for the Upper GI tract.
Kevin	Duncan	RDMS,RRA	1) Review various fluoroscopy studies of the Upper GI tract in adults. 2) Procedure-based discussions may include contrast agents, patient preparation, and variations made for post-operative exams. 3) Discuss routine anatomy, variant anatomy, common pathologies, and classic findings for the Upper GI tract.
Jason	Lee	DSc,MSc	1) Review various fluoroscopy studies of the Upper GI tract in adults. 2) Procedure-based discussions may include contrast agents, patient preparation, and variations made for post-operative exams. 3) Discuss routine anatomy, variant anatomy, common pathologies, and classic findings for the Upper GI tract.
Olga	Pasternak Wise	MS,MD	1) Examine factors to consider when choosing ultrasound or fluoroscopy to access various joints for the purposes of aspiration, injection or arthrography. 2) Discuss ultrasound-guided access of various joints including anatomy and procedure techniques. 3) Review pre-procedure considerations such as labs, consent and medications. 4) Discuss labs/tests performed on synovial fluid, medications used for therapeutic joint injections, and post-procedure patient care.
Courtney	Scher	DO	1) Examine factors to consider when choosing ultrasound or fluoroscopy to access various joints for the purposes of aspiration, injection or arthrography. 2) Discuss ultrasound-guided access of various joints including anatomy and procedure techniques. 3) Review pre-procedure considerations such as labs, consent and medications. 4) Discuss labs/tests performed on synovial fluid, medications used for therapeutic joint injections, and post-procedure patient care.

Robert	French	MBA,MD	1) Examine factors to consider when choosing ultrasound or fluoroscopy to access various joints for the purposes of aspiration, injection or arthrography. 2) Discuss ultrasound-guided access of various joints including anatomy and procedure techniques. 3) Review pre-procedure considerations such as labs, consent and medications. 4) Discuss labs/tests performed on synovial fluid, medications used for therapeutic joint injections, and post-procedure patient care.
Keith	Chew	PhD	1) Assess the current state and near-term trajectory of generative and agentic AI relevant to radiology, including large language models, multimodal and foundation models, and AI agents. 2) Evaluate where AI delivers genuine value versus hype by demanding evidence that matters, and recognize key risks, including automation bias, deskilling, and emerging medico-legal exposure. 3) Apply a practical framework for building a "frontier practice," addressing strategy, data readiness, governance, workflow integration, outcome measurement, and change management, regardless of practice size or budget.
Brian	Fox	ARRT,MBA	1) Assess the current state and near-term trajectory of generative and agentic AI relevant to radiology, including large language models, multimodal and foundation models, and AI agents. 2) Evaluate where AI delivers genuine value versus hype by demanding evidence that matters, and recognize key risks, including automation bias, deskilling, and emerging medico-legal exposure. 3) Apply a practical framework for building a "frontier practice," addressing strategy, data readiness, governance, workflow integration, outcome measurement, and change management, regardless of practice size or budget.
Woojin	Kim	MD	1) Assess the current state and near-term trajectory of generative and agentic AI relevant to radiology, including large language models, multimodal and foundation models, and AI agents. 2) Evaluate where AI delivers genuine value versus hype by demanding evidence that matters, and recognize key risks, including automation bias, deskilling, and emerging medico-legal exposure. 3) Apply a practical framework for building a "frontier practice," addressing strategy, data readiness, governance, workflow integration, outcome measurement, and change management, regardless of practice size or budget.

Meredith	Gammons	MBA	1) Articulate the role of structured education programmes in supporting radiographers practicing within limited or constrained scopes of practice. 2) Describe the developmental journey from limited practice to expanded clinical roles, including key competencies required at each stage. 3) Evaluate educational and training strategies that facilitate progression from limited practice roles toward enhanced and advanced professional capabilities. 4) Assess the impact of targeted education initiatives on workforce development, professional recognition, and service quality within radiography. 5)Identify practical approaches to advancing the profession, including building sustainable pathways for role extension and leadership in radiographic practice.
Charlotte	Beardmore	MBA	1) Articulate the role of structured education programmes in supporting radiographers practicing within limited or constrained scopes of practice. 2) Describe the developmental journey from limited practice to expanded clinical roles, including key competencies required at each stage. 3) Evaluate educational and training strategies that facilitate progression from limited practice roles toward enhanced and advanced professional capabilities. 4) Assess the impact of targeted education initiatives on workforce development, professional recognition, and service quality within radiography. 5)Identify practical approaches to advancing the profession, including building sustainable pathways for role extension and leadership in radiographic practice.
Robin	Cornett	ARRT,MEd	1) Articulate the role of structured education programmes in supporting radiographers practicing within limited or constrained scopes of practice. 2) Describe the developmental journey from limited practice to expanded clinical roles, including key competencies required at each stage. 3) Evaluate educational and training strategies that facilitate progression from limited practice roles toward enhanced and advanced professional capabilities. 4) Assess the impact of targeted education initiatives on workforce development, professional recognition, and service quality within radiography. 5)Identify practical approaches to advancing the profession, including building sustainable pathways for role extension and leadership in radiographic practice.

Rachel	Nolan		1) Articulate the role of structured education programmes in supporting radiographers practicing within limited or constrained scopes of practice. 2) Describe the developmental journey from limited practice to expanded clinical roles, including key competencies required at each stage. 3) Evaluate educational and training strategies that facilitate progression from limited practice roles toward enhanced and advanced professional capabilities. 4) Assess the impact of targeted education initiatives on workforce development, professional recognition, and service quality within radiography. 5)Identify practical approaches to advancing the profession, including building sustainable pathways for role extension and leadership in radiographic practice.
Charlotte	Beardmore	MBA	1) Explain the critical role of clinical leadership in diagnostic imaging services and its impact on delivering safe, high-quality, patient-centered care. 2) Describe how Radiology Service Managers integrate clinical, technological, and organizational priorities to drive effective and transformative service delivery. 3) Identify current challenges and gaps in leadership development within radiography, including workforce pressures, limited formal training pathways, and unclear career progression structures. 4) Assess the implications of leadership shortages on workforce sustainability, service performance, and patient outcomes in diagnostic imaging. 5) Apply evidence-informed strategies to strengthen the leadership pipeline, supporting the development and progression of radiographers into senior and strategic leadership roles.
Meredith	Gammons	MBA	1) Explain the critical role of clinical leadership in diagnostic imaging services and its impact on delivering safe, high-quality, patient-centered care. 2) Describe how Radiology Service Managers integrate clinical, technological, and organizational priorities to drive effective and transformative service delivery. 3) Identify current challenges and gaps in leadership development within radiography, including workforce pressures, limited formal training pathways, and unclear career progression structures. 4) Assess the implications of leadership shortages on workforce sustainability, service performance, and patient outcomes in diagnostic imaging. 5) Apply evidence-informed strategies to strengthen the leadership pipeline, supporting the development and progression of radiographers into senior and strategic leadership roles.

Kerry	Mills	BSC,MSc	1) Explain the critical role of clinical leadership in diagnostic imaging services and its impact on delivering safe, high-quality, patient-centered care. 2) Describe how Radiology Service Managers integrate clinical, technological, and organizational priorities to drive effective and transformative service delivery. 3) Identify current challenges and gaps in leadership development within radiography, including workforce pressures, limited formal training pathways, and unclear career progression structures. 4) Assess the implications of leadership shortages on workforce sustainability, service performance, and patient outcomes in diagnostic imaging. 5) Apply evidence-informed strategies to strengthen the leadership pipeline, supporting the development and progression of radiographers into senior and strategic leadership roles.
Rhonda	Weaver	ARRT	1) Explain the critical role of clinical leadership in diagnostic imaging services and its impact on delivering safe, high-quality, patient-centered care. 2) Describe how Radiology Service Managers integrate clinical, technological, and organizational priorities to drive effective and transformative service delivery. 3) Identify current challenges and gaps in leadership development within radiography, including workforce pressures, limited formal training pathways, and unclear career progression structures. 4) Assess the implications of leadership shortages on workforce sustainability, service performance, and patient outcomes in diagnostic imaging. 5) Apply evidence-informed strategies to strengthen the leadership pipeline, supporting the development and progression of radiographers into senior and strategic leadership roles.

Catherine	Gunn	RT,MBA	1) Assess the structural drivers of the prolonged radiologist workforce shortage--including shifting physician demographics, training pipeline constraints, retirement trends, and rising imaging volumes--and evaluate how these forces are likely to shape the supply of professional radiology services over the next decade. 2) Evaluate the role of artificial intelligence and emerging technologies in radiology workflows, and analyze how automation, decision-support tools, and teleradiology can be deployed to extend capacity, improve efficiency, and reposition the radiologist's value proposition rather than simply displace labor. 3) Analyze the macroeconomic and policy pressures affecting radiology practices--including Medicare and Medicaid reimbursement cuts, payer mix changes, consolidation, and private equity investment--and assess their implications for practice sustainability, staffing models, and access to care. 4) Develop strategic positioning options for radiology groups and imaging centers, including alternative staffing and coverage models, partnership and affiliation structures, technology adoption strategies, and contracting approaches that strengthen competitiveness and resilience in a constrained-workforce environment. 5) Apply a forward-looking framework for anticipating disruption and aligning operational, financial, and regulatory strategy, enabling participants to make informed decisions about the future of professional radiology services in a rapidly changing market.

Keith	Chew	PhD	1) Assess the structural drivers of the prolonged radiologist workforce shortage--including shifting physician demographics, training pipeline constraints, retirement trends, and rising imaging volumes--and evaluate how these forces are likely to shape the supply of professional radiology services over the next decade. 2) Evaluate the role of artificial intelligence and emerging technologies in radiology workflows, and analyze how automation, decision-support tools, and teleradiology can be deployed to extend capacity, improve efficiency, and reposition the radiologist's value proposition rather than simply displace labor. 3) Analyze the macroeconomic and policy pressures affecting radiology practices--including Medicare and Medicaid reimbursement cuts, payer mix changes, consolidation, and private equity investment--and assess their implications for practice sustainability, staffing models, and access to care. 4) Develop strategic positioning options for radiology groups and imaging centers, including alternative staffing and coverage models, partnership and affiliation structures, technology adoption strategies, and contracting approaches that strengthen competitiveness and resilience in a constrained-workforce environment. 5) Apply a forward-looking framework for anticipating disruption and aligning operational, financial, and regulatory strategy, enabling participants to make informed decisions about the future of professional radiology services in a rapidly changing market.

Paul	Pitts		1) Assess the structural drivers of the prolonged radiologist workforce shortage--including shifting physician demographics, training pipeline constraints, retirement trends, and rising imaging volumes--and evaluate how these forces are likely to shape the supply of professional radiology services over the next decade. 2) Evaluate the role of artificial intelligence and emerging technologies in radiology workflows, and analyze how automation, decision-support tools, and teleradiology can be deployed to extend capacity, improve efficiency, and reposition the radiologist's value proposition rather than simply displace labor. 3) Analyze the macroeconomic and policy pressures affecting radiology practices--including Medicare and Medicaid reimbursement cuts, payer mix changes, consolidation, and private equity investment--and assess their implications for practice sustainability, staffing models, and access to care. 4) Develop strategic positioning options for radiology groups and imaging centers, including alternative staffing and coverage models, partnership and affiliation structures, technology adoption strategies, and contracting approaches that strengthen competitiveness and resilience in a constrained-workforce environment. 5) Apply a forward-looking framework for anticipating disruption and aligning operational, financial, and regulatory strategy, enabling participants to make informed decisions about the future of professional radiology services in a rapidly changing market.
Nancy	McDonald	MS	1) Current Roles of APPs in Interventional Radiology Practice. 2) Future of APPs in Diagnostic Imaging Practices
Meena	Amlani	MBA,PhD	1) Current Roles of APPs in Interventional Radiology Practice. 2) Future of APPs in Diagnostic Imaging Practices
Brandy	Reed	RT,MBA	1) Current Roles of APPs in Interventional Radiology Practice. 2) Future of APPs in Diagnostic Imaging Practices
Haley	Shields		1) Current Roles of APPs in Interventional Radiology Practice. 2) Future of APPs in Diagnostic Imaging Practices

Jobin	John		1) Current Roles of APPs in Interventional Radiology Practice. 2) Future of APPs in Diagnostic Imaging Practices
Keith	Chew	PhD	1) Examine business cases with a return on investment with AI tools, the justification in support of deployment. 2) Identify operational approaches implementing and sustaining AI adoption in Radiology practice. 3) Demonstrate development of AI strategic plan to improve clinical care with monitoring for return on investment.
Brian	Fox	ARRT,MBA	1) Examine business cases with a return on investment with AI tools, the justification in support of deployment. 2) Identify operational approaches implementing and sustaining AI adoption in Radiology practice. 3) Demonstrate development of AI strategic plan to improve clinical care with monitoring for return on investment.
Paulo	Kuriki	MD	1) Examine business cases with a return on investment with AI tools, the justification in support of deployment. 2) Identify operational approaches implementing and sustaining AI adoption in Radiology practice. 3) Demonstrate development of AI strategic plan to improve clinical care with monitoring for return on investment.
Pelu	Tran		1) Examine business cases with a return on investment with AI tools, the justification in support of deployment. 2) Identify operational approaches implementing and sustaining AI adoption in Radiology practice. 3) Demonstrate development of AI strategic plan to improve clinical care with monitoring for return on investment.
Jason	Wiesner	MBA,MD	1) Examine business cases with a return on investment with AI tools, the justification in support of deployment. 2) Identify operational approaches implementing and sustaining AI adoption in Radiology practice. 3) Demonstrate development of AI strategic plan to improve clinical care with monitoring for return on investment.
Nancy	McDonald	MS	1) Define key stakeholders and planning milestones required to develop an effective imaging cyber-attack downtime plan. 2) Identify critical operational risks and vulnerabilities across imaging infrastructure, workflows, and data systems during a cyber event. 3) Provide a practical framework to guide implementation of a sustainable imaging continuity of care plan.
Brian	Fox	ARRT,MBA	1) Define key stakeholders and planning milestones required to develop an effective imaging cyber-attack downtime plan. 2) Identify critical operational risks and vulnerabilities across imaging infrastructure, workflows, and data systems during a cyber event. 3) Provide a practical framework to guide implementation of a sustainable imaging continuity of care plan.

Angelic	Chapman	ARRT,MS	1) Define key stakeholders and planning milestones required to develop an effective imaging cyber-attack downtime plan. 2) Identify critical operational risks and vulnerabilities across imaging infrastructure, workflows, and data systems during a cyber event. 3) Provide a practical framework to guide implementation of a sustainable imaging continuity of care plan.
Brian	Fox	ARRT,MBA	1) Evaluate design strategies for imaging facilities that accommodate rapid technology turnover while supporting long-term sustainability over 30-year infrastructure lifecycles. 2) Assess operational approaches that reduce environmental impact in radiology, including energy use, equipment lifecycle management, and waste reduction. 3) Integrate flexibility and adaptability into imaging suite design to future-proof departments against evolving modalities, workflows, and patient care demands. 4) Examine the intersection of climate responsibility and radiology practice, including the role of imaging departments in broader healthcare sustainability initiatives. 5) Apply principles of sustainable decision-making that balance patient care excellence, technological advancement, and environmental stewardship within imaging operations.
Meredith	Gammons	MBA	1) Evaluate design strategies for imaging facilities that accommodate rapid technology turnover while supporting long-term sustainability over 30-year infrastructure lifecycles. 2) Assess operational approaches that reduce environmental impact in radiology, including energy use, equipment lifecycle management, and waste reduction. 3) Integrate flexibility and adaptability into imaging suite design to future-proof departments against evolving modalities, workflows, and patient care demands. 4) Examine the intersection of climate responsibility and radiology practice, including the role of imaging departments in broader healthcare sustainability initiatives. 5) Apply principles of sustainable decision-making that balance patient care excellence, technological advancement, and environmental stewardship within imaging operations.

Carlos	Amato	MArch	1) Evaluate design strategies for imaging facilities that accommodate rapid technology turnover while supporting long-term sustainability over 30-year infrastructure lifecycles. 2) Assess operational approaches that reduce environmental impact in radiology, including energy use, equipment lifecycle management, and waste reduction. 3) Integrate flexibility and adaptability into imaging suite design to future-proof departments against evolving modalities, workflows, and patient care demands. 4) Examine the intersection of climate responsibility and radiology practice, including the role of imaging departments in broader healthcare sustainability initiatives. 5) Apply principles of sustainable decision-making that balance patient care excellence, technological advancement, and environmental stewardship within imaging operations.
Reed	Omary	MD, MS	1) Evaluate design strategies for imaging facilities that accommodate rapid technology turnover while supporting long-term sustainability over 30-year infrastructure lifecycles. 2) Assess operational approaches that reduce environmental impact in radiology, including energy use, equipment lifecycle management, and waste reduction. 3) Integrate flexibility and adaptability into imaging suite design to future-proof departments against evolving modalities, workflows, and patient care demands. 4) Examine the intersection of climate responsibility and radiology practice, including the role of imaging departments in broader healthcare sustainability initiatives. 5) Apply principles of sustainable decision-making that balance patient care excellence, technological advancement, and environmental stewardship within imaging operations.
Napapong	Pongnapang	BSc, PhD	1) Evaluate design strategies for imaging facilities that accommodate rapid technology turnover while supporting long-term sustainability over 30-year infrastructure lifecycles. 2) Assess operational approaches that reduce environmental impact in radiology, including energy use, equipment lifecycle management, and waste reduction. 3) Integrate flexibility and adaptability into imaging suite design to future-proof departments against evolving modalities, workflows, and patient care demands. 4) Examine the intersection of climate responsibility and radiology practice, including the role of imaging departments in broader healthcare sustainability initiatives. 5) Apply principles of sustainable decision-making that balance patient care excellence, technological advancement, and environmental stewardship within imaging operations.

Melissa	Culp	MEd	1) Recognize how planetary health directly influences human health. 2) Understand how medical imaging, including artificial intelligence and data centers, affects health through increased energy and resource use. 3) Identify practical actions radiologic technologists can take to support patient health in everyday imaging practice.
Reed	Omary	MD, MS	1) Recognize how planetary health directly influences human health. 2) Understand how medical imaging, including artificial intelligence and data centers, affects health through increased energy and resource use. 3) Identify practical actions radiologic technologists can take to support patient health in everyday imaging practice.
Melissa	Culp	MEd	1) Recognize the emotional demands and burdens of modern health care practice and their impact on wellbeing. 2) Experiment with creative arts techniques to process emotions, reduce stress and support resilience. 3) Explore strategies for integrating creative practices into clinical, educational and personal settings. 4) Discuss the benefits and challenges of creative approaches for sustaining emotional health.
Megan	Brydon	MSc,BSc	1) Recognize the emotional demands and burdens of modern health care practice and their impact on wellbeing. 2) Experiment with creative arts techniques to process emotions, reduce stress and support resilience. 3) Explore strategies for integrating creative practices into clinical, educational and personal settings. 4) Discuss the benefits and challenges of creative approaches for sustaining emotional health.
Jane	Harvey Lloyd	MSc,PhD	1) Recognize the emotional demands and burdens of modern health care practice and their impact on wellbeing. 2) Experiment with creative arts techniques to process emotions, reduce stress and support resilience. 3) Explore strategies for integrating creative practices into clinical, educational and personal settings. 4) Discuss the benefits and challenges of creative approaches for sustaining emotional health.
Melissa	Culp	MEd	1) Understand how different pedagogical methods prepare radiography students for clinical placement. 2) Appreciate theoretical frameworks, how students scaffold learning, and build skills during clinical placement. 3) Learn how to facilitate the transition from classroom to clinic by bridging theory into practice and mentoring students throughout clinical placement. 4) Learn how to promote reflective practice as a learning strategy for students at clinical placement.

Renee	French		1) Understand how different pedagogical methods prepare radiography students for clinical placement. 2) Appreciate theoretical frameworks, how students scaffold learning, and build skills during clinical placement. 3) Learn how to facilitate the transition from classroom to clinic by bridging theory into practice and mentoring students throughout clinical placement. 4) Learn how to promote reflective practice as a learning strategy for students at clinical placement.
Melissa	Culp	MEd	1) Define clinical leadership and explain its importance in radiologic technologist and radiography careers and within modern imaging services. 2) Recognize the impact of effective clinical leadership by radiologic technologists and radiographers on patient experience, team performance and service quality. 3) Identify pathways for developing clinical leadership capability from early career practice through to advanced and expert roles. 4) Reflect on personal leadership development opportunities and available professional resources.
Kerry	Mills	BSC,MSc	1) Define clinical leadership and explain its importance in radiologic technologist and radiography careers and within modern imaging services. 2) Recognize the impact of effective clinical leadership by radiologic technologists and radiographers on patient experience, team performance and service quality. 3) Identify pathways for developing clinical leadership capability from early career practice through to advanced and expert roles. 4) Reflect on personal leadership development opportunities and available professional resources.
Melissa	Culp	MEd	1) Explain how artificial intelligence (AI) technologies are currently being used to support breast imaging and breast cancer care. 2) Describe the impact of AI on diagnostic accuracy, workflow efficiency and patient outcomes. 3) Discuss the ethical and humanistic considerations of integrating AI into clinical practice. 4) Identify strategies for maintaining empathy and patient-centered care in an AI-augmented imaging environment.
Alicia	Giaimo		1) Explain how artificial intelligence (AI) technologies are currently being used to support breast imaging and breast cancer care. 2) Describe the impact of AI on diagnostic accuracy, workflow efficiency and patient outcomes. 3) Discuss the ethical and humanistic considerations of integrating AI into clinical practice. 4) Identify strategies for maintaining empathy and patient-centered care in an AI-augmented imaging environment.

Melissa	Culp	MEd	1) Explain the evolution of extended reality headsets over the past 20 years and compare them with traditional imaging review resources, such as display monitors. 2) Differentiate between traditional radiation safety screening tools (e.g., gamma probes, and ionization chambers) and emerging augmented reality systems that integrate real-time imaging overlays, scintillation imaging and light detection and ranging for enhanced radioactive contamination screening. 3) Identify end-users who can benefit from extended reality-based simulation training, including radiologic technologists, nurses, providers, law enforcement services and nontraditional radiation support staff, and highlight the versatility and new training opportunities extended reality offers beyond the radiology department. 4) Demonstrate how augmented reality headsets are being used in collaborative tumor board sessions to improve consensus among physicians and providers through enhanced 3D visualization of patient images. 5) Understand how Food and Drug Administration-approved extended reality technologies combine planned tomographic imaging with augmented reality headsets and real-time ultrasound to visualize 3D segmented organs, improving procedural planning and clinical outcomes during interventional radiology.
Ryan	Misseldine	BS,MBA	1) Explain the evolution of extended reality headsets over the past 20 years and compare them with traditional imaging review resources, such as display monitors. 2) Differentiate between traditional radiation safety screening tools (e.g., gamma probes, and ionization chambers) and emerging augmented reality systems that integrate real-time imaging overlays, scintillation imaging and light detection and ranging for enhanced radioactive contamination screening. 3) Identify end-users who can benefit from extended reality-based simulation training, including radiologic technologists, nurses, providers, law enforcement services and nontraditional radiation support staff, and highlight the versatility and new training opportunities extended reality offers beyond the radiology department. 4) Demonstrate how augmented reality headsets are being used in collaborative tumor board sessions to improve consensus among physicians and providers through enhanced 3D visualization of patient images. 5) Understand how Food and Drug Administration-approved extended reality technologies combine planned tomographic imaging with augmented reality headsets and real-time ultrasound to visualize 3D segmented organs, improving procedural planning and clinical outcomes during interventional radiology.

Ryan	Kocak	DSc	1) Explain the evolution of extended reality headsets over the past 20 years and compare them with traditional imaging review resources, such as display monitors. 2) Differentiate between traditional radiation safety screening tools (e.g., gamma probes, and ionization chambers) and emerging augmented reality systems that integrate real-time imaging overlays, scintillation imaging and light detection and ranging for enhanced radioactive contamination screening. 3) Identify end-users who can benefit from extended reality-based simulation training, including radiologic technologists, nurses, providers, law enforcement services and nontraditional radiation support staff, and highlight the versatility and new training opportunities extended reality offers beyond the radiology department. 4) Demonstrate how augmented reality headsets are being used in collaborative tumor board sessions to improve consensus among physicians and providers through enhanced 3D visualization of patient images. 5) Understand how Food and Drug Administration-approved extended reality technologies combine planned tomographic imaging with augmented reality headsets and real-time ultrasound to visualize 3D segmented organs, improving procedural planning and clinical outcomes during interventional radiology.
Melissa	Culp	MEd	1) Differentiate among a near miss, an incident and a pattern of concern in imaging practice. 2) Identify common themes in real-world imaging incidents involving patient identification, examination accuracy, privacy and communication. 3) Explain how technologist actions and team habits can either prevent or contribute to safety events and complaints. 4) Apply a simple framework for writing clear, useful incident reports that support learning and corrective action. 5) Recognize opportunities for technologists to participate in follow-up, education and workflow changes after an incident.
Carmen	Geerlings	ARRT,MBA	1) Differentiate among a near miss, an incident and a pattern of concern in imaging practice. 2) Identify common themes in real-world imaging incidents involving patient identification, examination accuracy, privacy and communication. 3) Explain how technologist actions and team habits can either prevent or contribute to safety events and complaints. 4) Apply a simple framework for writing clear, useful incident reports that support learning and corrective action. 5) Recognize opportunities for technologists to participate in follow-up, education and workflow changes after an incident.

Melissa	Culp	MEd	1) Understand magnetic resonance (MR) imaging safety protocols for implanted devices. 2) Navigate the MR imaging safety evaluation workflow. 3) Apply billing codes and documentation standards. 4) Execute electronic medical record workflow for MR imaging safety orders. 5) Recognize implementation challenges and the current status of MR safety evaluation.
Issack	Boru	MS, ARRT	1) Understand magnetic resonance (MR) imaging safety protocols for implanted devices. 2) Navigate the MR imaging safety evaluation workflow. 3) Apply billing codes and documentation standards. 4) Execute electronic medical record workflow for MR imaging safety orders. 5) Recognize implementation challenges and the current status of MR safety evaluation.
Christiane	Kuhl	MD, PhD	1) Describe how multimodality AI approaches are advancing breast cancer screening, triage, and detection across imaging platforms. 2) Summarize current evidence supporting AI-based breast cancer prediction and prognosis and assess their potential clinical applications and limitations. 3) Evaluate strategies for integrating traditional clinical risk factors with imaging-derived AI metrics to inform personalized risk assessment and diagnostic decision-making.
Christiane	Kuhl	MD, PhD	1) Describe how multimodality AI approaches are advancing breast cancer screening, triage, and detection across imaging platforms. 2) Summarize current evidence supporting AI-based breast cancer prediction and prognosis and assess their potential clinical applications and limitations. 3) Evaluate strategies for integrating traditional clinical risk factors with imaging-derived AI metrics to inform personalized risk assessment and diagnostic decision-making.
Lars	Grimm	MD	1) Describe how multimodality AI approaches are advancing breast cancer screening, triage, and detection across imaging platforms. 2) Summarize current evidence supporting AI-based breast cancer prediction and prognosis and assess their potential clinical applications and limitations. 3) Evaluate strategies for integrating traditional clinical risk factors with imaging-derived AI metrics to inform personalized risk assessment and diagnostic decision-making.
Leslie	Lamb	MSc,MD	1) Describe how multimodality AI approaches are advancing breast cancer screening, triage, and detection across imaging platforms. 2) Summarize current evidence supporting AI-based breast cancer prediction and prognosis and assess their potential clinical applications and limitations. 3) Evaluate strategies for integrating traditional clinical risk factors with imaging-derived AI metrics to inform personalized risk assessment and diagnostic decision-making.

Stamatia	Destounis	MD	1) Each radiologist attending will become familiar with different biopsy, cyst aspiration, and needle aspiration devices and techniques. 2) Review techniques of spring loaded and vacuum biopsy device methods available today. 3) Practice biopsy techniques with the advice of expert faculty that will advise attendee on biopsy and US technique.
Gary	Whitman	MD	1) Each radiologist attending will become familiar with different biopsy, cyst aspiration, and needle aspiration devices and techniques. 2) Review techniques of spring loaded and vacuum biopsy device methods available today. 3) Practice biopsy techniques with the advice of expert faculty that will advise attendee on biopsy and US technique.
Asha	Bhatt	MD	1) Each radiologist attending will become familiar with different biopsy, cyst aspiration, and needle aspiration devices and techniques. 2) Review techniques of spring loaded and vacuum biopsy device methods available today. 3) Practice biopsy techniques with the advice of expert faculty that will advise attendee on biopsy and US technique.
Hiroyuki	Abe	PhD,MD	1) Each radiologist attending will become familiar with different biopsy, cyst aspiration, and needle aspiration devices and techniques. 2) Review techniques of spring loaded and vacuum biopsy device methods available today. 3) Practice biopsy techniques with the advice of expert faculty that will advise attendee on biopsy and US technique.
Sarah	Pittman	FRCPC,MD	1) Each radiologist attending will become familiar with different biopsy, cyst aspiration, and needle aspiration devices and techniques. 2) Review techniques of spring loaded and vacuum biopsy device methods available today. 3) Practice biopsy techniques with the advice of expert faculty that will advise attendee on biopsy and US technique.
David	Schacht	MD	1) Each radiologist attending will become familiar with different biopsy, cyst aspiration, and needle aspiration devices and techniques. 2) Review techniques of spring loaded and vacuum biopsy device methods available today. 3) Practice biopsy techniques with the advice of expert faculty that will advise attendee on biopsy and US technique.
Andrea	Stavros	MD	1) Each radiologist attending will become familiar with different biopsy, cyst aspiration, and needle aspiration devices and techniques. 2) Review techniques of spring loaded and vacuum biopsy device methods available today. 3) Practice biopsy techniques with the advice of expert faculty that will advise attendee on biopsy and US technique.

Marcio	Saito	MD	1) Each radiologist attending will become familiar with different biopsy, cyst aspiration, and needle aspiration devices and techniques. 2) Review techniques of spring loaded and vacuum biopsy device methods available today. 3) Practice biopsy techniques with the advice of expert faculty that will advise attendee on biopsy and US technique.
Cecilia	Mercado	MD	1) Each radiologist attending will become familiar with different biopsy, cyst aspiration, and needle aspiration devices and techniques. 2) Review techniques of spring loaded and vacuum biopsy device methods available today. 3) Practice biopsy techniques with the advice of expert faculty that will advise attendee on biopsy and US technique.
Michael	Linver	MD	1) Each radiologist attending will become familiar with different biopsy, cyst aspiration, and needle aspiration devices and techniques. 2) Review techniques of spring loaded and vacuum biopsy device methods available today. 3) Practice biopsy techniques with the advice of expert faculty that will advise attendee on biopsy and US technique.
Erin	Neuschler	MD	1) Each radiologist attending will become familiar with different biopsy, cyst aspiration, and needle aspiration devices and techniques. 2) Review techniques of spring loaded and vacuum biopsy device methods available today. 3) Practice biopsy techniques with the advice of expert faculty that will advise attendee on biopsy and US technique.
Jeffrey	Reiner	MD	1) Each radiologist attending will become familiar with different biopsy, cyst aspiration, and needle aspiration devices and techniques. 2) Review techniques of spring loaded and vacuum biopsy device methods available today. 3) Practice biopsy techniques with the advice of expert faculty that will advise attendee on biopsy and US technique.
Roberto	Lo Gullo	MD	1) Each radiologist attending will become familiar with different biopsy, cyst aspiration, and needle aspiration devices and techniques. 2) Review techniques of spring loaded and vacuum biopsy device methods available today. 3) Practice biopsy techniques with the advice of expert faculty that will advise attendee on biopsy and US technique.
Jessica	Leung	MD	1) Each radiologist attending will become familiar with different biopsy, cyst aspiration, and needle aspiration devices and techniques. 2) Review techniques of spring loaded and vacuum biopsy device methods available today. 3) Practice biopsy techniques with the advice of expert faculty that will advise attendee on biopsy and US technique.

Cilia	Farias Mejia	MD	1) Each radiologist attending will become familiar with different biopsy, cyst aspiration, and needle aspiration devices and techniques. 2) Review techniques of spring loaded and vacuum biopsy device methods available today. 3) Practice biopsy techniques with the advice of expert faculty that will advise attendee on biopsy and US technique.
Beatriz	Adrada	MD	1) Each radiologist attending will become familiar with different biopsy, cyst aspiration, and needle aspiration devices and techniques. 2) Review techniques of spring loaded and vacuum biopsy device methods available today. 3) Practice biopsy techniques with the advice of expert faculty that will advise attendee on biopsy and US technique.
Georgia	Spear	MD	1) Each radiologist attending will become familiar with different biopsy, cyst aspiration, and needle aspiration devices and techniques. 2) Review techniques of spring loaded and vacuum biopsy device methods available today. 3) Practice biopsy techniques with the advice of expert faculty that will advise attendee on biopsy and US technique.
Richard	Barr	PhD,MD	1) Each radiologist attending will become familiar with different biopsy, cyst aspiration, and needle aspiration devices and techniques. 2) Review techniques of spring loaded and vacuum biopsy device methods available today. 3) Practice biopsy techniques with the advice of expert faculty that will advise attendee on biopsy and US technique.
Norran	Said	FRCR,MD	1) Each radiologist attending will become familiar with different biopsy, cyst aspiration, and needle aspiration devices and techniques. 2) Review techniques of spring loaded and vacuum biopsy device methods available today. 3) Practice biopsy techniques with the advice of expert faculty that will advise attendee on biopsy and US technique.
Ritse	Mann	MD, PhD	1) Summarize real-world evidence on the performance of artificial intelligence in mammography and digital breast tomosynthesis, including key lessons learned from clinical deployment. 2) Describe emerging and future AI use cases in breast imaging and assess their potential for clinical integration across diverse practice settings. 3) Identify practical barriers and facilitators to AI implementation into the clinical workflow to inform effective and sustainable adoption.
Linda	Moy	MD	1) Summarize real-world evidence on the performance of artificial intelligence in mammography and digital breast tomosynthesis, including key lessons learned from clinical deployment. 2) Describe emerging and future AI use cases in breast imaging and assess their potential for clinical integration across diverse practice settings. 3) Identify practical barriers and facilitators to AI implementation into the clinical workflow to inform effective and sustainable adoption.

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Roberta	Strigel	MS,MD	1) Define indications for MRI-guided breast biopsy and appropriate patient selection including relative and absolute contraindications to MRI-guided breast biopsy. 2) Describe and understand the steps of an MRI-guided breast biopsy procedure, including the MRI protocol and requirements for appropriate coil, needle, and approach selection. 3) Identify the benefits and limitations of MRI-guided breast biopsy and review tips for handling challenging biopsy locations and patient anatomy.
Roberta	Strigel	MS,MD	1) Define indications for MRI-guided breast biopsy and appropriate patient selection including relative and absolute contraindications to MRI-guided breast biopsy. 2) Describe and understand the steps of an MRI-guided breast biopsy procedure, including the MRI protocol and requirements for appropriate coil, needle, and approach selection. 3) Identify the benefits and limitations of MRI-guided breast biopsy and review tips for handling challenging biopsy locations and patient anatomy.
Tabassum	Ahmad	MD	1) Define indications for MRI-guided breast biopsy and appropriate patient selection including relative and absolute contraindications to MRI-guided breast biopsy. 2) Describe and understand the steps of an MRI-guided breast biopsy procedure, including the MRI protocol and requirements for appropriate coil, needle, and approach selection. 3) Identify the benefits and limitations of MRI-guided breast biopsy and review tips for handling challenging biopsy locations and patient anatomy.

Rend	Al-Khalili	MD	1) Define indications for MRI-guided breast biopsy and appropriate patient selection including relative and absolute contraindications to MRI-guided breast biopsy. 2) Describe and understand the steps of an MRI-guided breast biopsy procedure, including the MRI protocol and requirements for appropriate coil, needle, and approach selection. 3) Identify the benefits and limitations of MRI-guided breast biopsy and review tips for handling challenging biopsy locations and patient anatomy.
Dana	Ataya	MD	1) Define indications for MRI-guided breast biopsy and appropriate patient selection including relative and absolute contraindications to MRI-guided breast biopsy. 2) Describe and understand the steps of an MRI-guided breast biopsy procedure, including the MRI protocol and requirements for appropriate coil, needle, and approach selection. 3) Identify the benefits and limitations of MRI-guided breast biopsy and review tips for handling challenging biopsy locations and patient anatomy.
Jody	Hayes	MD, BSN	1) Define indications for MRI-guided breast biopsy and appropriate patient selection including relative and absolute contraindications to MRI-guided breast biopsy. 2) Describe and understand the steps of an MRI-guided breast biopsy procedure, including the MRI protocol and requirements for appropriate coil, needle, and approach selection. 3) Identify the benefits and limitations of MRI-guided breast biopsy and review tips for handling challenging biopsy locations and patient anatomy.
Thomas	Loduca	MD	1) Define indications for MRI-guided breast biopsy and appropriate patient selection including relative and absolute contraindications to MRI-guided breast biopsy. 2) Describe and understand the steps of an MRI-guided breast biopsy procedure, including the MRI protocol and requirements for appropriate coil, needle, and approach selection. 3) Identify the benefits and limitations of MRI-guided breast biopsy and review tips for handling challenging biopsy locations and patient anatomy.
Wahida	Rahman	MD	1) Define indications for MRI-guided breast biopsy and appropriate patient selection including relative and absolute contraindications to MRI-guided breast biopsy. 2) Describe and understand the steps of an MRI-guided breast biopsy procedure, including the MRI protocol and requirements for appropriate coil, needle, and approach selection. 3) Identify the benefits and limitations of MRI-guided breast biopsy and review tips for handling challenging biopsy locations and patient anatomy.

Raman	Verma	MD	1) Define indications for MRI-guided breast biopsy and appropriate patient selection including relative and absolute contraindications to MRI-guided breast biopsy. 2) Describe and understand the steps of an MRI-guided breast biopsy procedure, including the MRI protocol and requirements for appropriate coil, needle, and approach selection. 3) Identify the benefits and limitations of MRI-guided breast biopsy and review tips for handling challenging biopsy locations and patient anatomy.
Uzma	Waheed	MD	1) Define indications for MRI-guided breast biopsy and appropriate patient selection including relative and absolute contraindications to MRI-guided breast biopsy. 2) Describe and understand the steps of an MRI-guided breast biopsy procedure, including the MRI protocol and requirements for appropriate coil, needle, and approach selection. 3) Identify the benefits and limitations of MRI-guided breast biopsy and review tips for handling challenging biopsy locations and patient anatomy.
Kathryn	Lowry	MD	1) Define indications for MRI-guided breast biopsy and appropriate patient selection including relative and absolute contraindications to MRI-guided breast biopsy. 2) Describe and understand the steps of an MRI-guided breast biopsy procedure, including the MRI protocol and requirements for appropriate coil, needle, and approach selection. 3) Identify the benefits and limitations of MRI-guided breast biopsy and review tips for handling challenging biopsy locations and patient anatomy.
Alyssa	Cubbison	DO	1) Define indications for MRI-guided breast biopsy and appropriate patient selection including relative and absolute contraindications to MRI-guided breast biopsy. 2) Describe and understand the steps of an MRI-guided breast biopsy procedure, including the MRI protocol and requirements for appropriate coil, needle, and approach selection. 3) Identify the benefits and limitations of MRI-guided breast biopsy and review tips for handling challenging biopsy locations and patient anatomy.
Katie	Mason	MD	1) Define indications for MRI-guided breast biopsy and appropriate patient selection including relative and absolute contraindications to MRI-guided breast biopsy. 2) Describe and understand the steps of an MRI-guided breast biopsy procedure, including the MRI protocol and requirements for appropriate coil, needle, and approach selection. 3) Identify the benefits and limitations of MRI-guided breast biopsy and review tips for handling challenging biopsy locations and patient anatomy.

Jeffrey	Reiner	MD	1) Define indications for MRI-guided breast biopsy and appropriate patient selection including relative and absolute contraindications to MRI-guided breast biopsy. 2) Describe and understand the steps of an MRI-guided breast biopsy procedure, including the MRI protocol and requirements for appropriate coil, needle, and approach selection. 3) Identify the benefits and limitations of MRI-guided breast biopsy and review tips for handling challenging biopsy locations and patient anatomy.
Christine	Edmonds	MD	1) Define indications for MRI-guided breast biopsy and appropriate patient selection including relative and absolute contraindications to MRI-guided breast biopsy. 2) Describe and understand the steps of an MRI-guided breast biopsy procedure, including the MRI protocol and requirements for appropriate coil, needle, and approach selection. 3) Identify the benefits and limitations of MRI-guided breast biopsy and review tips for handling challenging biopsy locations and patient anatomy.
Supriya	Kulkarni	FRCPC,DMRD	1) Define indications for MRI-guided breast biopsy and appropriate patient selection including relative and absolute contraindications to MRI-guided breast biopsy. 2) Describe and understand the steps of an MRI-guided breast biopsy procedure, including the MRI protocol and requirements for appropriate coil, needle, and approach selection. 3) Identify the benefits and limitations of MRI-guided breast biopsy and review tips for handling challenging biopsy locations and patient anatomy.
Georgia	Spear	MD	1) Define indications for MRI-guided breast biopsy and appropriate patient selection including relative and absolute contraindications to MRI-guided breast biopsy. 2) Describe and understand the steps of an MRI-guided breast biopsy procedure, including the MRI protocol and requirements for appropriate coil, needle, and approach selection. 3) Identify the benefits and limitations of MRI-guided breast biopsy and review tips for handling challenging biopsy locations and patient anatomy.
Amy	Kerger	DO	1) Define indications for MRI-guided breast biopsy and appropriate patient selection including relative and absolute contraindications to MRI-guided breast biopsy. 2) Describe and understand the steps of an MRI-guided breast biopsy procedure, including the MRI protocol and requirements for appropriate coil, needle, and approach selection. 3) Identify the benefits and limitations of MRI-guided breast biopsy and review tips for handling challenging biopsy locations and patient anatomy.

Lauren	Snider	MD	1) Define indications for MRI-guided breast biopsy and appropriate patient selection including relative and absolute contraindications to MRI-guided breast biopsy. 2) Describe and understand the steps of an MRI-guided breast biopsy procedure, including the MRI protocol and requirements for appropriate coil, needle, and approach selection. 3) Identify the benefits and limitations of MRI-guided breast biopsy and review tips for handling challenging biopsy locations and patient anatomy.
Rachel	Loomans	MD	1) Define indications for MRI-guided breast biopsy and appropriate patient selection including relative and absolute contraindications to MRI-guided breast biopsy. 2) Describe and understand the steps of an MRI-guided breast biopsy procedure, including the MRI protocol and requirements for appropriate coil, needle, and approach selection. 3) Identify the benefits and limitations of MRI-guided breast biopsy and review tips for handling challenging biopsy locations and patient anatomy.
Tanya	Moseley	PhD,MD	1) Define indications for MRI-guided breast biopsy and appropriate patient selection including relative and absolute contraindications to MRI-guided breast biopsy. 2) Describe and understand the steps of an MRI-guided breast biopsy procedure, including the MRI protocol and requirements for appropriate coil, needle, and approach selection. 3) Identify the benefits and limitations of MRI-guided breast biopsy and review tips for handling challenging biopsy locations and patient anatomy.
Amie	Lee	MD	1) Summarize current evidence supporting the use of contrast-enhanced mammography for breast cancer screening, including appropriate indications and patient selection. 2) Describe the role of contrast-enhanced mammography in diagnostic breast imaging and compare its performance with other contrast-based modalities. 3) Evaluate strategies to expand access to contrast-enhanced mammography, particularly for underserved populations, and assess its potential to reduce disparities in breast cancer detection and care.
Janice	Sung	MD	

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Thiemo	van Nijnatten	PhD,MD	1) Summarize current evidence supporting the use of contrast-enhanced mammography for breast cancer screening, including appropriate indications and patient selection. 2) Describe the role of contrast-enhanced mammography in diagnostic breast imaging and compare its performance with other contrast-based modalities. 3) Evaluate strategies to expand access to contrast-enhanced mammography, particularly for underserved populations, and assess its potential to reduce disparities in breast cancer detection and care.
Bhavika	Patel	MD	1) Summarize current evidence supporting the use of contrast-enhanced mammography for breast cancer screening, including appropriate indications and patient selection. 2) Describe the role of contrast-enhanced mammography in diagnostic breast imaging and compare its performance with other contrast-based modalities. 3) Evaluate strategies to expand access to contrast-enhanced mammography, particularly for underserved populations, and assess its potential to reduce disparities in breast cancer detection and care.
Peter	Eby	MD	1) Summarize current guidelines and practice patterns for the management of high-risk breast lesions in the United States and Europe, highlighting key similarities and differences. 2) Apply multimodality imaging strategies including targeted ultrasound after MRI and contrast-enhanced mammography and CEM-guided biopsy for evaluation and management of high-risk lesions. 3) Integrate pathologic perspectives on lobular neoplasia and other high-risk breast lesions to support rad-patho correlation and informed clinical decision-making.

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Nisha	Sharma	FRCR,MB ChB	1) Summarize current guidelines and practice patterns for the management of high-risk breast lesions in the United States and Europe, highlighting key similarities and differences. 2) Apply multimodality imaging strategies including targeted ultrasound after MRI and contrast-enhanced mammography and CEM-guided biopsy for evaluation and management of high-risk lesions. 3) Integrate pathologic perspectives on lobular neoplasia and other high-risk breast lesions to support rad-patho correlation and informed clinical decision-making.
Husain	Sattar	MD, BA	1) Summarize current guidelines and practice patterns for the management of high-risk breast lesions in the United States and Europe, highlighting key similarities and differences. 2) Apply multimodality imaging strategies including targeted ultrasound after MRI and contrast-enhanced mammography and CEM-guided biopsy for evaluation and management of high-risk lesions. 3) Integrate pathologic perspectives on lobular neoplasia and other high-risk breast lesions to support rad-patho correlation and informed clinical decision-making.
Cherie	Kuzmiak	DO	1) Apply case-based imaging principles to assess DCIS, emphasizing radiologic–pathologic concordance and appropriate BI-RADS assessment. 2) Summarize current surgical management strategies for DCIS, including indications for excision, margin considerations, and de-escalation approaches. 3) Evaluate evolving oncologic strategies for DCIS, including systemic therapy considerations and active surveillance, to inform multidisciplinary care.
Cherie	Kuzmiak	DO	1) Apply case-based imaging principles to assess DCIS, emphasizing radiologic–pathologic concordance and appropriate BI-RADS assessment. 2) Summarize current surgical management strategies for DCIS, including indications for excision, margin considerations, and de-escalation approaches. 3) Evaluate evolving oncologic strategies for DCIS, including systemic therapy considerations and active surveillance, to inform multidisciplinary care.

Katharine	Yao	MD	1) Apply case-based imaging principles to assess DCIS, emphasizing radiologic–pathologic concordance and appropriate BI-RADS assessment. 2) Summarize current surgical management strategies for DCIS, including indications for excision, margin considerations, and de-escalation approaches. 3) Evaluate evolving oncologic strategies for DCIS, including systemic therapy considerations and active surveillance, to inform multidisciplinary care.
William	Gradishar	MD	1) Apply case-based imaging principles to assess DCIS, emphasizing radiologic–pathologic concordance and appropriate BI-RADS assessment. 2) Summarize current surgical management strategies for DCIS, including indications for excision, margin considerations, and de-escalation approaches. 3) Evaluate evolving oncologic strategies for DCIS, including systemic therapy considerations and active surveillance, to inform multidisciplinary care.
Bonnie	Joe	PhD,MD	1) Summarize traditional clinical breast cancer risk models and associated imaging screening strategies. 2) Describe AI-driven, imaging-based risk stratification approaches and their current clinical evidence. 3) Integrate clinical and imaging-based risk information to implement personalized breast cancer screening strategies in real-world practice.
Bonnie	Joe	PhD,MD	1) Summarize traditional clinical breast cancer risk models and associated imaging screening strategies. 2) Describe AI-driven, imaging-based risk stratification approaches and their current clinical evidence. 3) Integrate clinical and imaging-based risk information to implement personalized breast cancer screening strategies in real-world practice.
Stamatia	Destounis	MD	1) Summarize traditional clinical breast cancer risk models and associated imaging screening strategies. 2) Describe AI-driven, imaging-based risk stratification approaches and their current clinical evidence. 3) Integrate clinical and imaging-based risk information to implement personalized breast cancer screening strategies in real-world practice.
Katerina	Dodelzon	MD	1) Summarize traditional clinical breast cancer risk models and associated imaging screening strategies. 2) Describe AI-driven, imaging-based risk stratification approaches and their current clinical evidence. 3) Integrate clinical and imaging-based risk information to implement personalized breast cancer screening strategies in real-world practice.

Thomas	Helbich	MBA,MD	1) Describe the role of breast density in screening performance and summarize current U.S. screening policies and FDA regulatory requirements related to breast density notification and supplemental screening. 2) Compare supplemental breast cancer screening strategies used in Europe and Asia, including MRI, ultrasound, and contrast-enhanced mammography with respect to population risk, evidence base, and guideline recommendations. 3) Evaluate emerging imaging technologies and global screening paradigms to assess their potential impact on risk-adapted, personalized breast cancer screening.
Georgia	Spear	MD	1) Describe the role of breast density in screening performance and summarize current U.S. screening policies and FDA regulatory requirements related to breast density notification and supplemental screening. 2) Compare supplemental breast cancer screening strategies used in Europe and Asia, including MRI, ultrasound, and contrast-enhanced mammography with respect to population risk, evidence base, and guideline recommendations. 3) Evaluate emerging imaging technologies and global screening paradigms to assess their potential impact on risk-adapted, personalized breast cancer screening.
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Jung Min	Chang	MD	1) Describe the role of breast density in screening performance and summarize current U.S. screening policies and FDA regulatory requirements related to breast density notification and supplemental screening. 2) Compare supplemental breast cancer screening strategies used in Europe and Asia, including MRI, ultrasound, and contrast-enhanced mammography with respect to population risk, evidence base, and guideline recommendations. 3) Evaluate emerging imaging technologies and global screening paradigms to assess their potential impact on risk-adapted, personalized breast cancer screening.

Eric	Rosen	MD	1) Summarize current U.S. breast cancer screening guidelines, including recommendations for screening initiation, cessation, and risk-based modifications. 2) Compare population-based and opportunistic breast cancer screening models used in Europe and Canada, with emphasis on age thresholds, programmatic structures, and access considerations. 3) Evaluate international variations in screening recommendations to assess their implications for individualized patient care, health equity, and future guideline development.
Eric	Rosen	MD	1) Summarize current U.S. breast cancer screening guidelines, including recommendations for screening initiation, cessation, and risk-based modifications. 2) Compare population-based and opportunistic breast cancer screening models used in Europe and Canada, with emphasis on age thresholds, programmatic structures, and access considerations. 3) Evaluate international variations in screening recommendations to assess their implications for individualized patient care, health equity, and future guideline development.
Alexandra	Athanasiou	MD, MSc	1) Summarize current U.S. breast cancer screening guidelines, including recommendations for screening initiation, cessation, and risk-based modifications. 2) Compare population-based and opportunistic breast cancer screening models used in Europe and Canada, with emphasis on age thresholds, programmatic structures, and access considerations. 3) Evaluate international variations in screening recommendations to assess their implications for individualized patient care, health equity, and future guideline development.
Supriya	Kulkarni	FRCPC,DMRD	1) Summarize current U.S. breast cancer screening guidelines, including recommendations for screening initiation, cessation, and risk-based modifications. 2) Compare population-based and opportunistic breast cancer screening models used in Europe and Canada, with emphasis on age thresholds, programmatic structures, and access considerations. 3) Evaluate international variations in screening recommendations to assess their implications for individualized patient care, health equity, and future guideline development.

Anand	Narayan	PhD,MD	1) Identify key drivers of breast cancer screening disparities in the United States, including access, equity, and outcome-related factors. 2) Describe socioeconomic, geographic, and system-level barriers to equitable breast cancer screening in Europe and compare these challenges across healthcare models. 3) Evaluate current evidence, knowledge gaps, and best-practice recommendations for breast cancer screening in transgender and other under-represented populations to inform inclusive clinical care and research strategies.
Anand	Narayan	PhD,MD	1) Identify key drivers of breast cancer screening disparities in the United States, including access, equity, and outcome-related factors. 2) Describe socioeconomic, geographic, and system-level barriers to equitable breast cancer screening in Europe and compare these challenges across healthcare models. 3) Evaluate current evidence, knowledge gaps, and best-practice recommendations for breast cancer screening in transgender and other under-represented populations to inform inclusive clinical care and research strategies.
Yiming	Gao	MD	1) Identify key drivers of breast cancer screening disparities in the United States, including access, equity, and outcome-related factors. 2) Describe socioeconomic, geographic, and system-level barriers to equitable breast cancer screening in Europe and compare these challenges across healthcare models. 3) Evaluate current evidence, knowledge gaps, and best-practice recommendations for breast cancer screening in transgender and other under-represented populations to inform inclusive clinical care and research strategies.
Fiona	Gilbert	FRCR,MB ChB	1) Identify key drivers of breast cancer screening disparities in the United States, including access, equity, and outcome-related factors. 2) Describe socioeconomic, geographic, and system-level barriers to equitable breast cancer screening in Europe and compare these challenges across healthcare models. 3) Evaluate current evidence, knowledge gaps, and best-practice recommendations for breast cancer screening in transgender and other under-represented populations to inform inclusive clinical care and research strategies.
Katja	Pinker-Domenig	PhD,MD	1) Describe advances in dynamic contrast-enhanced breast MRI, including abbreviated and high-resolution protocols, and assess their clinical impact on screening efficiency and diagnostic performance. 2) Explain the evolving role of diffusion-weighted imaging and AI in breast MRI for different clinical indications. 3) Identify emerging breast MRI technologies beyond conventional DCE and DWI and evaluate their potential for clinical integration and future research.

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Habib	Rahbar	MD	1) Describe advances in dynamic contrast-enhanced breast MRI, including abbreviated and high-resolution protocols, and assess their clinical impact on screening efficiency and diagnostic performance. 2) Explain the evolving role of diffusion-weighted imaging and AI in breast MRI for different clinical indications. 3) Identify emerging breast MRI technologies beyond conventional DCE and DWI and evaluate their potential for clinical integration and future research.
Pascal	Baltzer	MD	1) Describe advances in dynamic contrast-enhanced breast MRI, including abbreviated and high-resolution protocols, and assess their clinical impact on screening efficiency and diagnostic performance. 2) Explain the evolving role of diffusion-weighted imaging and AI in breast MRI for different clinical indications. 3) Identify emerging breast MRI technologies beyond conventional DCE and DWI and evaluate their potential for clinical integration and future research.
Christopher	Comstock	MD	1) Apply breast MRI and contrast-enhanced mammography findings in case-based scenarios to guide diagnostic evaluation and clinical decision-making. 2) Compare breast MRI and contrast-enhanced mammography in problem-solving and lesion characterization. 3) Describe multimodality image-guided biopsy strategies, including selection of the most appropriate modality for intervention based on imaging findings.
Christopher	Comstock	MD	1) Apply breast MRI and contrast-enhanced mammography findings in case-based scenarios to guide diagnostic evaluation and clinical decision-making. 2) Compare breast MRI and contrast-enhanced mammography in problem-solving and lesion characterization. 3) Describe multimodality image-guided biopsy strategies, including selection of the most appropriate modality for intervention based on imaging findings.

Tali	Amir	MD	1) Apply breast MRI and contrast-enhanced mammography findings in case-based scenarios to guide diagnostic evaluation and clinical decision-making. 2) Compare breast MRI and contrast-enhanced mammography in problem-solving and lesion characterization. 3) Describe multimodality image-guided biopsy strategies, including selection of the most appropriate modality for intervention based on imaging findings.
Almir	Bitencourt	PhD,MD	1) Apply breast MRI and contrast-enhanced mammography findings in case-based scenarios to guide diagnostic evaluation and clinical decision-making. 2) Compare breast MRI and contrast-enhanced mammography in problem-solving and lesion characterization. 3) Describe multimodality image-guided biopsy strategies, including selection of the most appropriate modality for intervention based on imaging findings.
Panagiotis	Kapetas	PhD,MD	1) Describe recent advances in breast ultrasound, including the integration of artificial intelligence, and assess their impact on lesion detection and characterization. 2) Apply targeted ultrasound techniques following MRI and contrast-enhanced mammography to improve lesion localization and diagnostic confidence. 3) Explain the role of contrast-enhanced mammography–guided biopsy in the diagnostic pathway and identify appropriate clinical scenarios for its use.
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Wendie	Berg	MD, PhD	1) Describe recent advances in breast ultrasound, including the integration of artificial intelligence, and assess their impact on lesion detection and characterization. 2) Apply targeted ultrasound techniques following MRI and contrast-enhanced mammography to improve lesion localization and diagnostic confidence. 3) Explain the role of contrast-enhanced mammography–guided biopsy in the diagnostic pathway and identify appropriate clinical scenarios for its use.

Rodrigo	Alcantara	MSc,MD	1) Describe recent advances in breast ultrasound, including the integration of artificial intelligence, and assess their impact on lesion detection and characterization. 2) Apply targeted ultrasound techniques following MRI and contrast-enhanced mammography to improve lesion localization and diagnostic confidence. 3) Explain the role of contrast-enhanced mammography–guided biopsy in the diagnostic pathway and identify appropriate clinical scenarios for its use.
Corinne	Balleyguier	PhD,MD	1) Apply updated BI-RADS guidance in mammography and digital breast tomosynthesis interpretation to ensure accurate assessment, standardized reporting, and appropriate management. 2) Implement up-dated BI-RADS-based reporting standards in breast ultrasound, recognizing common pitfalls through case-based examples. 3) Integrate recent BI-RADS updates into breast MRI interpretation and reporting to support consistent communication and clinical decision-making.
Corinne	Balleyguier	PhD,MD	1) Apply updated BI-RADS guidance in mammography and digital breast tomosynthesis interpretation to ensure accurate assessment, standardized reporting, and appropriate management. 2) Implement up-dated BI-RADS-based reporting standards in breast ultrasound, recognizing common pitfalls through case-based examples. 3) Integrate recent BI-RADS updates into breast MRI interpretation and reporting to support consistent communication and clinical decision-making.
Jessica	Leung	MD	1) Apply updated BI-RADS guidance in mammography and digital breast tomosynthesis interpretation to ensure accurate assessment, standardized reporting, and appropriate management. 2) Implement up-dated BI-RADS-based reporting standards in breast ultrasound, recognizing common pitfalls through case-based examples. 3) Integrate recent BI-RADS updates into breast MRI interpretation and reporting to support consistent communication and clinical decision-making.
Lilian	Wang	MD	1) Apply updated BI-RADS guidance in mammography and digital breast tomosynthesis interpretation to ensure accurate assessment, standardized reporting, and appropriate management. 2) Implement up-dated BI-RADS-based reporting standards in breast ultrasound, recognizing common pitfalls through case-based examples. 3) Integrate recent BI-RADS updates into breast MRI interpretation and reporting to support consistent communication and clinical decision-making.

Vilert	Loving	MMM,MD	1) Select appropriate mammography- and digital breast tomosynthesis–guided interventions. 2) Apply best practices for ultrasound-guided breast interventions. 3) Describe indications, technical considerations, and workflow for MRI-guided breast interventions.
Vilert	Loving	MMM,MD	1) Select appropriate mammography- and digital breast tomosynthesis–guided interventions. 2) Apply best practices for ultrasound-guided breast interventions. 3) Describe indications, technical considerations, and workflow for MRI-guided breast interventions.
Gary	Whitman	MD	1) Select appropriate mammography- and digital breast tomosynthesis–guided interventions. 2) Apply best practices for ultrasound-guided breast interventions. 3) Describe indications, technical considerations, and workflow for MRI-guided breast interventions.
Jean	Seely	MD, FRCPC	1) Select appropriate mammography- and digital breast tomosynthesis–guided interventions. 2) Apply best practices for ultrasound-guided breast interventions. 3) Describe indications, technical considerations, and workflow for MRI-guided breast interventions.
Derek	Nguyen	MD	1) Assess imaging response to neoadjuvant breast cancer therapy using multimodality imaging to inform surgical planning and treatment decisions. 2) Interpret imaging findings of axillary and regional lymph nodes to evaluate treatment response and residual disease beyond the breast. 3) Describe the principles, indications, and imaging considerations for minimally invasive breast cancer treatment with cryotherapy.
Derek	Nguyen	MD	1) Assess imaging response to neoadjuvant breast cancer therapy using multimodality imaging to inform surgical planning and treatment decisions. 2) Interpret imaging findings of axillary and regional lymph nodes to evaluate treatment response and residual disease beyond the breast. 3) Describe the principles, indications, and imaging considerations for minimally invasive breast cancer treatment with cryotherapy.
Beatriz	Adrada	MD	1) Assess imaging response to neoadjuvant breast cancer therapy using multimodality imaging to inform surgical planning and treatment decisions. 2) Interpret imaging findings of axillary and regional lymph nodes to evaluate treatment response and residual disease beyond the breast. 3) Describe the principles, indications, and imaging considerations for minimally invasive breast cancer treatment with cryotherapy.

Michael	Fuchsjager	MD	1) Assess imaging response to neoadjuvant breast cancer therapy using multimodality imaging to inform surgical planning and treatment decisions. 2) Interpret imaging findings of axillary and regional lymph nodes to evaluate treatment response and residual disease beyond the breast. 3) Describe the principles, indications, and imaging considerations for minimally invasive breast cancer treatment with cryotherapy.
Candace	Howard-Claudio	PhD,MD	1) Review principles of coronary CTA interpretation and identify normal cardiac anatomy on cardiac CT. 2) Understand how to identify coronary atherosclerosis and stenosis in native coronary arteries, and interpret findings using CAD-RADS 2.0. 3) Understand how to identify pathology in coronary stents and bypass grafts, and use CAD-RADS 2.0 to standardize reporting. 4) Learn techniques for optimizing coronary CTA.
Juan	Batlle	MD	1) Review principles of coronary CTA interpretation and identify normal cardiac anatomy on cardiac CT. 2) Understand how to identify coronary atherosclerosis and stenosis in native coronary arteries, and interpret findings using CAD-RADS 2.0. 3) Understand how to identify pathology in coronary stents and bypass grafts, and use CAD-RADS 2.0 to standardize reporting. 4) Learn techniques for optimizing coronary CTA.
Brian	Ghoshhajra	MBA,MD	1) Review principles of coronary CTA interpretation and identify normal cardiac anatomy on cardiac CT. 2) Understand how to identify coronary atherosclerosis and stenosis in native coronary arteries, and interpret findings using CAD-RADS 2.0. 3) Understand how to identify pathology in coronary stents and bypass grafts, and use CAD-RADS 2.0 to standardize reporting. 4) Learn techniques for optimizing coronary CTA.
Rozemarijn	Vliegenthart	PhD,MD	1) Review principles of coronary CTA interpretation and identify normal cardiac anatomy on cardiac CT. 2) Understand how to identify coronary atherosclerosis and stenosis in native coronary arteries, and interpret findings using CAD-RADS 2.0. 3) Understand how to identify pathology in coronary stents and bypass grafts, and use CAD-RADS 2.0 to standardize reporting. 4) Learn techniques for optimizing coronary CTA.
Gilad	Borisovsky	MD	1) Review principles of coronary CTA interpretation and identify normal cardiac anatomy on cardiac CT. 2) Understand how to identify coronary atherosclerosis and stenosis in native coronary arteries, and interpret findings using CAD-RADS 2.0. 3) Understand how to identify pathology in coronary stents and bypass grafts, and use CAD-RADS 2.0 to standardize reporting. 4) Learn techniques for optimizing coronary CTA.

Phillip	Young	MD	1) Understand the basics and imaging findings associated with coronary artery calcium scoring, aortic valve calcium scoring, and mitral annular calcification. 2) Build a framework for integrating functional assessment of coronary artery disease into these clinical reports with awareness of both CT-FFR and CT perfusion assessment. 3) Identify congenital coronary artery variants on cardiac CT as well as additional types of non-CAD coronary pathology such as coronary fistula and spontaneous coronary artery dissection (SCAD).
Cristina	Fuss	PhD,MD	1) Understand the basics and imaging findings associated with coronary artery calcium scoring, aortic valve calcium scoring, and mitral annular calcification. 2) Build a framework for integrating functional assessment of coronary artery disease into these clinical reports with awareness of both CT-FFR and CT perfusion assessment. 3) Identify congenital coronary artery variants on cardiac CT as well as additional types of non-CAD coronary pathology such as coronary fistula and spontaneous coronary artery dissection (SCAD).
Anna	Bader	MD	1) Understand the basics and imaging findings associated with coronary artery calcium scoring, aortic valve calcium scoring, and mitral annular calcification. 2) Build a framework for integrating functional assessment of coronary artery disease into these clinical reports with awareness of both CT-FFR and CT perfusion assessment. 3) Identify congenital coronary artery variants on cardiac CT as well as additional types of non-CAD coronary pathology such as coronary fistula and spontaneous coronary artery dissection (SCAD).
Satoshi	Nakamura	MD	1) Understand the basics and imaging findings associated with coronary artery calcium scoring, aortic valve calcium scoring, and mitral annular calcification. 2) Build a framework for integrating functional assessment of coronary artery disease into these clinical reports with awareness of both CT-FFR and CT perfusion assessment. 3) Identify congenital coronary artery variants on cardiac CT as well as additional types of non-CAD coronary pathology such as coronary fistula and spontaneous coronary artery dissection (SCAD).

Nicola	Galea	MD	1) Understand the basics and imaging findings associated with coronary artery calcium scoring, aortic valve calcium scoring, and mitral annular calcification. 2) Build a framework for integrating functional assessment of coronary artery disease into these clinical reports with awareness of both CT-FFR and CT perfusion assessment. 3) Identify congenital coronary artery variants on cardiac CT as well as additional types of non-CAD coronary pathology such as coronary fistula and spontaneous coronary artery dissection (SCAD).
Smita	Patel	FRCR,MBBS	1) Understand the basics and imaging findings associated with coronary artery calcium scoring, aortic valve calcium scoring, and mitral annular calcification. 2) Build a framework for integrating functional assessment of coronary artery disease into these clinical reports with awareness of both CT-FFR and CT perfusion assessment. 3) Identify congenital coronary artery variants on cardiac CT as well as additional types of non-CAD coronary pathology such as coronary fistula and spontaneous coronary artery dissection (SCAD).
Sandeep	Hedgire	MD	1) Describe pre-TAVR imaging. 2) Describe pre-TMVR imaging. 3) Discuss imaging findings associated with left atrial interventions. 4). Be familiar with imaging complications associated with surgical and transcatheter interventions.
Candace	Howard-Claudio	PhD,MD	1) Describe pre-TAVR imaging. 2) Describe pre-TMVR imaging. 3) Discuss imaging findings associated with left atrial interventions. 4). Be familiar with imaging complications associated with surgical and transcatheter interventions.
Jonathan	Weir-McCall	FRCR	1) Describe pre-TAVR imaging. 2) Describe pre-TMVR imaging. 3) Discuss imaging findings associated with left atrial interventions. 4). Be familiar with imaging complications associated with surgical and transcatheter interventions.
Camila	Urzua Fresno	MD, MSc	1) Describe pre-TAVR imaging. 2) Describe pre-TMVR imaging. 3) Discuss imaging findings associated with left atrial interventions. 4). Be familiar with imaging complications associated with surgical and transcatheter interventions.
Tilman	Emrich	MD	1) Describe pre-TAVR imaging. 2) Describe pre-TMVR imaging. 3) Discuss imaging findings associated with left atrial interventions. 4). Be familiar with imaging complications associated with surgical and transcatheter interventions.
Gautham	Reddy	MD, MPH	1) Describe pre-TAVR imaging. 2) Describe pre-TMVR imaging. 3) Discuss imaging findings associated with left atrial interventions. 4). Be familiar with imaging complications associated with surgical and transcatheter interventions.

Daniel	Ocazionez-Trujillo	MD	1) Learn to identify abnormalities in and around the heart such as thrombus vs slow flow, pulmonary vein stenosis, CIED lead perforation, and incidental non-cardiac findings. 2) Become familiar with the CT appearance of tumors in and around the heart. 3) Describe CT findings associated with valvular pathology and endocarditis. 4). Become familiar with common adult congenital abnormalities on CT.
Katherine	Kaproth-Joslin	PhD,MD	1) Learn to identify abnormalities in and around the heart such as thrombus vs slow flow, pulmonary vein stenosis, CIED lead perforation, and incidental non-cardiac findings. 2) Become familiar with the CT appearance of tumors in and around the heart. 3) Describe CT findings associated with valvular pathology and endocarditis. 4). Become familiar with common adult congenital abnormalities on CT.
Aparna	Deshpande	MBBS, FRCR	1) Learn to identify abnormalities in and around the heart such as thrombus vs slow flow, pulmonary vein stenosis, CIED lead perforation, and incidental non-cardiac findings. 2) Become familiar with the CT appearance of tumors in and around the heart. 3) Describe CT findings associated with valvular pathology and endocarditis. 4). Become familiar with common adult congenital abnormalities on CT.
Mini	Pakkal	FRCR, MBBS	1) Learn to identify abnormalities in and around the heart such as thrombus vs slow flow, pulmonary vein stenosis, CIED lead perforation, and incidental non-cardiac findings. 2) Become familiar with the CT appearance of tumors in and around the heart. 3) Describe CT findings associated with valvular pathology and endocarditis. 4). Become familiar with common adult congenital abnormalities on CT.
Elsie	Nguyen	FRCPC,MD	1) Learn to identify abnormalities in and around the heart such as thrombus vs slow flow, pulmonary vein stenosis, CIED lead perforation, and incidental non-cardiac findings. 2) Become familiar with the CT appearance of tumors in and around the heart. 3) Describe CT findings associated with valvular pathology and endocarditis. 4). Become familiar with common adult congenital abnormalities on CT.
Prachi	Agarwal	MD	1) Learn to identify abnormalities in and around the heart such as thrombus vs slow flow, pulmonary vein stenosis, CIED lead perforation, and incidental non-cardiac findings. 2) Become familiar with the CT appearance of tumors in and around the heart. 3) Describe CT findings associated with valvular pathology and endocarditis. 4). Become familiar with common adult congenital abnormalities on CT.
Cristina	Fuss	PhD,MD	1) Become familiar with a spectrum of cardiovascular imaging findings, from classic and common to rare and atypical.

Jean	Jeudy	MD	1) Become familiar with a spectrum of cardiovascular imaging findings, from classic and common to rare and atypical.
Jordi	Broncano	MD	1) Become familiar with a spectrum of cardiovascular imaging findings, from classic and common to rare and atypical.
Liisa	Bergmann	MBA,MD	1) Become familiar with a spectrum of cardiovascular imaging findings, from classic and common to rare and atypical.
Daniel	Vargas	MD	1) Identify and describe the X-ray and CT appearances of different cardiac devices used in heart failure patients. 2) Discuss imaging optimization strategies on CT and MR for patients with cardiac devices. 3) Review radiographic findings of contemporary cardiac devices for structural heart disease.
Michael	Pohlen	MD	1) Identify and describe the X-ray and CT appearances of different cardiac devices used in heart failure patients. 2) Discuss imaging optimization strategies on CT and MR for patients with cardiac devices. 3) Review radiographic findings of contemporary cardiac devices for structural heart disease.
Suman	Prabhakar	FRCR,MD	1) Identify and describe the X-ray and CT appearances of different cardiac devices used in heart failure patients. 2) Discuss imaging optimization strategies on CT and MR for patients with cardiac devices. 3) Review radiographic findings of contemporary cardiac devices for structural heart disease.
Carole	Ridge	FFR(RCSI)	1) Identify and describe the X-ray and CT appearances of different cardiac devices used in heart failure patients. 2) Discuss imaging optimization strategies on CT and MR for patients with cardiac devices. 3) Review radiographic findings of contemporary cardiac devices for structural heart disease.
Alessande r	Ramos	MD, FRCPC	1) Identify and describe the X-ray and CT appearances of different cardiac devices used in heart failure patients. 2) Discuss imaging optimization strategies on CT and MR for patients with cardiac devices. 3) Review radiographic findings of contemporary cardiac devices for structural heart disease.
Michael	Morris	MD	1) Identify strategies for improving workflow and patient throughput in cardiac MRI and CT. 2) Understand how to bill and code properly for cardiac CT and MRI Explore how blending imaging modalities in cardiovascular imaging. 3) Discuss the role of a 3D Lab to solve imaging problems.
Richard	Hallett	MD	1) Identify strategies for improving workflow and patient throughput in cardiac MRI and CT. 2) Understand how to bill and code properly for cardiac CT and MRI Explore how blending imaging modalities in cardiovascular imaging. 3) Discuss the role of a 3D Lab to solve imaging problems.

Praveen	Ranganath	MD	1) Identify strategies for improving workflow and patient throughput in cardiac MRI and CT. 2) Understand how to bill and code properly for cardiac CT and MRI Explore how blending imaging modalities in cardiovascular imaging. 3) Discuss the role of a 3D Lab to solve imaging problems.
Melany	Atkins	MD	1) Identify strategies for improving workflow and patient throughput in cardiac MRI and CT. 2) Understand how to bill and code properly for cardiac CT and MRI Explore how blending imaging modalities in cardiovascular imaging. 3) Discuss the role of a 3D Lab to solve imaging problems.
Michael	Coords	MD	1) Identify strategies for improving workflow and patient throughput in cardiac MRI and CT. 2) Understand how to bill and code properly for cardiac CT and MRI Explore how blending imaging modalities in cardiovascular imaging. 3) Discuss the role of a 3D Lab to solve imaging problems.
Eric	Williamson	MD	1) Describe anatomic and technical considerations for transcatheter tricuspid valve replacement (TTVR), with emphasis on CT-based procedural planning. 2) Recognize common and high-risk post–valve intervention complications and identify the role of CT in their detection and management. 3) Discuss the current and future state of coronary CTA to help guide coronary interventions.
Prabhakar	Rajiah	FRCR,MD	1) Describe anatomic and technical considerations for transcatheter tricuspid valve replacement (TTVR), with emphasis on CT-based procedural planning. 2) Recognize common and high-risk post–valve intervention complications and identify the role of CT in their detection and management. 3) Discuss the current and future state of coronary CTA to help guide coronary interventions.
Monika	Radike	PhD,MD	1) Describe anatomic and technical considerations for transcatheter tricuspid valve replacement (TTVR), with emphasis on CT-based procedural planning. 2) Recognize common and high-risk post–valve intervention complications and identify the role of CT in their detection and management. 3) Discuss the current and future state of coronary CTA to help guide coronary interventions.
Yader	Sandoval	MD	1) Describe anatomic and technical considerations for transcatheter tricuspid valve replacement (TTVR), with emphasis on CT-based procedural planning. 2) Recognize common and high-risk post–valve intervention complications and identify the role of CT in their detection and management. 3) Discuss the current and future state of coronary CTA to help guide coronary interventions.
Jill	Jacobs	MD	1) Identify the strengths and limitations of using CCTA to assess CAD in women. 2) Understand some of the advantages and challenges of using CTFFR for assessing coronary stenosis. 3) Explore the concept of quantitative plaque assessment. 4) Discuss the growing use of CT for electrophysiology procedures.

Rozemarijn	Vliegenthart	PhD,MD	1) Identify the strengths and limitations of using CCTA to assess CAD in women. 2) Understand some of the advantages and challenges of using CTFFR for assessing coronary stenosis. 3) Explore the concept of quantitative plaque assessment. 4) Discuss the growing use of CT for electrophysiology procedures.
Diana	Litmanovich	MD	1) Identify the strengths and limitations of using CCTA to assess CAD in women. 2) Understand some of the advantages and challenges of using CTFFR for assessing coronary stenosis. 3) Explore the concept of quantitative plaque assessment. 4) Discuss the growing use of CT for electrophysiology procedures.
Akos	Varga-Szemes	PhD,MD	1) Identify the strengths and limitations of using CCTA to assess CAD in women. 2) Understand some of the advantages and challenges of using CTFFR for assessing coronary stenosis. 3) Explore the concept of quantitative plaque assessment. 4) Discuss the growing use of CT for electrophysiology procedures.
Jonathon	Leipsic	MD	1) Identify the strengths and limitations of using CCTA to assess CAD in women. 2) Understand some of the advantages and challenges of using CTFFR for assessing coronary stenosis. 3) Explore the concept of quantitative plaque assessment. 4) Discuss the growing use of CT for electrophysiology procedures.
Michael	Morris	MD	1) Identify the strengths and limitations of using CCTA to assess CAD in women. 2) Understand some of the advantages and challenges of using CTFFR for assessing coronary stenosis. 3) Explore the concept of quantitative plaque assessment. 4) Discuss the growing use of CT for electrophysiology procedures.
Albert	Hsiao	PhD,MD	1) Be able to explain the various techniques and strategies to achieve faster scans, perform stress cardiac MRI and examinations for electrophysiology. 2) Understand how to interpret stress cardiac MRI examinations and MRI examinations for electrophysiology. 3) Understand the latest techniques for MRI examinations including artificial intelligence for faster scanning, quantitative stress perfusion, 3D LGE for atrial scar and guiding ablation.
Lynette	Teo	FRCR,MBChB	1) Be able to explain the various techniques and strategies to achieve faster scans, perform stress cardiac MRI and examinations for electrophysiology. 2) Understand how to interpret stress cardiac MRI examinations and MRI examinations for electrophysiology. 3) Understand the latest techniques for MRI examinations including artificial intelligence for faster scanning, quantitative stress perfusion, 3D LGE for atrial scar and guiding ablation.

Karen	Ordovas	MS,MD	1) Be able to explain the various techniques and strategies to achieve faster scans, perform stress cardiac MRI and examinations for electrophysiology. 2) Understand how to interpret stress cardiac MRI examinations and MRI examinations for electrophysiology. 3) Understand the latest techniques for MRI examinations including artificial intelligence for faster scanning, quantitative stress perfusion, 3D LGE for atrial scar and guiding ablation.
Ming-Yen	Ng	BMBS, FRCR	1) Be able to explain the various techniques and strategies to achieve faster scans, perform stress cardiac MRI and examinations for electrophysiology. 2) Understand how to interpret stress cardiac MRI examinations and MRI examinations for electrophysiology. 3) Understand the latest techniques for MRI examinations including artificial intelligence for faster scanning, quantitative stress perfusion, 3D LGE for atrial scar and guiding ablation.
Harold	Litt	PhD,MD	1) Be able to explain the various techniques and strategies to achieve faster scans, perform stress cardiac MRI and examinations for electrophysiology. 2) Understand how to interpret stress cardiac MRI examinations and MRI examinations for electrophysiology. 3) Understand the latest techniques for MRI examinations including artificial intelligence for faster scanning, quantitative stress perfusion, 3D LGE for atrial scar and guiding ablation.
Jadranka	Stojanovska	MD, MS	1) Learn cardiac MR imaging pulse sequences used across imaging protocols. 2) Learn how to problem solve and optimize cardiac MRI. 3) Learn when to use parametric mapping and pearls for interpretation (T1, T2, T2*, ECV). 4) Review pulse sequences and techniques for magnetic resonance angiography and imaging findings associated with aortopathies.
Tim	Leiner	MD, PhD	1) Learn cardiac MR imaging pulse sequences used across imaging protocols. 2) Learn how to problem solve and optimize cardiac MRI. 3) Learn when to use parametric mapping and pearls for interpretation (T1, T2, T2*, ECV). 4) Review pulse sequences and techniques for magnetic resonance angiography and imaging findings associated with aortopathies.
Bradley	Allen	MD, MS	1) Learn cardiac MR imaging pulse sequences used across imaging protocols. 2) Learn how to problem solve and optimize cardiac MRI. 3) Learn when to use parametric mapping and pearls for interpretation (T1, T2, T2*, ECV). 4) Review pulse sequences and techniques for magnetic resonance angiography and imaging findings associated with aortopathies.

Vineeta	Ojha	MD,MBBS	1) Learn cardiac MR imaging pulse sequences used across imaging protocols. 2) Learn how to problem solve and optimize cardiac MRI. 3) Learn when to use parametric mapping and pearls for interpretation (T1, T2, T2*, ECV). 4) Review pulse sequences and techniques for magnetic resonance angiography and imaging findings associated with aortopathies.
Felipe	Torres	PhD,MD	1) Learn cardiac MR imaging pulse sequences used across imaging protocols. 2) Learn how to problem solve and optimize cardiac MRI. 3) Learn when to use parametric mapping and pearls for interpretation (T1, T2, T2*, ECV). 4) Review pulse sequences and techniques for magnetic resonance angiography and imaging findings associated with aortopathies.
Sara	Boccalini	MD, PhD	1) Learn cardiac MR imaging pulse sequences used across imaging protocols. 2) Learn how to problem solve and optimize cardiac MRI. 3) Learn when to use parametric mapping and pearls for interpretation (T1, T2, T2*, ECV). 4) Review pulse sequences and techniques for magnetic resonance angiography and imaging findings associated with aortopathies.
Jacobo	Kirsch	MD, MBA	1) Identify common CMR findings associated with chest pain such as epicardial ischemia, coronary microvascular disease, and MINOCA. 2) Learn how to use CMR for identification and follow-up of inflammatory cardiomyopathies such as sarcoid, immune checkpoint inhibitor associated myocarditis, and genetic cardiomyopathies. 3) Interpret and recognize cardiac and pericardial masses.
Linda	Haramati	MS,MD	1) Identify common CMR findings associated with chest pain such as epicardial ischemia, coronary microvascular disease, and MINOCA. 2) Learn how to use CMR for identification and follow-up of inflammatory cardiomyopathies such as sarcoid, immune checkpoint inhibitor associated myocarditis, and genetic cardiomyopathies. 3) Interpret and recognize cardiac and pericardial masses.
Rodrigo	Salgado	PhD,MD	1) Identify common CMR findings associated with chest pain such as epicardial ischemia, coronary microvascular disease, and MINOCA. 2) Learn how to use CMR for identification and follow-up of inflammatory cardiomyopathies such as sarcoid, immune checkpoint inhibitor associated myocarditis, and genetic cardiomyopathies. 3) Interpret and recognize cardiac and pericardial masses.

Sandeep	Hedgire	MD	1) Identify common CMR findings associated with chest pain such as epicardial ischemia, coronary microvascular disease, and MINOCA. 2) Learn how to use CMR for identification and follow-up of inflammatory cardiomyopathies such as sarcoid, immune checkpoint inhibitor associated myocarditis, and genetic cardiomyopathies. 3) Interpret and recognize cardiac and pericardial masses.
Cristina	Fuss	PhD,MD	1) Identify common CMR findings associated with chest pain such as epicardial ischemia, coronary microvascular disease, and MINOCA. 2) Learn how to use CMR for identification and follow-up of inflammatory cardiomyopathies such as sarcoid, immune checkpoint inhibitor associated myocarditis, and genetic cardiomyopathies. 3) Interpret and recognize cardiac and pericardial masses.
Seth	Kligerman	MS,MD	1) Correlate key imaging patterns of diffuse lung disease with the underlying anatomic structures, physiologic processes, and histopathologic changes that generate them. 2) Interpret radiographic and CT findings through an integrated lens that connects imaging appearances with pathophysiologic mechanisms. 3) Recognize imaging clues that reflect specific histologic processes to improve diagnostic precision.
Jeffrey	Galvin	MD	1) Correlate key imaging patterns of diffuse lung disease with the underlying anatomic structures, physiologic processes, and histopathologic changes that generate them. 2) Interpret radiographic and CT findings through an integrated lens that connects imaging appearances with pathophysiologic mechanisms. 3) Recognize imaging clues that reflect specific histologic processes to improve diagnostic precision.
Teri	Franks	MD	1) Correlate key imaging patterns of diffuse lung disease with the underlying anatomic structures, physiologic processes, and histopathologic changes that generate them. 2) Interpret radiographic and CT findings through an integrated lens that connects imaging appearances with pathophysiologic mechanisms. 3) Recognize imaging clues that reflect specific histologic processes to improve diagnostic precision.
Jo-Anne	Shepard	MD	1) Recognize normal and abnormal appearances of life-support devices and lines, including endotracheal tubes, tracheostomy tubes, central venous catheters, pulmonary artery catheters, chest tubes, ECMO cannulas, and enteric tubes. 2) Identify common and critical ICU-related pathologies on chest radiographs and CT, including pulmonary edema, ARDS, pneumonia, atelectasis, pneumothorax, and pleural effusion. 3) Differentiate technical and positioning artifacts from true pathology on portable ICU chest radiographs and CT scans.

Rishi	Agrawal	MD	1) Recognize normal and abnormal appearances of life-support devices and lines, including endotracheal tubes, tracheostomy tubes, central venous catheters, pulmonary artery catheters, chest tubes, ECMO cannulas, and enteric tubes. 2) Identify common and critical ICU-related pathologies on chest radiographs and CT, including pulmonary edema, ARDS, pneumonia, atelectasis, pneumothorax, and pleural effusion. 3) Differentiate technical and positioning artifacts from true pathology on portable ICU chest radiographs and CT scans.
Demetrios	Raptis	MD	1) Recognize normal and abnormal appearances of life-support devices and lines, including endotracheal tubes, tracheostomy tubes, central venous catheters, pulmonary artery catheters, chest tubes, ECMO cannulas, and enteric tubes. 2) Identify common and critical ICU-related pathologies on chest radiographs and CT, including pulmonary edema, ARDS, pneumonia, atelectasis, pneumothorax, and pleural effusion. 3) Differentiate technical and positioning artifacts from true pathology on portable ICU chest radiographs and CT scans.
Lydia	Chelala	MD	1) Recognize normal and abnormal appearances of life-support devices and lines, including endotracheal tubes, tracheostomy tubes, central venous catheters, pulmonary artery catheters, chest tubes, ECMO cannulas, and enteric tubes. 2) Identify common and critical ICU-related pathologies on chest radiographs and CT, including pulmonary edema, ARDS, pneumonia, atelectasis, pneumothorax, and pleural effusion. 3) Differentiate technical and positioning artifacts from true pathology on portable ICU chest radiographs and CT scans.
Laura	Heynemann	MD	1) Recognize normal and abnormal appearances of life-support devices and lines, including endotracheal tubes, tracheostomy tubes, central venous catheters, pulmonary artery catheters, chest tubes, ECMO cannulas, and enteric tubes. 2) Identify common and critical ICU-related pathologies on chest radiographs and CT, including pulmonary edema, ARDS, pneumonia, atelectasis, pneumothorax, and pleural effusion. 3) Differentiate technical and positioning artifacts from true pathology on portable ICU chest radiographs and CT scans.

Masahiro	Yanagawa	PhD,MD	1) Recognize normal and abnormal appearances of life-support devices and lines, including endotracheal tubes, tracheostomy tubes, central venous catheters, pulmonary artery catheters, chest tubes, ECMO cannulas, and enteric tubes. 2) Identify common and critical ICU-related pathologies on chest radiographs and CT, including pulmonary edema, ARDS, pneumonia, atelectasis, pneumothorax, and pleural effusion. 3) Differentiate technical and positioning artifacts from true pathology on portable ICU chest radiographs and CT scans.
Jitesh	Ahuja	MBBS,MD	1) Recognize expected CT common postoperative thoracic appearances and possible complications after pneumonectomy, lobectomy and wedge resection. 2) Describe typical CT imaging patterns of radiation-induced lung injury and differentiate expected post-radiation changes from disease recurrence or progression. 3) Understand the CT imaging patterns of drug-induced lung injury from chemotherapy, immunotherapy and targeted therapies and differentiate them from infection. 4) Describe the normal CT postoperative imaging appearance post lung transplant and identify imaging features of early and chronic complications.
Nicholas	Screaton	MA,BMBCh	1) Recognize expected CT common postoperative thoracic appearances and possible complications after pneumonectomy, lobectomy and wedge resection. 2) Describe typical CT imaging patterns of radiation-induced lung injury and differentiate expected post-radiation changes from disease recurrence or progression. 3) Understand the CT imaging patterns of drug-induced lung injury from chemotherapy, immunotherapy and targeted therapies and differentiate them from infection. 4) Describe the normal CT postoperative imaging appearance post lung transplant and identify imaging features of early and chronic complications.
Michelle	Ginsberg	MD	1) Recognize expected CT common postoperative thoracic appearances and possible complications after pneumonectomy, lobectomy and wedge resection. 2) Describe typical CT imaging patterns of radiation-induced lung injury and differentiate expected post-radiation changes from disease recurrence or progression. 3) Understand the CT imaging patterns of drug-induced lung injury from chemotherapy, immunotherapy and targeted therapies and differentiate them from infection. 4) Describe the normal CT postoperative imaging appearance post lung transplant and identify imaging features of early and chronic complications.

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Sharon	Steinberger	MD	1) Recognize expected CT common postoperative thoracic appearances and possible complications after pneumonectomy, lobectomy and wedge resection. 2) Describe typical CT imaging patterns of radiation-induced lung injury and differentiate expected post-radiation changes from disease recurrence or progression. 3) Understand the CT imaging patterns of drug-induced lung injury from chemotherapy, immunotherapy and targeted therapies and differentiate them from infection. 4) Describe the normal CT postoperative imaging appearance post lung transplant and identify imaging features of early and chronic complications.
Matthew	Lazarus	PhD,MD	1) Identify uncommon thoracic imaging entities through recognition of distinctive radiographic and CT features that differentiate them from more common mimics. 2) Recognize typical and atypical thoracic imaging findings associated with rare entities such CVID and IgG4 diseases. 3) Correlate clinical history and presentation with imaging findings to narrow differential considerations in cases of lung mineralization.
Stacy	Kim	MD	1) Identify uncommon thoracic imaging entities through recognition of distinctive radiographic and CT features that differentiate them from more common mimics. 2) Recognize typical and atypical thoracic imaging findings associated with rare entities such CVID and IgG4 diseases. 3) Correlate clinical history and presentation with imaging findings to narrow differential considerations in cases of lung mineralization.
Brian	Pogatchnik	MD	1) Identify uncommon thoracic imaging entities through recognition of distinctive radiographic and CT features that differentiate them from more common mimics. 2) Recognize typical and atypical thoracic imaging findings associated with rare entities such CVID and IgG4 diseases. 3) Correlate clinical history and presentation with imaging findings to narrow differential considerations in cases of lung mineralization.

Tami	Bang	MD	1) Identify uncommon thoracic imaging entities through recognition of distinctive radiographic and CT features that differentiate them from more common mimics. 2) Recognize typical and atypical thoracic imaging findings associated with rare entities such CVID and IgG4 diseases. 3) Correlate clinical history and presentation with imaging findings to narrow differential considerations in cases of lung mineralization.
Brent	Little	MD	1) Identify uncommon thoracic imaging entities through recognition of distinctive radiographic and CT features that differentiate them from more common mimics. 2) Recognize typical and atypical thoracic imaging findings associated with rare entities such CVID and IgG4 diseases. 3) Correlate clinical history and presentation with imaging findings to narrow differential considerations in cases of lung mineralization.
Jonathan	Chung	MD	1) Identify HRCT features of progressive pulmonary fibrosis and interstitial lung abnormality. 2) Recognize common CT patterns of CTD associated ILD and distinguish them from idiopathic ILDs. 3) Describe typical and atypical thoracic imaging findings of sarcoidosis. 4) Apply pattern based approaches to interpret diffuse lung diseases efficiently.
Christoph er	Walker	MD	1) Identify HRCT features of progressive pulmonary fibrosis and interstitial lung abnormality. 2) Recognize common CT patterns of CTD associated ILD and distinguish them from idiopathic ILDs. 3) Describe typical and atypical thoracic imaging findings of sarcoidosis. 4) Apply pattern based approaches to interpret diffuse lung diseases efficiently.
Kimberly	Kallianos	MD	1) Identify HRCT features of progressive pulmonary fibrosis and interstitial lung abnormality. 2) Recognize common CT patterns of CTD associated ILD and distinguish them from idiopathic ILDs. 3) Describe typical and atypical thoracic imaging findings of sarcoidosis. 4) Apply pattern based approaches to interpret diffuse lung diseases efficiently.
Sujal	Desai	MBBS	1) Identify HRCT features of progressive pulmonary fibrosis and interstitial lung abnormality. 2) Recognize common CT patterns of CTD associated ILD and distinguish them from idiopathic ILDs. 3) Describe typical and atypical thoracic imaging findings of sarcoidosis. 4) Apply pattern based approaches to interpret diffuse lung diseases efficiently.
Maria	Martin	MD	1) Identify HRCT features of progressive pulmonary fibrosis and interstitial lung abnormality. 2) Recognize common CT patterns of CTD associated ILD and distinguish them from idiopathic ILDs. 3) Describe typical and atypical thoracic imaging findings of sarcoidosis. 4) Apply pattern based approaches to interpret diffuse lung diseases efficiently.

Palmi	Shah	MD	1) Recognize sex-specific and population-specific differences in lung cancer risk and presentation. 2) Evaluate evidence-based approaches to improving lung cancer screening uptake. 3) Apply current international guidelines and best practices for lung cancer screening and nodule management.
Marie-Pierre	Revel		1) Recognize sex-specific and population-specific differences in lung cancer risk and presentation. 2) Evaluate evidence-based approaches to improving lung cancer screening uptake. 3) Apply current international guidelines and best practices for lung cancer screening and nodule management.
Ella	Kazerooni	MS,MD	1) Recognize sex-specific and population-specific differences in lung cancer risk and presentation. 2) Evaluate evidence-based approaches to improving lung cancer screening uptake. 3) Apply current international guidelines and best practices for lung cancer screening and nodule management.
Mathias	Prokop	PhD,MD	1) Recognize sex-specific and population-specific differences in lung cancer risk and presentation. 2) Evaluate evidence-based approaches to improving lung cancer screening uptake. 3) Apply current international guidelines and best practices for lung cancer screening and nodule management.
Jin Mo	Goo	PhD,MD	1) Recognize sex-specific and population-specific differences in lung cancer risk and presentation. 2) Evaluate evidence-based approaches to improving lung cancer screening uptake. 3) Apply current international guidelines and best practices for lung cancer screening and nodule management.
Chi Wan	Koo	MD	1) Identify key chest CT patterns, including mosaic attenuation, ground-glass opacity, septal thickening/crazy paving, bronchiectasis, and micronodules. 2) Develop focused differential diagnoses based on imaging pattern and distribution. 3) Apply a systematic approach to chest CT interpretation to improve diagnostic confidence and efficiency.
Cornelia	Schaefer-Prokop	MD	1) Identify key chest CT patterns, including mosaic attenuation, ground-glass opacity, septal thickening/crazy paving, bronchiectasis, and micronodules. 2) Develop focused differential diagnoses based on imaging pattern and distribution. 3) Apply a systematic approach to chest CT interpretation to improve diagnostic confidence and efficiency.
Saurabh	Agarwal	MD	1) Identify key chest CT patterns, including mosaic attenuation, ground-glass opacity, septal thickening/crazy paving, bronchiectasis, and micronodules. 2) Develop focused differential diagnoses based on imaging pattern and distribution. 3) Apply a systematic approach to chest CT interpretation to improve diagnostic confidence and efficiency.

Lea	Azour	MD	1) Identify key chest CT patterns, including mosaic attenuation, ground-glass opacity, septal thickening/crazy paving, bronchiectasis, and micronodules. 2) Develop focused differential diagnoses based on imaging pattern and distribution. 3) Apply a systematic approach to chest CT interpretation to improve diagnostic confidence and efficiency.
James	Gruden	MD	1) Identify key chest CT patterns, including mosaic attenuation, ground-glass opacity, septal thickening/crazy paving, bronchiectasis, and micronodules. 2) Develop focused differential diagnoses based on imaging pattern and distribution. 3) Apply a systematic approach to chest CT interpretation to improve diagnostic confidence and efficiency.
Anastasia	Oikonomou	PhD,MD	1) Describe current updated nomenclature for key thoracic imaging findings and intestinal pneumonias. 2) Apply the appropriate LungRADs categories and their associated recommendations to lung cancer screening practice. 3) Recognize essential elements of CTPA reporting and their clinical relevance.
Alexander	Bankier	MD, PhD	1) Describe current updated nomenclature for key thoracic imaging findings and intestinal pneumonias. 2) Apply the appropriate LungRADs categories and their associated recommendations to lung cancer screening practice. 3) Recognize essential elements of CTPA reporting and their clinical relevance.
Amita	Sharma	MBBS	1) Describe current updated nomenclature for key thoracic imaging findings and intestinal pneumonias. 2) Apply the appropriate LungRADs categories and their associated recommendations to lung cancer screening practice. 3) Recognize essential elements of CTPA reporting and their clinical relevance.
Jared	Christensen	MBA,MD	1) Describe current updated nomenclature for key thoracic imaging findings and intestinal pneumonias. 2) Apply the appropriate LungRADs categories and their associated recommendations to lung cancer screening practice. 3) Recognize essential elements of CTPA reporting and their clinical relevance.
Linda	Haramati	MS,MD	1) Describe current updated nomenclature for key thoracic imaging findings and intestinal pneumonias. 2) Apply the appropriate LungRADs categories and their associated recommendations to lung cancer screening practice. 3) Recognize essential elements of CTPA reporting and their clinical relevance.

Baskaran	Sundaram	MD, MD	1) Identify key radiographic and CT features that distinguish acute inhalational injuries from chronic exposure-related lung diseases. 2) Interpret imaging findings in the context of exposure history to improve diagnostic accuracy and reduce misclassification of mimicking conditions. 3) Apply a systematic approach to evaluating suspected inhalational lung disease on chest radiographs and CT, integrating pattern recognition with pathophysiologic understanding.
David	Lynch	MBBCh	1) Identify key radiographic and CT features that distinguish acute inhalational injuries from chronic exposure-related lung diseases. 2) Interpret imaging findings in the context of exposure history to improve diagnostic accuracy and reduce misclassification of mimicking conditions. 3) Apply a systematic approach to evaluating suspected inhalational lung disease on chest radiographs and CT, integrating pattern recognition with pathophysiologic understanding.
Claudio	Silva	MSc,MD	1) Identify key radiographic and CT features that distinguish acute inhalational injuries from chronic exposure-related lung diseases. 2) Interpret imaging findings in the context of exposure history to improve diagnostic accuracy and reduce misclassification of mimicking conditions. 3) Apply a systematic approach to evaluating suspected inhalational lung disease on chest radiographs and CT, integrating pattern recognition with pathophysiologic understanding.
Travis	Henry	MD	1) Identify key radiographic and CT features that distinguish acute inhalational injuries from chronic exposure-related lung diseases. 2) Interpret imaging findings in the context of exposure history to improve diagnostic accuracy and reduce misclassification of mimicking conditions. 3) Apply a systematic approach to evaluating suspected inhalational lung disease on chest radiographs and CT, integrating pattern recognition with pathophysiologic understanding.
Rydhwana	Hossain	MD	1) Identify key radiographic and CT features that distinguish acute inhalational injuries from chronic exposure-related lung diseases. 2) Interpret imaging findings in the context of exposure history to improve diagnostic accuracy and reduce misclassification of mimicking conditions. 3) Apply a systematic approach to evaluating suspected inhalational lung disease on chest radiographs and CT, integrating pattern recognition with pathophysiologic understanding.

Bruno	Hochhegger	PhD,MD	1) Describe the principles and clinical advantages of emerging imaging technologies in thoracic radiology. 2) Assess the impact of cutting-edge technologies on diagnostic performance, workflow efficiency, and clinical decision-making in chest imaging. 3) Understand the role of image-guided thermal ablation in the management of early-stage lung cancer.
Martine	Remy-Jardin	PhD,MD	1) Describe the principles and clinical advantages of emerging imaging technologies in thoracic radiology. 2) Assess the impact of cutting-edge technologies on diagnostic performance, workflow efficiency, and clinical decision-making in chest imaging. 3) Understand the role of image-guided thermal ablation in the management of early-stage lung cancer.
Jens	Vogel-Claussen	MD	1) Describe the principles and clinical advantages of emerging imaging technologies in thoracic radiology. 2) Assess the impact of cutting-edge technologies on diagnostic performance, workflow efficiency, and clinical decision-making in chest imaging. 3) Understand the role of image-guided thermal ablation in the management of early-stage lung cancer.
Yoshiharu	Ohno	PhD,MD	1) Describe the principles and clinical advantages of emerging imaging technologies in thoracic radiology. 2) Assess the impact of cutting-edge technologies on diagnostic performance, workflow efficiency, and clinical decision-making in chest imaging. 3) Understand the role of image-guided thermal ablation in the management of early-stage lung cancer.
Fereidoun	Abtin	MD	1) Describe the principles and clinical advantages of emerging imaging technologies in thoracic radiology. 2) Assess the impact of cutting-edge technologies on diagnostic performance, workflow efficiency, and clinical decision-making in chest imaging. 3) Understand the role of image-guided thermal ablation in the management of early-stage lung cancer.
Sanjeev	Bhalla	MD	1) Refine the performance and interpretation of CTPA for acute pulmonary embolism. 2) Recognize the imaging finding of chronic thromboembolic pulmonary hypertension and their implications in treatment planning. 3) Identify imaging finding that suggest unusual thoracic vascular and pulmonary vein disorders.
Jane	Ko	MD	1) Refine the performance and interpretation of CTPA for acute pulmonary embolism. 2) Recognize the imaging finding of chronic thromboembolic pulmonary hypertension and their implications in treatment planning. 3) Identify imaging finding that suggest unusual thoracic vascular and pulmonary vein disorders.

Seth	Kligerman	MS,MD	1) Refine the performance and interpretation of CTPA for acute pulmonary embolism. 2) Recognize the imaging finding of chronic thromboembolic pulmonary hypertension and their implications in treatment planning. 3) Identify imaging finding that suggest unusual thoracic vascular and pulmonary vein disorders.
Aletta Ann	Frazier	MD	1) Refine the performance and interpretation of CTPA for acute pulmonary embolism. 2) Recognize the imaging finding of chronic thromboembolic pulmonary hypertension and their implications in treatment planning. 3) Identify imaging finding that suggest unusual thoracic vascular and pulmonary vein disorders.
John	Lichtenberger	MD	1) Refine the performance and interpretation of CTPA for acute pulmonary embolism. 2) Recognize the imaging finding of chronic thromboembolic pulmonary hypertension and their implications in treatment planning. 3) Identify imaging finding that suggest unusual thoracic vascular and pulmonary vein disorders.
Mylene	Truong	MD	1) Identify key imaging findings across a broad range of thoracic conditions—including pulmonary, mediastinal, pleural, and chest wall processes—through rapid-fire, case-based challenges. 2) Apply structured reasoning to solve imaging “clues,” integrating clinical context with radiologic features to arrive at the most likely diagnosis. 3) Reinforce knowledge through competitive, team-based learning that promotes engagement, retention, and collaborative problem-solving.
Brett	Elicker	MD	1) Identify key imaging findings across a broad range of thoracic conditions—including pulmonary, mediastinal, pleural, and chest wall processes—through rapid-fire, case-based challenges. 2) Apply structured reasoning to solve imaging “clues,” integrating clinical context with radiologic features to arrive at the most likely diagnosis. 3) Reinforce knowledge through competitive, team-based learning that promotes engagement, retention, and collaborative problem-solving.
Kristopher	Cummings	MD	1) Identify key imaging findings across a broad range of thoracic conditions—including pulmonary, mediastinal, pleural, and chest wall processes—through rapid-fire, case-based challenges. 2) Apply structured reasoning to solve imaging “clues,” integrating clinical context with radiologic features to arrive at the most likely diagnosis. 3) Reinforce knowledge through competitive, team-based learning that promotes engagement, retention, and collaborative problem-solving.

Anu	Brixey	MD	1) Identify key imaging findings across a broad range of thoracic conditions—including pulmonary, mediastinal, pleural, and chest wall processes—through rapid-fire, case-based challenges. 2) Apply structured reasoning to solve imaging “clues,” integrating clinical context with radiologic features to arrive at the most likely diagnosis. 3) Reinforce knowledge through competitive, team-based learning that promotes engagement, retention, and collaborative problem-solving.
Ralph	Drosten	MD	1) Identify key imaging findings across a broad range of thoracic conditions—including pulmonary, mediastinal, pleural, and chest wall processes—through rapid-fire, case-based challenges. 2) Apply structured reasoning to solve imaging “clues,” integrating clinical context with radiologic features to arrive at the most likely diagnosis. 3) Reinforce knowledge through competitive, team-based learning that promotes engagement, retention, and collaborative problem-solving.
Edith	Marom	MD	1) Identify key imaging findings across a broad range of thoracic conditions—including pulmonary, mediastinal, pleural, and chest wall processes—through rapid-fire, case-based challenges. 2) Apply structured reasoning to solve imaging “clues,” integrating clinical context with radiologic features to arrive at the most likely diagnosis. 3) Reinforce knowledge through competitive, team-based learning that promotes engagement, retention, and collaborative problem-solving.
Cheng Ting	Lin	MD	1) Differentiate the imaging characteristics of common and uncommon thoracic neoplasms using case-based examples across radiography, CT, and MRI. 2) Identify key imaging features that help distinguish benign from malignant thoracic masses. 3) Recognize imaging patterns associated with tumor complications such as airway obstruction, vascular invasion, paraneoplastic syndromes, and metastatic spread.
Yoshiyuki	Ozawa	MD, PhD	1) Differentiate the imaging characteristics of common and uncommon thoracic neoplasms using case-based examples across radiography, CT, and MRI. 2) Identify key imaging features that help distinguish benign from malignant thoracic masses. 3) Recognize imaging patterns associated with tumor complications such as airway obstruction, vascular invasion, paraneoplastic syndromes, and metastatic spread.

Justin	Stowell	MD	1) Differentiate the imaging characteristics of common and uncommon thoracic neoplasms using case-based examples across radiography, CT, and MRI. 2) Identify key imaging features that help distinguish benign from malignant thoracic masses. 3) Recognize imaging patterns associated with tumor complications such as airway obstruction, vascular invasion, paraneoplastic syndromes, and metastatic spread.
Rachna	Madan	MD,MBBS	1) Differentiate the imaging characteristics of common and uncommon thoracic neoplasms using case-based examples across radiography, CT, and MRI. 2) Identify key imaging features that help distinguish benign from malignant thoracic masses. 3) Recognize imaging patterns associated with tumor complications such as airway obstruction, vascular invasion, paraneoplastic syndromes, and metastatic spread.
Jooae	Choe	PhD,MD	1) Differentiate the imaging characteristics of common and uncommon thoracic neoplasms using case-based examples across radiography, CT, and MRI. 2) Identify key imaging features that help distinguish benign from malignant thoracic masses. 3) Recognize imaging patterns associated with tumor complications such as airway obstruction, vascular invasion, paraneoplastic syndromes, and metastatic spread.
Ritu	Gill	MPH,MBBS	1) Differentiate the imaging characteristics of common and uncommon thoracic neoplasms using case-based examples across radiography, CT, and MRI. 2) Identify key imaging features that help distinguish benign from malignant thoracic masses. 3) Recognize imaging patterns associated with tumor complications such as airway obstruction, vascular invasion, paraneoplastic syndromes, and metastatic spread.
Yeon Joo	Jeong	PhD,MD	1) Understand and apply the principles of the 9th edition of TNM staging system for lung cancer to thoracic imaging for accurate assessment of primary tumor (T), nodal involvement (N) and distant metastases (M). 2) Identify key imaging findings and pearls on different imaging modalities that help distinguish the different categories of T, N and M. 3) Identify common pitfalls and limitations in lung cancer staging and restaging that may affect diagnostic accuracy. 4) Discuss the emerging role of imaging biomarkers in targeted therapies and immunotherapy in lung cancer diagnosis, treatment selection and monitoring.

Helmut	Prosch	MD	1) Understand and apply the principles of the 9th edition of TNM staging system for lung cancer to thoracic imaging for accurate assessment of primary tumor (T), nodal involvement (N) and distant metastases (M). 2) Identify key imaging findings and pearls on different imaging modalities that help distinguish the different categories of T, N and M. 3) Identify common pitfalls and limitations in lung cancer staging and restaging that may affect diagnostic accuracy. 4) Discuss the emerging role of imaging biomarkers in targeted therapies and immunotherapy in lung cancer diagnosis, treatment selection and monitoring.
Ioannis	Vlahos	MBBS, FRCR	1) Understand and apply the principles of the 9th edition of TNM staging system for lung cancer to thoracic imaging for accurate assessment of primary tumor (T), nodal involvement (N) and distant metastases (M). 2) Identify key imaging findings and pearls on different imaging modalities that help distinguish the different categories of T, N and M. 3) Identify common pitfalls and limitations in lung cancer staging and restaging that may affect diagnostic accuracy. 4) Discuss the emerging role of imaging biomarkers in targeted therapies and immunotherapy in lung cancer diagnosis, treatment selection and monitoring.
Brett	Carter	MD	1) Understand and apply the principles of the 9th edition of TNM staging system for lung cancer to thoracic imaging for accurate assessment of primary tumor (T), nodal involvement (N) and distant metastases (M). 2) Identify key imaging findings and pearls on different imaging modalities that help distinguish the different categories of T, N and M. 3) Identify common pitfalls and limitations in lung cancer staging and restaging that may affect diagnostic accuracy. 4) Discuss the emerging role of imaging biomarkers in targeted therapies and immunotherapy in lung cancer diagnosis, treatment selection and monitoring.
Milena	Petranovic	MD	1) Understand and apply the principles of the 9th edition of TNM staging system for lung cancer to thoracic imaging for accurate assessment of primary tumor (T), nodal involvement (N) and distant metastases (M). 2) Identify key imaging findings and pearls on different imaging modalities that help distinguish the different categories of T, N and M. 3) Identify common pitfalls and limitations in lung cancer staging and restaging that may affect diagnostic accuracy. 4) Discuss the emerging role of imaging biomarkers in targeted therapies and immunotherapy in lung cancer diagnosis, treatment selection and monitoring.

Tarek	El-Diasty	FRCR,MD	1) Recognize the educational activities of the PAARS and cooperation with international radiological societies and organizations. 2) Identify the new dimensions for Audit-Ready AI and Clinical Accountability in UAE. 3) Learn how imaging can assess athletic pubalgia. 4) Understand the experience in screening of lung cancer in Kuwait. 5) Get an in-depth view of advanced MRI techniques for imaging brain masses. 6) Acquire the essential interpretation skills for mammographic arterial calcifications as predictors of cardiovascular events.
Emad	Naguib		1) Recognize the educational activities of the PAARS and cooperation with international radiological societies and organizations. 2) Identify the new dimensions for Audit-Ready AI and Clinical Accountability in UAE. 3) Learn how imaging can assess athletic pubalgia. 4) Understand the experience in screening of lung cancer in Kuwait. 5) Get an in-depth view of advanced MRI techniques for imaging brain masses. 6) Acquire the essential interpretation skills for mammographic arterial calcifications as predictors of cardiovascular events.
Lemya	Alzaabi	MBBS	1) Recognize the educational activities of the PAARS and cooperation with international radiological societies and organizations. 2) Identify the new dimensions for Audit-Ready AI and Clinical Accountability in UAE. 3) Learn how imaging can assess athletic pubalgia. 4) Understand the experience in screening of lung cancer in Kuwait. 5) Get an in-depth view of advanced MRI techniques for imaging brain masses. 6) Acquire the essential interpretation skills for mammographic arterial calcifications as predictors of cardiovascular events.
Khalid	Manei	MD	1) Recognize the educational activities of the PAARS and cooperation with international radiological societies and organizations. 2) Identify the new dimensions for Audit-Ready AI and Clinical Accountability in UAE. 3) Learn how imaging can assess athletic pubalgia. 4) Understand the experience in screening of lung cancer in Kuwait. 5) Get an in-depth view of advanced MRI techniques for imaging brain masses. 6) Acquire the essential interpretation skills for mammographic arterial calcifications as predictors of cardiovascular events.

Nourah	Almubarak	FFR(RCSI)	1) Recognize the educational activities of the PAARS and cooperation with international radiological societies and organizations. 2) Identify the new dimensions for Audit-Ready AI and Clinical Accountability in UAE. 3) Learn how imaging can assess athletic pubalgia. 4) Understand the experience in screening of lung cancer in Kuwait. 5) Get an in-depth view of advanced MRI techniques for imaging brain masses. 6) Acquire the essential interpretation skills for mammographic arterial calcifications as predictors of cardiovascular events.
Mohamed-Ihab	Reda	MD	1) Recognize the educational activities of the PAARS and cooperation with international radiological societies and organizations. 2) Identify the new dimensions for Audit-Ready AI and Clinical Accountability in UAE. 3) Learn how imaging can assess athletic pubalgia. 4) Understand the experience in screening of lung cancer in Kuwait. 5) Get an in-depth view of advanced MRI techniques for imaging brain masses. 6) Acquire the essential interpretation skills for mammographic arterial calcifications as predictors of cardiovascular events.
Asma	Zidi	MD	1) Recognize the educational activities of the PAARS and cooperation with international radiological societies and organizations. 2) Identify the new dimensions for Audit-Ready AI and Clinical Accountability in UAE. 3) Learn how imaging can assess athletic pubalgia. 4) Understand the experience in screening of lung cancer in Kuwait. 5) Get an in-depth view of advanced MRI techniques for imaging brain masses. 6) Acquire the essential interpretation skills for mammographic arterial calcifications as predictors of cardiovascular events.
Lamia	Jamjoom	MD	1) Recognize the educational activities of the PAARS and cooperation with international radiological societies and organizations. 2) Identify the new dimensions for Audit-Ready AI and Clinical Accountability in UAE. 3) Learn how imaging can assess athletic pubalgia. 4) Understand the experience in screening of lung cancer in Kuwait. 5) Get an in-depth view of advanced MRI techniques for imaging brain masses. 6) Acquire the essential interpretation skills for mammographic arterial calcifications as predictors of cardiovascular events.
Anand	Narayan	PhD,MD	1) Leverage implementation science frameworks to accelerate the adoption of evidence-based practices and address care gaps in radiology. 2) Design strategies to integrate innovations into clinical practice and address care gaps. 3) Evaluate the implementation of innovations into clinical practice using process and outcome metrics to evaluate impact, sustainability, and access. 4) Identify common barriers and facilitators to practice change within radiology workflows.

Tessa	Cook	MD, PhD	1) Leverage implementation science frameworks to accelerate the adoption of evidence-based practices and address care gaps in radiology. 2) Design strategies to integrate innovations into clinical practice and address care gaps. 3) Evaluate the implementation of innovations into clinical practice using process and outcome metrics to evaluate impact, sustainability, and access. 4) Identify common barriers and facilitators to practice change within radiology workflows.
Gelareh	Sadigh	MD	1) Leverage implementation science frameworks to accelerate the adoption of evidence-based practices and address care gaps in radiology. 2) Design strategies to integrate innovations into clinical practice and address care gaps. 3) Evaluate the implementation of innovations into clinical practice using process and outcome metrics to evaluate impact, sustainability, and access. 4) Identify common barriers and facilitators to practice change within radiology workflows.
Lucy	Spalluto	MPH,MD	1) Leverage implementation science frameworks to accelerate the adoption of evidence-based practices and address care gaps in radiology. 2) Design strategies to integrate innovations into clinical practice and address care gaps. 3) Evaluate the implementation of innovations into clinical practice using process and outcome metrics to evaluate impact, sustainability, and access. 4) Identify common barriers and facilitators to practice change within radiology workflows.
Bhavika	Patel	MD	1) Leverage implementation science frameworks to accelerate the adoption of evidence-based practices and address care gaps in radiology. 2) Design strategies to integrate innovations into clinical practice and address care gaps. 3) Evaluate the implementation of innovations into clinical practice using process and outcome metrics to evaluate impact, sustainability, and access. 4) Identify common barriers and facilitators to practice change within radiology workflows.
Rachel	Shelton	MPH	1) Leverage implementation science frameworks to accelerate the adoption of evidence-based practices and address care gaps in radiology. 2) Design strategies to integrate innovations into clinical practice and address care gaps. 3) Evaluate the implementation of innovations into clinical practice using process and outcome metrics to evaluate impact, sustainability, and access. 4) Identify common barriers and facilitators to practice change within radiology workflows.

Taara	Hassan Williams	MD	1) This session will highlight the importance of developing leadership skills early in one's career to promote clinical excellence, facilitate effective collaboration, prepare for future leadership opportunities and grow an inclusive specialty. 2) Skills to sustain a successful career in leadership will be included.
Judy	Yee	MD	1) This session will highlight the importance of developing leadership skills early in one's career to promote clinical excellence, facilitate effective collaboration, prepare for future leadership opportunities and grow an inclusive specialty. 2) Skills to sustain a successful career in leadership will be included.
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Megan	Kalambo	MD	1) This session will highlight the importance of developing leadership skills early in one's career to promote clinical excellence, facilitate effective collaboration, prepare for future leadership opportunities and grow an inclusive specialty. 2) Skills to sustain a successful career in leadership will be included.
Jenny	Bencardino	MD	1) This session will highlight the importance of developing leadership skills early in one's career to promote clinical excellence, facilitate effective collaboration, prepare for future leadership opportunities and grow an inclusive specialty. 2) Skills to sustain a successful career in leadership will be included.
Andrea	Rockall	FRCR	1) This session will highlight the importance of developing leadership skills early in one's career to promote clinical excellence, facilitate effective collaboration, prepare for future leadership opportunities and grow an inclusive specialty. 2) Skills to sustain a successful career in leadership will be included.
Meriely	Garrido Ceballos	MD	1) Introduce modern advances and techniques in musculoskeletal radiology and their clinical application. 2) Analyze the role of magnetic resonance imaging in the diagnosis and management of soft tissue tumors. 3) Explore the use of dynamic musculoskeletal ultrasound to reveal pathology. 4) Present modern ultrasound-guided interventional techniques in musculoskeletal radiology for pain management.
Angel	Gayete Cara	PhD,MD	1) Introduce modern advances and techniques in musculoskeletal radiology and their clinical application. 2) Analyze the role of magnetic resonance imaging in the diagnosis and management of soft tissue tumors. 3) Explore the use of dynamic musculoskeletal ultrasound to reveal pathology. 4) Present modern ultrasound-guided interventional techniques in musculoskeletal radiology for pain management.

Rodrigo	Re		1) Introduce modern advances and techniques in musculoskeletal radiology and their clinical application. 2) Analyze the role of magnetic resonance imaging in the diagnosis and management of soft tissue tumors. 3) Explore the use of dynamic musculoskeletal ultrasound to reveal pathology. 4) Present modern ultrasound-guided interventional techniques in musculoskeletal radiology for pain management.
Gonzalo	Serrano	MD	1) Introduce modern advances and techniques in musculoskeletal radiology and their clinical application. 2) Analyze the role of magnetic resonance imaging in the diagnosis and management of soft tissue tumors. 3) Explore the use of dynamic musculoskeletal ultrasound to reveal pathology. 4) Present modern ultrasound-guided interventional techniques in musculoskeletal radiology for pain management.
Lena	Pari	MD	1) Introduce modern advances and techniques in musculoskeletal radiology and their clinical application. 2) Analyze the role of magnetic resonance imaging in the diagnosis and management of soft tissue tumors. 3) Explore the use of dynamic musculoskeletal ultrasound to reveal pathology. 4) Present modern ultrasound-guided interventional techniques in musculoskeletal radiology for pain management.
Heba	Albasha	MD	1) Invite residents from across the world to compete against each other in a riveting case competition. 2) Foster team-building and friendly competition.
Maria Lucia	Brun	MD	1) Invite residents from across the world to compete against each other in a riveting case competition. 2) Foster team-building and friendly competition.
R. Paul	Guillerman	MD	1) Understand how employment structure (W-2, 1099, LLC, S-Corp) impacts tax liability, retirement planning, and debt strategy, and apply tax-efficient approaches to optimize after-tax income. 2) Identify effective strategies for paying down student loans while building savings and investment, including leveraging side-gig income opportunities. 3) Describe estate-planning fundamentals—wills, trusts, and beneficiary designations—and how they support family and legacy goals. 4) Develop a cohesive roadmap integrating tax, retirement, and estate planning into lifelong financial wellness.

Zi	Zhang	MSc,MD	1) Understand how employment structure (W-2, 1099, LLC, S-Corp) impacts tax liability, retirement planning, and debt strategy, and apply tax-efficient approaches to optimize after-tax income. 2) Identify effective strategies for paying down student loans while building savings and investment, including leveraging side-gig income opportunities. 3) Describe estate-planning fundamentals—wills, trusts, and beneficiary designations—and how they support family and legacy goals. 4) Develop a cohesive roadmap integrating tax, retirement, and estate planning into lifelong financial wellness.
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Jeffrey	Brown	MBA,MD	1) Understand how employment structure (W-2, 1099, LLC, S-Corp) impacts tax liability, retirement planning, and debt strategy, and apply tax-efficient approaches to optimize after-tax income. 2) Identify effective strategies for paying down student loans while building savings and investment, including leveraging side-gig income opportunities. 3) Describe estate-planning fundamentals—wills, trusts, and beneficiary designations—and how they support family and legacy goals. 4) Develop a cohesive roadmap integrating tax, retirement, and estate planning into lifelong financial wellness.
Chirag	Parghi	MBA,MD	1) Understand how employment structure (W-2, 1099, LLC, S-Corp) impacts tax liability, retirement planning, and debt strategy, and apply tax-efficient approaches to optimize after-tax income. 2) Identify effective strategies for paying down student loans while building savings and investment, including leveraging side-gig income opportunities. 3) Describe estate-planning fundamentals—wills, trusts, and beneficiary designations—and how they support family and legacy goals. 4) Develop a cohesive roadmap integrating tax, retirement, and estate planning into lifelong financial wellness.

Scott No	Truhlar Presenter	MBA,MS, MD	1) Understand how employment structure (W-2, 1099, LLC, S-Corp) impacts tax liability, retirement planning, and debt strategy, and apply tax-efficient approaches to optimize after-tax income. 2) Identify effective strategies for paying down student loans while building savings and investment, including leveraging side-gig income opportunities. 3) Describe estate-planning fundamentals—wills, trusts, and beneficiary designations—and how they support family and legacy goals. 4) Develop a cohesive roadmap integrating tax, retirement, and estate planning into lifelong financial wellness.
Ahmed	Gharib	MBBCh	1) Recognize key factors, experiences, and strategies that contribute to successful careers in radiology research, including mentorship and funding opportunities. 2) Describe how the NIH/RSNA Fundamentals of Radiology Research course introduces foundational concepts and equips learners with essential principles to foster meaningful discovery in radiology.
Peter	Choyke	MD	1) Recognize key factors, experiences, and strategies that contribute to successful careers in radiology research, including mentorship and funding opportunities. 2) Describe how the NIH/RSNA Fundamentals of Radiology Research course introduces foundational concepts and equips learners with essential principles to foster meaningful discovery in radiology.
Ruth	Carlos	MS,MD	1) Recognize key factors, experiences, and strategies that contribute to successful careers in radiology research, including mentorship and funding opportunities. 2) Describe how the NIH/RSNA Fundamentals of Radiology Research course introduces foundational concepts and equips learners with essential principles to foster meaningful discovery in radiology.
Pamela	Woodard	MD	1) Recognize key factors, experiences, and strategies that contribute to successful careers in radiology research, including mentorship and funding opportunities. 2) Describe how the NIH/RSNA Fundamentals of Radiology Research course introduces foundational concepts and equips learners with essential principles to foster meaningful discovery in radiology.
Michael	Gee	MD,PhD, MBA	1) Recognize key factors, experiences, and strategies that contribute to successful careers in radiology research, including mentorship and funding opportunities. 2) Describe how the NIH/RSNA Fundamentals of Radiology Research course introduces foundational concepts and equips learners with essential principles to foster meaningful discovery in radiology.

Yoshimi	Anzai	MPH,MD	1) Describe the structure and function of the glymphatic and meningeal lymphatic systems and discuss their emerging role in neurodegenerative disease, brain injury, and neurologic health. 2) Evaluate the clinical applications and technical advantages of ultra-high-field (7T) MRI for the diagnosis and characterization of neurologic disorders, including epilepsy, multiple sclerosis, cerebrovascular disease, and neurodegeneration. 3) Review advances in neuro-oncology imaging, including the use of novel PET radiotracers and multiparametric imaging techniques for tumor detection, characterization, treatment planning, and response assessment. 4) Integrate advanced MRI and molecular imaging biomarkers into clinical neuroradiology practice to improve diagnostic accuracy, prognostication, and management of patients with brain tumors. 5) Discuss the role of neuroimaging in promoting brain health and healthy aging, including the identification of imaging biomarkers associated with cognitive resilience, vascular health, neurodegeneration, and risk stratification.
Danny	Wang	PhD	1) Describe the structure and function of the glymphatic and meningeal lymphatic systems and discuss their emerging role in neurodegenerative disease, brain injury, and neurologic health. 2) Evaluate the clinical applications and technical advantages of ultra-high-field (7T) MRI for the diagnosis and characterization of neurologic disorders, including epilepsy, multiple sclerosis, cerebrovascular disease, and neurodegeneration. 3) Review advances in neuro-oncology imaging, including the use of novel PET radiotracers and multiparametric imaging techniques for tumor detection, characterization, treatment planning, and response assessment. 4) Integrate advanced MRI and molecular imaging biomarkers into clinical neuroradiology practice to improve diagnostic accuracy, prognostication, and management of patients with brain tumors. 5) Discuss the role of neuroimaging in promoting brain health and healthy aging, including the identification of imaging biomarkers associated with cognitive resilience, vascular health, neurodegeneration, and risk stratification.

Cyrus	Raji	MD, PhD	1) Describe the structure and function of the glymphatic and meningeal lymphatic systems and discuss their emerging role in neurodegenerative disease, brain injury, and neurologic health. 2) Evaluate the clinical applications and technical advantages of ultra-high-field (7T) MRI for the diagnosis and characterization of neurologic disorders, including epilepsy, multiple sclerosis, cerebrovascular disease, and neurodegeneration. 3) Review advances in neuro-oncology imaging, including the use of novel PET radiotracers and multiparametric imaging techniques for tumor detection, characterization, treatment planning, and response assessment. 4) Integrate advanced MRI and molecular imaging biomarkers into clinical neuroradiology practice to improve diagnostic accuracy, prognostication, and management of patients with brain tumors. 5) Discuss the role of neuroimaging in promoting brain health and healthy aging, including the identification of imaging biomarkers associated with cognitive resilience, vascular health, neurodegeneration, and risk stratification.
Jana	Ivanidze	PhD,MD	1) Describe the structure and function of the glymphatic and meningeal lymphatic systems and discuss their emerging role in neurodegenerative disease, brain injury, and neurologic health. 2) Evaluate the clinical applications and technical advantages of ultra-high-field (7T) MRI for the diagnosis and characterization of neurologic disorders, including epilepsy, multiple sclerosis, cerebrovascular disease, and neurodegeneration. 3) Review advances in neuro-oncology imaging, including the use of novel PET radiotracers and multiparametric imaging techniques for tumor detection, characterization, treatment planning, and response assessment. 4) Integrate advanced MRI and molecular imaging biomarkers into clinical neuroradiology practice to improve diagnostic accuracy, prognostication, and management of patients with brain tumors. 5) Discuss the role of neuroimaging in promoting brain health and healthy aging, including the identification of imaging biomarkers associated with cognitive resilience, vascular health, neurodegeneration, and risk stratification.

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Justin	Cramer	MD	1) Describe the structure and function of the glymphatic and meningeal lymphatic systems and discuss their emerging role in neurodegenerative disease, brain injury, and neurologic health. 2) Evaluate the clinical applications and technical advantages of ultra-high-field (7T) MRI for the diagnosis and characterization of neurologic disorders, including epilepsy, multiple sclerosis, cerebrovascular disease, and neurodegeneration. 3) Review advances in neuro-oncology imaging, including the use of novel PET radiotracers and multiparametric imaging techniques for tumor detection, characterization, treatment planning, and response assessment. 4) Integrate advanced MRI and molecular imaging biomarkers into clinical neuroradiology practice to improve diagnostic accuracy, prognostication, and management of patients with brain tumors. 5) Discuss the role of neuroimaging in promoting brain health and healthy aging, including the identification of imaging biomarkers associated with cognitive resilience, vascular health, neurodegeneration, and risk stratification.

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Jeffrey	Petrella	MD	1) Describe the structure and function of the glymphatic and meningeal lymphatic systems and discuss their emerging role in neurodegenerative disease, brain injury, and neurologic health. 2) Evaluate the clinical applications and technical advantages of ultra-high-field (7T) MRI for the diagnosis and characterization of neurologic disorders, including epilepsy, multiple sclerosis, cerebrovascular disease, and neurodegeneration. 3) Review advances in neuro-oncology imaging, including the use of novel PET radiotracers and multiparametric imaging techniques for tumor detection, characterization, treatment planning, and response assessment. 4) Integrate advanced MRI and molecular imaging biomarkers into clinical neuroradiology practice to improve diagnostic accuracy, prognostication, and management of patients with brain tumors. 5) Discuss the role of neuroimaging in promoting brain health and healthy aging, including the identification of imaging biomarkers associated with cognitive resilience, vascular health, neurodegeneration, and risk stratification.
Brandon K.K.	Fields	MD	1) Identify and describe the key components and common terms found in physician employment contracts. 2) Recognize and evaluate common pitfalls in contract review and apply best practices when working with legal counsel. 3) Develop and apply effective negotiation strategies, including approaches to securing both compensation and non-compensation benefits in a contract.

John	Lyle		1) Identify and describe the key components and common terms found in physician employment contracts. 2) Recognize and evaluate common pitfalls in contract review and apply best practices when working with legal counsel. 3) Develop and apply effective negotiation strategies, including approaches to securing both compensation and non-compensation benefits in a contract.
Rama	Ayyala	MD	1) Identify characteristics and impacts of performative leadership and distinguish them from authentic, accountable leadership practices. 2) Apply leadership strategies that promote authenticity, trust, and psychological safety, and avoid performative practices that undermine team culture. 3) Describe validated approaches for measuring well-being and integrating these metrics into departmental quality dashboards and leadership performance frameworks. 4) Develop a roadmap for embedding wellness, integrity, and accountability into operations, evaluations, and professionalism standards.
Sarah	Bixby	MD, MBA	1) Identify characteristics and impacts of performative leadership and distinguish them from authentic, accountable leadership practices. 2) Apply leadership strategies that promote authenticity, trust, and psychological safety, and avoid performative practices that undermine team culture. 3) Describe validated approaches for measuring well-being and integrating these metrics into departmental quality dashboards and leadership performance frameworks. 4) Develop a roadmap for embedding wellness, integrity, and accountability into operations, evaluations, and professionalism standards.
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Amy	Kotsenas	MD	1) Identify characteristics and impacts of performative leadership and distinguish them from authentic, accountable leadership practices. 2) Apply leadership strategies that promote authenticity, trust, and psychological safety, and avoid performative practices that undermine team culture. 3) Describe validated approaches for measuring well-being and integrating these metrics into departmental quality dashboards and leadership performance frameworks. 4) Develop a roadmap for embedding wellness, integrity, and accountability into operations, evaluations, and professionalism standards.
Susanna	Lee	PhD,MD	1) Identify the highlights of the research published in the past year in Radiology Advances, Radiology: Cardiothoracic Imaging, and Radiology: Imaging Cancer. 2) Describe the latest scanners, tracers, databases, software, and workflow innovations reported in these journals. 3) Understand the rationale for selection of these articles and why these innovations are likely to disseminate widely.
Gary	Luker	MD	1) Identify the highlights of the research published in the past year in Radiology Advances, Radiology: Cardiothoracic Imaging, and Radiology: Imaging Cancer. 2) Describe the latest scanners, tracers, databases, software, and workflow innovations reported in these journals. 3) Understand the rationale for selection of these articles and why these innovations are likely to disseminate widely.
Harold	Litt	PhD,MD	1) Identify the highlights of the research published in the past year in Radiology Advances, Radiology: Cardiothoracic Imaging, and Radiology: Imaging Cancer. 2) Describe the latest scanners, tracers, databases, software, and workflow innovations reported in these journals. 3) Understand the rationale for selection of these articles and why these innovations are likely to disseminate widely.
Xiaoyang	Liu	PhD,MD	1) Identify the highlights of the research published in the past year in Radiology Advances, Radiology: Cardiothoracic Imaging, and Radiology: Imaging Cancer. 2) Describe the latest scanners, tracers, databases, software, and workflow innovations reported in these journals. 3) Understand the rationale for selection of these articles and why these innovations are likely to disseminate widely.

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Andrew	Bowman	MD, PhD	1) Describe the importance of having an MRI Safety Officer (MRSO). 2) Understand the new (2024) reimbursement process for device MRI safety investigations. 3) Describe MRI risks with 7T imaging.
Nadja	Kadom	MD	1) Describe the importance of having an MRI Safety Officer (MRSO). 2) Understand the new (2024) reimbursement process for device MRI safety investigations. 3) Describe MRI risks with 7T imaging.
Colin	Segovis	PhD,MD	1) Describe the importance of having an MRI Safety Officer (MRSO). 2) Understand the new (2024) reimbursement process for device MRI safety investigations. 3) Describe MRI risks with 7T imaging.
Andrew	Bowman	MD, PhD	1) Describe the importance of having an MRI Safety Officer (MRSO). 2) Understand the new (2024) reimbursement process for device MRI safety investigations. 3) Describe MRI risks with 7T imaging.
Robert	Watson	PhD,MD	1) Describe the importance of having an MRI Safety Officer (MRSO). 2) Understand the new (2024) reimbursement process for device MRI safety investigations. 3) Describe MRI risks with 7T imaging.
Marie	Hausner	ARRT,MS	1) Describe the importance of having an MRI Safety Officer (MRSO). 2) Understand the new (2024) reimbursement process for device MRI safety investigations. 3) Describe MRI risks with 7T imaging.
Jay	Pahade	MD	1) Describe the importance of having an MRI Safety Officer (MRSO). 2) Understand the new (2024) reimbursement process for device MRI safety investigations. 3) Describe MRI risks with 7T imaging.

Ruth	Carlos	MS,MD	1) Evaluate the diagnostic performance, accuracy, and limitations of current multi-cancer detection (MCD) tests and assess the strength of the evidence supporting their clinical use. 2) Analyze the intended and unintended consequences of MCD testing for patients, including downstream imaging, false-positive results, overdiagnosis, and effects on patient anxiety and care pathways. 3) Discuss the implications of MCD testing for health equity, access, and resource utilization, and identify strategies to support equitable and patient-centered implementation.
Ruth	Carlos	MS,MD	1) Evaluate the diagnostic performance, accuracy, and limitations of current multi-cancer detection (MCD) tests and assess the strength of the evidence supporting their clinical use. 2) Analyze the intended and unintended consequences of MCD testing for patients, including downstream imaging, false-positive results, overdiagnosis, and effects on patient anxiety and care pathways. 3) Discuss the implications of MCD testing for health equity, access, and resource utilization, and identify strategies to support equitable and patient-centered implementation.
Stella	Kang	MD, MSc	1) Evaluate the diagnostic performance, accuracy, and limitations of current multi-cancer detection (MCD) tests and assess the strength of the evidence supporting their clinical use. 2) Analyze the intended and unintended consequences of MCD testing for patients, including downstream imaging, false-positive results, overdiagnosis, and effects on patient anxiety and care pathways. 3) Discuss the implications of MCD testing for health equity, access, and resource utilization, and identify strategies to support equitable and patient-centered implementation.
Anand	Narayan	PhD,MD	1) Evaluate the diagnostic performance, accuracy, and limitations of current multi-cancer detection (MCD) tests and assess the strength of the evidence supporting their clinical use. 2) Analyze the intended and unintended consequences of MCD testing for patients, including downstream imaging, false-positive results, overdiagnosis, and effects on patient anxiety and care pathways. 3) Discuss the implications of MCD testing for health equity, access, and resource utilization, and identify strategies to support equitable and patient-centered implementation.
Sherwin	Chan	PhD,MD	1) Understand key methods in rigorous study design for quantitative imaging markers, health outcomes, and multi-site studies. 2) Apply strategies for pursuit of grant funding, including project alignment with agencies and writing tips. 3) Adopt strategies to revise and reframe research goals based on feedback.

Fiona	Fennessy	MBBCh, PhD	1) Understand key methods in rigorous study design for quantitative imaging markers, health outcomes, and multi-site studies. 2) Apply strategies for pursuit of grant funding, including project alignment with agencies and writing tips. 3) Adopt strategies to revise and reframe research goals based on feedback.
Nancy	Obuchowski	MS,PhD	1) Understand key methods in rigorous study design for quantitative imaging markers, health outcomes, and multi-site studies. 2) Apply strategies for pursuit of grant funding, including project alignment with agencies and writing tips. 3) Adopt strategies to revise and reframe research goals based on feedback.
Stella	Kang	MD, MSc	1) Understand key methods in rigorous study design for quantitative imaging markers, health outcomes, and multi-site studies. 2) Apply strategies for pursuit of grant funding, including project alignment with agencies and writing tips. 3) Adopt strategies to revise and reframe research goals based on feedback.
Shadi No	Abdar Esfahani Presenter	MPH,MD	1) Understand key methods in rigorous study design for quantitative imaging markers, health outcomes, and multi-site studies. 2) Apply strategies for pursuit of grant funding, including project alignment with agencies and writing tips. 3) Adopt strategies to revise and reframe research goals based on feedback.
Ali	Pirasteh	MD	1) The audience will understand the new terminology, new therapies and the need for imaging follow up related to steatotic liver disease. 2) The audience will understand the fundamentals of MRI- and ultrasound-based method for qualification of liver fat. 3) The audience will understand and compare the strengths, limitations, and pitfalls associated with MRI- and ultrasound-based liver fat qualification techniques.
Suraj	Serai	PhD	1) The audience will understand the new terminology, new therapies and the need for imaging follow up related to steatotic liver disease. 2) The audience will understand the fundamentals of MRI- and ultrasound-based method for qualification of liver fat. 3) The audience will understand and compare the strengths, limitations, and pitfalls associated with MRI- and ultrasound-based liver fat qualification techniques.

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Manish	Dhyani	MD	1) The audience will understand the new terminology, new therapies and the need for imaging follow up related to steatotic liver disease. 2) The audience will understand the fundamentals of MRI- and ultrasound-based method for qualification of liver fat. 3) The audience will understand and compare the strengths, limitations, and pitfalls associated with MRI- and ultrasound-based liver fat qualification techniques.
Minal	Jagtiani	MD	1) The audience will understand the new terminology, new therapies and the need for imaging follow up related to steatotic liver disease. 2) The audience will understand the fundamentals of MRI- and ultrasound-based method for qualification of liver fat. 3) The audience will understand and compare the strengths, limitations, and pitfalls associated with MRI- and ultrasound-based liver fat qualification techniques.
Suraj	Serai	PhD	1) The audience will understand the new terminology, new therapies and the need for imaging follow up related to steatotic liver disease. 2) The audience will understand the fundamentals of MRI- and ultrasound-based method for qualification of liver fat. 3) The audience will understand and compare the strengths, limitations, and pitfalls associated with MRI- and ultrasound-based liver fat qualification techniques.
Erica	Riedesel	MD	1) The audience will understand the new terminology, new therapies and the need for imaging follow up related to steatotic liver disease. 2) The audience will understand the fundamentals of MRI- and ultrasound-based method for qualification of liver fat. 3) The audience will understand and compare the strengths, limitations, and pitfalls associated with MRI- and ultrasound-based liver fat qualification techniques.
Jonathan	Dillman	MD, MSc	1) The audience will understand the new terminology, new therapies and the need for imaging follow up related to steatotic liver disease. 2) The audience will understand the fundamentals of MRI- and ultrasound-based method for qualification of liver fat. 3) The audience will understand and compare the strengths, limitations, and pitfalls associated with MRI- and ultrasound-based liver fat qualification techniques.

Nikdokht	Farid	MD	1) Evaluate the evolution of radiology advancements and their role in the evolving landscape of current health care delivery. 2) Explore strategies to preserve the academic missions of clinical care, research, and education. 3) Emphasize the value of multidisciplinary health care teams in patient care and workflow, and the role of the radiologist as part of these teams. 4) Illustrate how digital tools can assist in workflow efficiencies.
Jean	Kunjummen	DO	1) Evaluate the evolution of radiology advancements and their role in the evolving landscape of current health care delivery. 2) Explore strategies to preserve the academic missions of clinical care, research, and education. 3) Emphasize the value of multidisciplinary health care teams in patient care and workflow, and the role of the radiologist as part of these teams. 4) Illustrate how digital tools can assist in workflow efficiencies.
Laurie	Loevner	MD	1) Evaluate the evolution of radiology advancements and their role in the evolving landscape of current health care delivery. 2) Explore strategies to preserve the academic missions of clinical care, research, and education. 3) Emphasize the value of multidisciplinary health care teams in patient care and workflow, and the role of the radiologist as part of these teams. 4) Illustrate how digital tools can assist in workflow efficiencies.
Mitesh	Naik	FRCR	1) Discuss common incidental findings on body CT imaging and select appropriate management strategies through a case-based approach. 2) Compare international guidelines for incidental findings and analyze the rationale behind regional differences. 3) Apply evidence-based principles to implement balanced, patient-centered management strategies in local clinical practice.
Federica	Vernuccio	MD	1) Discuss common incidental findings on body CT imaging and select appropriate management strategies through a case-based approach. 2) Compare international guidelines for incidental findings and analyze the rationale behind regional differences. 3) Apply evidence-based principles to implement balanced, patient-centered management strategies in local clinical practice.
Harriet	Thoeny	MD,MD	1) Discuss common incidental findings on body CT imaging and select appropriate management strategies through a case-based approach. 2) Compare international guidelines for incidental findings and analyze the rationale behind regional differences. 3) Apply evidence-based principles to implement balanced, patient-centered management strategies in local clinical practice.

Alessandro	Furlan	MMM,MD	1) Discuss common incidental findings on body CT imaging and select appropriate management strategies through a case-based approach. 2) Compare international guidelines for incidental findings and analyze the rationale behind regional differences. 3) Apply evidence-based principles to implement balanced, patient-centered management strategies in local clinical practice.
Danny	Cho	FRCR,MBBS	1) Discuss common incidental findings on body CT imaging and select appropriate management strategies through a case-based approach. 2) Compare international guidelines for incidental findings and analyze the rationale behind regional differences. 3) Apply evidence-based principles to implement balanced, patient-centered management strategies in local clinical practice.
Luis	Gorospe-Sarasua	MD	1) Discuss common incidental findings on body CT imaging and select appropriate management strategies through a case-based approach. 2) Compare international guidelines for incidental findings and analyze the rationale behind regional differences. 3) Apply evidence-based principles to implement balanced, patient-centered management strategies in local clinical practice.
Mathias	Meyer	MD	1) Discuss common incidental findings on body CT imaging and select appropriate management strategies through a case-based approach. 2) Compare international guidelines for incidental findings and analyze the rationale behind regional differences. 3) Apply evidence-based principles to implement balanced, patient-centered management strategies in local clinical practice.
Omolola	Atalabi	MBBS,MD	1) Discuss common incidental findings on body CT imaging and select appropriate management strategies through a case-based approach. 2) Compare international guidelines for incidental findings and analyze the rationale behind regional differences. 3) Apply evidence-based principles to implement balanced, patient-centered management strategies in local clinical practice.
Felipe	Aluja-Jaramillo	MD	1) Discuss common incidental findings on body CT imaging and select appropriate management strategies through a case-based approach. 2) Compare international guidelines for incidental findings and analyze the rationale behind regional differences. 3) Apply evidence-based principles to implement balanced, patient-centered management strategies in local clinical practice.
Jean-Pierre	Tasu	PhD,MD	1) Discuss common incidental findings on body CT imaging and select appropriate management strategies through a case-based approach. 2) Compare international guidelines for incidental findings and analyze the rationale behind regional differences. 3) Apply evidence-based principles to implement balanced, patient-centered management strategies in local clinical practice.

Janie	Lee	MSc,MD	1) Synthesize evidence, operational feasibility and implementation risks associated with new technologies to decide whether they are ready for adoption. 2) Differentiate how decision makers at increasingly higher levels of healthcare administration assess new technologies for adoption. 3) Understand how to make a cogent ask for adopting new technologies, anticipating key considerations and leadership questions.
Premal	Trivedi	MSc,MD	1) Synthesize evidence, operational feasibility and implementation risks associated with new technologies to decide whether they are ready for adoption. 2) Differentiate how decision makers at increasingly higher levels of healthcare administration assess new technologies for adoption. 3) Understand how to make a cogent ask for adopting new technologies, anticipating key considerations and leadership questions.
Premal	Trivedi	MSc,MD	1) Synthesize evidence, operational feasibility and implementation risks associated with new technologies to decide whether they are ready for adoption. 2) Differentiate how decision makers at increasingly higher levels of healthcare administration assess new technologies for adoption. 3) Understand how to make a cogent ask for adopting new technologies, anticipating key considerations and leadership questions.
Pari	Pandharipande	MPH,MD	1) Synthesize evidence, operational feasibility and implementation risks associated with new technologies to decide whether they are ready for adoption. 2) Differentiate how decision makers at increasingly higher levels of healthcare administration assess new technologies for adoption. 3) Understand how to make a cogent ask for adopting new technologies, anticipating key considerations and leadership questions.
Norman	Beauchamp	MD	1) Synthesize evidence, operational feasibility and implementation risks associated with new technologies to decide whether they are ready for adoption. 2) Differentiate how decision makers at increasingly higher levels of healthcare administration assess new technologies for adoption. 3) Understand how to make a cogent ask for adopting new technologies, anticipating key considerations and leadership questions.
Bin	Song	MD	
Dengbin	Wang	MD	
Zheng Yu	Jin	MD	

Huadan	Xue	MD	
Huimao	Zhang	MD, PhD	
Min	Chen	PhD	
Andrea	Rockall	FRCR	1) Describe the environmental impacts of radiology across the imaging lifecycle and explain why sustainability is integral to high-quality, safe, and equitable imaging care. 2) Identify practical steps to establish and sustain a radiology Green Team, including stakeholder engagement, goal setting, and progress tracking. 3) Apply methods to measure energy use, perform waste audits, and interpret lifecycle assessment data within radiology departments. 4) Implement actionable strategies to reduce energy consumption, waste generation, and contrast use in routine radiology practice.
Kate	Hannemann	MPH,MD	1) Describe the environmental impacts of radiology across the imaging lifecycle and explain why sustainability is integral to high-quality, safe, and equitable imaging care. 2) Identify practical steps to establish and sustain a radiology Green Team, including stakeholder engagement, goal setting, and progress tracking. 3) Apply methods to measure energy use, perform waste audits, and interpret lifecycle assessment data within radiology departments. 4) Implement actionable strategies to reduce energy consumption, waste generation, and contrast use in routine radiology practice.
Anne	Covey	MD	1) Describe the environmental impacts of radiology across the imaging lifecycle and explain why sustainability is integral to high-quality, safe, and equitable imaging care. 2) Identify practical steps to establish and sustain a radiology Green Team, including stakeholder engagement, goal setting, and progress tracking. 3) Apply methods to measure energy use, perform waste audits, and interpret lifecycle assessment data within radiology departments. 4) Implement actionable strategies to reduce energy consumption, waste generation, and contrast use in routine radiology practice.

Michael	Zalis	MD	1) Describe the environmental impacts of radiology across the imaging lifecycle and explain why sustainability is integral to high-quality, safe, and equitable imaging care. 2) Identify practical steps to establish and sustain a radiology Green Team, including stakeholder engagement, goal setting, and progress tracking. 3) Apply methods to measure energy use, perform waste audits, and interpret lifecycle assessment data within radiology departments. 4) Implement actionable strategies to reduce energy consumption, waste generation, and contrast use in routine radiology practice.
Charles	Goh	FRCR, MMEd	1) Describe the environmental impacts of radiology across the imaging lifecycle and explain why sustainability is integral to high-quality, safe, and equitable imaging care. 2) Identify practical steps to establish and sustain a radiology Green Team, including stakeholder engagement, goal setting, and progress tracking. 3) Apply methods to measure energy use, perform waste audits, and interpret lifecycle assessment data within radiology departments. 4) Implement actionable strategies to reduce energy consumption, waste generation, and contrast use in routine radiology practice.
Andrew	Hernandez	PhD	1) Describe the environmental impacts of radiology across the imaging lifecycle and explain why sustainability is integral to high-quality, safe, and equitable imaging care. 2) Identify practical steps to establish and sustain a radiology Green Team, including stakeholder engagement, goal setting, and progress tracking. 3) Apply methods to measure energy use, perform waste audits, and interpret lifecycle assessment data within radiology departments. 4) Implement actionable strategies to reduce energy consumption, waste generation, and contrast use in routine radiology practice.
Melissa	Davis	MBA,MD	1) Understand current FDA approaches and regulatory frameworks (e.g., overview of FDA's current policies for AI -enabled medical devices, and types of approvals). 2) Explore the development of regulatory science tools to promote safe and effective AI-enabled medical devices (e.g., how to address issues of algorithm transparency, bias, and real-world performance). 3) Promote dialogue among panel members and with the audience on challenges and over-arching regulatory frameworks (e.g., recent updates to regulatory policies and/or legislative frameworks).

Robert	Ochs	PhD	1) Understand current FDA approaches and regulatory frameworks (e.g., overview of FDA's current policies for AI -enabled medical devices, and types of approvals). 2) Explore the development of regulatory science tools to promote safe and effective AI-enabled medical devices (e.g., how to address issues of algorithm transparency, bias, and real-world performance). 3) Promote dialogue among panel members and with the audience on challenges and over-arching regulatory frameworks (e.g., recent updates to regulatory policies and/or legislative frameworks).
Aldo	Badano	PhD	1) Understand current FDA approaches and regulatory frameworks (e.g., overview of FDA's current policies for AI -enabled medical devices, and types of approvals). 2) Explore the development of regulatory science tools to promote safe and effective AI-enabled medical devices (e.g., how to address issues of algorithm transparency, bias, and real-world performance). 3) Promote dialogue among panel members and with the audience on challenges and over-arching regulatory frameworks (e.g., recent updates to regulatory policies and/or legislative frameworks).
Richard	Abramson	MS,MD	1) Understand current FDA approaches and regulatory frameworks (e.g., overview of FDA's current policies for AI -enabled medical devices, and types of approvals). 2) Explore the development of regulatory science tools to promote safe and effective AI-enabled medical devices (e.g., how to address issues of algorithm transparency, bias, and real-world performance). 3) Promote dialogue among panel members and with the audience on challenges and over-arching regulatory frameworks (e.g., recent updates to regulatory policies and/or legislative frameworks).
Marcelo	Takahashi	PhD,MD	1) Describe RSNA's ATLAS repository (atlas.rsna.org) that indexes AI models and datasets. 2) Learn how ATLAS makes AI resources more findable and interoperable. * Describe ROADMAP, the ontology that underpins ATLAS 3) Identify applications of ATLAS and ROADMAP.
Marcelo	Takahashi	PhD,MD	1) Describe RSNA's ATLAS repository (atlas.rsna.org) that indexes AI models and datasets. 2) Learn how ATLAS makes AI resources more findable and interoperable. * Describe ROADMAP, the ontology that underpins ATLAS 3) Identify applications of ATLAS and ROADMAP.
Abhinav	Suri	MPH,BA	1) Describe RSNA's ATLAS repository (atlas.rsna.org) that indexes AI models and datasets. 2) Learn how ATLAS makes AI resources more findable and interoperable. * Describe ROADMAP, the ontology that underpins ATLAS 3) Identify applications of ATLAS and ROADMAP.

Tara	Retson	PhD,MD	1) Describe RSNA's ATLAS repository (atlas.rsna.org) that indexes AI models and datasets. 2) Learn how ATLAS makes AI resources more findable and interoperable. * Describe ROADMAP, the ontology that underpins ATLAS 3) Identify applications of ATLAS and ROADMAP.
Ricardo	Gonzales Vera	MD	1) Describe RSNA's ATLAS repository (atlas.rsna.org) that indexes AI models and datasets. 2) Learn how ATLAS makes AI resources more findable and interoperable. * Describe ROADMAP, the ontology that underpins ATLAS 3) Identify applications of ATLAS and ROADMAP.
Bing	Zhang	PhD	
Lan	Zhang		
Fuhua	Yan	MS	
Shenghong	Ju	PhD,MD	
Meiyun	Wang	PhD	
Weihua	Liao	PhD	
Jiayin	Zhang	MD	
Yaou	Liu	MD,PhD	
Hanyu	Jiang	MD	
Omolola	Atalabi	MBBS,MD	1) Appreciate the background historical evolution of radiological practice in Nigeria. 2) Recognize the key milestones that have shaped diagnostic and interventional radiology practice in resource-limited settings like Nigeria. 3) Evaluate the current trends in medical imaging technology, workforce dynamics, training and clinical applications. 4) Identify prevailing challenges (the tide) such as technological disruption, cost implication, maintenance, radiation safety, workforce shortages, and policy issues. 5) Explore future directions such as Interventional Radiology, Artificial Intelligence, molecular imaging, precision medicine, and to evaluate adaptive strategies radiologists have used to remain relevant in a rapidly evolving healthcare ecosystem. 6) Develop leadership and innovation mindsets and formulate actionable roadmaps necessary for sustaining radiology practice.

Ebbi	Robinson	MPH,MBBS	1) Appreciate the background historical evolution of radiological practice in Nigeria. 2) Recognize the key milestones that have shaped diagnostic and interventional radiology practice in resource-limited settings like Nigeria. 3) Evaluate the current trends in medical imaging technology, workforce dynamics, training and clinical applications. 4) Identify prevailing challenges (the tide) such as technological disruption, cost implication, maintenance, radiation safety, workforce shortages, and policy issues. 5) Explore future directions such as Interventional Radiology, Artificial Intelligence, molecular imaging, precision medicine, and to evaluate adaptive strategies radiologists have used to remain relevant in a rapidly evolving healthcare ecosystem. 6) Develop leadership and innovation mindsets and formulate actionable roadmaps necessary for sustaining radiology practice.
Feyisayo	Daji	MBChB	1) Appreciate the background historical evolution of radiological practice in Nigeria. 2) Recognize the key milestones that have shaped diagnostic and interventional radiology practice in resource-limited settings like Nigeria. 3) Evaluate the current trends in medical imaging technology, workforce dynamics, training and clinical applications. 4) Identify prevailing challenges (the tide) such as technological disruption, cost implication, maintenance, radiation safety, workforce shortages, and policy issues. 5) Explore future directions such as Interventional Radiology, Artificial Intelligence, molecular imaging, precision medicine, and to evaluate adaptive strategies radiologists have used to remain relevant in a rapidly evolving healthcare ecosystem. 6) Develop leadership and innovation mindsets and formulate actionable roadmaps necessary for sustaining radiology practice.
Ofonime	Ukweh	MBBCh	1) Appreciate the background historical evolution of radiological practice in Nigeria. 2) Recognize the key milestones that have shaped diagnostic and interventional radiology practice in resource-limited settings like Nigeria. 3) Evaluate the current trends in medical imaging technology, workforce dynamics, training and clinical applications. 4) Identify prevailing challenges (the tide) such as technological disruption, cost implication, maintenance, radiation safety, workforce shortages, and policy issues. 5) Explore future directions such as Interventional Radiology, Artificial Intelligence, molecular imaging, precision medicine, and to evaluate adaptive strategies radiologists have used to remain relevant in a rapidly evolving healthcare ecosystem. 6) Develop leadership and innovation mindsets and formulate actionable roadmaps necessary for sustaining radiology practice.

Ahmed	Ahidjo	MBBS	1) Appreciate the background historical evolution of radiological practice in Nigeria. 2) Recognize the key milestones that have shaped diagnostic and interventional radiology practice in resource-limited settings like Nigeria. 3) Evaluate the current trends in medical imaging technology, workforce dynamics, training and clinical applications. 4) Identify prevailing challenges (the tide) such as technological disruption, cost implication, maintenance, radiation safety, workforce shortages, and policy issues. 5) Explore future directions such as Interventional Radiology, Artificial Intelligence, molecular imaging, precision medicine, and to evaluate adaptive strategies radiologists have used to remain relevant in a rapidly evolving healthcare ecosystem. 6) Develop leadership and innovation mindsets and formulate actionable roadmaps necessary for sustaining radiology practice.
Abdul	Salaam	MBBS	1) Appreciate the background historical evolution of radiological practice in Nigeria. 2) Recognize the key milestones that have shaped diagnostic and interventional radiology practice in resource-limited settings like Nigeria. 3) Evaluate the current trends in medical imaging technology, workforce dynamics, training and clinical applications. 4) Identify prevailing challenges (the tide) such as technological disruption, cost implication, maintenance, radiation safety, workforce shortages, and policy issues. 5) Explore future directions such as Interventional Radiology, Artificial Intelligence, molecular imaging, precision medicine, and to evaluate adaptive strategies radiologists have used to remain relevant in a rapidly evolving healthcare ecosystem. 6) Develop leadership and innovation mindsets and formulate actionable roadmaps necessary for sustaining radiology practice.
Abiodun	Fatade	MD,MBBS	1) Appreciate the background historical evolution of radiological practice in Nigeria. 2) Recognize the key milestones that have shaped diagnostic and interventional radiology practice in resource-limited settings like Nigeria. 3) Evaluate the current trends in medical imaging technology, workforce dynamics, training and clinical applications. 4) Identify prevailing challenges (the tide) such as technological disruption, cost implication, maintenance, radiation safety, workforce shortages, and policy issues. 5) Explore future directions such as Interventional Radiology, Artificial Intelligence, molecular imaging, precision medicine, and to evaluate adaptive strategies radiologists have used to remain relevant in a rapidly evolving healthcare ecosystem. 6) Develop leadership and innovation mindsets and formulate actionable roadmaps necessary for sustaining radiology practice.

Jacob	Sosna	MD	1) Critically review and synthesize existing literature. 2) Identify strengths of and areas needing improvement in proposed manuscripts. 3) Apply chosen diagnostic and/or therapeutic techniques.
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Suhny	Abbara	MD	1) Critically review and synthesize existing literature. 2) Identify strengths of and areas needing improvement in proposed manuscripts. 3) Apply chosen diagnostic and/or therapeutic techniques.
Gary	Luker	MD	1) Critically review and synthesize existing literature. 2) Identify strengths of and areas needing improvement in proposed manuscripts. 3) Apply chosen diagnostic and/or therapeutic techniques.
Susanna	Lee	PhD,MD	1) Critically review and synthesize existing literature. 2) Identify strengths of and areas needing improvement in proposed manuscripts. 3) Apply chosen diagnostic and/or therapeutic techniques.
Charles	Kahn	MS,MD	1) Critically review and synthesize existing literature. 2) Identify strengths of and areas needing improvement in proposed manuscripts. 3) Apply chosen diagnostic and/or therapeutic techniques.
Harold	Litt	PhD,MD	1) Critically review and synthesize existing literature. 2) Identify strengths of and areas needing improvement in proposed manuscripts. 3) Apply chosen diagnostic and/or therapeutic techniques.
Anand	Devaraj	FRCR,MD	1) Review the state of lung cancer screening in the United States and Europe - eligibility criteria, uptake and adherence. 2) Identify mechanisms for ensuring a high quality lung cancer screening program - reader training, guidelines based reporting, and lung cancer screening registries. 3) Gain insight into advancements in technology that may improve lung cancer screening efficiency and quality - AI, liquid biomarkers and opportunistic screening.
Ashley	Prosper	MD	1) Review the state of lung cancer screening in the United States and Europe - eligibility criteria, uptake and adherence. 2) Identify mechanisms for ensuring a high quality lung cancer screening program - reader training, guidelines based reporting, and lung cancer screening registries. 3) Gain insight into advancements in technology that may improve lung cancer screening efficiency and quality - AI, liquid biomarkers and opportunistic screening.

Arjun	Nair	FRCR,MD	1) Review the state of lung cancer screening in the United States and Europe - eligibility criteria, uptake and adherence. 2) Identify mechanisms for ensuring a high quality lung cancer screening program - reader training, guidelines based reporting, and lung cancer screening registries. 3) Gain insight into advancements in technology that may improve lung cancer screening efficiency and quality - AI, liquid biomarkers and opportunistic screening.
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Jens	Vogel-Claussen	MD	1) Review the state of lung cancer screening in the United States and Europe - eligibility criteria, uptake and adherence. 2) Identify mechanisms for ensuring a high quality lung cancer screening program - reader training, guidelines based reporting, and lung cancer screening registries. 3) Gain insight into advancements in technology that may improve lung cancer screening efficiency and quality - AI, liquid biomarkers and opportunistic screening.
Andrew	Moriarity	MBA,MD	1) Identify key human-factors principles that influence radiologist interaction with AI systems, including cognitive load, trust calibration, and workflow integration. 2) Evaluate strategies to build transparency and trust in clinical AI, including communication with clinical teams, governance structures, and performance monitoring. 3) Design workflows that support effective collaboration between radiologists and AI, including approaches to manage discrepancies, oversight, and escalation pathways. 4) Apply human-centered design principles to AI implementation in order to improve diagnostic quality, reduce alert fatigue, and enhance radiologist engagement.
Andrew	Moriarity	MBA,MD	1) Identify key human-factors principles that influence radiologist interaction with AI systems, including cognitive load, trust calibration, and workflow integration. 2) Evaluate strategies to build transparency and trust in clinical AI, including communication with clinical teams, governance structures, and performance monitoring. 3) Design workflows that support effective collaboration between radiologists and AI, including approaches to manage discrepancies, oversight, and escalation pathways. 4) Apply human-centered design principles to AI implementation in order to improve diagnostic quality, reduce alert fatigue, and enhance radiologist engagement.

Elizabeth	Krupinski	PhD	1) Identify key human-factors principles that influence radiologist interaction with AI systems, including cognitive load, trust calibration, and workflow integration. 2) Evaluate strategies to build transparency and trust in clinical AI, including communication with clinical teams, governance structures, and performance monitoring. 3) Design workflows that support effective collaboration between radiologists and AI, including approaches to manage discrepancies, oversight, and escalation pathways. 4) Apply human-centered design principles to AI implementation in order to improve diagnostic quality, reduce alert fatigue, and enhance radiologist engagement.
Valeria	Makeeva	MD	1) Identify key human-factors principles that influence radiologist interaction with AI systems, including cognitive load, trust calibration, and workflow integration. 2) Evaluate strategies to build transparency and trust in clinical AI, including communication with clinical teams, governance structures, and performance monitoring. 3) Design workflows that support effective collaboration between radiologists and AI, including approaches to manage discrepancies, oversight, and escalation pathways. 4) Apply human-centered design principles to AI implementation in order to improve diagnostic quality, reduce alert fatigue, and enhance radiologist engagement.
Avishkar	Sharma	MD	1) Identify key human-factors principles that influence radiologist interaction with AI systems, including cognitive load, trust calibration, and workflow integration. 2) Evaluate strategies to build transparency and trust in clinical AI, including communication with clinical teams, governance structures, and performance monitoring. 3) Design workflows that support effective collaboration between radiologists and AI, including approaches to manage discrepancies, oversight, and escalation pathways. 4) Apply human-centered design principles to AI implementation in order to improve diagnostic quality, reduce alert fatigue, and enhance radiologist engagement.
Arun	Krishnaraj	MD, MPH	1) Identify key human-factors principles that influence radiologist interaction with AI systems, including cognitive load, trust calibration, and workflow integration. 2) Evaluate strategies to build transparency and trust in clinical AI, including communication with clinical teams, governance structures, and performance monitoring. 3) Design workflows that support effective collaboration between radiologists and AI, including approaches to manage discrepancies, oversight, and escalation pathways. 4) Apply human-centered design principles to AI implementation in order to improve diagnostic quality, reduce alert fatigue, and enhance radiologist engagement.

Karen	Ordovas	MS,MD	1) List imaging biomarkers used to quantify burden of atherosclerotic coronary plaque. 2) Identify the biomarkers that are considered most reproducible and robust. 3) Describe the rationale for using quantitative coronary plaque imaging to guide therapy decisions.
Jonathon	Leipsic	MD	1) List imaging biomarkers used to quantify burden of atherosclerotic coronary plaque. 2) Identify the biomarkers that are considered most reproducible and robust. 3) Describe the rationale for using quantitative coronary plaque imaging to guide therapy decisions.
Carlotta	Onnis	MD	1) List imaging biomarkers used to quantify burden of atherosclerotic coronary plaque. 2) Identify the biomarkers that are considered most reproducible and robust. 3) Describe the rationale for using quantitative coronary plaque imaging to guide therapy decisions.
Damini	Dey	PhD	1) List imaging biomarkers used to quantify burden of atherosclerotic coronary plaque. 2) Identify the biomarkers that are considered most reproducible and robust. 3) Describe the rationale for using quantitative coronary plaque imaging to guide therapy decisions.
Carlo	De Cecco	PhD,MD	1) List imaging biomarkers used to quantify burden of atherosclerotic coronary plaque. 2) Identify the biomarkers that are considered most reproducible and robust. 3) Describe the rationale for using quantitative coronary plaque imaging to guide therapy decisions.
Jonathon	Leipsic	MD	1) List imaging biomarkers used to quantify burden of atherosclerotic coronary plaque. 2) Identify the biomarkers that are considered most reproducible and robust. 3) Describe the rationale for using quantitative coronary plaque imaging to guide therapy decisions.

Anand	Devaraj	FRCR,MD	1) Review the state of lung cancer screening in the United States and Europe - eligibility criteria, uptake and adherence. 2) Identify mechanisms for ensuring a high quality lung cancer screening program - reader training, guidelines based reporting, and lung cancer screening registries. 3) Gain insight into advancements in technology that may improve lung cancer screening efficiency and quality - AI, liquid biomarkers and opportunistic screening.
Ashley	Prosper	MD	1) Review the state of lung cancer screening in the United States and Europe - eligibility criteria, uptake and adherence. 2) Identify mechanisms for ensuring a high quality lung cancer screening program - reader training, guidelines based reporting, and lung cancer screening registries. 3) Gain insight into advancements in technology that may improve lung cancer screening efficiency and quality - AI, liquid biomarkers and opportunistic screening.
Arjun	Nair	FRCR,MD	1) Review the state of lung cancer screening in the United States and Europe - eligibility criteria, uptake and adherence. 2) Identify mechanisms for ensuring a high quality lung cancer screening program - reader training, guidelines based reporting, and lung cancer screening registries. 3) Gain insight into advancements in technology that may improve lung cancer screening efficiency and quality - AI, liquid biomarkers and opportunistic screening.
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Jared No	Christensen Presenter	MBA,MD	1) Review the state of lung cancer screening in the United States and Europe - eligibility criteria, uptake and adherence. 2) Identify mechanisms for ensuring a high quality lung cancer screening program - reader training, guidelines based reporting, and lung cancer screening registries. 3) Gain insight into advancements in technology that may improve lung cancer screening efficiency and quality - AI, liquid biomarkers and opportunistic screening.
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Jeffrey	Kanne	MD	1) Review the state of lung cancer screening in the United States and Europe - eligibility criteria, uptake and adherence. 2) Identify mechanisms for ensuring a high quality lung cancer screening program - reader training, guidelines based reporting, and lung cancer screening registries. 3) Gain insight into advancements in technology that may improve lung cancer screening efficiency and quality - AI, liquid biomarkers and opportunistic screening.
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Victoria	Chernyak	MS,MD	1) Compare Eastern and Western approaches to HCC surveillance, diagnosis and early treatment. 2) Identify methods to optimize performance of surveillance ultrasound, including technical and patient-related factors. 3) Describe how imaging biomarkers such LI-RADS imaging features and categories can support risk stratification and prognosis of patients with HCC. 4) Discuss the role of higher-sensitivity strategies such as abbreviated MRI and HBP imaging in population-level screening.
Charles	Goh	FRCR, MMEd	1) Compare Eastern and Western approaches to HCC surveillance, diagnosis and early treatment. 2) Identify methods to optimize performance of surveillance ultrasound, including technical and patient-related factors. 3) Describe how imaging biomarkers such LI-RADS imaging features and categories can support risk stratification and prognosis of patients with HCC. 4) Discuss the role of higher-sensitivity strategies such as abbreviated MRI and HBP imaging in population-level screening.
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Jeong Min	Lee	MD, PhD	1) Compare Eastern and Western approaches to HCC surveillance, diagnosis and early treatment. 2) Identify methods to optimize performance of surveillance ultrasound, including technical and patient-related factors. 3) Describe how imaging biomarkers such LI-RADS imaging features and categories can support risk stratification and prognosis of patients with HCC. 4) Discuss the role of higher-sensitivity strategies such as abbreviated MRI and HBP imaging in population-level screening.

Aya	Kamaya	MD	1) Compare Eastern and Western approaches to HCC surveillance, diagnosis and early treatment. 2) Identify methods to optimize performance of surveillance ultrasound, including technical and patient-related factors. 3) Describe how imaging biomarkers such LI-RADS imaging features and categories can support risk stratification and prognosis of patients with HCC. 4) Discuss the role of higher-sensitivity strategies such as abbreviated MRI and HBP imaging in population-level screening.
Keitaro	Sofue	MD	1) Compare Eastern and Western approaches to HCC surveillance, diagnosis and early treatment. 2) Identify methods to optimize performance of surveillance ultrasound, including technical and patient-related factors. 3) Describe how imaging biomarkers such LI-RADS imaging features and categories can support risk stratification and prognosis of patients with HCC. 4) Discuss the role of higher-sensitivity strategies such as abbreviated MRI and HBP imaging in population-level screening.
Errol	Colak	MD	1) Describe how AI benchmarks differ from one-time challenges and isolated validation studies. 2) Understand the key components required tot design and maintain a robust, reproducible benchmark. 3) Discuss how benchmark frameworks such as PICAI can be generalized and applied across radiology use cases.
Henkjan	Huisman	PhD	1) Describe how AI benchmarks differ from one-time challenges and isolated validation studies. 2) Understand the key components required tot design and maintain a robust, reproducible benchmark. 3) Discuss how benchmark frameworks such as PICAI can be generalized and applied across radiology use cases.
Baris	Turkbey	MD	1) Describe how AI benchmarks differ from one-time challenges and isolated validation studies. 2) Understand the key components required tot design and maintain a robust, reproducible benchmark. 3) Discuss how benchmark frameworks such as PICAI can be generalized and applied across radiology use cases.
Maggie	Chung	MD	1) Describe how AI benchmarks differ from one-time challenges and isolated validation studies. 2) Understand the key components required tot design and maintain a robust, reproducible benchmark. 3) Discuss how benchmark frameworks such as PICAI can be generalized and applied across radiology use cases.

George	Shih	MS,MD	1) Describe how AI benchmarks differ from one-time challenges and isolated validation studies. 2) Understand the key components required tot design and maintain a robust, reproducible benchmark. 3) Discuss how benchmark frameworks such as PICAI can be generalized and applied across radiology use cases.
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Florian	Fintelmann	MD	1) Review the state of lung cancer screening in the United States and Europe - eligibility criteria, uptake and adherence. 2) Identify mechanisms for ensuring a high quality lung cancer screening program - reader training, guidelines based reporting, and lung cancer screening registries. 3) Gain insight into advancements in technology that may improve lung cancer screening efficiency and quality - AI, liquid biomarkers and opportunistic screening.
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Jens	Vogel-Claussen	MD	1) Review the state of lung cancer screening in the United States and Europe - eligibility criteria, uptake and adherence. 2) Identify mechanisms for ensuring a high quality lung cancer screening program - reader training, guidelines based reporting, and lung cancer screening registries. 3) Gain insight into advancements in technology that may improve lung cancer screening efficiency and quality - AI, liquid biomarkers and opportunistic screening.

Brandon K.K.	Fields	MD	1) Didactic Overview: Presentation on the overall structure of the oral board exam and the primary evaluation criteria; practical tips and “pearls” for successful case-taking, including communication strategies, time management, and handling challenging scenarios will be reviewed. 2) Exemplar Case-Taking: Three attending-level panelists representing different institutions and specialties will be individually presented with different cases in a mock exam format. A moderator will act as the examiner to simulate the experience. Panelists will model effective case-taking approaches, highlighting techniques that trainees can emulate. Panelists will be given ~12 minutes per case.
Rylee	Friel	MD	1) Didactic Overview: Presentation on the overall structure of the oral board exam and the primary evaluation criteria; practical tips and “pearls” for successful case-taking, including communication strategies, time management, and handling challenging scenarios will be reviewed. 2) Exemplar Case-Taking: Three attending-level panelists representing different institutions and specialties will be individually presented with different cases in a mock exam format. A moderator will act as the examiner to simulate the experience. Panelists will model effective case-taking approaches, highlighting techniques that trainees can emulate. Panelists will be given ~12 minutes per case.
Katherine	Maturen	MD, MS	1) Didactic Overview: Presentation on the overall structure of the oral board exam and the primary evaluation criteria; practical tips and “pearls” for successful case-taking, including communication strategies, time management, and handling challenging scenarios will be reviewed. 2) Exemplar Case-Taking: Three attending-level panelists representing different institutions and specialties will be individually presented with different cases in a mock exam format. A moderator will act as the examiner to simulate the experience. Panelists will model effective case-taking approaches, highlighting techniques that trainees can emulate. Panelists will be given ~12 minutes per case.
Karuna	Raj	MD	1) Didactic Overview: Presentation on the overall structure of the oral board exam and the primary evaluation criteria; practical tips and “pearls” for successful case-taking, including communication strategies, time management, and handling challenging scenarios will be reviewed. 2) Exemplar Case-Taking: Three attending-level panelists representing different institutions and specialties will be individually presented with different cases in a mock exam format. A moderator will act as the examiner to simulate the experience. Panelists will model effective case-taking approaches, highlighting techniques that trainees can emulate. Panelists will be given ~12 minutes per case.

Rachel	Bass	MD	1) Didactic Overview: Presentation on the overall structure of the oral board exam and the primary evaluation criteria; practical tips and “pearls” for successful case-taking, including communication strategies, time management, and handling challenging scenarios will be reviewed. 2) Exemplar Case-Taking: Three attending-level panelists representing different institutions and specialties will be individually presented with different cases in a mock exam format. A moderator will act as the examiner to simulate the experience. Panelists will model effective case-taking approaches, highlighting techniques that trainees can emulate. Panelists will be given ~12 minutes per case.
Ghaneh	Fananapazir	MD	1) Didactic Overview: Presentation on the overall structure of the oral board exam and the primary evaluation criteria; practical tips and “pearls” for successful case-taking, including communication strategies, time management, and handling challenging scenarios will be reviewed. 2) Exemplar Case-Taking: Three attending-level panelists representing different institutions and specialties will be individually presented with different cases in a mock exam format. A moderator will act as the examiner to simulate the experience. Panelists will model effective case-taking approaches, highlighting techniques that trainees can emulate. Panelists will be given ~12 minutes per case.
Jordan	Perchik	MD	1) The session will focus on practical, evidence-informed strategies to promote workforce inclusivity, including inclusive hiring practices, effective mentorship and sponsorship models, leadership and professional development pathways, and approaches to increasing representation in academic and administrative leadership roles.
Diana	Vera-Garcia	MD	1) The session will focus on practical, evidence-informed strategies to promote workforce inclusivity, including inclusive hiring practices, effective mentorship and sponsorship models, leadership and professional development pathways, and approaches to increasing representation in academic and administrative leadership roles.
Maureen	Kohi	MD	1) The session will focus on practical, evidence-informed strategies to promote workforce inclusivity, including inclusive hiring practices, effective mentorship and sponsorship models, leadership and professional development pathways, and approaches to increasing representation in academic and administrative leadership roles.

Ihab	Kamel	MD, PhD	1) The session will focus on practical, evidence-informed strategies to promote workforce inclusivity, including inclusive hiring practices, effective mentorship and sponsorship models, leadership and professional development pathways, and approaches to increasing representation in academic and administrative leadership roles.
Stefanie	Woodard	DO	1) The session will focus on practical, evidence-informed strategies to promote workforce inclusivity, including inclusive hiring practices, effective mentorship and sponsorship models, leadership and professional development pathways, and approaches to increasing representation in academic and administrative leadership roles.
Charlotte	Yong-Hing	FRCPC,MD	1) The session will focus on practical, evidence-informed strategies to promote workforce inclusivity, including inclusive hiring practices, effective mentorship and sponsorship models, leadership and professional development pathways, and approaches to increasing representation in academic and administrative leadership roles.
Bettina	Siewert	MD	1) Recognize radiology-specific communication challenges that contribute to diagnostic error and burnout. 2) Apply structured approaches to difficult conversations with clinicians, patients, and leadership. 3) Advocate effectively for professional needs within radiology practice, Respond to errors and complaints using best practices in disclosure, candour, and apology.
Geraldine	McGinty	MBA,MD	1) Recognize radiology-specific communication challenges that contribute to diagnostic error and burnout. 2) Apply structured approaches to difficult conversations with clinicians, patients, and leadership. 3) Advocate effectively for professional needs within radiology practice, Respond to errors and complaints using best practices in disclosure, candour, and apology.
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Vikas	Gulani	PhD,MD	1) Recognize radiology-specific communication challenges that contribute to diagnostic error and burnout. 2) Apply structured approaches to difficult conversations with clinicians, patients, and leadership. 3) Advocate effectively for professional needs within radiology practice, Respond to errors and complaints using best practices in disclosure, candour, and apology.

Stephen	Brown	MD	1) Recognize radiology-specific communication challenges that contribute to diagnostic error and burnout. 2) Apply structured approaches to difficult conversations with clinicians, patients, and leadership. 3) Advocate effectively for professional needs within radiology practice, Respond to errors and complaints using best practices in disclosure, candour, and apology.
Grainne	Murphy	MBBCh, MMedSc	1) Recognize radiology-specific communication challenges that contribute to diagnostic error and burnout. 2) Apply structured approaches to difficult conversations with clinicians, patients, and leadership. 3) Advocate effectively for professional needs within radiology practice, Respond to errors and complaints using best practices in disclosure, candour, and apology.
Fiona	Fennessy	MBBCh, PhD	1) To explain the importance of private-public partnerships in clinical research, using the longstanding iSPY breast cancer trial evaluating the efficacy of novel drugs alongside standard chemotherapy, as a successful example. 2) To describe, from international perspective, how multidisciplinary institutional expertise supported by public funding can partner with industry to address unmet needs in metastatic prostate cancer assessment. 3) To demonstrate how public–private -foundational partnerships drive innovation, enabling the development, validation and regulatory application of biomarkers and other decision-making took to accelerate therapeutic development and improve patient care, using the Foundation for the National Institutes of Health (FNIH) as an example.
David	Mankoff	PhD,MD	1) To explain the importance of private-public partnerships in clinical research, using the longstanding iSPY breast cancer trial evaluating the efficacy of novel drugs alongside standard chemotherapy, as a successful example. 2) To describe, from international perspective, how multidisciplinary institutional expertise supported by public funding can partner with industry to address unmet needs in metastatic prostate cancer assessment. 3) To demonstrate how public–private -foundational partnerships drive innovation, enabling the development, validation and regulatory application of biomarkers and other decision-making took to accelerate therapeutic development and improve patient care, using the Foundation for the National Institutes of Health (FNIH) as an example.

Nola	Hylton	PhD	1) To explain the importance of private-public partnerships in clinical research, using the longstanding iSPY breast cancer trial evaluating the efficacy of novel drugs alongside standard chemotherapy, as a successful example. 2) To describe, from international perspective, how multidisciplinary institutional expertise supported by public funding can partner with industry to address unmet needs in metastatic prostate cancer assessment. 3) To demonstrate how public–private -foundational partnerships drive innovation, enabling the development, validation and regulatory application of biomarkers and other decision-making took to accelerate therapeutic development and improve patient care, using the Foundation for the National Institutes of Health (FNIH) as an example.
Dow-Mu	Koh	FRCR	1) To explain the importance of private-public partnerships in clinical research, using the longstanding iSPY breast cancer trial evaluating the efficacy of novel drugs alongside standard chemotherapy, as a successful example. 2) To describe, from international perspective, how multidisciplinary institutional expertise supported by public funding can partner with industry to address unmet needs in metastatic prostate cancer assessment. 3) To demonstrate how public–private -foundational partnerships drive innovation, enabling the development, validation and regulatory application of biomarkers and other decision-making took to accelerate therapeutic development and improve patient care, using the Foundation for the National Institutes of Health (FNIH) as an example.
Etta	Pisano	MD	1) To explain the importance of private-public partnerships in clinical research, using the longstanding iSPY breast cancer trial evaluating the efficacy of novel drugs alongside standard chemotherapy, as a successful example. 2) To describe, from international perspective, how multidisciplinary institutional expertise supported by public funding can partner with industry to address unmet needs in metastatic prostate cancer assessment. 3) To demonstrate how public–private -foundational partnerships drive innovation, enabling the development, validation and regulatory application of biomarkers and other decision-making took to accelerate therapeutic development and improve patient care, using the Foundation for the National Institutes of Health (FNIH) as an example.

Clint	Sliker	MD	1) Understand the basics of wound ballistics and how they affect what is demonstrated by imaging. 2) Plan the initial steps in evaluating a patient with penetrating trauma to the torso and recognize how the radiologist can provide her with vital information. 3) Develop clear approach to interpreting CT images of a patient with penetrating torso trauma with emphasis on findings that will most prominently affect patient care.
Carrie	Hoff	MD	1) Understand the basics of wound ballistics and how they affect what is demonstrated by imaging. 2) Plan the initial steps in evaluating a patient with penetrating trauma to the torso and recognize how the radiologist can provide her with vital information. 3) Develop clear approach to interpreting CT images of a patient with penetrating torso trauma with emphasis on findings that will most prominently affect patient care.
Scott	Steenburg	MD	1) Understand the basics of wound ballistics and how they affect what is demonstrated by imaging. 2) Plan the initial steps in evaluating a patient with penetrating trauma to the torso and recognize how the radiologist can provide her with vital information. 3) Develop clear approach to interpreting CT images of a patient with penetrating torso trauma with emphasis on findings that will most prominently affect patient care.
Deborah	Stein	MPH,MD	1) Understand the basics of wound ballistics and how they affect what is demonstrated by imaging. 2) Plan the initial steps in evaluating a patient with penetrating trauma to the torso and recognize how the radiologist can provide her with vital information. 3) Develop clear approach to interpreting CT images of a patient with penetrating torso trauma with emphasis on findings that will most prominently affect patient care.
Felipe	Munera	MD	1) Understand the basics of wound ballistics and how they affect what is demonstrated by imaging. 2) Plan the initial steps in evaluating a patient with penetrating trauma to the torso and recognize how the radiologist can provide her with vital information. 3) Develop clear approach to interpreting CT images of a patient with penetrating torso trauma with emphasis on findings that will most prominently affect patient care.
Laura	Avery	MD	1) Understand and differentiate the imaging features of traumatic and non-traumatic conditions commonly encountered in the emergency room. 2) Provide accurate and clinically relevant radiologic reports highlighting critical findings for effective ER management. 3) Exposure to a panel discussion to analyze and discuss common diagnostic challenges, limitations, and potential pitfalls in emergency radiology imaging for traumatic and non-traumatic conditions and develop strategies to improve diagnostic accuracy and patient outcomes.

Carl	Flink	MD	1) Understand and differentiate the imaging features of traumatic and non-traumatic conditions commonly encountered in the emergency room. 2) Provide accurate and clinically relevant radiologic reports highlighting critical findings for effective ER management. 3) Exposure to a panel discussion to analyze and discuss common diagnostic challenges, limitations, and potential pitfalls in emergency radiology imaging for traumatic and non-traumatic conditions and develop strategies to improve diagnostic accuracy and patient outcomes.
Carlota	Andreu Arasa	PhD,MD	1) Understand and differentiate the imaging features of traumatic and non-traumatic conditions commonly encountered in the emergency room. 2) Provide accurate and clinically relevant radiologic reports highlighting critical findings for effective ER management. 3) Exposure to a panel discussion to analyze and discuss common diagnostic challenges, limitations, and potential pitfalls in emergency radiology imaging for traumatic and non-traumatic conditions and develop strategies to improve diagnostic accuracy and patient outcomes.
Refky	Nicola	DO,MSc	1) Understand and differentiate the imaging features of traumatic and non-traumatic conditions commonly encountered in the emergency room. 2) Provide accurate and clinically relevant radiologic reports highlighting critical findings for effective ER management. 3) Exposure to a panel discussion to analyze and discuss common diagnostic challenges, limitations, and potential pitfalls in emergency radiology imaging for traumatic and non-traumatic conditions and develop strategies to improve diagnostic accuracy and patient outcomes.
Jason	Pietryga	MD	1) Understand and differentiate the imaging features of traumatic and non-traumatic conditions commonly encountered in the emergency room. 2) Provide accurate and clinically relevant radiologic reports highlighting critical findings for effective ER management. 3) Exposure to a panel discussion to analyze and discuss common diagnostic challenges, limitations, and potential pitfalls in emergency radiology imaging for traumatic and non-traumatic conditions and develop strategies to improve diagnostic accuracy and patient outcomes.

Karen	Buch	MD	1) Understand and differentiate the imaging features of traumatic and non-traumatic conditions commonly encountered in the emergency room. 2) Provide accurate and clinically relevant radiologic reports highlighting critical findings for effective ER management. 3) Exposure to a panel discussion to analyze and discuss common diagnostic challenges, limitations, and potential pitfalls in emergency radiology imaging for traumatic and non-traumatic conditions and develop strategies to improve diagnostic accuracy and patient outcomes.
Dinesh	Chinchure	MBBS,FRCR	1) Understand and differentiate the imaging features of traumatic and non-traumatic conditions commonly encountered in the emergency room. 2) Provide accurate and clinically relevant radiologic reports highlighting critical findings for effective ER management. 3) Exposure to a panel discussion to analyze and discuss common diagnostic challenges, limitations, and potential pitfalls in emergency radiology imaging for traumatic and non-traumatic conditions and develop strategies to improve diagnostic accuracy and patient outcomes.
Alexis	Boscak	MD	1) Understand and differentiate the imaging features of traumatic and non-traumatic conditions commonly encountered in the emergency room. 2) Provide accurate and clinically relevant radiologic reports highlighting critical findings for effective ER management. 3) Exposure to a panel discussion to analyze and discuss common diagnostic challenges, limitations, and potential pitfalls in emergency radiology imaging for traumatic and non-traumatic conditions and develop strategies to improve diagnostic accuracy and patient outcomes.
Mohamed	Rajput	MD	1) Understand and differentiate the imaging features of traumatic and non-traumatic conditions commonly encountered in the emergency room. 2) Provide accurate and clinically relevant radiologic reports highlighting critical findings for effective ER management. 3) Exposure to a panel discussion to analyze and discuss common diagnostic challenges, limitations, and potential pitfalls in emergency radiology imaging for traumatic and non-traumatic conditions and develop strategies to improve diagnostic accuracy and patient outcomes.
Koenraad	Nieboer	MD	1) Recognize key imaging patterns and subtle findings of cervical and thoracolumbar spine fractures on CT. 2) Apply trauma classification principles to distinguish stable from unstable injuries and support clinical decision-making. 3) Understand the role of MRI in assessing spinal cord, ligamentous injury, and prognostic indicators in spinal trauma.

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Ferco	Berger	FRCPC,MD	1) Recognize key imaging patterns and subtle findings of cervical and thoracolumbar spine fractures on CT. 2) Apply trauma classification principles to distinguish stable from unstable injuries and support clinical decision-making. 3) Understand the role of MRI in assessing spinal cord, ligamentous injury, and prognostic indicators in spinal trauma.
David	Timaran Montenegro	MD	1) Recognize key imaging patterns and subtle findings of cervical and thoracolumbar spine fractures on CT. 2) Apply trauma classification principles to distinguish stable from unstable injuries and support clinical decision-making. 3) Understand the role of MRI in assessing spinal cord, ligamentous injury, and prognostic indicators in spinal trauma.
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Gopal	Punjabi	MD	1) Select and optimize multi-energy CT acquisition and reconstruction techniques for advanced emergency department applications across thoracic, abdominal, and musculoskeletal imaging. 2) Utilize material-specific imaging outputs (including iodine quantification and virtual monoenergetic reconstructions) to improve diagnostic certainty in time-critical and diagnostically challenging emergency presentations. 3) Incorporate multi-energy CT into emergency radiology practice to enhance diagnostic confidence and clinical decision-making while maintaining efficiency, and reduce follow-up for incidental findings.
Jeremy	Wortman	MD	1) Select and optimize multi-energy CT acquisition and reconstruction techniques for advanced emergency department applications across thoracic, abdominal, and musculoskeletal imaging. 2) Utilize material-specific imaging outputs (including iodine quantification and virtual monoenergetic reconstructions) to improve diagnostic certainty in time-critical and diagnostically challenging emergency presentations. 3) Incorporate multi-energy CT into emergency radiology practice to enhance diagnostic confidence and clinical decision-making while maintaining efficiency, and reduce follow-up for incidental findings.

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Waleed	Abdellatif	MSc,MD	1) Select and optimize multi-energy CT acquisition and reconstruction techniques for advanced emergency department applications across thoracic, abdominal, and musculoskeletal imaging. 2) Utilize material-specific imaging outputs (including iodine quantification and virtual monoenergetic reconstructions) to improve diagnostic certainty in time-critical and diagnostically challenging emergency presentations. 3) Incorporate multi-energy CT into emergency radiology practice to enhance diagnostic confidence and clinical decision-making while maintaining efficiency, and reduce follow-up for incidental findings.
Fides	Schwartz	MD	1) Select and optimize multi-energy CT acquisition and reconstruction techniques for advanced emergency department applications across thoracic, abdominal, and musculoskeletal imaging. 2) Utilize material-specific imaging outputs (including iodine quantification and virtual monoenergetic reconstructions) to improve diagnostic certainty in time-critical and diagnostically challenging emergency presentations. 3) Incorporate multi-energy CT into emergency radiology practice to enhance diagnostic confidence and clinical decision-making while maintaining efficiency, and reduce follow-up for incidental findings.
Hailey	Rich	MD, MPH	1) Select and optimize multi-energy CT acquisition and reconstruction techniques for advanced emergency department applications across thoracic, abdominal, and musculoskeletal imaging. 2) Utilize material-specific imaging outputs (including iodine quantification and virtual monoenergetic reconstructions) to improve diagnostic certainty in time-critical and diagnostically challenging emergency presentations. 3) Incorporate multi-energy CT into emergency radiology practice to enhance diagnostic confidence and clinical decision-making while maintaining efficiency, and reduce follow-up for incidental findings.

Jennifer	Uyeda	MD	1) Recognize imaging findings of bowel obstruction, detect various causes/etiologies, and assess for the presence of associated complications. 2) Detect various biliary sources of abdominal pain including gallstones, acute cholecystitis, complications of acute cholecystitis, and biliary emergnecies. 3) Detect various acute and emergent gastric conditions responsible for emergency room visits. 4) Review various commonly encountered causes of acute abdominal pain in pregnant patients along with the associated complications as well as less commonly seen causes of abdominal pain in this patient population.
Gayatri	Joshi	MD	1) Recognize imaging findings of bowel obstruction, detect various causes/etiologies, and assess for the presence of associated complications. 2) Detect various biliary sources of abdominal pain including gallstones, acute cholecystitis, complications of acute cholecystitis, and biliary emergnecies. 3) Detect various acute and emergent gastric conditions responsible for emergency room visits. 4) Review various commonly encountered causes of acute abdominal pain in pregnant patients along with the associated complications as well as less commonly seen causes of abdominal pain in this patient population.
Richard	Tsai	MD	1) Recognize imaging findings of bowel obstruction, detect various causes/etiologies, and assess for the presence of associated complications. 2) Detect various biliary sources of abdominal pain including gallstones, acute cholecystitis, complications of acute cholecystitis, and biliary emergnecies. 3) Detect various acute and emergent gastric conditions responsible for emergency room visits. 4) Review various commonly encountered causes of acute abdominal pain in pregnant patients along with the associated complications as well as less commonly seen causes of abdominal pain in this patient population.
Jennifer	Uyeda	MD	1) Recognize imaging findings of bowel obstruction, detect various causes/etiologies, and assess for the presence of associated complications. 2) Detect various biliary sources of abdominal pain including gallstones, acute cholecystitis, complications of acute cholecystitis, and biliary emergnecies. 3) Detect various acute and emergent gastric conditions responsible for emergency room visits. 4) Review various commonly encountered causes of acute abdominal pain in pregnant patients along with the associated complications as well as less commonly seen causes of abdominal pain in this patient population.

Karen	Lee	MD	1) Recognize imaging findings of bowel obstruction, detect various causes/etiologies, and assess for the presence of associated complications. 2) Detect various biliary sources of abdominal pain including gallstones, acute cholecystitis, complications of acute cholecystitis, and biliary emergnecies. 3) Detect various acute and emergent gastric conditions responsible for emergency room visits. 4) Review various commonly encountered causes of acute abdominal pain in pregnant patients along with the associated complications as well as less commonly seen causes of abdominal pain in this patient population.
Vikas	Shah	FRCR,MRCP	1) Recognize imaging findings of bowel obstruction, detect various causes/etiologies, and assess for the presence of associated complications. 2) Detect various biliary sources of abdominal pain including gallstones, acute cholecystitis, complications of acute cholecystitis, and biliary emergnecies. 3) Detect various acute and emergent gastric conditions responsible for emergency room visits. 4) Review various commonly encountered causes of acute abdominal pain in pregnant patients along with the associated complications as well as less commonly seen causes of abdominal pain in this patient population.
Douglas	Katz	MD	1) To review the current role and findings of CT of the acute femaie pelvis. 2) To review the sonographic findings of selected GU emergencies. 3) To overview the imaging findings of complications of GU procedures.
Alba	Pugliesi	MD	1) To review the current role and findings of CT of the acute femaie pelvis. 2) To review the sonographic findings of selected GU emergencies. 3) To overview the imaging findings of complications of GU procedures.
Robin	Levenson	MD	1) To review the current role and findings of CT of the acute femaie pelvis. 2) To review the sonographic findings of selected GU emergencies. 3) To overview the imaging findings of complications of GU procedures.
Douglas	Katz	MD	1) To review the current role and findings of CT of the acute femaie pelvis. 2) To review the sonographic findings of selected GU emergencies. 3) To overview the imaging findings of complications of GU procedures.
Meghan	Lubner	MD	1) To review the current role and findings of CT of the acute femaie pelvis. 2) To review the sonographic findings of selected GU emergencies. 3) To overview the imaging findings of complications of GU procedures.

Krystal	Archer-Arroyo	MD	1) Identify life-threatening cardiovascular and diaphragmatic injuries early and facilitate emergent management. 2) Recognize imaging patterns and common pitfalls for pulmonary contusions and diaphragmatic injuries and apply prognostic information to clinical care. 3) Apply lessons from challenging case discussions to improve diagnostic assessment, operative decision-making, and patient outcomes.
Andrew	Barakat	MD	1) Identify life-threatening cardiovascular and diaphragmatic injuries early and facilitate emergent management. 2) Recognize imaging patterns and common pitfalls for pulmonary contusions and diaphragmatic injuries and apply prognostic information to clinical care. 3) Apply lessons from challenging case discussions to improve diagnostic assessment, operative decision-making, and patient outcomes.
Demetrios	Raptis	MD	1) Identify life-threatening cardiovascular and diaphragmatic injuries early and facilitate emergent management. 2) Recognize imaging patterns and common pitfalls for pulmonary contusions and diaphragmatic injuries and apply prognostic information to clinical care. 3) Apply lessons from challenging case discussions to improve diagnostic assessment, operative decision-making, and patient outcomes.
Nicolas	Murray	FRCPC,MD	1) Identify life-threatening cardiovascular and diaphragmatic injuries early and facilitate emergent management. 2) Recognize imaging patterns and common pitfalls for pulmonary contusions and diaphragmatic injuries and apply prognostic information to clinical care. 3) Apply lessons from challenging case discussions to improve diagnostic assessment, operative decision-making, and patient outcomes.
Kirthi	Sathyakumar	FRCR,MD	1) Identify life-threatening cardiovascular and diaphragmatic injuries early and facilitate emergent management. 2) Recognize imaging patterns and common pitfalls for pulmonary contusions and diaphragmatic injuries and apply prognostic information to clinical care. 3) Apply lessons from challenging case discussions to improve diagnostic assessment, operative decision-making, and patient outcomes.
Sadia	Qamar	MBBS	1) Identify life-threatening cardiovascular and diaphragmatic injuries early and facilitate emergent management. 2) Recognize imaging patterns and common pitfalls for pulmonary contusions and diaphragmatic injuries and apply prognostic information to clinical care. 3) Apply lessons from challenging case discussions to improve diagnostic assessment, operative decision-making, and patient outcomes.

Nupur	Verma	MD	1) Interpret imaging findings and improve diagnostic accuracy in acute nontraumatic thoracic emergencies, including complications in oncologic patients, postsurgical aortic emergencies, and acute occupational lung disease in the emergency setting.
Behrooz	Masuodi	MD	1) Interpret imaging findings and improve diagnostic accuracy in acute nontraumatic thoracic emergencies, including complications in oncologic patients, postsurgical aortic emergencies, and acute occupational lung disease in the emergency setting.
Melissa	Price	MD	1) Interpret imaging findings and improve diagnostic accuracy in acute nontraumatic thoracic emergencies, including complications in oncologic patients, postsurgical aortic emergencies, and acute occupational lung disease in the emergency setting.
Smita	Patel	FRCR,MBBS	1) Interpret imaging findings and improve diagnostic accuracy in acute nontraumatic thoracic emergencies, including complications in oncologic patients, postsurgical aortic emergencies, and acute occupational lung disease in the emergency setting.
Bhavin	Jankharia	MD	1) Interpret imaging findings and improve diagnostic accuracy in acute nontraumatic thoracic emergencies, including complications in oncologic patients, postsurgical aortic emergencies, and acute occupational lung disease in the emergency setting.
Tan-Lucien	Mohammed	MD	1) Interpret imaging findings and improve diagnostic accuracy in acute nontraumatic thoracic emergencies, including complications in oncologic patients, postsurgical aortic emergencies, and acute occupational lung disease in the emergency setting.
Melissa	Davis	MBA,MD	1) Identify emergency radiology workflow and detection tasks where AI assistance has demonstrated benefit. 2) Recognize common failure points when AI is applied in high-acuity settings. 3) Recognize the impact of automation bias and alert fatigue on diagnostic decision-making. 4) Apply principles of human oversight and governance to AI use in emergency practice.
Arjun	Kalyanpur	MD	1) Identify emergency radiology workflow and detection tasks where AI assistance has demonstrated benefit. 2) Recognize common failure points when AI is applied in high-acuity settings. 3) Recognize the impact of automation bias and alert fatigue on diagnostic decision-making. 4) Apply principles of human oversight and governance to AI use in emergency practice.
Melissa	Davis	MBA,MD	1) Identify emergency radiology workflow and detection tasks where AI assistance has demonstrated benefit. 2) Recognize common failure points when AI is applied in high-acuity settings. 3) Recognize the impact of automation bias and alert fatigue on diagnostic decision-making. 4) Apply principles of human oversight and governance to AI use in emergency practice.

David	Dreizin	MD	1) Identify emergency radiology workflow and detection tasks where AI assistance has demonstrated benefit. 2) Recognize common failure points when AI is applied in high-acuity settings. 3) Recognize the impact of automation bias and alert fatigue on diagnostic decision-making. 4) Apply principles of human oversight and governance to AI use in emergency practice.
Anjali	Agrawal	MD	1) Identify emergency radiology workflow and detection tasks where AI assistance has demonstrated benefit. 2) Recognize common failure points when AI is applied in high-acuity settings. 3) Recognize the impact of automation bias and alert fatigue on diagnostic decision-making. 4) Apply principles of human oversight and governance to AI use in emergency practice.
Lee	Myers	MD	1) Recognize subtle imaging findings that indicate instability or high-risk injury in shoulder, hip/pelvic, and knee trauma. 2) Identify occult or unstable injury patterns that may be radiographically subtle. 3) Apply structured search strategies to avoid common diagnostic pitfalls in emergency musculoskeletal imaging. 4) Communicate actionable findings effectively to guide acute management.
Ashish	Patel	MBA,MD	1) Recognize subtle imaging findings that indicate instability or high-risk injury in shoulder, hip/pelvic, and knee trauma. 2) Identify occult or unstable injury patterns that may be radiographically subtle. 3) Apply structured search strategies to avoid common diagnostic pitfalls in emergency musculoskeletal imaging. 4) Communicate actionable findings effectively to guide acute management.
Claire	Sandstrom	MD	1) Recognize subtle imaging findings that indicate instability or high-risk injury in shoulder, hip/pelvic, and knee trauma. 2) Identify occult or unstable injury patterns that may be radiographically subtle. 3) Apply structured search strategies to avoid common diagnostic pitfalls in emergency musculoskeletal imaging. 4) Communicate actionable findings effectively to guide acute management.
Ashwin	Asrani	MD	1) Recognize subtle imaging findings that indicate instability or high-risk injury in shoulder, hip/pelvic, and knee trauma. 2) Identify occult or unstable injury patterns that may be radiographically subtle. 3) Apply structured search strategies to avoid common diagnostic pitfalls in emergency musculoskeletal imaging. 4) Communicate actionable findings effectively to guide acute management.
Ankit Anil	Tandon		1) Recognize subtle imaging findings that indicate instability or high-risk injury in shoulder, hip/pelvic, and knee trauma. 2) Identify occult or unstable injury patterns that may be radiographically subtle. 3) Apply structured search strategies to avoid common diagnostic pitfalls in emergency musculoskeletal imaging. 4) Communicate actionable findings effectively to guide acute management.

Carl	Flink	MD	1) Appreciate the relationship between pelvic fractures and penile injuries. 2) Gain familiarity with the updated renal trauma grading. Correlate imaging findings/grading with key information clinicians need. 3) Understand the appropriate clinical management of various bladder injuries. Gain familiarity with complications of bladder injuries.
Paulina	Cewe Jonsson	MD, PhD	1) Appreciate the relationship between pelvic fractures and penile injuries. 2) Gain familiarity with the updated renal trauma grading. Correlate imaging findings/grading with key information clinicians need. 3) Understand the appropriate clinical management of various bladder injuries. Gain familiarity with complications of bladder injuries.
Carl	Flink	MD	1) Appreciate the relationship between pelvic fractures and penile injuries. 2) Gain familiarity with the updated renal trauma grading. Correlate imaging findings/grading with key information clinicians need. 3) Understand the appropriate clinical management of various bladder injuries. Gain familiarity with complications of bladder injuries.
Sorena	Keihani	MD	1) Appreciate the relationship between pelvic fractures and penile injuries. 2) Gain familiarity with the updated renal trauma grading. Correlate imaging findings/grading with key information clinicians need. 3) Understand the appropriate clinical management of various bladder injuries. Gain familiarity with complications of bladder injuries.
Susan	Cross	MBChB, FRCR	1) Learn about the role of an emergency radiology expert working as a consultant and witness in medicolegal proceedings. Important topics include what to expect when taking a case, standard of care determinations, and how to give effective testimony. 2) Review strategies for optimizing job satisfaction and work-life balance in radiologists, with an emphasis on countering burnout among emergency radiologists. 3) Explain how to build a constructive peer review culture in emergency radiology practice, including methods for identifying diagnostic errors and using peer review data to drive measurable quality improvement.
John	Nazarian	MD	

John	Nazarian	MD	1) Learn about the role of an emergency radiology expert working as a consultant and witness in medicolegal proceedings. Important topics include what to expect when taking a case, standard of care determinations, and how to give effective testimony. 2) Review strategies for optimizing job satisfaction and work-life balance in radiologists, with an emphasis on countering burnout among emergency radiologists. 3) Explain how to build a constructive peer review culture in emergency radiology practice, including methods for identifying diagnostic errors and using peer review data to drive measurable quality improvement.
Michael	Patlas	FRCPC,MD	1) Learn about the role of an emergency radiology expert working as a consultant and witness in medicolegal proceedings. Important topics include what to expect when taking a case, standard of care determinations, and how to give effective testimony. 2) Review strategies for optimizing job satisfaction and work-life balance in radiologists, with an emphasis on countering burnout among emergency radiologists. 3) Explain how to build a constructive peer review culture in emergency radiology practice, including methods for identifying diagnostic errors and using peer review data to drive measurable quality improvement.
Mona	Vakil	MD	1) Learn about the role of an emergency radiology expert working as a consultant and witness in medicolegal proceedings. Important topics include what to expect when taking a case, standard of care determinations, and how to give effective testimony. 2) Review strategies for optimizing job satisfaction and work-life balance in radiologists, with an emphasis on countering burnout among emergency radiologists. 3) Explain how to build a constructive peer review culture in emergency radiology practice, including methods for identifying diagnostic errors and using peer review data to drive measurable quality improvement.
Ellen	Sun	MD	1) Learn about the role of an emergency radiology expert working as a consultant and witness in medicolegal proceedings. Important topics include what to expect when taking a case, standard of care determinations, and how to give effective testimony. 2) Review strategies for optimizing job satisfaction and work-life balance in radiologists, with an emphasis on countering burnout among emergency radiologists. 3) Explain how to build a constructive peer review culture in emergency radiology practice, including methods for identifying diagnostic errors and using peer review data to drive measurable quality improvement.

Sameer	Raniga	FRCR,MD	1) Apply a systematic search pattern when interpreting foot and ankle trauma imaging. 2) Recognize key imaging findings and instability markers in malleolar, talar, calcaneal, Chopart, and Lisfranc injuries. 3) Identify common diagnostic pitfalls that result in missed or delayed injuries. 4) Know when radiographs are inadequate and when to escalate to CT or MRI. 5) Clearly communicate imaging findings that directly guide orthopedic and trauma management.
Rola	Husain	MD	1) Apply a systematic search pattern when interpreting foot and ankle trauma imaging. 2) Recognize key imaging findings and instability markers in malleolar, talar, calcaneal, Chopart, and Lisfranc injuries. 3) Identify common diagnostic pitfalls that result in missed or delayed injuries. 4) Know when radiographs are inadequate and when to escalate to CT or MRI. 5) Clearly communicate imaging findings that directly guide orthopedic and trauma management.
Sameer	Raniga	FRCR,MD	1) Apply a systematic search pattern when interpreting foot and ankle trauma imaging. 2) Recognize key imaging findings and instability markers in malleolar, talar, calcaneal, Chopart, and Lisfranc injuries. 3) Identify common diagnostic pitfalls that result in missed or delayed injuries. 4) Know when radiographs are inadequate and when to escalate to CT or MRI. 5) Clearly communicate imaging findings that directly guide orthopedic and trauma management.
Manickam	Kumaravel	FRCR,MD	1) Apply a systematic search pattern when interpreting foot and ankle trauma imaging. 2) Recognize key imaging findings and instability markers in malleolar, talar, calcaneal, Chopart, and Lisfranc injuries. 3) Identify common diagnostic pitfalls that result in missed or delayed injuries. 4) Know when radiographs are inadequate and when to escalate to CT or MRI. 5) Clearly communicate imaging findings that directly guide orthopedic and trauma management.
Adnan	Sheikh	MD	1) Apply a systematic search pattern when interpreting foot and ankle trauma imaging. 2) Recognize key imaging findings and instability markers in malleolar, talar, calcaneal, Chopart, and Lisfranc injuries. 3) Identify common diagnostic pitfalls that result in missed or delayed injuries. 4) Know when radiographs are inadequate and when to escalate to CT or MRI. 5) Clearly communicate imaging findings that directly guide orthopedic and trauma management.

Susanna	Spence	MD	1) Apply a systematic search pattern when interpreting foot and ankle trauma imaging. 2) Recognize key imaging findings and instability markers in malleolar, talar, calcaneal, Chopart, and Lisfranc injuries. 3) Identify common diagnostic pitfalls that result in missed or delayed injuries. 4) Know when radiographs are inadequate and when to escalate to CT or MRI. 5) Clearly communicate imaging findings that directly guide orthopedic and trauma management.
Summer	Kaplan	MD, MS	1) Explain appropriate use of imaging in pediatric head and neck trauma and review relevant case examples unique to pediatrics. 2) Discuss mechanisms and imaging findings in classic fractures of abuse, using cases to demonstrat both key findings and pitfalls. 3) Explain appropriate use of imaging in pediatric abdominal trauma and review relevant case examples.
Smyrna	Tuburan	MD	1) Explain appropriate use of imaging in pediatric head and neck trauma and review relevant case examples unique to pediatrics. 2) Discuss mechanisms and imaging findings in classic fractures of abuse, using cases to demonstrat both key findings and pitfalls. 3) Explain appropriate use of imaging in pediatric abdominal trauma and review relevant case examples.
David	Mirsky	MD	1) Explain appropriate use of imaging in pediatric head and neck trauma and review relevant case examples unique to pediatrics. 2) Discuss mechanisms and imaging findings in classic fractures of abuse, using cases to demonstrat both key findings and pitfalls. 3) Explain appropriate use of imaging in pediatric abdominal trauma and review relevant case examples.
Samantha	Gerrie	FRCPC,MD	1) Explain appropriate use of imaging in pediatric head and neck trauma and review relevant case examples unique to pediatrics. 2) Discuss mechanisms and imaging findings in classic fractures of abuse, using cases to demonstrat both key findings and pitfalls. 3) Explain appropriate use of imaging in pediatric abdominal trauma and review relevant case examples.
Carlos	Ugas-Charcape	MD	1) Explain appropriate use of imaging in pediatric head and neck trauma and review relevant case examples unique to pediatrics. 2) Discuss mechanisms and imaging findings in classic fractures of abuse, using cases to demonstrat both key findings and pitfalls. 3) Explain appropriate use of imaging in pediatric abdominal trauma and review relevant case examples.
Ferco	Berger	FRCPC,MD	1) To define the role of the imaging departement and its value in the wider hospital, region and broader health care system response to disaster. 2) To understand what changes when disaster strikes and (examples of) things to consider to be well prepared. 3) To explore the value provided by your residency and how to embed it in your disaster preparedness plan.

Wouter	Foppen	MD	1) To define the role of the imaging departement and its value in the wider hospital, region and broader health care system response to disaster. 2) To understand what changes when disaster strikes and (examples of) things to consider to be well prepared. 3) To explore the value provided by your residency and how to embed it in your disaster preparedness plan.
Ronald	Bilow	MD	1) To define the role of the imaging departement and its value in the wider hospital, region and broader health care system response to disaster. 2) To understand what changes when disaster strikes and (examples of) things to consider to be well prepared. 3) To explore the value provided by your residency and how to embed it in your disaster preparedness plan.
Courtney	Orsbon	MD, PhD	1) To define the role of the imaging departement and its value in the wider hospital, region and broader health care system response to disaster. 2) To understand what changes when disaster strikes and (examples of) things to consider to be well prepared. 3) To explore the value provided by your residency and how to embed it in your disaster preparedness plan.
Maartje	Terra		1) To define the role of the imaging departement and its value in the wider hospital, region and broader health care system response to disaster. 2) To understand what changes when disaster strikes and (examples of) things to consider to be well prepared. 3) To explore the value provided by your residency and how to embed it in your disaster preparedness plan.
Vincent	Mellnick	MD	1) Recognize challenging cases in emergency radiology. 2) Generate differential diagnoses when appropriate. 3) Utilize these skills to guide management.
Chenara	Johnson	PhD,MD	1) Recognize challenging cases in emergency radiology. 2) Generate differential diagnoses when appropriate. 3) Utilize these skills to guide management.
Marc	Camacho	MS,MD	1) Recognize challenging cases in emergency radiology. 2) Generate differential diagnoses when appropriate. 3) Utilize these skills to guide management.
Stefania	Romano	MD	1) Recognize challenging cases in emergency radiology. 2) Generate differential diagnoses when appropriate. 3) Utilize these skills to guide management.
Carlos	Torres	MD, FRCPC	1) Recognize challenging cases in emergency radiology. 2) Generate differential diagnoses when appropriate. 3) Utilize these skills to guide management.

Nicholas	Beckmann	MD	1) Recognize challenging cases in emergency radiology. 2) Generate differential diagnoses when appropriate. 3) Utilize these skills to guide management.
Gary	Danton	PhD,MD	1) Recognize pathological findings seen post-mortem that may be different or uncommon in living patients. 2) Recognize findings that are normally observed post mortem and how to distinguish them from pathologies that contribued to death. 3) Understand how post-mortem CT can be used to calculate injury severity score and how this technique can impact the trauma quality program.
Summer	Decker	PhD	1) Recognize pathological findings seen post-mortem that may be different or uncommon in living patients. 2) Recognize findings that are normally observed post mortem and how to distinguish them from pathologies that contribued to death. 3) Understand how post-mortem CT can be used to calculate injury severity score and how this technique can impact the trauma quality program.
Jamie	Elifritz	MD,BS	1) Recognize pathological findings seen post-mortem that may be different or uncommon in living patients. 2) Recognize findings that are normally observed post mortem and how to distinguish them from pathologies that contribued to death. 3) Understand how post-mortem CT can be used to calculate injury severity score and how this technique can impact the trauma quality program.
Michael	Thali	MD	1) Recognize pathological findings seen post-mortem that may be different or uncommon in living patients. 2) Recognize findings that are normally observed post mortem and how to distinguish them from pathologies that contribued to death. 3) Understand how post-mortem CT can be used to calculate injury severity score and how this technique can impact the trauma quality program.
Gary	Danton	PhD,MD	1) Recognize pathological findings seen post-mortem that may be different or uncommon in living patients. 2) Recognize findings that are normally observed post mortem and how to distinguish them from pathologies that contribued to death. 3) Understand how post-mortem CT can be used to calculate injury severity score and how this technique can impact the trauma quality program.
Christina	LeBedis	MS,MD	1) Explore the role of CT, including CT protocols, in the diagnosis of patients who have sustained abdominopelvic trauma specifically with respect to hepatobiliary, pancreatic trauma, splenic trauma, and bowel and mesenteric trauma. 2) Identify key CT imaging findings in these organ injury types through case examples. 3) Discuss the imaging findings crucial to patient triage and management.

Ludo	Beenen	PhD,MD	1) Explore the role of CT, including CT protocols, in the diagnosis of patients who have sustained abdominopelvic trauma specifically with respect to hepatobiliary, pancreatic trauma, splenic trauma, and bowel and mesenteric trauma. 2) Identify key CT imaging findings in these organ injury types through case examples. 3) Discuss the imaging findings crucial to patient triage and management.
Christina	LeBedis	MS,MD	1) Explore the role of CT, including CT protocols, in the diagnosis of patients who have sustained abdominopelvic trauma specifically with respect to hepatobiliary, pancreatic trauma, splenic trauma, and bowel and mesenteric trauma. 2) Identify key CT imaging findings in these organ injury types through case examples. 3) Discuss the imaging findings crucial to patient triage and management.
Alexis	Boscak	MD	1) Explore the role of CT, including CT protocols, in the diagnosis of patients who have sustained abdominopelvic trauma specifically with respect to hepatobiliary, pancreatic trauma, splenic trauma, and bowel and mesenteric trauma. 2) Identify key CT imaging findings in these organ injury types through case examples. 3) Discuss the imaging findings crucial to patient triage and management.
Ludo	Beenen	PhD,MD	1) Explore the role of CT, including CT protocols, in the diagnosis of patients who have sustained abdominopelvic trauma specifically with respect to hepatobiliary, pancreatic trauma, splenic trauma, and bowel and mesenteric trauma. 2) Identify key CT imaging findings in these organ injury types through case examples. 3) Discuss the imaging findings crucial to patient triage and management.
James	Lee	MD	1) Explore the role of CT, including CT protocols, in the diagnosis of patients who have sustained abdominopelvic trauma specifically with respect to hepatobiliary, pancreatic trauma, splenic trauma, and bowel and mesenteric trauma. 2) Identify key CT imaging findings in these organ injury types through case examples. 3) Discuss the imaging findings crucial to patient triage and management.
Douglas	Katz	MD	1) Demonstrate a series of cases demonstrating GI emergencies, including vascular, bowel, pancreas, gallbladder, and miscellaneous abdominal conditions. 2) Briefly review the relevant literature on these disorders.
Douglas	Katz	MD	1) Demonstrate a series of cases demonstrating GI emergencies, including vascular, bowel, pancreas, gallbladder, and miscellaneous abdominal conditions. 2) Briefly review the relevant literature on these disorders.

Federica	Vernuccio	MD	1) Demonstrate a series of cases demonstrating GI emergencies, including vascular, bowel, pancreas, gallbladder, and miscellaneous abdominal conditions. 2) Briefly review the relevant literature on these disorders.
Sowmya	Mahalingam	MBBS,MD	1) Demonstrate a series of cases demonstrating GI emergencies, including vascular, bowel, pancreas, gallbladder, and miscellaneous abdominal conditions. 2) Briefly review the relevant literature on these disorders.
Avinash	Kambadakone	FRCR,MD	1) Demonstrate a series of cases demonstrating GI emergencies, including vascular, bowel, pancreas, gallbladder, and miscellaneous abdominal conditions. 2) Briefly review the relevant literature on these disorders.
Aya	Kamaya	MD	1) Demonstrate a series of cases demonstrating GI emergencies, including vascular, bowel, pancreas, gallbladder, and miscellaneous abdominal conditions. 2) Briefly review the relevant literature on these disorders.
Alessandro	Furlan	MMM,MD	1) Learn the key CT angiographic findings in GI bleeding with recent updates. 2) Recognize the imaging features of bowel ischemia differentiating different etiologies. 3) Identify characteristic findings of intestinal vasculitis. 4) Identify common and uncommon portal vein abormalities. 5) Discuss various infectious and inflammatory GI abnormalities to differntiate from ischemic to neoplastic process.
Michael	Wells	MD	1) Learn the key CT angiographic findings in GI bleeding with recent updates. 2) Recognize the imaging features of bowel ischemia differentiating different etiologies. 3) Identify characteristic findings of intestinal vasculitis. 4) Identify common and uncommon portal vein abormalities. 5) Discuss various infectious and inflammatory GI abnormalities to differntiate from ischemic to neoplastic process.
Maxime	Ronot	PhD,MD	1) Learn the key CT angiographic findings in GI bleeding with recent updates. 2) Recognize the imaging features of bowel ischemia differentiating different etiologies. 3) Identify characteristic findings of intestinal vasculitis. 4) Identify common and uncommon portal vein abormalities. 5) Discuss various infectious and inflammatory GI abnormalities to differntiate from ischemic to neoplastic process.
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Mindy	Horrow	MD	1) Learn the key CT angiographic findings in GI bleeding with recent updates. 2) Recognize the imaging features of bowel ischemia differentiating different etiologies. 3) Identify characteristic findings of intestinal vasculitis. 4) Identify common and uncommon portal vein abormalities. 5) Discuss various infectious and inflammatory GI abnormalities to differntiate from ischemic to neoplastic process.
Kristina	Flicek	MD	1) Learn the key CT angiographic findings in GI bleeding with recent updates. 2) Recognize the imaging features of bowel ischemia differentiating different etiologies. 3) Identify characteristic findings of intestinal vasculitis. 4) Identify common and uncommon portal vein abormalities. 5) Discuss various infectious and inflammatory GI abnormalities to differntiate from ischemic to neoplastic process.
Courtney	Moreno	MD	1) Learn strategies to avoid pitfalls in imaging of the hepatobiliary system, bowel, pancreas, and abdominal vasculature. 2) Identify ways to expand your search pattern to avoid misses.
Musturay	Karcaaltincaba	MD	1) Learn strategies to avoid pitfalls in imaging of the hepatobiliary system, bowel, pancreas, and abdominal vasculature. 2) Identify ways to expand your search pattern to avoid misses.
Courtney	Moreno	MD	1) Learn strategies to avoid pitfalls in imaging of the hepatobiliary system, bowel, pancreas, and abdominal vasculature. 2) Identify ways to expand your search pattern to avoid misses.
Frank	Miller	MD	1) Learn strategies to avoid pitfalls in imaging of the hepatobiliary system, bowel, pancreas, and abdominal vasculature. 2) Identify ways to expand your search pattern to avoid misses.
Luis	Curvo-Semedo	PhD,MD	1) Learn strategies to avoid pitfalls in imaging of the hepatobiliary system, bowel, pancreas, and abdominal vasculature. 2) Identify ways to expand your search pattern to avoid misses.
Jeff	Fidler	MD	1) Describe the imaging diagnosis and staging of cholangiocarcinoma, and apply knowledge of biliary anatomy to accurately assess biliary system disorders. 2) Discuss findings and differential diagnosis of cholangiopathies. 3) Learn the imaging findings of gallbladder polyps and stratify based on SRUS guidelines.
Jeff	Fidler	MD	1) Describe the imaging diagnosis and staging of cholangiocarcinoma, and apply knowledge of biliary anatomy to accurately assess biliary system disorders. 2) Discuss findings and differential diagnosis of cholangiopathies. 3) Learn the imaging findings of gallbladder polyps and stratify based on SRUS guidelines.
Maria Antonietta	Mazzei	MD	1) Describe the imaging diagnosis and staging of cholangiocarcinoma, and apply knowledge of biliary anatomy to accurately assess biliary system disorders. 2) Discuss findings and differential diagnosis of cholangiopathies. 3) Learn the imaging findings of gallbladder polyps and stratify based on SRUS guidelines.

Meghan	Lubner	MD	1) Describe the imaging diagnosis and staging of cholangiocarcinoma, and apply knowledge of biliary anatomy to accurately assess biliary system disorders. 2) Discuss findings and differential diagnosis of cholangiopathies. 3) Learn the imaging findings of gallbladder polyps and stratify based on SRUS guidelines.
Aya	Kamaya	MD	1) Describe the imaging diagnosis and staging of cholangiocarcinoma, and apply knowledge of biliary anatomy to accurately assess biliary system disorders. 2) Discuss findings and differential diagnosis of cholangiopathies. 3) Learn the imaging findings of gallbladder polyps and stratify based on SRUS guidelines.
Jeong Min	Lee	MD, PhD	1) To recognize the imaging findings and pitfalls in the diagnosis of benign, infectous/inflammatory and malignant lesions of liver. 2) To learn the recent updates to LI-RADS.
Frank	Miller	MD	1) To recognize the imaging findings and pitfalls in the diagnosis of benign, infectous/inflammatory and malignant lesions of liver. 2) To learn the recent updates to LI-RADS.
Jeong Min	Lee	MD, PhD	1) To recognize the imaging findings and pitfalls in the diagnosis of benign, infectous/inflammatory and malignant lesions of liver. 2) To learn the recent updates to LI-RADS.
Amir	Borhani	MD	1) To recognize the imaging findings and pitfalls in the diagnosis of benign, infectous/inflammatory and malignant lesions of liver. 2) To learn the recent updates to LI-RADS.
Victoria	Chernyak	MS,MD	1) To recognize the imaging findings and pitfalls in the diagnosis of benign, infectous/inflammatory and malignant lesions of liver. 2) To learn the recent updates to LI-RADS.
Gaiane	Rauch	PhD,MD	1) Learn the surgical perspective of rectal cancer followed by staging of rectal cancer on MRI and evaluate treatment response. 2) Learn about anal cancers and role of imaging in staging.
Scott	Strong		1) Learn the surgical perspective of rectal cancer followed by staging of rectal cancer on MRI and evaluate treatment response. 2) Learn about anal cancers and role of imaging in staging.
Mukesh	Harisinghani	MD	1) Learn the surgical perspective of rectal cancer followed by staging of rectal cancer on MRI and evaluate treatment response. 2) Learn about anal cancers and role of imaging in staging.
Kartik	Jhaveri	FRCPC,MD	1) Learn the surgical perspective of rectal cancer followed by staging of rectal cancer on MRI and evaluate treatment response. 2) Learn about anal cancers and role of imaging in staging.
Gaiane	Rauch	PhD,MD	1) Learn the surgical perspective of rectal cancer followed by staging of rectal cancer on MRI and evaluate treatment response. 2) Learn about anal cancers and role of imaging in staging.
Christine	Menias	MD	1) Recognize imaging findings that reveal common and unusual gastrointestinal, genitourinary, and abdominal solid organ pathologies.

David	DiSantis	MD	1) Recognize imaging findings that reveal common and unusual gastrointestinal, genitourinary, and abdominal solid organ pathologies.
Mauricio	Zapparoli	MSc,MD	1) Recognize imaging findings that reveal common and unusual gastrointestinal, genitourinary, and abdominal solid organ pathologies.
Jordan	LeGout	MD	1) Recognize imaging findings that reveal common and unusual gastrointestinal, genitourinary, and abdominal solid organ pathologies.
Lejla	Aganovic	MD	1) Recognize imaging findings that reveal common and unusual gastrointestinal, genitourinary, and abdominal solid organ pathologies.
Kristen	Olinger	MD	1) Recognize imaging findings that reveal common and unusual gastrointestinal, genitourinary, and abdominal solid organ pathologies.
Richa	Patel	MD	1) Recognize imaging findings that reveal common and unusual gastrointestinal, genitourinary, and abdominal solid organ pathologies.
Raju	Sharma	MD	1) Recognize imaging findings that reveal common and unusual gastrointestinal, genitourinary, and abdominal solid organ pathologies.
Mustafa	Bashir	MD	1) Review the findings which should be reported in patients undergoing evaluation for potential living donor liver transplant. 2) Review the normal appearance of the post- transplant liver and early and late complications. 3) Discuss indications for liver transplantation in patients with non-HCC tumors such as colorectal cancer liver metastases and cholangiocarcinoma. 4) Discuss ischemic including microangiopathic cholangiopathies after transplant.
Justin	Tse	MD	1) Review the findings which should be reported in patients undergoing evaluation for potential living donor liver transplant. 2) Review the normal appearance of the post- transplant liver and early and late complications. 3) Discuss indications for liver transplantation in patients with non-HCC tumors such as colorectal cancer liver metastases and cholangiocarcinoma. 4) Discuss ischemic including microangiopathic cholangiopathies after transplant.

Mustafa	Bashir	MD	1) Review the findings which should be reported in patients undergoing evaluation for potential living donor liver transplant. 2) Review the normal appearance of the post- transplant liver and early and late complications. 3) Discuss indications for liver transplantation in patients with non-HCC tumors such as colorectal cancer liver metastases and cholangiocarcinoma. 4) Discuss ischemic including microangiopathic cholangiopathies after transplant.
Helena	Gabriel	MD	1) Review the findings which should be reported in patients undergoing evaluation for potential living donor liver transplant. 2) Review the normal appearance of the post- transplant liver and early and late complications. 3) Discuss indications for liver transplantation in patients with non-HCC tumors such as colorectal cancer liver metastases and cholangiocarcinoma. 4) Discuss ischemic including microangiopathic cholangiopathies after transplant.
Motoyo	Yano	MD, PhD	1) Review the findings which should be reported in patients undergoing evaluation for potential living donor liver transplant. 2) Review the normal appearance of the post- transplant liver and early and late complications. 3) Discuss indications for liver transplantation in patients with non-HCC tumors such as colorectal cancer liver metastases and cholangiocarcinoma. 4) Discuss ischemic including microangiopathic cholangiopathies after transplant.
Daniel	Souza	MSc,MD	1) Demonstrate proficiency in identifying characteristic imaging features of splenic, peritoneal, appendiceal and mesenteric pathologies using multimodality approaches, including advanced MRI techniques and contrast-enhanced CT protocols. 2) Formulate comprehensive differential diagnoses for complex abdominal imaging findings and apply systematic diagnostic algorithms to challenging cases. 3) Recognize and mitigate common interpretation pitfalls in splenic, peritoneal, appendiceal and mesenteric imaging, implementing quality assurance strategies to reduce diagnostic errors.
Khaled	Elsayes	MD, PhD	1) Demonstrate proficiency in identifying characteristic imaging features of splenic, peritoneal, appendiceal and mesenteric pathologies using multimodality approaches, including advanced MRI techniques and contrast-enhanced CT protocols. 2) Formulate comprehensive differential diagnoses for complex abdominal imaging findings and apply systematic diagnostic algorithms to challenging cases. 3) Recognize and mitigate common interpretation pitfalls in splenic, peritoneal, appendiceal and mesenteric imaging, implementing quality assurance strategies to reduce diagnostic errors.

Vincent	Vandecaveye	MD, PhD	1) Demonstrate proficiency in identifying characteristic imaging features of splenic, peritoneal, appendiceal and mesenteric pathologies using multimodality approaches, including advanced MRI techniques and contrast-enhanced CT protocols. 2) Formulate comprehensive differential diagnoses for complex abdominal imaging findings and apply systematic diagnostic algorithms to challenging cases. 3) Recognize and mitigate common interpretation pitfalls in splenic, peritoneal, appendiceal and mesenteric imaging, implementing quality assurance strategies to reduce diagnostic errors.
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Se Hyung	Kim	PhD,MD	1) Demonstrate proficiency in identifying characteristic imaging features of splenic, peritoneal, appendiceal and mesenteric pathologies using multimodality approaches, including advanced MRI techniques and contrast-enhanced CT protocols. 2) Formulate comprehensive differential diagnoses for complex abdominal imaging findings and apply systematic diagnostic algorithms to challenging cases. 3) Recognize and mitigate common interpretation pitfalls in splenic, peritoneal, appendiceal and mesenteric imaging, implementing quality assurance strategies to reduce diagnostic errors.

Leo	Tsai	MD, PhD	1) Describe the role of advanced imaging biomarkers in the diagnosis and monitoring of oncologic diseases. 2) Recognize common and emerging imaging manifestations of immunotherapy-related complications. 3) Evaluate the use of imaging in planning, guiding, and assessing response to liver-directed therapies. 4) Learn the recent updates to LI-RADS treatment response algorithms.
Vicky	Goh	MBBChir, FRCR	1) Describe the role of advanced imaging biomarkers in the diagnosis and monitoring of oncologic diseases. 2) Recognize common and emerging imaging manifestations of immunotherapy-related complications. 3) Evaluate the use of imaging in planning, guiding, and assessing response to liver-directed therapies. 4) Learn the recent updates to LI-RADS treatment response algorithms.
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Mishal	Mendirattta-Lala	MD	1) Describe the role of advanced imaging biomarkers in the diagnosis and monitoring of oncologic diseases. 2) Recognize common and emerging imaging manifestations of immunotherapy-related complications. 3) Evaluate the use of imaging in planning, guiding, and assessing response to liver-directed therapies. 4) Learn the recent updates to LI-RADS treatment response algorithms.
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Dushyant	Sahani	MD	1) Understand the need for imaging diagnosis in the era of MASLD. 2) Understand the concept of metALD (metabolic and alcohol associated liver disease (metALD) and need for accurate diagnosis. 3) Recognize fat and iron quantification techniques in liver imaging to accurately assess and monitor hepatic steatosis and liver iron overload. 4) Familiarize with new ultrasound, CT and MR quantitative parameters for chronic liver disease. 5) Integrate these advanced imaging techniques into clinical practice to improve the diagnosis and management of patients with diffuse liver diseases.
Claude	Sirlin	MD	1) Understand the need for imaging diagnosis in the era of MASLD. 2) Understand the concept of metALD (metabolic and alcohol associated liver disease (metALD) and need for accurate diagnosis. 3) Recognize fat and iron quantification techniques in liver imaging to accurately assess and monitor hepatic steatosis and liver iron overload. 4) Familiarize with new ultrasound, CT and MR quantitative parameters for chronic liver disease. 5) Integrate these advanced imaging techniques into clinical practice to improve the diagnosis and management of patients with diffuse liver diseases.
Sudhakar	Venkatesh	FRCR,MD	1) Understand the need for imaging diagnosis in the era of MASLD. 2) Understand the concept of metALD (metabolic and alcohol associated liver disease (metALD) and need for accurate diagnosis. 3) Recognize fat and iron quantification techniques in liver imaging to accurately assess and monitor hepatic steatosis and liver iron overload. 4) Familiarize with new ultrasound, CT and MR quantitative parameters for chronic liver disease. 5) Integrate these advanced imaging techniques into clinical practice to improve the diagnosis and management of patients with diffuse liver diseases.
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Richard	Barr	PhD,MD	1) Review the appropriate technique for performing SWE for liver stiffness. 2) Review the appropriate technique for performing liver fat estimation using quantitative ultrasound. 3) Review the literature on the accuracy of SWE and quantitative ultrasound for liver fat quantification. 4) Provide an overview of the basic science of both liver SWE and liver fat using ultrasound.
Richard	Barr	PhD,MD	1) Review the appropriate technique for performing SWE for liver stiffness. 2) Review the appropriate technique for performing liver fat estimation using quantitative ultrasound. 3) Review the literature on the accuracy of SWE and quantitative ultrasound for liver fat quantification. 4) Provide an overview of the basic science of both liver SWE and liver fat using ultrasound.
Giovanna	Ferraioli	MD	1) Review the appropriate technique for performing SWE for liver stiffness. 2) Review the appropriate technique for performing liver fat estimation using quantitative ultrasound. 3) Review the literature on the accuracy of SWE and quantitative ultrasound for liver fat quantification. 4) Provide an overview of the basic science of both liver SWE and liver fat using ultrasound.
Nitin	Chaubal	MD	1) Review the appropriate technique for performing SWE for liver stiffness. 2) Review the appropriate technique for performing liver fat estimation using quantitative ultrasound. 3) Review the literature on the accuracy of SWE and quantitative ultrasound for liver fat quantification. 4) Provide an overview of the basic science of both liver SWE and liver fat using ultrasound.

Rajas	Chaubal	MBBS, MD	1) Review the appropriate technique for performing SWE for liver stiffness. 2) Review the appropriate technique for performing liver fat estimation using quantitative ultrasound. 3) Review the literature on the accuracy of SWE and quantitative ultrasound for liver fat quantification. 4) Provide an overview of the basic science of both liver SWE and liver fat using ultrasound.
Chander	Lulla	MD, MBBS	1) Review the appropriate technique for performing SWE for liver stiffness. 2) Review the appropriate technique for performing liver fat estimation using quantitative ultrasound. 3) Review the literature on the accuracy of SWE and quantitative ultrasound for liver fat quantification. 4) Provide an overview of the basic science of both liver SWE and liver fat using ultrasound.
Jonathan	Dillman	MD, MSc	1) Review the appropriate technique for performing SWE for liver stiffness. 2) Review the appropriate technique for performing liver fat estimation using quantitative ultrasound. 3) Review the literature on the accuracy of SWE and quantitative ultrasound for liver fat quantification. 4) Provide an overview of the basic science of both liver SWE and liver fat using ultrasound.
Vito	Cantisani	PhD,MD	1) Review the appropriate technique for performing SWE for liver stiffness. 2) Review the appropriate technique for performing liver fat estimation using quantitative ultrasound. 3) Review the literature on the accuracy of SWE and quantitative ultrasound for liver fat quantification. 4) Provide an overview of the basic science of both liver SWE and liver fat using ultrasound.
Maija	Radzina	PhD,MD	1) Review the appropriate technique for performing SWE for liver stiffness. 2) Review the appropriate technique for performing liver fat estimation using quantitative ultrasound. 3) Review the literature on the accuracy of SWE and quantitative ultrasound for liver fat quantification. 4) Provide an overview of the basic science of both liver SWE and liver fat using ultrasound.
David	Fetzer	MD	1) Review the appropriate technique for performing SWE for liver stiffness. 2) Review the appropriate technique for performing liver fat estimation using quantitative ultrasound. 3) Review the literature on the accuracy of SWE and quantitative ultrasound for liver fat quantification. 4) Provide an overview of the basic science of both liver SWE and liver fat using ultrasound.
Michelle	Robbin	MD, MS	1) Review the appropriate technique for performing SWE for liver stiffness. 2) Review the appropriate technique for performing liver fat estimation using quantitative ultrasound. 3) Review the literature on the accuracy of SWE and quantitative ultrasound for liver fat quantification. 4) Provide an overview of the basic science of both liver SWE and liver fat using ultrasound.

Adrian	Lim	FRCR,MD	1) Review the appropriate technique for performing SWE for liver stiffness. 2) Review the appropriate technique for performing liver fat estimation using quantitative ultrasound. 3) Review the literature on the accuracy of SWE and quantitative ultrasound for liver fat quantification. 4) Provide an overview of the basic science of both liver SWE and liver fat using ultrasound.
Mirko	D'Onofrio	MD	1) Review the appropriate technique for performing SWE for liver stiffness. 2) Review the appropriate technique for performing liver fat estimation using quantitative ultrasound. 3) Review the literature on the accuracy of SWE and quantitative ultrasound for liver fat quantification. 4) Provide an overview of the basic science of both liver SWE and liver fat using ultrasound.
Arinc	Ozturk	MD	1) Review the appropriate technique for performing SWE for liver stiffness. 2) Review the appropriate technique for performing liver fat estimation using quantitative ultrasound. 3) Review the literature on the accuracy of SWE and quantitative ultrasound for liver fat quantification. 4) Provide an overview of the basic science of both liver SWE and liver fat using ultrasound.
Pal Novak	Kaposi	MD, PhD	1) Review the appropriate technique for performing SWE for liver stiffness. 2) Review the appropriate technique for performing liver fat estimation using quantitative ultrasound. 3) Review the literature on the accuracy of SWE and quantitative ultrasound for liver fat quantification. 4) Provide an overview of the basic science of both liver SWE and liver fat using ultrasound.
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Jing	Gao	MD	1) Review the appropriate technique for performing SWE for liver stiffness. 2) Review the appropriate technique for performing liver fat estimation using quantitative ultrasound. 3) Review the literature on the accuracy of SWE and quantitative ultrasound for liver fat quantification. 4) Provide an overview of the basic science of both liver SWE and liver fat using ultrasound.
Linda	Chu	MD	1) To describe the key updates in the early detection and staging of pancreatic cancer. 2) To explain the current role of imaging in assessment of therapeutic response in pancreatic cancer. 3) To review the current and emerging applications of artificial intelligence in pancreatic cancer. 4) To explain recent advances in pancreatic neuroendocrine tumor imaging. 5) To discuss the imaging manifestations of rare pancreatic neoplasms.

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Marc	Zins	MD	1) Identify and interpret common and critical post-operative imaging findings in gastrointestinal (GI) surgery patients, including expected post-surgical anatomy and common complications such as leaks, obstructions, and abscesses. 2) Utilize a systematic, case-based diagnostic approach to complex post-operative GI imaging, correlating imaging findings with surgical techniques, timelines, and clinical presentation to optimize diagnostic confidence and reporting clarity.

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Shannon	Sheedy	MD	1) Recognize the technical tips and best practices to perform and interpret GI fluoroscopic procedures. 2) Identify characteristic imaging features of gastric tumors and techniques. 3) Identify key imaging features of on CT, MRI, and enterography studies using case-based examples. 4) Learn problem solving techniques for CT Colonography using case-based examples. 5) Imaging based review of pelvic floor conditions with an emphasis on defecatory dysfunction.

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Bari	Dane	MD	1) Incorporate new updates about inflammatory bowel disease imaging, terminology and clinical perspectives into your practice. 2) Analyze the different roles ultrasound, CT enterography and MR enterography play in inflammatory bowel disease imaging. 3) Understand the role of imaging in evaluation of perianal fistulas.
Russell	Cohen	MD	1) Incorporate new updates about inflammatory bowel disease imaging, terminology and clinical perspectives into your practice. 2) Analyze the different roles ultrasound, CT enterography and MR enterography play in inflammatory bowel disease imaging. 3) Understand the role of imaging in evaluation of perianal fistulas.
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Mahmoud	Al-Hawary	MD	1) Compare CT and MRI for the evaluation of incidental renal masses, including diagnostic performance, workflow efficiency, cost, and patient-centered considerations. 2) Critically assess the role of MRI in prostate cancer screening, weighing current evidence, clinical benefits, limitations, and implementation challenges. 3) Apply debate-informed insights to optimize kidney and prostate imaging protocols within diverse practice settings.
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Tharakeswara	Bathala	MD, MS	1) Identify normal prostate zonal anatomy on multiparametric MRI and apply a systematic approach to image review across T2-weighted, diffusion-weighted, and dynamic contrast-enhanced sequences in order to detect and localize suspicious findings. 2) Apply the PI-RADS v2.1 scoring system to categorize prostate lesions by likelihood of clinically significant cancer, distinguishing malignant findings from common benign mimics such as BPH nodules, prostatitis, and imaging artifacts. 3) Generate a structured prostate MRI report that clearly communicates lesion location, size, PI-RADS score, and relevant clinical context to referring urologists and oncologists to support informed biopsy and treatment decisions.

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Sungmin	Woo	PhD,MD	1) Identify normal prostate zonal anatomy on multiparametric MRI and apply a systematic approach to image review across T2-weighted, diffusion-weighted, and dynamic contrast-enhanced sequences in order to detect and localize suspicious findings. 2) Apply the PI-RADS v2.1 scoring system to categorize prostate lesions by likelihood of clinically significant cancer, distinguishing malignant findings from common benign mimics such as BPH nodules, prostatitis, and imaging artifacts. 3) Generate a structured prostate MRI report that clearly communicates lesion location, size, PI-RADS score, and relevant clinical context to referring urologists and oncologists to support informed biopsy and treatment decisions.

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Andrei	Purysko	MD	1) Identify normal prostate zonal anatomy on multiparametric MRI and apply a systematic approach to image review across T2-weighted, diffusion-weighted, and dynamic contrast-enhanced sequences in order to detect and localize suspicious findings. 2) Apply the PI-RADS v2.1 scoring system to categorize prostate lesions by likelihood of clinically significant cancer, distinguishing malignant findings from common benign mimics such as BPH nodules, prostatitis, and imaging artifacts. 3) Generate a structured prostate MRI report that clearly communicates lesion location, size, PI-RADS score, and relevant clinical context to referring urologists and oncologists to support informed biopsy and treatment decisions.

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Katherine	Krajewski	MD	1) Identify imaging features of uncommon pathologic entities of the kidney, prostate and male GU tract. 2) Analyze imaging characteristics to formulate an appropriate differential diagnosis. 3) Understand appropriate management and follow up.
Mauricio	Zapparoli	MSc,MD	1) Identify imaging features of uncommon pathologic entities of the kidney, prostate and male GU tract. 2) Analyze imaging characteristics to formulate an appropriate differential diagnosis. 3) Understand appropriate management and follow up.
Lejla	Aganovic	MD	1) Identify imaging features of uncommon pathologic entities of the kidney, prostate and male GU tract. 2) Analyze imaging characteristics to formulate an appropriate differential diagnosis. 3) Understand appropriate management and follow up.
Justin	Tse	MD	1) Identify imaging features of uncommon pathologic entities of the kidney, prostate and male GU tract. 2) Analyze imaging characteristics to formulate an appropriate differential diagnosis. 3) Understand appropriate management and follow up.
Hiram	Shaish	MD	1) Identify imaging features of uncommon pathologic entities of the kidney, prostate and male GU tract. 2) Analyze imaging characteristics to formulate an appropriate differential diagnosis. 3) Understand appropriate management and follow up.
Antonio	Westphalen	PhD,MD	1) Overview of transition towards peer learning in radiology and overview of common cognitive and system-based biases that contribute to error. 2) Understand common patterns of missed findings and benign vs malignant misinterpretation in GU imaging, and apply strategies to reduce their occurrence in daily practice. 3) Leverage peer-learning approaches and real-time consultation or "second opinion" to improve diagnostic accuracy, confidence, and patient safety.

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Eva Carolina	Serrao	PhD,FRCR	1) Overview of transition towards peer learning in radiology and overview of common cognitive and system-based biases that contribute to error. 2) Understand common patterns of missed findings and benign vs malignant misinterpretation in GU imaging, and apply strategies to reduce their occurrence in daily practice. 3) Leverage peer-learning approaches and real-time consultation or "second opinion" to improve diagnostic accuracy, confidence, and patient safety.
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Grace	Zhu	MD	1) Identify imaging features of common pathologic entities of the bladder, adrenal glands, and retroperitoneum. 2) Analyze imaging characteristics to formulate an appropriate differential diagnosis. 3) Understand appropriate management and follow up.

Lyndon	Luk	MD	1) Identify imaging features of common pathologic entities of the bladder, adrenal glands, and retroperitoneum. 2) Analyze imaging characteristics to formulate an appropriate differential diagnosis. 3) Understand appropriate management and follow up.
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Valeria	Panebianco	MD	1) Identify imaging features of common pathologic entities of the bladder, adrenal glands, and retroperitoneum. 2) Analyze imaging characteristics to formulate an appropriate differential diagnosis. 3) Understand appropriate management and follow up.
Khaled	Elsayes	MD, PhD	1) Identify imaging features of common pathologic entities of the bladder, adrenal glands, and retroperitoneum. 2) Analyze imaging characteristics to formulate an appropriate differential diagnosis. 3) Understand appropriate management and follow up.
Helen	Addley	BMBCh,FRCR	1) Explain updates to contrast reaction management and pre-medication strategies following new consensus guidelines. 2) Discuss novel MRI contrast agents. 3) Review common questions/scenarios related to IV contrast administration. 4) Debate the benefits and drawbacks of gadolinium in GU protocols.
Matthew	Davenport	MBA,MD	1) Explain updates to contrast reaction management and pre-medication strategies following new consensus guidelines. 2) Discuss novel MRI contrast agents. 3) Review common questions/scenarios related to IV contrast administration. 4) Debate the benefits and drawbacks of gadolinium in GU protocols.
Jennifer	Schopp	MD	1) Explain updates to contrast reaction management and pre-medication strategies following new consensus guidelines. 2) Discuss novel MRI contrast agents. 3) Review common questions/scenarios related to IV contrast administration. 4) Debate the benefits and drawbacks of gadolinium in GU protocols.
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Varaha	Tammisetti	MBBS, MD	1) Optimize prostate MRI acquisition protocols—including patient positioning, pulse sequence selection, and integration of AI-assisted algorithms—and adapt these protocols for specific clinical scenarios such as MRI-ultrasound fusion biopsy guidance, surgical and focal therapy planning, and radiotherapy targeting. 2) Apply advanced interpretation skills beyond foundational PI-RADS v2.1 assessment, including serial comparison techniques for active surveillance monitoring, differentiation of post-treatment changes from true recurrence across therapeutic modalities, and evaluation of treatment response using imaging biomarkers. 3) Recognize common diagnostic pitfalls—including malignancy mimics, technical artifacts, and borderline PI-RADS 3 lesion management—and communicate actionable findings effectively to multidisciplinary care teams.

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Atul	Shinagare	MD	1) Approach to evaluation of cystic and solid renal masses using fundamental imaging features to support accurate characterization and risk stratification. 2) Understand the indications for renal mass biopsy. 3) Discuss the role of active surveillance in the management of renal masses.
Shane	Wells	MD	1) Approach to evaluation of cystic and solid renal masses using fundamental imaging features to support accurate characterization and risk stratification. 2) Understand the indications for renal mass biopsy. 3) Discuss the role of active surveillance in the management of renal masses.

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Nicole	Hindman	MD	1) Approach to evaluation of cystic and solid renal masses using fundamental imaging features to support accurate characterization and risk stratification. 2) Understand the indications for renal mass biopsy. 3) Discuss the role of active surveillance in the management of renal masses.
Virginia	Planz	MD	1) Approach to evaluation of cystic and solid renal masses using fundamental imaging features to support accurate characterization and risk stratification. 2) Understand the indications for renal mass biopsy. 3) Discuss the role of active surveillance in the management of renal masses.
Nicola	Schieda	MD	1) Focus on integration of imaging findings with pathologic correlates for common and rare adrenal lesions. 2) Discuss up-to-date algorithm for evaluating incidental adrenal lesions. 3) Review imaging features of adrenal malignancies and subsequent clinical/surgical management. 4) Review indications and technique for adrenal intervention as well as pitfalls and potential complications.
Elaine	Caoili	MD, MS	1) Focus on integration of imaging findings with pathologic correlates for common and rare adrenal lesions. 2) Discuss up-to-date algorithm for evaluating incidental adrenal lesions. 3) Review imaging features of adrenal malignancies and subsequent clinical/surgical management. 4) Review indications and technique for adrenal intervention as well as pitfalls and potential complications.
Myles	Taffel	MD	1) Focus on integration of imaging findings with pathologic correlates for common and rare adrenal lesions. 2) Discuss up-to-date algorithm for evaluating incidental adrenal lesions. 3) Review imaging features of adrenal malignancies and subsequent clinical/surgical management. 4) Review indications and technique for adrenal intervention as well as pitfalls and potential complications.

Erick	Remer	MD	1) Focus on integration of imaging findings with pathologic correlates for common and rare adrenal lesions. 2) Discuss up-to-date algorithm for evaluating incidental adrenal lesions. 3) Review imaging features of adrenal malignancies and subsequent clinical/surgical management. 4) Review indications and technique for adrenal intervention as well as pitfalls and potential complications.
Silvia	Chang	FRCPC,MD	1) Focus on integration of imaging findings with pathologic correlates for common and rare adrenal lesions. 2) Discuss up-to-date algorithm for evaluating incidental adrenal lesions. 3) Review imaging features of adrenal malignancies and subsequent clinical/surgical management. 4) Review indications and technique for adrenal intervention as well as pitfalls and potential complications.
Daniel	Glazer	MD	1) Focus on integration of imaging findings with pathologic correlates for common and rare adrenal lesions. 2) Discuss up-to-date algorithm for evaluating incidental adrenal lesions. 3) Review imaging features of adrenal malignancies and subsequent clinical/surgical management. 4) Review indications and technique for adrenal intervention as well as pitfalls and potential complications.
Fabian	Elsholtz	MD	1) Understand the impact of radiological findings that influence surgical planning, radiation field design, and systemic therapy selection in head and neck cancer. 2) Recognize reporting gaps that may hinder management or delay care. 3) Recognize the importance of clear communication in improving collaboration, efficiency, and patient-centered outcomes in head and neck cancer care.
Paul	Bunch	MD	1) Understand the impact of radiological findings that influence surgical planning, radiation field design, and systemic therapy selection in head and neck cancer. 2) Recognize reporting gaps that may hinder management or delay care. 3) Recognize the importance of clear communication in improving collaboration, efficiency, and patient-centered outcomes in head and neck cancer care.
Jason	Chan	MD	1) Understand the impact of radiological findings that influence surgical planning, radiation field design, and systemic therapy selection in head and neck cancer. 2) Recognize reporting gaps that may hinder management or delay care. 3) Recognize the importance of clear communication in improving collaboration, efficiency, and patient-centered outcomes in head and neck cancer care.

Xin	Wu	MD	1) Understand the impact of radiological findings that influence surgical planning, radiation field design, and systemic therapy selection in head and neck cancer. 2) Recognize reporting gaps that may hinder management or delay care. 3) Recognize the importance of clear communication in improving collaboration, efficiency, and patient-centered outcomes in head and neck cancer care.
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Kim	Learned	MD	1) Understand the impact of radiological findings that influence surgical planning, radiation field design, and systemic therapy selection in head and neck cancer. 2) Recognize reporting gaps that may hinder management or delay care. 3) Recognize the importance of clear communication in improving collaboration, efficiency, and patient-centered outcomes in head and neck cancer care.
Hafiz	Patwa	MD	1) Understand the impact of radiological findings that influence surgical planning, radiation field design, and systemic therapy selection in head and neck cancer. 2) Recognize reporting gaps that may hinder management or delay care. 3) Recognize the importance of clear communication in improving collaboration, efficiency, and patient-centered outcomes in head and neck cancer care.
Kwaku	Obeng	MD	1) Understand how key compartmental anatomy of the orbit, deep face spaces, lower neck, and pharynx/larynx is useful for narrowing differential diagnoses in complex head and neck cases. 2) Distinguish pathologies based on precise anatomic boundaries and patterns of spread. 3) Recognize common pitfalls that arise from inadequate anatomic localization.
Tanya	Rath	MD	1) Understand how key compartmental anatomy of the orbit, deep face spaces, lower neck, and pharynx/larynx is useful for narrowing differential diagnoses in complex head and neck cases. 2) Distinguish pathologies based on precise anatomic boundaries and patterns of spread. 3) Recognize common pitfalls that arise from inadequate anatomic localization.

Karen	Salzman	MD,BS	1) Understand how key compartmental anatomy of the orbit, deep face spaces, lower neck, and pharynx/larynx is useful for narrowing differential diagnoses in complex head and neck cases. 2) Distinguish pathologies based on precise anatomic boundaries and patterns of spread. 3) Recognize common pitfalls that arise from inadequate anatomic localization.
Greg	Avey	MD	1) Understand how key compartmental anatomy of the orbit, deep face spaces, lower neck, and pharynx/larynx is useful for narrowing differential diagnoses in complex head and neck cases. 2) Distinguish pathologies based on precise anatomic boundaries and patterns of spread. 3) Recognize common pitfalls that arise from inadequate anatomic localization.
Valeria	Potigailo	MD	1) Understand how key compartmental anatomy of the orbit, deep face spaces, lower neck, and pharynx/larynx is useful for narrowing differential diagnoses in complex head and neck cases. 2) Distinguish pathologies based on precise anatomic boundaries and patterns of spread. 3) Recognize common pitfalls that arise from inadequate anatomic localization.
Gopi	Nayak	MD	1) Learn expert problem-solving strategies to analyze complex and atypical head and neck imaging cases. 2) Recognize subtle imaging findings that may alter differential diagnosis and management. 3) Understand cognitive biases and interpretive pitfalls that may occur in challenging cases.
C. Douglas	Phillips	MD	1) Learn expert problem-solving strategies to analyze complex and atypical head and neck imaging cases. 2) Recognize subtle imaging findings that may alter differential diagnosis and management. 3) Understand cognitive biases and interpretive pitfalls that may occur in challenging cases.
Tabassum	Kennedy	MD	1) Learn expert problem-solving strategies to analyze complex and atypical head and neck imaging cases. 2) Recognize subtle imaging findings that may alter differential diagnosis and management. 3) Understand cognitive biases and interpretive pitfalls that may occur in challenging cases.
Ashok	Srinivasan	MD	1) Learn expert problem-solving strategies to analyze complex and atypical head and neck imaging cases. 2) Recognize subtle imaging findings that may alter differential diagnosis and management. 3) Understand cognitive biases and interpretive pitfalls that may occur in challenging cases.
Minerva	Becker	MD, PhD	1) Learn expert problem-solving strategies to analyze complex and atypical head and neck imaging cases. 2) Recognize subtle imaging findings that may alter differential diagnosis and management. 3) Understand cognitive biases and interpretive pitfalls that may occur in challenging cases.

Ian	Mark	MD	1) Understand the concept of imaging-based evaluation of extranodal extension (iENE) and the current recommendations for iENE grading. 2) Understand key AJCC9 changes impacting nasopharyngeal, oropharyngeal, and salivary gland tumor staging and the rationales behind them.
Sara	Strauss	MD	1) Understand the concept of imaging-based evaluation of extranodal extension (iENE) and the current recommendations for iENE grading. 2) Understand key AJCC9 changes impacting nasopharyngeal, oropharyngeal, and salivary gland tumor staging and the rationales behind them.
Ann	King	MD	1) Understand the concept of imaging-based evaluation of extranodal extension (iENE) and the current recommendations for iENE grading. 2) Understand key AJCC9 changes impacting nasopharyngeal, oropharyngeal, and salivary gland tumor staging and the rationales behind them.
Katie	Traylor	DO	1) Understand the concept of imaging-based evaluation of extranodal extension (iENE) and the current recommendations for iENE grading. 2) Understand key AJCC9 changes impacting nasopharyngeal, oropharyngeal, and salivary gland tumor staging and the rationales behind them.
Alvand	Hassankhani	MD	1) Understand the concept of imaging-based evaluation of extranodal extension (iENE) and the current recommendations for iENE grading. 2) Understand key AJCC9 changes impacting nasopharyngeal, oropharyngeal, and salivary gland tumor staging and the rationales behind them.
Ryan	Rigsby	MD	1) Understand which cranial neuropathies are associated with symptoms of diplopia/ophthalmoplegia, facial pain, facial paralysis, and dysphagia/hoarseness. 2) Review the relevant cranial nerve anatomy as it pertains to these symptoms. 3) Become familiar with imaging apperarances of typical pathologies that may result in these symptoms.
Burce	Ozgen Mocan	MD	1) Understand which cranial neuropathies are associated with symptoms of diplopia/ophthalmoplegia, facial pain, facial paralysis, and dysphagia/hoarseness. 2) Review the relevant cranial nerve anatomy as it pertains to these symptoms. 3) Become familiar with imaging apperarances of typical pathologies that may result in these symptoms.
Yun Jung	Bae	PhD,MD	1) Understand which cranial neuropathies are associated with symptoms of diplopia/ophthalmoplegia, facial pain, facial paralysis, and dysphagia/hoarseness. 2) Review the relevant cranial nerve anatomy as it pertains to these symptoms. 3) Become familiar with imaging apperarances of typical pathologies that may result in these symptoms.

Stephen	Connor	FRCR,MB ChB	1) Understand which cranial neuropathies are associated with symptoms of diplopia/ophthalmoplegia, facial pain, facial paralysis, and dysphagia/hoarseness. 2) Review the relevant cranial nerve anatomy as it pertains to these symptoms. 3) Become familiar with imaging apperarances of typical pathologies that may result in these symptoms.
Luke	Ledbetter	MD	1) Understand which cranial neuropathies are associated with symptoms of diplopia/ophthalmoplegia, facial pain, facial paralysis, and dysphagia/hoarseness. 2) Review the relevant cranial nerve anatomy as it pertains to these symptoms. 3) Become familiar with imaging apperarances of typical pathologies that may result in these symptoms.
Sara	Tedla	MD	1) Learn to identify imaging features and anatomic clues that help distinguish benign from malignant processes in the orbits and sinonasal cavities, oral cavity, pharynx, larynx, the lower neck, and in pediatric patients. 2) Apply a structured approach to evaluating neck masses to narrow the differential diagnosis.
Bronwyn	Hamilton	MD	1) Learn to identify imaging features and anatomic clues that help distinguish benign from malignant processes in the orbits and sinonasal cavities, oral cavity, pharynx, larynx, the lower neck, and in pediatric patients. 2) Apply a structured approach to evaluating neck masses to narrow the differential diagnosis.
Ashley	Aiken	MD	1) Learn to identify imaging features and anatomic clues that help distinguish benign from malignant processes in the orbits and sinonasal cavities, oral cavity, pharynx, larynx, the lower neck, and in pediatric patients. 2) Apply a structured approach to evaluating neck masses to narrow the differential diagnosis.
Deborah	Shatzkes	MD	1) Learn to identify imaging features and anatomic clues that help distinguish benign from malignant processes in the orbits and sinonasal cavities, oral cavity, pharynx, larynx, the lower neck, and in pediatric patients. 2) Apply a structured approach to evaluating neck masses to narrow the differential diagnosis.
William	O'Brien	DO	1) Learn to identify imaging features and anatomic clues that help distinguish benign from malignant processes in the orbits and sinonasal cavities, oral cavity, pharynx, larynx, the lower neck, and in pediatric patients. 2) Apply a structured approach to evaluating neck masses to narrow the differential diagnosis.

William	Malouf	MD	1) Identify key anatomic variants and critical findings on preoperative imaging for sinus disease that influence surgical planning. 2) Understand imaging findings relevant to preoperative planning for gender-affirming facial surgery. 3) Recognize essential preoperative imaging findings and contraindication to cochlear implantation. 4) Differentiate expected post-treatment changes from complications or recurrent/residual disease in head and neck cancer imaging.
Kalen	Riley	MBA,MD	1) Identify key anatomic variants and critical findings on preoperative imaging for sinus disease that influence surgical planning. 2) Understand imaging findings relevant to preoperative planning for gender-affirming facial surgery. 3) Recognize essential preoperative imaging findings and contraindication to cochlear implantation. 4) Differentiate expected post-treatment changes from complications or recurrent/residual disease in head and neck cancer imaging.
Mari	Hagiwara	MD	1) Identify key anatomic variants and critical findings on preoperative imaging for sinus disease that influence surgical planning. 2) Understand imaging findings relevant to preoperative planning for gender-affirming facial surgery. 3) Recognize essential preoperative imaging findings and contraindication to cochlear implantation. 4) Differentiate expected post-treatment changes from complications or recurrent/residual disease in head and neck cancer imaging.
Gul	Moonis	MD	1) Identify key anatomic variants and critical findings on preoperative imaging for sinus disease that influence surgical planning. 2) Understand imaging findings relevant to preoperative planning for gender-affirming facial surgery. 3) Recognize essential preoperative imaging findings and contraindication to cochlear implantation. 4) Differentiate expected post-treatment changes from complications or recurrent/residual disease in head and neck cancer imaging.
Yoshimi	Anzai	MPH,MD	1) Identify key anatomic variants and critical findings on preoperative imaging for sinus disease that influence surgical planning. 2) Understand imaging findings relevant to preoperative planning for gender-affirming facial surgery. 3) Recognize essential preoperative imaging findings and contraindication to cochlear implantation. 4) Differentiate expected post-treatment changes from complications or recurrent/residual disease in head and neck cancer imaging.

Brent	Weinberg	PhD,MD	1) Understand imaging protocols and normal features of TMJ MRI, skull base MR/CT cisternography, spinal MRA, and brachial plexus neurography. 2) Understand anatomy relevant to accurate interpretation of each study type. 3) Apply systematic search patterns to improve efficiency and diagnostic confidence for each study type.
Osamu	Sakai	PhD,MD	1) Understand imaging protocols and normal features of TMJ MRI, skull base MR/CT cisternography, spinal MRA, and brachial plexus neurography. 2) Understand anatomy relevant to accurate interpretation of each study type. 3) Apply systematic search patterns to improve efficiency and diagnostic confidence for each study type.
Kristen	Baugnon	MD	1) Understand imaging protocols and normal features of TMJ MRI, skull base MR/CT cisternography, spinal MRA, and brachial plexus neurography. 2) Understand anatomy relevant to accurate interpretation of each study type. 3) Apply systematic search patterns to improve efficiency and diagnostic confidence for each study type.
Vinil	Shah	MD	1) Understand imaging protocols and normal features of TMJ MRI, skull base MR/CT cisternography, spinal MRA, and brachial plexus neurography. 2) Understand anatomy relevant to accurate interpretation of each study type. 3) Apply systematic search patterns to improve efficiency and diagnostic confidence for each study type.
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Rafael Maffei	Loureiro	MD	1) Review anatomy of the anterior, central, and lateral/posterior skull base as seen on CT and MRI. 2) Recognize common pathologies affecting each skull base region and their characteristic imaging features. 3) Understand developmental anatomy and common pediatric skull base pathologies to avoid misinterpretation.
Nicholas	Koontz	MD	1) Review anatomy of the anterior, central, and lateral/posterior skull base as seen on CT and MRI. 2) Recognize common pathologies affecting each skull base region and their characteristic imaging features. 3) Understand developmental anatomy and common pediatric skull base pathologies to avoid misinterpretation.

Jennifer	Becker	FRCR,BMBS	1) Review anatomy of the anterior, central, and lateral/posterior skull base as seen on CT and MRI. 2) Recognize common pathologies affecting each skull base region and their characteristic imaging features. 3) Understand developmental anatomy and common pediatric skull base pathologies to avoid misinterpretation.
Katherine	Reinshagen	FRCPC,MD	1) Review anatomy of the anterior, central, and lateral/posterior skull base as seen on CT and MRI. 2) Recognize common pathologies affecting each skull base region and their characteristic imaging features. 3) Understand developmental anatomy and common pediatric skull base pathologies to avoid misinterpretation.
Karen	Moeller	MD	1) Review anatomy of the anterior, central, and lateral/posterior skull base as seen on CT and MRI. 2) Recognize common pathologies affecting each skull base region and their characteristic imaging features. 3) Understand developmental anatomy and common pediatric skull base pathologies to avoid misinterpretation.
Susana	Calle	MD	1) Identify key imaging features of acute facial trauma and related complications. 2) Recognize urgent sinonasal, temporal bone, and skull base pathologies requiring immediate attention. 3) Evaluate lower face and neck emergencies with an emphasis on airway and vascular compromise. 4) Understand unique imaging considerations in pediatric head and neck emergencies.
Salman	Qureshi	MBChB	1) Identify key imaging features of acute facial trauma and related complications. 2) Recognize urgent sinonasal, temporal bone, and skull base pathologies requiring immediate attention. 3) Evaluate lower face and neck emergencies with an emphasis on airway and vascular compromise. 4) Understand unique imaging considerations in pediatric head and neck emergencies.
Jussi	Hirvonen	PhD,MD	1) Identify key imaging features of acute facial trauma and related complications. 2) Recognize urgent sinonasal, temporal bone, and skull base pathologies requiring immediate attention. 3) Evaluate lower face and neck emergencies with an emphasis on airway and vascular compromise. 4) Understand unique imaging considerations in pediatric head and neck emergencies.
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Elizabeth	Loney		1) Identify key imaging features of acute facial trauma and related complications. 2) Recognize urgent sinonasal, temporal bone, and skull base pathologies requiring immediate attention. 3) Evaluate lower face and neck emergencies with an emphasis on airway and vascular compromise. 4) Understand unique imaging considerations in pediatric head and neck emergencies.
Amanda	Aguilera	MD	1) Understand imaging appearance of common pathologies causing acquired conductive hearing loss, acquired sensorineural hearing loss, congenital hearing loss, and vertigo. 2) Gain symptom-based localization strategies to improve diagnostic accuracy.
Francis	Deng	MD	1) Understand imaging appearance of common pathologies causing acquired conductive hearing loss, acquired sensorineural hearing loss, congenital hearing loss, and vertigo. 2) Gain symptom-based localization strategies to improve diagnostic accuracy.
David	Zander	MD	1) Understand imaging appearance of common pathologies causing acquired conductive hearing loss, acquired sensorineural hearing loss, congenital hearing loss, and vertigo. 2) Gain symptom-based localization strategies to improve diagnostic accuracy.
Alexandra	Foust	DO	1) Understand imaging appearance of common pathologies causing acquired conductive hearing loss, acquired sensorineural hearing loss, congenital hearing loss, and vertigo. 2) Gain symptom-based localization strategies to improve diagnostic accuracy.
Jan	Casselman	PhD,MD	1) Understand imaging appearance of common pathologies causing acquired conductive hearing loss, acquired sensorineural hearing loss, congenital hearing loss, and vertigo. 2) Gain symptom-based localization strategies to improve diagnostic accuracy.
Imon	Banerjee	PhD	
Pallavi	Tiwari	PhD	
Pascal	Baltzer	MD	
Kenneth	Wang	PhD,MD	
Kayhan	Batmanghelich	PhD	
Judy	Gichoya	MS,MBChB	1) Define what a foundation model is in the context of radiology. 2) Differentiate foundation models from traditional machine learning models. 3) Describe the key mechanisms underlying how foundation models work. 4) Identify the main types of foundation models and their applications. 5) Apply a foundation model to a set of defined tasks using a hands-on coding notebook.

Seyed Mohammadreza	Chavoshi	MD	1) Define what a foundation model is in the context of radiology. 2) Differentiate foundation models from traditional machine learning models. 3) Describe the key mechanisms underlying how foundation models work. 4) Identify the main types of foundation models and their applications. 5) Apply a foundation model to a set of defined tasks using a hands-on coding notebook.
Frank	Li	PhD	1) Define what a foundation model is in the context of radiology. 2) Differentiate foundation models from traditional machine learning models. 3) Describe the key mechanisms underlying how foundation models work. 4) Identify the main types of foundation models and their applications. 5) Apply a foundation model to a set of defined tasks using a hands-on coding notebook.
Shahriar	Faghani	MD	1) Define the key criteria that determine whether an AI model is ready for real-world clinical deployment beyond research performance metrics. 2) Distinguish between internal validation performance and true generalizability across diverse clinical settings. 3) Describe frameworks for evaluating uncertainty quantification, safety, and workflow integration of AI tools. 4) Identify common pitfalls and failure modes that arise when transitioning AI models from research to clinical practice. 5) Apply a structured evaluation checklist to assess the deployment readiness of an AI model using a hands-on case scenario.
Mana	Moassefi	MD	1) Define the key criteria that determine whether an AI model is ready for real-world clinical deployment beyond research performance metrics. 2) Distinguish between internal validation performance and true generalizability across diverse clinical settings. 3) Describe frameworks for evaluating uncertainty quantification, safety, and workflow integration of AI tools. 4) Identify common pitfalls and failure modes that arise when transitioning AI models from research to clinical practice. 5) Apply a structured evaluation checklist to assess the deployment readiness of an AI model using a hands-on case scenario.
Tugba	Akinci D'Antonoli	MD	1) Explain how AI behaves in radiology and recognize common failure modes. 2) Identify clinical use cases where AI delivers meaningful value. 3) Make informed decisions about adopting AI in radiology practice.
Jaron	Chong	MD	1) Explain how AI behaves in radiology and recognize common failure modes. 2) Identify clinical use cases where AI delivers meaningful value. 3) Make informed decisions about adopting AI in radiology practice.
Stacy	O'Connor	MPH,MD	1) Explain how AI behaves in radiology and recognize common failure modes. 2) Identify clinical use cases where AI delivers meaningful value. 3) Make informed decisions about adopting AI in radiology practice.

Ali	Tejani	MD	1) Explain how AI behaves in radiology and recognize common failure modes. 2) Identify clinical use cases where AI delivers meaningful value. 3) Make informed decisions about adopting AI in radiology practice.
Errol	Colak	MD	1) Evaluate AI tools for purchase using practical clinical and operational criteria. 2) Describe key steps and challenges in implementing AI in radiology practice. 3) Apply principles for safe and responsible clinical use of AI.
John	Mongan	MD, PhD	1) Evaluate AI tools for purchase using practical clinical and operational criteria. 2) Describe key steps and challenges in implementing AI in radiology practice. 3) Apply principles for safe and responsible clinical use of AI.
Leonardo	Bittencourt	PhD,MD	1) Evaluate AI tools for purchase using practical clinical and operational criteria. 2) Describe key steps and challenges in implementing AI in radiology practice. 3) Apply principles for safe and responsible clinical use of AI.
Merel	Huisman	PhD,MD	1) Evaluate AI tools for purchase using practical clinical and operational criteria. 2) Describe key steps and challenges in implementing AI in radiology practice. 3) Apply principles for safe and responsible clinical use of AI.
George	Shih	MS,MD	1) Monitor AI performance safely over time in clinical practice. 2) Recognize and respond to AI failures to mitigate clinical risk. 3) Lead and sustain effective AI programs in radiology.
Lisa	Adams	PhD,MD	1) Monitor AI performance safely over time in clinical practice. 2) Recognize and respond to AI failures to mitigate clinical risk. 3) Lead and sustain effective AI programs in radiology.
Po-Hao	Chen	MD, MBA	1) Monitor AI performance safely over time in clinical practice. 2) Recognize and respond to AI failures to mitigate clinical risk. 3) Lead and sustain effective AI programs in radiology.
Adam	Flanders	MD	1) Monitor AI performance safely over time in clinical practice. 2) Recognize and respond to AI failures to mitigate clinical risk. 3) Lead and sustain effective AI programs in radiology.
Ayis	Pyrros	MD	1) Apply a structured procurement framework to evaluate radiology AI vendors, including red flags in RFPs and contract terms.2) Describe what payers require to grant coverage for an AI tool, beyond CPT-code creation.3) Compare US, European, and Middle East reimbursement and pricing models for radiology AI. 4) Evaluate how agentic AI changes per-scan pricing models and assess implications for practice ROI.

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Martha	Menchaca	PhD,MD	1) To understand how to build accurate AI algorithms where the data must be accurate and personalized for each subpopulaiton. Research must move beyond, or deeply integrate, standard demographic data with SDoH—such as housing stability, education, and neighborhood environmentn factors (zipcodes,etc) that contribute to addressing the root causes of health disparities. 2) How to build AI-driven imaging solutions for children requires specialized models that account for developmental anatomy, as adult-trained AI often fails on pediatric data. Key learnings emphasize accelerating imaging, reducing radiation exposure, augmenting diagnostic precision in oncology/neuroimaging, and automating routine workflows to improve care, while strictly requiring age-specific, curated datasets. 3) How to build equitable datasets in an intentional process that shifts from merely collecting large amounts of data to collecting representative and meaningful data. It aims to counteract historic systemic biases, improve model performance for underrepresented groups, and ensure that data-driven decisions do not perpetuate inequities. 4) Understanding how open data serves as a powerful antidote to "Garbage-In-Garbage-Out" (GIGO) models by providing high-quality, diverse, and well-documented datasets that improve AI training, accuracy, and reliability. Leveraging open data and open-source validation tools allows organizations to shift from simply cleaning data to proactively building trustworthy, transparent data pipelines

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Udunna	Anazodo	PhD	1) To understand how to build accurate AI algorithms where the data must be accurate and personalized for each subpopulaiton. Research must move beyond, or deeply integrate, standard demographic data with SDoH—such as housing stability, education, and neighborhood environmentn factors (zipcodes,etc) that contribute to addressing the root causes of health disparities. 2) How to build AI-driven imaging solutions for children requires specialized models that account for developmental anatomy, as adult-trained AI often fails on pediatric data. Key learnings emphasize accelerating imaging, reducing radiation exposure, augmenting diagnostic precision in oncology/neuroimaging, and automating routine workflows to improve care, while strictly requiring age-specific, curated datasets. 3) How to build equitable datasets in an intentional process that shifts from merely collecting large amounts of data to collecting representative and meaningful data. It aims to counteract historic systemic biases, improve model performance for underrepresented groups, and ensure that data-driven decisions do not perpetuate inequities. 4) Understanding how open data serves as a powerful antidote to "Garbage-In-Garbage-Out" (GIGO) models by providing high-quality, diverse, and well-documented datasets that improve AI training, accuracy, and reliability. Leveraging open data and open-source validation tools allows organizations to shift from simply cleaning data to proactively building trustworthy, transparent data pipelines
Surbhi	Raichandani	MD	1) Evaluate competing perspectives on the clinical readiness, safety, and reliability of advanced AI approaches, such as foundation models and agentic AI, for use in medical imaging workflows. 2) Distinguish the potential benefits and risks of increasing automation in radiology, including the implications for human oversight, professional responsibility, and liability as AI systems become more autonomous. 3) Assess current and emerging federal and state policy approaches to regulating AI in medicine and consider how different regulatory and governance frameworks may influence adoption, accountability, and innovation in medical imaging.

Ronald	Summers	PhD,MD	1) Evaluate competing perspectives on the clinical readiness, safety, and reliability of advanced AI approaches, such as foundation models and agentic AI, for use in medical imaging workflows. 2) Distinguish the potential benefits and risks of increasing automation in radiology, including the implications for human oversight, professional responsibility, and liability as AI systems become more autonomous. 3) Assess current and emerging federal and state policy approaches to regulating AI in medicine and consider how different regulatory and governance frameworks may influence adoption, accountability, and innovation in medical imaging.
Woojin	Kim	MD	1) Evaluate competing perspectives on the clinical readiness, safety, and reliability of advanced AI approaches, such as foundation models and agentic AI, for use in medical imaging workflows. 2) Distinguish the potential benefits and risks of increasing automation in radiology, including the implications for human oversight, professional responsibility, and liability as AI systems become more autonomous. 3) Assess current and emerging federal and state policy approaches to regulating AI in medicine and consider how different regulatory and governance frameworks may influence adoption, accountability, and innovation in medical imaging.
Florence	Doo	MA,MD	1) Evaluate competing perspectives on the clinical readiness, safety, and reliability of advanced AI approaches, such as foundation models and agentic AI, for use in medical imaging workflows. 2) Distinguish the potential benefits and risks of increasing automation in radiology, including the implications for human oversight, professional responsibility, and liability as AI systems become more autonomous. 3) Assess current and emerging federal and state policy approaches to regulating AI in medicine and consider how different regulatory and governance frameworks may influence adoption, accountability, and innovation in medical imaging.
Shinjini	Kundu	PhD,MD	1) Evaluate competing perspectives on the clinical readiness, safety, and reliability of advanced AI approaches, such as foundation models and agentic AI, for use in medical imaging workflows. 2) Distinguish the potential benefits and risks of increasing automation in radiology, including the implications for human oversight, professional responsibility, and liability as AI systems become more autonomous. 3) Assess current and emerging federal and state policy approaches to regulating AI in medicine and consider how different regulatory and governance frameworks may influence adoption, accountability, and innovation in medical imaging.

David	Ballard	MD	1) Describe common organizational models for 3D printing programs within radiology and associated institutional tradeoffs. 2) Evaluate the opportunity cost and workflow implications of radiologist involvement in 3D printing activities. 3) Identify scenarios where digital advanced visualization and quantitative imaging solutions may replace or complement physical 3D printing. 4) Discuss strategies for integrating 3D printing into broader advanced visualization, segmentation, and quantitative imaging frameworks in radiology.
Summer	Decker	PhD	1) Describe common organizational models for 3D printing programs within radiology and associated institutional tradeoffs. 2) Evaluate the opportunity cost and workflow implications of radiologist involvement in 3D printing activities. 3) Identify scenarios where digital advanced visualization and quantitative imaging solutions may replace or complement physical 3D printing. 4) Discuss strategies for integrating 3D printing into broader advanced visualization, segmentation, and quantitative imaging frameworks in radiology.
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Justin	Ryan	PhD	1) Describe common organizational models for 3D printing programs within radiology and associated institutional tradeoffs. 2) Evaluate the opportunity cost and workflow implications of radiologist involvement in 3D printing activities. 3) Identify scenarios where digital advanced visualization and quantitative imaging solutions may replace or complement physical 3D printing. 4) Discuss strategies for integrating 3D printing into broader advanced visualization, segmentation, and quantitative imaging frameworks in radiology.

Lumarie	Santiago	MD	1) Describe common organizational models for 3D printing programs within radiology and associated institutional tradeoffs. 2) Evaluate the opportunity cost and workflow implications of radiologist involvement in 3D printing activities. 3) Identify scenarios where digital advanced visualization and quantitative imaging solutions may replace or complement physical 3D printing. 4) Discuss strategies for integrating 3D printing into broader advanced visualization, segmentation, and quantitative imaging frameworks in radiology.
Sujaya	Rao	MS	1) Describe common organizational models for 3D printing programs within radiology and associated institutional tradeoffs. 2) Evaluate the opportunity cost and workflow implications of radiologist involvement in 3D printing activities. 3) Identify scenarios where digital advanced visualization and quantitative imaging solutions may replace or complement physical 3D printing. 4) Discuss strategies for integrating 3D printing into broader advanced visualization, segmentation, and quantitative imaging frameworks in radiology.
Jonathan	Morris	MD	1) Describe common organizational models for 3D printing programs within radiology and associated institutional tradeoffs. 2) Evaluate the opportunity cost and workflow implications of radiologist involvement in 3D printing activities. 3) Identify scenarios where digital advanced visualization and quantitative imaging solutions may replace or complement physical 3D printing. 4) Discuss strategies for integrating 3D printing into broader advanced visualization, segmentation, and quantitative imaging frameworks in radiology.
Stella	Kang	MD, MSc	1) Identify meaningful metrics to evaluate the impact of noninterpretive AI. 2) Recognize operational and human factors that affect AI adoption. 3) Apply strategies to align AI initiatives with organizational goals and mission.
David	Larson	MBA,MD	1) Identify meaningful metrics to evaluate the impact of noninterpretive AI. 2) Recognize operational and human factors that affect AI adoption. 3) Apply strategies to align AI initiatives with organizational goals and mission.
Ankur	Doshi	MD	1) Identify meaningful metrics to evaluate the impact of noninterpretive AI. 2) Recognize operational and human factors that affect AI adoption. 3) Apply strategies to align AI initiatives with organizational goals and mission.

Stella	Kang	MD, MSc	1) Identify meaningful metrics to evaluate the impact of noninterpretive AI. 2) Recognize operational and human factors that affect AI adoption. 3) Apply strategies to align AI initiatives with organizational goals and mission.
Stacy	O'Connor	MPH,MD	1) Identify meaningful metrics to evaluate the impact of noninterpretive AI. 2) Recognize operational and human factors that affect AI adoption. 3) Apply strategies to align AI initiatives with organizational goals and mission.
Gloria	Hwang	MD	1) Describe effective AI governance structures that support safe, high value adoption. 2) Apply process based approaches to evaluate and implement AI in clinical radiology. 3) Integrate post deployment AI monitoring into existing quality improvement programs.
Marta	Heilbrun	MS,MD	1) Describe effective AI governance structures that support safe, high value adoption. 2) Apply process based approaches to evaluate and implement AI in clinical radiology. 3) Integrate post deployment AI monitoring into existing quality improvement programs.
Tessa	Cook	MD, PhD	1) Describe effective AI governance structures that support safe, high value adoption. 2) Apply process based approaches to evaluate and implement AI in clinical radiology. 3) Integrate post deployment AI monitoring into existing quality improvement programs.
Shlomit	Goldberg-Stein	MD	1) Describe effective AI governance structures that support safe, high value adoption. 2) Apply process based approaches to evaluate and implement AI in clinical radiology. 3) Integrate post deployment AI monitoring into existing quality improvement programs.
Jason	Poff	MD	1) Describe effective AI governance structures that support safe, high value adoption. 2) Apply process based approaches to evaluate and implement AI in clinical radiology. 3) Integrate post deployment AI monitoring into existing quality improvement programs.

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Bardia	Khosravi	MPH,MD	1) Define what AI agents are and distinguish them from standard large language models (LLMs). 2) Explain core agent concepts including tool calling and context definition. 3) Build a functional AI agent using a no-code platform. 4) Build a functional AI agent using a low-code framework (Pydantic AI).
Vera	Sorin	MD	1) Define what AI agents are and distinguish them from standard large language models (LLMs). 2) Explain core agent concepts including tool calling and context definition. 3) Build a functional AI agent using a no-code platform. 4) Build a functional AI agent using a low-code framework (Pydantic AI).
Amirali	Khosravi	MD	1) Define what AI agents are and distinguish them from standard large language models (LLMs). 2) Explain core agent concepts including tool calling and context definition. 3) Build a functional AI agent using a no-code platform. 4) Build a functional AI agent using a low-code framework (Pydantic AI).
Namita	Gandhi	MSc,MD	1) This course will provide participants with a practical, end to end understanding of how informatics standards position radiology at the center of care by enabling scalable, interoperable, and trustworthy data exchange. Using the Formula 1 analogy, learners will connect the “blueprint” of semantic standards (e.g., Common Data Elements, RadLex, and AI model cards) with the “powertrain” of transport standards (DICOM, HL7, FHIR) and the “pit crew playbook” of real world implementation frameworks (like IHE profiles). 2) By the end of the course, attendees will be able to describe how these complementary standards fit together, explain their roles in supporting high performance clinical workflows and AI integration, and identify practical strategies to deploy standards based technology effectively within their organizations to deliver patient centered care.

Audrey	Verde	MD, PhD	1) This course will provide participants with a practical, end to end understanding of how informatics standards position radiology at the center of care by enabling scalable, interoperable, and trustworthy data exchange. Using the Formula 1 analogy, learners will connect the “blueprint” of semantic standards (e.g., Common Data Elements, RadLex, and AI model cards) with the “powertrain” of transport standards (DICOM, HL7, FHIR) and the “pit crew playbook” of real world implementation frameworks (like IHE profiles). 2) By the end of the course, attendees will be able to describe how these complementary standards fit together, explain their roles in supporting high performance clinical workflows and AI integration, and identify practical strategies to deploy standards based technology effectively within their organizations to deliver patient centered care.
Kevin	O'Donnell		1) This course will provide participants with a practical, end to end understanding of how informatics standards position radiology at the center of care by enabling scalable, interoperable, and trustworthy data exchange. Using the Formula 1 analogy, learners will connect the “blueprint” of semantic standards (e.g., Common Data Elements, RadLex, and AI model cards) with the “powertrain” of transport standards (DICOM, HL7, FHIR) and the “pit crew playbook” of real world implementation frameworks (like IHE profiles). 2) By the end of the course, attendees will be able to describe how these complementary standards fit together, explain their roles in supporting high performance clinical workflows and AI integration, and identify practical strategies to deploy standards based technology effectively within their organizations to deliver patient centered care.
Pouria	Rouzrokh	MPH,MD	1) Define what multi-agent AI frameworks are and explain their relevance to current AI workflows. 2) Describe how multiple specialized agents collaborate to leverage task-specific expertise and diverse perspectives. 3) Implement a multi-agent system using a straightforward coding framework (Pydantic AI). 4) Deploy and connect LLM-based agents to one another to accomplish a defined task.
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Weijie	Chen	
William	Hsu	PhD
Akshay	Chaudhari	PhD
Hannah	Milch	MD
Axel	Wismuller	PhD,MD
Nina	Kottler	MS,MD
Linda	Moy	MD
Pranav	Rajpurkar	PhD
Grayson	Baird	PhD, MS
Jonathan	Huang	PhD
John	Garrett	PhD
Dania	Daye	PhD,MD

Michael	Recht	MD	
Jason	Poff	MD	
Mitchell	Schnall	MD, PhD	
Tugba	Akinci D'Antonoli	MD	1) Explain core principles of prompt engineering and how structured natural language inputs influence LLM outputs in application development contexts. 2) Describe the “vibe coding” paradigm and its relevance for rapid prototyping of radiology tools without traditional programming experience. 3) Develop basic AI-assisted radiology applications by translating clinical or workflow use cases into functional prompts and generated code. 4) Evaluate practical considerations including usability, data sensitivity, and workflow integration when deploying LLM-generated solutions in radiology settings.
Walter	Wiggins	PhD,MD	1) Explain core principles of prompt engineering and how structured natural language inputs influence LLM outputs in application development contexts. 2) Describe the “vibe coding” paradigm and its relevance for rapid prototyping of radiology tools without traditional programming experience. 3) Develop basic AI-assisted radiology applications by translating clinical or workflow use cases into functional prompts and generated code. 4) Evaluate practical considerations including usability, data sensitivity, and workflow integration when deploying LLM-generated solutions in radiology settings.
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Dania	Daye	PhD,MD	
Curtis	Langlotz	PhD,MD	
Nina	Kottler	MS,MD	
Farouk	Dako	MD, MPH	
Merel	Huisman	PhD,MD	
Rory	Pilgrim	BEng	1) Demonstrate how to adapt and deploy open-weight, pre-trained radiology-specific AI models using public datasets and Colab notebooks. 2) Evaluate the impact of training data curation, validation strategies, and operating point selection on model performance and generalizability across clinical use cases.
Jason	Klotzer		1) Demonstrate how to adapt and deploy open-weight, pre-trained radiology-specific AI models using public datasets and Colab notebooks. 2) Evaluate the impact of training data curation, validation strategies, and operating point selection on model performance and generalizability across clinical use cases.
Benoit	Desjardins	PhD,MD	
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Po-Hao	Chen	MD, MBA	
Kristen	DeStigter	MD	

Ali	Ganjizadeh	MD	1) Define what large vision-language models (LVLMs) are and explain how they differ from traditional vision-only or text-only AI models in radiology. 2) Describe the key fine-tuning strategies — including full fine-tuning, LoRA, and prompt tuning — and identify when each approach is appropriate for a given clinical use case. 3) Explain the critical role of data curation, annotation quality, and dataset composition in determining fine-tuning outcomes and model reliability. 4) Fine-tune a large vision-language model on a radiology dataset using a guided, hands-on coding notebook with a cloud-based compute environment. 5) Evaluate fine-tuned model performance using task-appropriate metrics and identify common failure modes such as hallucination, catastrophic forgetting, and overfitting.
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Felipe	Kitamura	PhD,MD	1) Demonstrate how to programmatically identify and select clinical cohorts by querying EHR databases and radiology reports, integrating disparate data sources into a unified research pipeline. 2) Execute end-to-end imaging retrieval and sanitization using pynetdicom for PACS communication and DICOM de-identification protocols to ensure HIPAA compliance. 3) Synthesize "Image-Text" pairs by applying NLP-based anonymization to free-text reports and synchronizing them with corresponding imaging volumes.
Imon	Banerjee	PhD	1) Demonstrate how to programmatically identify and select clinical cohorts by querying EHR databases and radiology reports, integrating disparate data sources into a unified research pipeline. 2) Execute end-to-end imaging retrieval and sanitization using pynetdicom for PACS communication and DICOM de-identification protocols to ensure HIPAA compliance. 3) Synthesize "Image-Text" pairs by applying NLP-based anonymization to free-text reports and synchronizing them with corresponding imaging volumes.
Eduardo	Farina	MD	1) Demonstrate how to programmatically identify and select clinical cohorts by querying EHR databases and radiology reports, integrating disparate data sources into a unified research pipeline. 2) Execute end-to-end imaging retrieval and sanitization using pynetdicom for PACS communication and DICOM de-identification protocols to ensure HIPAA compliance. 3) Synthesize "Image-Text" pairs by applying NLP-based anonymization to free-text reports and synchronizing them with corresponding imaging volumes.
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Laura	Heacock	MD, MS	1) Describe the operational requirements for moving an imaging-biomarker program from research pilot to scalable clinical deployment. 2) Identify equity considerations and population-performance gaps in AI-derived imaging biomarkers and apply strategies to mitigate them. 3) Evaluate workflow approaches for delivering biomarker findings into radiology reports, primary-care notifications, and longitudinal care pathways. 4) Discuss emerging vision-language model capabilities for opportunistic biomarker extraction.

Judy	Gichoya	MS,MBChB	1) Describe the operational requirements for moving an imaging-biomarker program from research pilot to scalable clinical deployment. 2) Identify equity considerations and population-performance gaps in AI-derived imaging biomarkers and apply strategies to mitigate them. 3) Evaluate workflow approaches for delivering biomarker findings into radiology reports, primary-care notifications, and longitudinal care pathways. 4) Discuss emerging vision-language model capabilities for opportunistic biomarker extraction.
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Merel	Huisman	PhD,MD	1) Identify common failure modes of LLMs in radiology reporting (hallucinations, omissions, hedging) and outline guardrails to mitigate clinical risk. 2) Describe the evolution of generative AI in reporting from dictation assistance to agentic workflow orchestration. 3) Apply lessons from year-one foundation-model deployments to inform LLM adoption decisions in your practice. 4) Evaluate measurable outcomes (efficiency, accuracy, satisfaction) of LLM-assisted reporting based on published evidence.

Ulas	Bagci	PhD,MSc	1) Identify common failure modes of LLMs in radiology reporting (hallucinations, omissions, hedging) and outline guardrails to mitigate clinical risk. 2) Describe the evolution of generative AI in reporting from dictation assistance to agentic workflow orchestration. 3) Apply lessons from year-one foundation-model deployments to inform LLM adoption decisions in your practice. 4) Evaluate measurable outcomes (efficiency, accuracy, satisfaction) of LLM-assisted reporting based on published evidence.
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Robert	Ward	MD	1) Describe the evolving role of breast cryoablation within contemporary breast cancer care, including how it fits into the broader shift toward less invasive, image-guided oncologic therapies. 2) Recognize appropriate patient selection criteria for breast cryoablation based on tumor biology, imaging characteristics, clinical context, and current evidence. 3) Summarize key clinical trials, outcomes data, and regulatory considerations that inform the current and future use of breast cryoablation. 4) Understand procedural technique, technical considerations, and common pitfalls associated with breast cryoablation to optimize safety and efficacy. 5) Apply evidence-based post-treatment follow-up strategies, including clinical workflows and imaging surveillance paradigms, to assess treatment response and identify complications or recurrence.
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Amy	Deipolyi	PhD,MD	1) Describe the evolving role of breast cryoablation within contemporary breast cancer care, including how it fits into the broader shift toward less invasive, image-guided oncologic therapies. 2) Recognize appropriate patient selection criteria for breast cryoablation based on tumor biology, imaging characteristics, clinical context, and current evidence. 3) Summarize key clinical trials, outcomes data, and regulatory considerations that inform the current and future use of breast cryoablation. 4) Understand procedural technique, technical considerations, and common pitfalls associated with breast cryoablation to optimize safety and efficacy. 5) Apply evidence-based post-treatment follow-up strategies, including clinical workflows and imaging surveillance paradigms, to assess treatment response and identify complications or recurrence.
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Gloria	Salazar	MD	1) recognize the most serious and potentially life-threatening complications associated with key image-guided procedures—including kyphoplasty, venous and portal vein stenting, liver-directed therapies, and lung ablation—using case-based learning to enhance situational awareness. 2) Apply evidence-based strategies and technical best practices to prevent these complications through optimized procedural planning, imaging guidance, device selection, and intraprocedural decision-making. 3) Develop post-procedural monitoring and rapid-response approaches that enable early detection and effective management of complications to improve patient safety and clinical outcomes.
Milan	Patel	MD	1) recognize the most serious and potentially life-threatening complications associated with key image-guided procedures—including kyphoplasty, venous and portal vein stenting, liver-directed therapies, and lung ablation—using case-based learning to enhance situational awareness. 2) Apply evidence-based strategies and technical best practices to prevent these complications through optimized procedural planning, imaging guidance, device selection, and intraprocedural decision-making. 3) Develop post-procedural monitoring and rapid-response approaches that enable early detection and effective management of complications to improve patient safety and clinical outcomes.
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Rony	Avritscher	MD	1) Identify and implement optimal imaging strategies for detecting and characterizing neuroendocrine liver metastases, including advanced functional and hybrid modalities. 2) Compare therapeutic pathways—such as PRRT, systemic therapy, liver-directed interventions, and surgical cytoreduction—to determine the most appropriate treatment algorithm from medical, surgical, and interventional perspectives. 3) Integrate emerging multidisciplinary consensus recommendations to coordinate personalized, evidence-based care plans for patients with well-differentiated neuroendocrine liver metastases.
Ronaldo	Baroni	PhD,MD	1) Identify and implement optimal imaging strategies for detecting and characterizing neuroendocrine liver metastases, including advanced functional and hybrid modalities. 2) Compare therapeutic pathways—such as PRRT, systemic therapy, liver-directed interventions, and surgical cytoreduction—to determine the most appropriate treatment algorithm from medical, surgical, and interventional perspectives. 3) Integrate emerging multidisciplinary consensus recommendations to coordinate personalized, evidence-based care plans for patients with well-differentiated neuroendocrine liver metastases.
Ghassan	El-Haddad	MD	1) Identify and implement optimal imaging strategies for detecting and characterizing neuroendocrine liver metastases, including advanced functional and hybrid modalities. 2) Compare therapeutic pathways—such as PRRT, systemic therapy, liver-directed interventions, and surgical cytoreduction—to determine the most appropriate treatment algorithm from medical, surgical, and interventional perspectives. 3) Integrate emerging multidisciplinary consensus recommendations to coordinate personalized, evidence-based care plans for patients with well-differentiated neuroendocrine liver metastases.

Michael	Soulen	MD	1) Identify and implement optimal imaging strategies for detecting and characterizing neuroendocrine liver metastases, including advanced functional and hybrid modalities. 2) Compare therapeutic pathways—such as PRRT, systemic therapy, liver-directed interventions, and surgical cytoreduction—to determine the most appropriate treatment algorithm from medical, surgical, and interventional perspectives. 3) Integrate emerging multidisciplinary consensus recommendations to coordinate personalized, evidence-based care plans for patients with well-differentiated neuroendocrine liver metastases.
Chandrikha	Chandrasekharan	MBBS	1) Identify and implement optimal imaging strategies for detecting and characterizing neuroendocrine liver metastases, including advanced functional and hybrid modalities. 2) Compare therapeutic pathways—such as PRRT, systemic therapy, liver-directed interventions, and surgical cytoreduction—to determine the most appropriate treatment algorithm from medical, surgical, and interventional perspectives. 3) Integrate emerging multidisciplinary consensus recommendations to coordinate personalized, evidence-based care plans for patients with well-differentiated neuroendocrine liver metastases.
Daniel	Anaya	MD	1) Identify and implement optimal imaging strategies for detecting and characterizing neuroendocrine liver metastases, including advanced functional and hybrid modalities. 2) Compare therapeutic pathways—such as PRRT, systemic therapy, liver-directed interventions, and surgical cytoreduction—to determine the most appropriate treatment algorithm from medical, surgical, and interventional perspectives. 3) Integrate emerging multidisciplinary consensus recommendations to coordinate personalized, evidence-based care plans for patients with well-differentiated neuroendocrine liver metastases.
Bernhard	Gebauer	MD	1) Apply principles of damage-control embolization in acute trauma settings. 2) Select appropriate embolic materials, including liquid agents, particles, coils, and covered stents, based on injury pattern and hemodynamics. 3) Understand technical considerations and pitfalls of different embolization strategies. 4) Integrate endovascular reconstruction techniques for vascular injury. 5) Implement accepted decision-making algorithms in multidisciplinary trauma care.

Theresa	Caridi	MD	1) Apply principles of damage-control embolization in acute trauma settings. 2) Select appropriate embolic materials, including liquid agents, particles, coils, and covered stents, based on injury pattern and hemodynamics. 3) Understand technical considerations and pitfalls of different embolization strategies. 4) Integrate endovascular reconstruction techniques for vascular injury. 5) Implement accepted decision-making algorithms in multidisciplinary trauma care.
Anna Maria	Ierardi	MD	1) Apply principles of damage-control embolization in acute trauma settings. 2) Select appropriate embolic materials, including liquid agents, particles, coils, and covered stents, based on injury pattern and hemodynamics. 3) Understand technical considerations and pitfalls of different embolization strategies. 4) Integrate endovascular reconstruction techniques for vascular injury. 5) Implement accepted decision-making algorithms in multidisciplinary trauma care.
Giovanni	Torsello	BA,MD	1) Apply principles of damage-control embolization in acute trauma settings. 2) Select appropriate embolic materials, including liquid agents, particles, coils, and covered stents, based on injury pattern and hemodynamics. 3) Understand technical considerations and pitfalls of different embolization strategies. 4) Integrate endovascular reconstruction techniques for vascular injury. 5) Implement accepted decision-making algorithms in multidisciplinary trauma care.
Cristina	Mosconi	MD	1) Apply principles of damage-control embolization in acute trauma settings. 2) Select appropriate embolic materials, including liquid agents, particles, coils, and covered stents, based on injury pattern and hemodynamics. 3) Understand technical considerations and pitfalls of different embolization strategies. 4) Integrate endovascular reconstruction techniques for vascular injury. 5) Implement accepted decision-making algorithms in multidisciplinary trauma care.
Antonio	Bulum	MD	1) Apply principles of damage-control embolization in acute trauma settings. 2) Select appropriate embolic materials, including liquid agents, particles, coils, and covered stents, based on injury pattern and hemodynamics. 3) Understand technical considerations and pitfalls of different embolization strategies. 4) Integrate endovascular reconstruction techniques for vascular injury. 5) Implement accepted decision-making algorithms in multidisciplinary trauma care.

Timo	Auer	MD	1) Assess portal hypertension using hemodynamic measurements and imaging biomarkers. 2) Describe modern TIPS techniques, devices, and procedural strategies. 3) Recognize expanding clinical indications for TIPS beyond variceal bleeding and ascites. 4) Identify and manage TIPS-related complications. 5) Interpret post-procedural imaging to guide surveillance and shunt revision.
Marilena	Georgiades		1) Assess portal hypertension using hemodynamic measurements and imaging biomarkers. 2) Describe modern TIPS techniques, devices, and procedural strategies. 3) Recognize expanding clinical indications for TIPS beyond variceal bleeding and ascites. 4) Identify and manage TIPS-related complications. 5) Interpret post-procedural imaging to guide surveillance and shunt revision.
Vijay	Ramalingam	MD	1) Assess portal hypertension using hemodynamic measurements and imaging biomarkers. 2) Describe modern TIPS techniques, devices, and procedural strategies. 3) Recognize expanding clinical indications for TIPS beyond variceal bleeding and ascites. 4) Identify and manage TIPS-related complications. 5) Interpret post-procedural imaging to guide surveillance and shunt revision.
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Sarah	White	MS,MD	1) Assess portal hypertension using hemodynamic measurements and imaging biomarkers. 2) Describe modern TIPS techniques, devices, and procedural strategies. 3) Recognize expanding clinical indications for TIPS beyond variceal bleeding and ascites. 4) Identify and manage TIPS-related complications. 5) Interpret post-procedural imaging to guide surveillance and shunt revision.
Eric	Tietz		1) Assess portal hypertension using hemodynamic measurements and imaging biomarkers. 2) Describe modern TIPS techniques, devices, and procedural strategies. 3) Recognize expanding clinical indications for TIPS beyond variceal bleeding and ascites. 4) Identify and manage TIPS-related complications. 5) Interpret post-procedural imaging to guide surveillance and shunt revision.

Charles	Kim	MD	1) Optimize biopsy practice by selecting appropriate sedation and local anesthesia strategies tailored to sensitive or high-anxiety patients, and by choosing the ideal needle gauge and number of samples to ensure diagnostic adequacy. 2) Apply advanced imaging-guided techniques for challenging anatomic targets—particularly retroperitoneal and hepatopancreaticobiliary (HPB) lesions—to maximize tissue yield while minimizing procedural risk. 3) Integrate multidisciplinary biopsy pathways, understanding when interventional radiology versus GI endoscopy provides the most effective and least invasive approach for obtaining precision-medicine-grade tissue.
Amy	Deipolyi	PhD,MD	1) Optimize biopsy practice by selecting appropriate sedation and local anesthesia strategies tailored to sensitive or high-anxiety patients, and by choosing the ideal needle gauge and number of samples to ensure diagnostic adequacy. 2) Apply advanced imaging-guided techniques for challenging anatomic targets—particularly retroperitoneal and hepatopancreaticobiliary (HPB) lesions—to maximize tissue yield while minimizing procedural risk. 3) Integrate multidisciplinary biopsy pathways, understanding when interventional radiology versus GI endoscopy provides the most effective and least invasive approach for obtaining precision-medicine-grade tissue.
Alda	Tam	MD	1) Optimize biopsy practice by selecting appropriate sedation and local anesthesia strategies tailored to sensitive or high-anxiety patients, and by choosing the ideal needle gauge and number of samples to ensure diagnostic adequacy. 2) Apply advanced imaging-guided techniques for challenging anatomic targets—particularly retroperitoneal and hepatopancreaticobiliary (HPB) lesions—to maximize tissue yield while minimizing procedural risk. 3) Integrate multidisciplinary biopsy pathways, understanding when interventional radiology versus GI endoscopy provides the most effective and least invasive approach for obtaining precision-medicine-grade tissue.
Brendan	Cline	MD	1) Optimize biopsy practice by selecting appropriate sedation and local anesthesia strategies tailored to sensitive or high-anxiety patients, and by choosing the ideal needle gauge and number of samples to ensure diagnostic adequacy. 2) Apply advanced imaging-guided techniques for challenging anatomic targets—particularly retroperitoneal and hepatopancreaticobiliary (HPB) lesions—to maximize tissue yield while minimizing procedural risk. 3) Integrate multidisciplinary biopsy pathways, understanding when interventional radiology versus GI endoscopy provides the most effective and least invasive approach for obtaining precision-medicine-grade tissue.

Eric	Mastria	MD	1) Optimize biopsy practice by selecting appropriate sedation and local anesthesia strategies tailored to sensitive or high-anxiety patients, and by choosing the ideal needle gauge and number of samples to ensure diagnostic adequacy. 2) Apply advanced imaging-guided techniques for challenging anatomic targets—particularly retroperitoneal and hepatopancreaticobiliary (HPB) lesions—to maximize tissue yield while minimizing procedural risk. 3) Integrate multidisciplinary biopsy pathways, understanding when interventional radiology versus GI endoscopy provides the most effective and least invasive approach for obtaining precision-medicine-grade tissue.
Johanna	Chan		1) Optimize biopsy practice by selecting appropriate sedation and local anesthesia strategies tailored to sensitive or high-anxiety patients, and by choosing the ideal needle gauge and number of samples to ensure diagnostic adequacy. 2) Apply advanced imaging-guided techniques for challenging anatomic targets—particularly retroperitoneal and hepatopancreaticobiliary (HPB) lesions—to maximize tissue yield while minimizing procedural risk. 3) Integrate multidisciplinary biopsy pathways, understanding when interventional radiology versus GI endoscopy provides the most effective and least invasive approach for obtaining precision-medicine-grade tissue.
Jason	Chiang	PhD,MD	1) Recognize imaging response patterns to immune-based therapies in HCC, including iRECIST and atypical responses. 2) Understand the biological rationale for combining locoregional therapies with immunotherapy. 3) Identify emerging image-guided strategies for intratumoral immune delivery. 4) Interpret key clinical trial data evaluating combined LRT and immune checkpoint inhibition. 5) Anticipate and manage toxicities and complications related to combination therapy.
Vicky	Goh	MBBChir, FRCR	1) Recognize imaging response patterns to immune-based therapies in HCC, including iRECIST and atypical responses. 2) Understand the biological rationale for combining locoregional therapies with immunotherapy. 3) Identify emerging image-guided strategies for intratumoral immune delivery. 4) Interpret key clinical trial data evaluating combined LRT and immune checkpoint inhibition. 5) Anticipate and manage toxicities and complications related to combination therapy.

James	Hui	MD, PhD	1) Recognize imaging response patterns to immune-based therapies in HCC, including iRECIST and atypical responses. 2) Understand the biological rationale for combining locoregional therapies with immunotherapy. 3) Identify emerging image-guided strategies for intratumoral immune delivery. 4) Interpret key clinical trial data evaluating combined LRT and immune checkpoint inhibition. 5) Anticipate and manage toxicities and complications related to combination therapy.
Rahul	Sheth	MD	1) Recognize imaging response patterns to immune-based therapies in HCC, including iRECIST and atypical responses. 2) Understand the biological rationale for combining locoregional therapies with immunotherapy. 3) Identify emerging image-guided strategies for intratumoral immune delivery. 4) Interpret key clinical trial data evaluating combined LRT and immune checkpoint inhibition. 5) Anticipate and manage toxicities and complications related to combination therapy.
Terence	Gade	PhD,MD	1) Recognize imaging response patterns to immune-based therapies in HCC, including iRECIST and atypical responses. 2) Understand the biological rationale for combining locoregional therapies with immunotherapy. 3) Identify emerging image-guided strategies for intratumoral immune delivery. 4) Interpret key clinical trial data evaluating combined LRT and immune checkpoint inhibition. 5) Anticipate and manage toxicities and complications related to combination therapy.
Joseph	Erinjeri	PhD,MD	1) Recognize imaging response patterns to immune-based therapies in HCC, including iRECIST and atypical responses. 2) Understand the biological rationale for combining locoregional therapies with immunotherapy. 3) Identify emerging image-guided strategies for intratumoral immune delivery. 4) Interpret key clinical trial data evaluating combined LRT and immune checkpoint inhibition. 5) Anticipate and manage toxicities and complications related to combination therapy.
Julius	Chapiro	PhD,MD	1) critically interpret and apply the updates to LI-RADS within the context of the 2026 BCLC staging system to enhance diagnostic accuracy and multidisciplinary communication. 2) Evaluate the strengths and limitations of the new guideline revisions, identifying opportunities for improved clinical decision-making. 3) Incorporate emerging tools—including the CUSE criteria and relevant molecular markers—into individualized patient selection and treatment planning for hepatocellular carcinoma.

Maxime	Ronot	PhD,MD	1) critically interpret and apply the updates to LI-RADS within the context of the 2026 BCLC staging system to enhance diagnostic accuracy and multidisciplinary communication. 2) Evaluate the strengths and limitations of the new guideline revisions, identifying opportunities for improved clinical decision-making. 3) Incorporate emerging tools—including the CUSE criteria and relevant molecular markers—into individualized patient selection and treatment planning for hepatocellular carcinoma.
Edward	Kim	MD	1) critically interpret and apply the updates to LI-RADS within the context of the 2026 BCLC staging system to enhance diagnostic accuracy and multidisciplinary communication. 2) Evaluate the strengths and limitations of the new guideline revisions, identifying opportunities for improved clinical decision-making. 3) Incorporate emerging tools—including the CUSE criteria and relevant molecular markers—into individualized patient selection and treatment planning for hepatocellular carcinoma.
Irene	Bargellini	MD	1) critically interpret and apply the updates to LI-RADS within the context of the 2026 BCLC staging system to enhance diagnostic accuracy and multidisciplinary communication. 2) Evaluate the strengths and limitations of the new guideline revisions, identifying opportunities for improved clinical decision-making. 3) Incorporate emerging tools—including the CUSE criteria and relevant molecular markers—into individualized patient selection and treatment planning for hepatocellular carcinoma.
Nishita	Kothary	MD	1) critically interpret and apply the updates to LI-RADS within the context of the 2026 BCLC staging system to enhance diagnostic accuracy and multidisciplinary communication. 2) Evaluate the strengths and limitations of the new guideline revisions, identifying opportunities for improved clinical decision-making. 3) Incorporate emerging tools—including the CUSE criteria and relevant molecular markers—into individualized patient selection and treatment planning for hepatocellular carcinoma.
Riad	Salem	MBA	1) critically interpret and apply the updates to LI-RADS within the context of the 2026 BCLC staging system to enhance diagnostic accuracy and multidisciplinary communication. 2) Evaluate the strengths and limitations of the new guideline revisions, identifying opportunities for improved clinical decision-making. 3) Incorporate emerging tools—including the CUSE criteria and relevant molecular markers—into individualized patient selection and treatment planning for hepatocellular carcinoma.

Juan	Camacho Vasquez	MD	1) Summarize the spectrum of minimally invasive therapies for benign thyroid nodules. 2) Describe indications, contraindications, and technical considerations for thyroid nodule ablation. 3) Explain the role of thyroid artery embolization within multidisciplinary thyroid care. 4) Compare traditional thyroid artery embolization with PED-TAE techniques. 5) Review clinical outcomes, safety profiles, and evidence supporting embolization therapies for thyroid disease.
Chelsey	Baldwin	MD	1) Summarize the spectrum of minimally invasive therapies for benign thyroid nodules. 2) Describe indications, contraindications, and technical considerations for thyroid nodule ablation. 3) Explain the role of thyroid artery embolization within multidisciplinary thyroid care. 4) Compare traditional thyroid artery embolization with PED-TAE techniques. 5) Review clinical outcomes, safety profiles, and evidence supporting embolization therapies for thyroid disease.
Timothy	Huber	MD	1) Summarize the spectrum of minimally invasive therapies for benign thyroid nodules. 2) Describe indications, contraindications, and technical considerations for thyroid nodule ablation. 3) Explain the role of thyroid artery embolization within multidisciplinary thyroid care. 4) Compare traditional thyroid artery embolization with PED-TAE techniques. 5) Review clinical outcomes, safety profiles, and evidence supporting embolization therapies for thyroid disease.
Jonathon	Russell	MD	1) Summarize the spectrum of minimally invasive therapies for benign thyroid nodules. 2) Describe indications, contraindications, and technical considerations for thyroid nodule ablation. 3) Explain the role of thyroid artery embolization within multidisciplinary thyroid care. 4) Compare traditional thyroid artery embolization with PED-TAE techniques. 5) Review clinical outcomes, safety profiles, and evidence supporting embolization therapies for thyroid disease.
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Sean	Golden	MD	1) Summarize the spectrum of minimally invasive therapies for benign thyroid nodules. 2) Describe indications, contraindications, and technical considerations for thyroid nodule ablation. 3) Explain the role of thyroid artery embolization within multidisciplinary thyroid care. 4) Compare traditional thyroid artery embolization with PED-TAE techniques. 5) Review clinical outcomes, safety profiles, and evidence supporting embolization therapies for thyroid disease.

Nishita	Kothary	MD	1) Identify expected post-treatment imaging appearances following common locoregional oncologic and vascular interventions across multiple organ systems. 2) Differentiate normal post-procedural changes from findings suggestive of residual disease, recurrence, or complications, reducing diagnostic uncertainty and unnecessary interventions. 3) Compare imaging features after different treatment modalities (surgery, embolization, ablation, and shunt creation) and understand how treatment mechanism influences imaging evolution. 4) Recognize imaging findings that should prompt clinical action, including referral for re-intervention, additional imaging, or multidisciplinary discussion. 5) Integrate imaging follow-up into patient management pathways, improving communication between diagnostic radiology, interventional radiology, and referring clinicians.
Richard Kinh Gian	Do	PhD,MD	1) Identify expected post-treatment imaging appearances following common locoregional oncologic and vascular interventions across multiple organ systems. 2) Differentiate normal post-procedural changes from findings suggestive of residual disease, recurrence, or complications, reducing diagnostic uncertainty and unnecessary interventions. 3) Compare imaging features after different treatment modalities (surgery, embolization, ablation, and shunt creation) and understand how treatment mechanism influences imaging evolution. 4) Recognize imaging findings that should prompt clinical action, including referral for re-intervention, additional imaging, or multidisciplinary discussion. 5) Integrate imaging follow-up into patient management pathways, improving communication between diagnostic radiology, interventional radiology, and referring clinicians.
Mishal	Mendiratta-Lala	MD	1) Identify expected post-treatment imaging appearances following common locoregional oncologic and vascular interventions across multiple organ systems. 2) Differentiate normal post-procedural changes from findings suggestive of residual disease, recurrence, or complications, reducing diagnostic uncertainty and unnecessary interventions. 3) Compare imaging features after different treatment modalities (surgery, embolization, ablation, and shunt creation) and understand how treatment mechanism influences imaging evolution. 4) Recognize imaging findings that should prompt clinical action, including referral for re-intervention, additional imaging, or multidisciplinary discussion. 5) Integrate imaging follow-up into patient management pathways, improving communication between diagnostic radiology, interventional radiology, and referring clinicians.

Robert	Suh	MD	1) Identify expected post-treatment imaging appearances following common locoregional oncologic and vascular interventions across multiple organ systems. 2) Differentiate normal post-procedural changes from findings suggestive of residual disease, recurrence, or complications, reducing diagnostic uncertainty and unnecessary interventions. 3) Compare imaging features after different treatment modalities (surgery, embolization, ablation, and shunt creation) and understand how treatment mechanism influences imaging evolution. 4) Recognize imaging findings that should prompt clinical action, including referral for re-intervention, additional imaging, or multidisciplinary discussion. 5) Integrate imaging follow-up into patient management pathways, improving communication between diagnostic radiology, interventional radiology, and referring clinicians.
Jack	Jennings	PhD,MD	1) Identify expected post-treatment imaging appearances following common locoregional oncologic and vascular interventions across multiple organ systems. 2) Differentiate normal post-procedural changes from findings suggestive of residual disease, recurrence, or complications, reducing diagnostic uncertainty and unnecessary interventions. 3) Compare imaging features after different treatment modalities (surgery, embolization, ablation, and shunt creation) and understand how treatment mechanism influences imaging evolution. 4) Recognize imaging findings that should prompt clinical action, including referral for re-intervention, additional imaging, or multidisciplinary discussion. 5) Integrate imaging follow-up into patient management pathways, improving communication between diagnostic radiology, interventional radiology, and referring clinicians.
Anne	Covey	MD	1) Identify expected post-treatment imaging appearances following common locoregional oncologic and vascular interventions across multiple organ systems. 2) Differentiate normal post-procedural changes from findings suggestive of residual disease, recurrence, or complications, reducing diagnostic uncertainty and unnecessary interventions. 3) Compare imaging features after different treatment modalities (surgery, embolization, ablation, and shunt creation) and understand how treatment mechanism influences imaging evolution. 4) Recognize imaging findings that should prompt clinical action, including referral for re-intervention, additional imaging, or multidisciplinary discussion. 5) Integrate imaging follow-up into patient management pathways, improving communication between diagnostic radiology, interventional radiology, and referring clinicians.

Osmanuddin	Ahmed	MD	1) Recognize imaging findings associated with the inflammatory phenotype of osteoarthritis and their therapeutic implications. 2) Describe the indications, patient selection, and technical steps of genicular artery embolization. 3) Identify musculoskeletal pain syndromes amenable to embolization and understand expected outcomes. 4) Compare ablative techniques for chronic MSK pain, including mechanisms, advantages, and limitations. 5) Discuss the role and evidence for low-dose radiation therapy in osteoarthritis management.
Jenny	Bencardino	MD	1) Recognize imaging findings associated with the inflammatory phenotype of osteoarthritis and their therapeutic implications. 2) Describe the indications, patient selection, and technical steps of genicular artery embolization. 3) Identify musculoskeletal pain syndromes amenable to embolization and understand expected outcomes. 4) Compare ablative techniques for chronic MSK pain, including mechanisms, advantages, and limitations. 5) Discuss the role and evidence for low-dose radiation therapy in osteoarthritis management.
Joaquim	Motta-Leal-Filho	PhD,MD	1) Recognize imaging findings associated with the inflammatory phenotype of osteoarthritis and their therapeutic implications. 2) Describe the indications, patient selection, and technical steps of genicular artery embolization. 3) Identify musculoskeletal pain syndromes amenable to embolization and understand expected outcomes. 4) Compare ablative techniques for chronic MSK pain, including mechanisms, advantages, and limitations. 5) Discuss the role and evidence for low-dose radiation therapy in osteoarthritis management.
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Dimitrios	Filippiadis	PhD,MD	1) Recognize imaging findings associated with the inflammatory phenotype of osteoarthritis and their therapeutic implications. 2) Describe the indications, patient selection, and technical steps of genicular artery embolization. 3) Identify musculoskeletal pain syndromes amenable to embolization and understand expected outcomes. 4) Compare ablative techniques for chronic MSK pain, including mechanisms, advantages, and limitations. 5) Discuss the role and evidence for low-dose radiation therapy in osteoarthritis management.
Alex	Herskovic	MD	1) Recognize imaging findings associated with the inflammatory phenotype of osteoarthritis and their therapeutic implications. 2) Describe the indications, patient selection, and technical steps of genicular artery embolization. 3) Identify musculoskeletal pain syndromes amenable to embolization and understand expected outcomes. 4) Compare ablative techniques for chronic MSK pain, including mechanisms, advantages, and limitations. 5) Discuss the role and evidence for low-dose radiation therapy in osteoarthritis management.
Soterios	Gyftopoulos	MBA,MD	1) Review the important aspects of reporting meniscal and ACL pathology. 2) Discuss the crucial anatomy and pathophysiology of patellofemoral instabilty. 3) Explain the different types of pathology that typically involves the extensor mechanism.
Hailey	Allen	MD	1) Review the important aspects of reporting meniscal and ACL pathology. 2) Discuss the crucial anatomy and pathophysiology of patellofemoral instabilty. 3) Explain the different types of pathology that typically involves the extensor mechanism.
Soterios	Gyftopoulos	MBA,MD	1) Review the important aspects of reporting meniscal and ACL pathology. 2) Discuss the crucial anatomy and pathophysiology of patellofemoral instabilty. 3) Explain the different types of pathology that typically involves the extensor mechanism.
Kenneth	Lee	MD, MBA	1) Review the important aspects of reporting meniscal and ACL pathology. 2) Discuss the crucial anatomy and pathophysiology of patellofemoral instabilty. 3) Explain the different types of pathology that typically involves the extensor mechanism.
Megan	Mills	MD	1) Review the important aspects of reporting meniscal and ACL pathology. 2) Discuss the crucial anatomy and pathophysiology of patellofemoral instabilty. 3) Explain the different types of pathology that typically involves the extensor mechanism.

Shivani	Ahlawat	MD	1) Recognize imaging patterns of peripheral nerve injury, inflammation, and neoplasia that directly influence diagnosis and prognosis. 2) Integrate imaging findings into clinical decision-making to guide medical therapy, surgery, or image-guided intervention. 3) Apply imaging interpretation frameworks to improve diagnostic confidence and multidisciplinary communication. 4) Identify scenarios where imaging alters treatment pathways and patient outcomes.
Shivani	Ahlawat	MD	1) Recognize imaging patterns of peripheral nerve injury, inflammation, and neoplasia that directly influence diagnosis and prognosis. 2) Integrate imaging findings into clinical decision-making to guide medical therapy, surgery, or image-guided intervention. 3) Apply imaging interpretation frameworks to improve diagnostic confidence and multidisciplinary communication. 4) Identify scenarios where imaging alters treatment pathways and patient outcomes.
Darryl	Sneag	MD	1) Recognize imaging patterns of peripheral nerve injury, inflammation, and neoplasia that directly influence diagnosis and prognosis. 2) Integrate imaging findings into clinical decision-making to guide medical therapy, surgery, or image-guided intervention. 3) Apply imaging interpretation frameworks to improve diagnostic confidence and multidisciplinary communication. 4) Identify scenarios where imaging alters treatment pathways and patient outcomes.
Laura	Fayad	MD	1) Recognize imaging patterns of peripheral nerve injury, inflammation, and neoplasia that directly influence diagnosis and prognosis. 2) Integrate imaging findings into clinical decision-making to guide medical therapy, surgery, or image-guided intervention. 3) Apply imaging interpretation frameworks to improve diagnostic confidence and multidisciplinary communication. 4) Identify scenarios where imaging alters treatment pathways and patient outcomes.
Jan	Fritz	MD	1) Recognize imaging patterns of peripheral nerve injury, inflammation, and neoplasia that directly influence diagnosis and prognosis. 2) Integrate imaging findings into clinical decision-making to guide medical therapy, surgery, or image-guided intervention. 3) Apply imaging interpretation frameworks to improve diagnostic confidence and multidisciplinary communication. 4) Identify scenarios where imaging alters treatment pathways and patient outcomes.

Alan	Belzberg		1) Recognize imaging patterns of peripheral nerve injury, inflammation, and neoplasia that directly influence diagnosis and prognosis. 2) Integrate imaging findings into clinical decision-making to guide medical therapy, surgery, or image-guided intervention. 3) Apply imaging interpretation frameworks to improve diagnostic confidence and multidisciplinary communication. 4) Identify scenarios where imaging alters treatment pathways and patient outcomes.
Linda	Probyn	MD	1) Review the fundamentals of ultrasound imaging of the elbow, hand, and wrist. 2) Demonstrate the proper techniques for imaging ankle and foot nerves.
Andrew	Grainger	MD	1) Review the fundamentals of ultrasound imaging of the elbow, hand, and wrist. 2) Demonstrate the proper techniques for imaging ankle and foot nerves.
Jon	Jacobson	MD	1) Review the fundamentals of ultrasound imaging of the elbow, hand, and wrist. 2) Demonstrate the proper techniques for imaging ankle and foot nerves.
Luca Maria	Sconfienza	PhD,MD	1) Review the fundamentals of ultrasound imaging of the elbow, hand, and wrist. 2) Demonstrate the proper techniques for imaging ankle and foot nerves.
Monique	Reijnierse	PhD,MD	1) Review the fundamentals of ultrasound imaging of the elbow, hand, and wrist. 2) Demonstrate the proper techniques for imaging ankle and foot nerves.
Andrew	Grainger	MD	1) Review the fundamentals of ultrasound imaging of the elbow, hand, and wrist. 2) Demonstrate the proper techniques for imaging ankle and foot nerves.

Girish	Gandikota	MD	1) Review the fundamentals of ultrasound imaging of the elbow, hand, and wrist. 2) Demonstrate the proper techniques for imaging ankle and foot nerves.
Andrew	Ross	MPH,MD	1) Review the fundamentals of ultrasound imaging of the elbow, hand, and wrist. 2) Demonstrate the proper techniques for imaging ankle and foot nerves.
Tetyana	Gorbachova	MD	1) Differentiate common distal radius fracture patterns and identify features most relevant to long-term outcomes. 2) Identify the imaging features of common traumatic and degenerative causes of ulnar-sided wrist pain. 3) Distinguish dissociative from non-dissociative instability patterns and identifying key ligamentous injuries. 4) Recognize characteristic imaging features of the most common hand and wrist tendon and pulley disorders on ultrasound and MRI.
Tetyana	Gorbachova	MD	1) Differentiate common distal radius fracture patterns and identify features most relevant to long-term outcomes. 2) Identify the imaging features of common traumatic and degenerative causes of ulnar-sided wrist pain. 3) Distinguish dissociative from non-dissociative instability patterns and identifying key ligamentous injuries. 4) Recognize characteristic imaging features of the most common hand and wrist tendon and pulley disorders on ultrasound and MRI.
Gonzalo	Serrano	MD	1) Differentiate common distal radius fracture patterns and identify features most relevant to long-term outcomes. 2) Identify the imaging features of common traumatic and degenerative causes of ulnar-sided wrist pain. 3) Distinguish dissociative from non-dissociative instability patterns and identifying key ligamentous injuries. 4) Recognize characteristic imaging features of the most common hand and wrist tendon and pulley disorders on ultrasound and MRI.
Graeme	Thompson	MBChB	1) Differentiate common distal radius fracture patterns and identify features most relevant to long-term outcomes. 2) Identify the imaging features of common traumatic and degenerative causes of ulnar-sided wrist pain. 3) Distinguish dissociative from non-dissociative instability patterns and identifying key ligamentous injuries. 4) Recognize characteristic imaging features of the most common hand and wrist tendon and pulley disorders on ultrasound and MRI.

Aline	Serfaty	PhD,MD	1) Differentiate common distal radius fracture patterns and identify features most relevant to long-term outcomes. 2) Identify the imaging features of common traumatic and degenerative causes of ulnar-sided wrist pain. 3) Distinguish dissociative from non-dissociative instability patterns and identifying key ligamentous injuries. 4) Recognize characteristic imaging features of the most common hand and wrist tendon and pulley disorders on ultrasound and MRI.
Reto	Sutter	MD	1) Apply a structured reporting approach to common hip disorders including developmental dysplasia, labral pathology, cartilage defects, and greater trochanteric pain syndrome. 2) Differentiate true pathologic findings from normal variants and postoperative changes.
Nele	Herregods	PhD,MD	1) Apply a structured reporting approach to common hip disorders including developmental dysplasia, labral pathology, cartilage defects, and greater trochanteric pain syndrome. 2) Differentiate true pathologic findings from normal variants and postoperative changes.
Donna	Blankenbaker	MD	1) Apply a structured reporting approach to common hip disorders including developmental dysplasia, labral pathology, cartilage defects, and greater trochanteric pain syndrome. 2) Differentiate true pathologic findings from normal variants and postoperative changes.
Miriam	Bredella	MBA,MD	1) Apply a structured reporting approach to common hip disorders including developmental dysplasia, labral pathology, cartilage defects, and greater trochanteric pain syndrome. 2) Differentiate true pathologic findings from normal variants and postoperative changes.
Reto	Sutter	MD	1) Apply a structured reporting approach to common hip disorders including developmental dysplasia, labral pathology, cartilage defects, and greater trochanteric pain syndrome. 2) Differentiate true pathologic findings from normal variants and postoperative changes.
Francis	Baffour	MD	1) Understand the principles of CT and MR metal artifact reduction techniques. 2) Optimize imaging protocols to improve diagnostic image quality in patients with orthopedic hardware. 3) Differentiate normal postoperative appearances from complications in hip and knee arthroplasty.
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Christoph	Germann	MD	1) Understand the principles of CT and MR metal artifact reduction techniques. 2) Optimize imaging protocols to improve diagnostic image quality in patients with orthopedic hardware. 3) Differentiate normal postoperative appearances from complications in hip and knee arthroplasty.
Anna	Falkowski	MD	1) Understand the principles of CT and MR metal artifact reduction techniques. 2) Optimize imaging protocols to improve diagnostic image quality in patients with orthopedic hardware. 3) Differentiate normal postoperative appearances from complications in hip and knee arthroplasty.
Georg	Feuerriegel	MD	1) Understand the principles of CT and MR metal artifact reduction techniques. 2) Optimize imaging protocols to improve diagnostic image quality in patients with orthopedic hardware. 3) Differentiate normal postoperative appearances from complications in hip and knee arthroplasty.
Christine	Chung	MD	1) Review how to interpret shoulder radiographs accurately. 2) Discuss the important imaging findings typically seen in shoulder instability and rotator cuff tearing. 3) Explain how imaging can be used to interpret superior labral pathology appropriately.
Christine	Chung	MD	1) Review how to interpret shoulder radiographs accurately. 2) Discuss the important imaging findings typically seen in shoulder instability and rotator cuff tearing. 3) Explain how imaging can be used to interpret superior labral pathology appropriately.
Naveen	Subhas	MPH,MD	1) Review how to interpret shoulder radiographs accurately. 2) Discuss the important imaging findings typically seen in shoulder instability and rotator cuff tearing. 3) Explain how imaging can be used to interpret superior labral pathology appropriately.
P. Diana	Afonso	MD	1) Review how to interpret shoulder radiographs accurately. 2) Discuss the important imaging findings typically seen in shoulder instability and rotator cuff tearing. 3) Explain how imaging can be used to interpret superior labral pathology appropriately.
Michael	Tuite	MD	1) Review how to interpret shoulder radiographs accurately. 2) Discuss the important imaging findings typically seen in shoulder instability and rotator cuff tearing. 3) Explain how imaging can be used to interpret superior labral pathology appropriately.
Benjamin	Fritz	MD	1) Review the expected post-operative appearance of the rotator cuff and labrum. 2) Describe the types of pathologies seen in the shoulder musculature, excluding the rotator cuff. 3) Explain how to appropriately characterize common shoulder nerve entrapments.
Erin	Alaia	MD	1) Review the expected post-operative appearance of the rotator cuff and labrum. 2) Describe the types of pathologies seen in the shoulder musculature, excluding the rotator cuff. 3) Explain how to appropriately characterize common shoulder nerve entrapments.

Benjamin	Fritz	MD	1) Review the expected post-operative appearance of the rotator cuff and labrum. 2) Describe the types of pathologies seen in the shoulder musculature, excluding the rotator cuff. 3) Explain how to appropriately characterize common shoulder nerve entrapments.
Meghan	Jardon	MD	1) Review the expected post-operative appearance of the rotator cuff and labrum. 2) Describe the types of pathologies seen in the shoulder musculature, excluding the rotator cuff. 3) Explain how to appropriately characterize common shoulder nerve entrapments.
Robert	Boutin	MD	1) Review the expected post-operative appearance of the rotator cuff and labrum. 2) Describe the types of pathologies seen in the shoulder musculature, excluding the rotator cuff. 3) Explain how to appropriately characterize common shoulder nerve entrapments.
Leon	Lenchik	MD	1) Review the basic imaging techniques for foot and ankle. 2) Discuss the most important areas of anatomy around the foot and ankle. 3) Review common pathology of the ligaments, tendons and nerves around the ankle.
Andrew	Grainger	MD	1) Review the basic imaging techniques for foot and ankle. 2) Discuss the most important areas of anatomy around the foot and ankle. 3) Review common pathology of the ligaments, tendons and nerves around the ankle.
Laxshmi Veda	Avula		1) Review the basic imaging techniques for foot and ankle. 2) Discuss the most important areas of anatomy around the foot and ankle. 3) Review common pathology of the ligaments, tendons and nerves around the ankle.
Ramy	Mansour	FRCR,MSc	1) Review the basic imaging techniques for foot and ankle. 2) Discuss the most important areas of anatomy around the foot and ankle. 3) Review common pathology of the ligaments, tendons and nerves around the ankle.
Leon	Lenchik	MD	1) Review the basic imaging techniques for foot and ankle. 2) Discuss the most important areas of anatomy around the foot and ankle. 3) Review common pathology of the ligaments, tendons and nerves around the ankle.
Hillary	Garner	MD	1) Distinguish incidental bone lesion features that help determine next steps in management. 2) Review common non-neoplastic soft tissue entities that mimic tumors and recognize distinguishing features. 3) Understand the impact of precise anatomical location on differential diagnosis of bone tumors. 4) Review MRI findings critical for local staging of soft tissue sarcoma that help support surgical planning.

Hillary	Garner	MD	1) Distinguish incidental bone lesion features that help determine next steps in management. 2) Review common non-neoplastic soft tissue entities that mimic tumors and recognize distinguishing features. 3) Understand the impact of precise anatomical location on differential diagnosis of bone tumors. 4) Review MRI findings critical for local staging of soft tissue sarcoma that help support surgical planning.
Connie	Chang	MD	1) Distinguish incidental bone lesion features that help determine next steps in management. 2) Review common non-neoplastic soft tissue entities that mimic tumors and recognize distinguishing features. 3) Understand the impact of precise anatomical location on differential diagnosis of bone tumors. 4) Review MRI findings critical for local staging of soft tissue sarcoma that help support surgical planning.
Mark	Murphey	MD	1) Distinguish incidental bone lesion features that help determine next steps in management. 2) Review common non-neoplastic soft tissue entities that mimic tumors and recognize distinguishing features. 3) Understand the impact of precise anatomical location on differential diagnosis of bone tumors. 4) Review MRI findings critical for local staging of soft tissue sarcoma that help support surgical planning.
Behrang	Amini	PhD,MD	1) Distinguish incidental bone lesion features that help determine next steps in management. 2) Review common non-neoplastic soft tissue entities that mimic tumors and recognize distinguishing features. 3) Understand the impact of precise anatomical location on differential diagnosis of bone tumors. 4) Review MRI findings critical for local staging of soft tissue sarcoma that help support surgical planning.
Linda	Probyn	MD	1) Review anatomy and practice ultrasound imaging techniques for evaluation of the shoulder. 2) Describe useful dynamic imaging techniques to enhance assessment of the shoulder. 3) Discuss ultrasound imaging of common pathologic musculoskeletal conditions at the shoulder.
Viviane	Khoury	MD	1) Review anatomy and practice ultrasound imaging techniques for evaluation of the shoulder. 2) Describe useful dynamic imaging techniques to enhance assessment of the shoulder. 3) Discuss ultrasound imaging of common pathologic musculoskeletal conditions at the shoulder.

Angela	Atinga	FRCPC,MBBChir	1) Review anatomy and practice ultrasound imaging techniques for evaluation of the shoulder. 2) Describe useful dynamic imaging techniques to enhance assessment of the shoulder. 3) Discuss ultrasound imaging of common pathologic musculoskeletal conditions at the shoulder.
Theodore	Miller	MD	1) Review anatomy and practice ultrasound imaging techniques for evaluation of the shoulder. 2) Describe useful dynamic imaging techniques to enhance assessment of the shoulder. 3) Discuss ultrasound imaging of common pathologic musculoskeletal conditions at the shoulder.
Jon	Jacobson	MD	1) Review anatomy and practice ultrasound imaging techniques for evaluation of the shoulder. 2) Describe useful dynamic imaging techniques to enhance assessment of the shoulder. 3) Discuss ultrasound imaging of common pathologic musculoskeletal conditions at the shoulder.
Robert	Campbell	FRCR,MBChB	1) Review anatomy and practice ultrasound imaging techniques for evaluation of the shoulder. 2) Describe useful dynamic imaging techniques to enhance assessment of the shoulder. 3) Discuss ultrasound imaging of common pathologic musculoskeletal conditions at the shoulder.
Benjamin	Levine	MD	1) Review anatomy and practice ultrasound imaging techniques for evaluation of the shoulder. 2) Describe useful dynamic imaging techniques to enhance assessment of the shoulder. 3) Discuss ultrasound imaging of common pathologic musculoskeletal conditions at the shoulder.
Andrew	Grainger	MD	1) Review anatomy and practice ultrasound imaging techniques for evaluation of the shoulder. 2) Describe useful dynamic imaging techniques to enhance assessment of the shoulder. 3) Discuss ultrasound imaging of common pathologic musculoskeletal conditions at the shoulder.

Humberto	Rosas	MD	1) Review anatomy and practice ultrasound imaging techniques for evaluation of the shoulder. 2) Describe useful dynamic imaging techniques to enhance assessment of the shoulder. 3) Discuss ultrasound imaging of common pathologic musculoskeletal conditions at the shoulder.
Girish	Gandikota	MD	1) Review anatomy and practice ultrasound imaging techniques for evaluation of the shoulder. 2) Describe useful dynamic imaging techniques to enhance assessment of the shoulder. 3) Discuss ultrasound imaging of common pathologic musculoskeletal conditions at the shoulder.
Joseph	Craig	MBChB	1) Review anatomy and practice ultrasound imaging techniques for evaluation of the shoulder. 2) Describe useful dynamic imaging techniques to enhance assessment of the shoulder. 3) Discuss ultrasound imaging of common pathologic musculoskeletal conditions at the shoulder.
Andrew	Ross	MPH,MD	1) Review anatomy and practice ultrasound imaging techniques for evaluation of the shoulder. 2) Describe useful dynamic imaging techniques to enhance assessment of the shoulder. 3) Discuss ultrasound imaging of common pathologic musculoskeletal conditions at the shoulder.
Dyan	Flores	MD	1) Review anatomy and practice ultrasound imaging techniques for evaluation of the shoulder. 2) Describe useful dynamic imaging techniques to enhance assessment of the shoulder. 3) Discuss ultrasound imaging of common pathologic musculoskeletal conditions at the shoulder.
Kambiz	Motamedi	MD	1) Review anatomy and practice ultrasound imaging techniques for evaluation of the shoulder. 2) Describe useful dynamic imaging techniques to enhance assessment of the shoulder. 3) Discuss ultrasound imaging of common pathologic musculoskeletal conditions at the shoulder.

Laxshmi Veda	Avula		1) Review anatomy and practice ultrasound imaging techniques for evaluation of the shoulder. 2) Describe useful dynamic imaging techniques to enhance assessment of the shoulder. 3) Discuss ultrasound imaging of common pathologic musculoskeletal conditions at the shoulder.
Vivek	Kalia	MD, MPH	1) Review anatomy and practice ultrasound imaging techniques for evaluation of the shoulder. 2) Describe useful dynamic imaging techniques to enhance assessment of the shoulder. 3) Discuss ultrasound imaging of common pathologic musculoskeletal conditions at the shoulder.
Ramy	Mansour	FRCR,MSc	1) Review anatomy and practice ultrasound imaging techniques for evaluation of the shoulder. 2) Describe useful dynamic imaging techniques to enhance assessment of the shoulder. 3) Discuss ultrasound imaging of common pathologic musculoskeletal conditions at the shoulder.
Zachary	Stewart	MD	1) Review anatomy and practice ultrasound imaging techniques for evaluation of the shoulder. 2) Describe useful dynamic imaging techniques to enhance assessment of the shoulder. 3) Discuss ultrasound imaging of common pathologic musculoskeletal conditions at the shoulder.
Aline	Serfaty	PhD,MD	1) Review anatomy and practice ultrasound imaging techniques for evaluation of the shoulder. 2) Describe useful dynamic imaging techniques to enhance assessment of the shoulder. 3) Discuss ultrasound imaging of common pathologic musculoskeletal conditions at the shoulder.
Sarah	Kamel	MD	1) Recognize key imaging patterns of skeletal muscle disease. 2) Differentiate traumatic, inflammatory, infectious, ischemic, and neoplastic muscle pathology. 3) Select the optimal imaging modality based on clinical presentation. 4) Apply imaging findings to patient management.

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Atul	Taneja	PhD,MD	1) Recognize key imaging patterns of skeletal muscle disease. 2) Differentiate traumatic, inflammatory, infectious, ischemic, and neoplastic muscle pathology. 3) Select the optimal imaging modality based on clinical presentation. 4) Apply imaging findings to patient management.
Julio	Guimaraes	MD, PhD	1) Recognize key imaging patterns of skeletal muscle disease. 2) Differentiate traumatic, inflammatory, infectious, ischemic, and neoplastic muscle pathology. 3) Select the optimal imaging modality based on clinical presentation. 4) Apply imaging findings to patient management.
David	Rubin	MD	1) Recognize key imaging patterns of skeletal muscle disease. 2) Differentiate traumatic, inflammatory, infectious, ischemic, and neoplastic muscle pathology. 3) Select the optimal imaging modality based on clinical presentation. 4) Apply imaging findings to patient management.
Shadpour	Demehri	MD	1) Recognize key imaging patterns of skeletal muscle disease. 2) Differentiate traumatic, inflammatory, infectious, ischemic, and neoplastic muscle pathology. 3) Select the optimal imaging modality based on clinical presentation. 4) Apply imaging findings to patient management.
Jie	Nguyen	MD, MS	1) Recognize normal developmental anatomy and common injury patterns in pediatric elbow imaging. 2) Identify key ligamentous stabilizers and mechanisms of elbow instability on imaging. 3) Differentiate acute and chronic tendon injuries of the elbow to support accurate diagnosis and management.
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William	Palmer	MD	1) Recognize normal developmental anatomy and common injury patterns in pediatric elbow imaging. 2) Identify key ligamentous stabilizers and mechanisms of elbow instability on imaging. 3) Differentiate acute and chronic tendon injuries of the elbow to support accurate diagnosis and management.

Matthew	Frick	MD	1) Recognize normal developmental anatomy and common injury patterns in pediatric elbow imaging. 2) Identify key ligamentous stabilizers and mechanisms of elbow instability on imaging. 3) Differentiate acute and chronic tendon injuries of the elbow to support accurate diagnosis and management.
Lynne	Steinbach	MD	1) Recognize normal developmental anatomy and common injury patterns in pediatric elbow imaging. 2) Identify key ligamentous stabilizers and mechanisms of elbow instability on imaging. 3) Differentiate acute and chronic tendon injuries of the elbow to support accurate diagnosis and management.
Hilary	Umans	MD	1) Explore imaging techniques and pathology of complex foot and ankle pathology eg plantar plate and ligament patterns of injury. 2) Understand the available interentaion techniques for the coomon pathology of Achilles tendinopathy. 3) Review cases of complex pathology.
Hilary	Umans	MD	1) Explore imaging techniques and pathology of complex foot and ankle pathology eg plantar plate and ligament patterns of injury. 2) Understand the available interentaion techniques for the coomon pathology of Achilles tendinopathy. 3) Review cases of complex pathology.
James	Linklater	BMedSc,FRANZCR	1) Explore imaging techniques and pathology of complex foot and ankle pathology eg plantar plate and ligament patterns of injury. 2) Understand the available interentaion techniques for the coomon pathology of Achilles tendinopathy. 3) Review cases of complex pathology.
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Dyan	Flores	MD	1) Discuss the advantages and disadvantages of MRI and ultrasound when evaluating common conditions. 2) Review the criteria for how to make the decision of using MRI or ultrasound based on real world experiences and examples.
Robert	Campbell	FRCR,MBChB	1) Discuss the advantages and disadvantages of MRI and ultrasound when evaluating common conditions. 2) Review the criteria for how to make the decision of using MRI or ultrasound based on real world experiences and examples.

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Robert	Campbell	FRCR,MB ChB	1) Discuss the advantages and disadvantages of MRI and ultrasound when evaluating common conditions. 2) Review the criteria for how to make the decision of using MRI or ultrasound based on real world experiences and examples.
Robert	Lambert	FRCPC,M BBCh	1) Recognize key imaging features of spondyloarthropathies. 2) Identify worrisome features of erosive and destructive arthropathies. 3) Differentiate imaging appearances of the common crystal arthropathies.
Robert	Lambert	FRCPC,M BBCh	1) Recognize key imaging features of spondyloarthropathies. 2) Identify worrisome features of erosive and destructive arthropathies. 3) Differentiate imaging appearances of the common crystal arthropathies.
Anne	Cotten	MD	1) Recognize key imaging features of spondyloarthropathies. 2) Identify worrisome features of erosive and destructive arthropathies. 3) Differentiate imaging appearances of the common crystal arthropathies.
Jeremiah	Long	MD	1) Recognize key imaging features of spondyloarthropathies. 2) Identify worrisome features of erosive and destructive arthropathies. 3) Differentiate imaging appearances of the common crystal arthropathies.
Maxine	Kresse	MD	1) Identify imaging features of MSK infection that required urgent clinical escalation. 2) Apply advanced imaging approaches to distinguish infection in native bone, soft tissues and prosthetic joints. 3) Integrate imaging findings into therapeutic planning including biopsy. 4) Optimize image-guided interventiosn to improve microbiologic yield.

Maxine	Kresse	MD	1) Identify imaging features of MSK infection that required urgent clinical escalation. 2) Apply advanced imaging approaches to distinguish infection in native bone, soft tissues and prosthetic joints. 3) Integrate imaging findings into therapeutic planning including biopsy. 4) Optimize image-guided interventiosn to improve microbiologic yield.
Uma	Thakur	MD	1) Identify imaging features of MSK infection that required urgent clinical escalation. 2) Apply advanced imaging approaches to distinguish infection in native bone, soft tissues and prosthetic joints. 3) Integrate imaging findings into therapeutic planning including biopsy. 4) Optimize image-guided interventiosn to improve microbiologic yield.
Jonathan	Samet	MD	1) Identify imaging features of MSK infection that required urgent clinical escalation. 2) Apply advanced imaging approaches to distinguish infection in native bone, soft tissues and prosthetic joints. 3) Integrate imaging findings into therapeutic planning including biopsy. 4) Optimize image-guided interventiosn to improve microbiologic yield.
Mary	Buchanan	MD	1) Identify imaging features of MSK infection that required urgent clinical escalation. 2) Apply advanced imaging approaches to distinguish infection in native bone, soft tissues and prosthetic joints. 3) Integrate imaging findings into therapeutic planning including biopsy. 4) Optimize image-guided interventiosn to improve microbiologic yield.
Mohammad	Samim	MRCS,MD	1) Identify imaging features of MSK infection that required urgent clinical escalation. 2) Apply advanced imaging approaches to distinguish infection in native bone, soft tissues and prosthetic joints. 3) Integrate imaging findings into therapeutic planning including biopsy. 4) Optimize image-guided interventiosn to improve microbiologic yield.
Margarita	Revzin	MS,MD	1) Compare the clinical performance, strengths, and limitations of US and MRI elastography across various organ systems. 2) Identify appropriate clinical indications for the use of elastography and determine when to select US versus MRI based on diagnostic needs, patient factors, and institutional resources.
Arunark	Kolipaka	PhD	1) Compare the clinical performance, strengths, and limitations of US and MRI elastography across various organ systems. 2) Identify appropriate clinical indications for the use of elastography and determine when to select US versus MRI based on diagnostic needs, patient factors, and institutional resources.

Richard	Ehman	MD	1) Compare the clinical performance, strengths, and limitations of US and MRI elastography across various organ systems. 2) Identify appropriate clinical indications for the use of elastography and determine when to select US versus MRI based on diagnostic needs, patient factors, and institutional resources.
Mihra	Taljanovic	PhD,MD	1) Compare the clinical performance, strengths, and limitations of US and MRI elastography across various organ systems. 2) Identify appropriate clinical indications for the use of elastography and determine when to select US versus MRI based on diagnostic needs, patient factors, and institutional resources.
Faezeh	Sodagari	MD	1) Compare the clinical performance, strengths, and limitations of US and MRI elastography across various organ systems. 2) Identify appropriate clinical indications for the use of elastography and determine when to select US versus MRI based on diagnostic needs, patient factors, and institutional resources.
Nadine	Bayerl	MD	1) Describe evidence-based clinical indications for whole-body MRI in oncologic staging, pediatric cancer evaluation, and hereditary cancer predisposition syndromes. 2) Compare the diagnostic yield and limitations of opportunistic whole-body MRI screening with indication-driven whole-body MRI, including current detection rates from recent meta-analyses. 3) Discuss strategies for managing incidental findings on whole-body MRI, including risk stratification, follow-up burden, and psychological impact on patients. 4) Explain how population-scale whole-body MRI cohort studies (UK Biobank, NAKO) are generating new insights into disease prevalence, body composition, and AI-driven automated image analysis. 5) Evaluate current evidence for whole-body MRI surveillance in familial cancer syndromes including Li-Fraumeni syndrome, and identify complementary screening strategies such as liquid biopsy.
Anwar	Padhani	FRCR,MBBS	1) Describe evidence-based clinical indications for whole-body MRI in oncologic staging, pediatric cancer evaluation, and hereditary cancer predisposition syndromes. 2) Compare the diagnostic yield and limitations of opportunistic whole-body MRI screening with indication-driven whole-body MRI, including current detection rates from recent meta-analyses. 3) Discuss strategies for managing incidental findings on whole-body MRI, including risk stratification, follow-up burden, and psychological impact on patients. 4) Explain how population-scale whole-body MRI cohort studies (UK Biobank, NAKO) are generating new insights into disease prevalence, body composition, and AI-driven automated image analysis. 5) Evaluate current evidence for whole-body MRI surveillance in familial cancer syndromes including Li-Fraumeni syndrome, and identify complementary screening strategies such as liquid biopsy.

Mary-Louise	Greer	MBBS	1) Describe evidence-based clinical indications for whole-body MRI in oncologic staging, pediatric cancer evaluation, and hereditary cancer predisposition syndromes. 2) Compare the diagnostic yield and limitations of opportunistic whole-body MRI screening with indication-driven whole-body MRI, including current detection rates from recent meta-analyses. 3) Discuss strategies for managing incidental findings on whole-body MRI, including risk stratification, follow-up burden, and psychological impact on patients. 4) Explain how population-scale whole-body MRI cohort studies (UK Biobank, NAKO) are generating new insights into disease prevalence, body composition, and AI-driven automated image analysis. 5) Evaluate current evidence for whole-body MRI surveillance in familial cancer syndromes including Li-Fraumeni syndrome, and identify complementary screening strategies such as liquid biopsy.
Benoit	Rizk	MD	1) Describe evidence-based clinical indications for whole-body MRI in oncologic staging, pediatric cancer evaluation, and hereditary cancer predisposition syndromes. 2) Compare the diagnostic yield and limitations of opportunistic whole-body MRI screening with indication-driven whole-body MRI, including current detection rates from recent meta-analyses. 3) Discuss strategies for managing incidental findings on whole-body MRI, including risk stratification, follow-up burden, and psychological impact on patients. 4) Explain how population-scale whole-body MRI cohort studies (UK Biobank, NAKO) are generating new insights into disease prevalence, body composition, and AI-driven automated image analysis. 5) Evaluate current evidence for whole-body MRI surveillance in familial cancer syndromes including Li-Fraumeni syndrome, and identify complementary screening strategies such as liquid biopsy.
Keno	Bressem	MD	1) Describe evidence-based clinical indications for whole-body MRI in oncologic staging, pediatric cancer evaluation, and hereditary cancer predisposition syndromes. 2) Compare the diagnostic yield and limitations of opportunistic whole-body MRI screening with indication-driven whole-body MRI, including current detection rates from recent meta-analyses. 3) Discuss strategies for managing incidental findings on whole-body MRI, including risk stratification, follow-up burden, and psychological impact on patients. 4) Explain how population-scale whole-body MRI cohort studies (UK Biobank, NAKO) are generating new insights into disease prevalence, body composition, and AI-driven automated image analysis. 5) Evaluate current evidence for whole-body MRI surveillance in familial cancer syndromes including Li-Fraumeni syndrome, and identify complementary screening strategies such as liquid biopsy.

Sebastian	Ziegelmayer	MD	1) Describe evidence-based clinical indications for whole-body MRI in oncologic staging, pediatric cancer evaluation, and hereditary cancer predisposition syndromes. 2) Compare the diagnostic yield and limitations of opportunistic whole-body MRI screening with indication-driven whole-body MRI, including current detection rates from recent meta-analyses. 3) Discuss strategies for managing incidental findings on whole-body MRI, including risk stratification, follow-up burden, and psychological impact on patients. 4) Explain how population-scale whole-body MRI cohort studies (UK Biobank, NAKO) are generating new insights into disease prevalence, body composition, and AI-driven automated image analysis. 5) Evaluate current evidence for whole-body MRI surveillance in familial cancer syndromes including Li-Fraumeni syndrome, and identify complementary screening strategies such as liquid biopsy.
John	Pellerito	MD	1) Understand the principles, advantages, and limitations of CEUS and MRI in various clinical settings. 2) Compare the diagnostic performance of CEUS and MRI for liver, vascular, and soft tissue pathologies. 3) Identify scenarios where CEUS offers advantages over MRI (e.g., renal impairment, real-time assessment) and vice versa. 4) Explore contrast agent differences, safety profiles, and considerations in special populations. 5) Develop a decision-making framework for selecting the most appropriate imaging modality based on patient and disease-specific factors.
Nitin	Chaubal	MD	1) Understand the principles, advantages, and limitations of CEUS and MRI in various clinical settings. 2) Compare the diagnostic performance of CEUS and MRI for liver, vascular, and soft tissue pathologies. 3) Identify scenarios where CEUS offers advantages over MRI (e.g., renal impairment, real-time assessment) and vice versa. 4) Explore contrast agent differences, safety profiles, and considerations in special populations. 5) Develop a decision-making framework for selecting the most appropriate imaging modality based on patient and disease-specific factors.
Harriet	Paltiel	MD	1) Understand the principles, advantages, and limitations of CEUS and MRI in various clinical settings. 2) Compare the diagnostic performance of CEUS and MRI for liver, vascular, and soft tissue pathologies. 3) Identify scenarios where CEUS offers advantages over MRI (e.g., renal impairment, real-time assessment) and vice versa. 4) Explore contrast agent differences, safety profiles, and considerations in special populations. 5) Develop a decision-making framework for selecting the most appropriate imaging modality based on patient and disease-specific factors.

Louis	Mazzarelli	MD	1) Understand the principles, advantages, and limitations of CEUS and MRI in various clinical settings. 2) Compare the diagnostic performance of CEUS and MRI for liver, vascular, and soft tissue pathologies. 3) Identify scenarios where CEUS offers advantages over MRI (e.g., renal impairment, real-time assessment) and vice versa. 4) Explore contrast agent differences, safety profiles, and considerations in special populations. 5) Develop a decision-making framework for selecting the most appropriate imaging modality based on patient and disease-specific factors.
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Richard	Barr	PhD,MD	1) Learn how to develop a CEUS program. 2) Learn what patients are appropriate for CEUS. 3) Review organs where CEUS can be used. 4) Discuss how to optimize CEUS imaging. 5) Review how to interpret CEUS studies.
Stephanie	Wilson	MD	1) Learn how to develop a CEUS program. 2) Learn what patients are appropriate for CEUS. 3) Review organs where CEUS can be used. 4) Discuss how to optimize CEUS imaging. 5) Review how to interpret CEUS studies.
Dirk-Andre	Clevert	MD	1) Learn how to develop a CEUS program. 2) Learn what patients are appropriate for CEUS. 3) Review organs where CEUS can be used. 4) Discuss how to optimize CEUS imaging. 5) Review how to interpret CEUS studies.

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Rajas	Chaubal	MBBS, MD	1) Learn how to develop a CEUS program. 2) Learn what patients are appropriate for CEUS. 3) Review organs where CEUS can be used. 4) Discuss how to optimize CEUS imaging. 5) Review how to interpret CEUS studies.
Chander	Lulla	MD, MBBS	1) Learn how to develop a CEUS program. 2) Learn what patients are appropriate for CEUS. 3) Review organs where CEUS can be used. 4) Discuss how to optimize CEUS imaging. 5) Review how to interpret CEUS studies.
Vito	Cantisani	PhD,MD	1) Learn how to develop a CEUS program. 2) Learn what patients are appropriate for CEUS. 3) Review organs where CEUS can be used. 4) Discuss how to optimize CEUS imaging. 5) Review how to interpret CEUS studies.
Maija	Radzina	PhD,MD	1) Learn how to develop a CEUS program. 2) Learn what patients are appropriate for CEUS. 3) Review organs where CEUS can be used. 4) Discuss how to optimize CEUS imaging. 5) Review how to interpret CEUS studies.
David	Fetzer	MD	1) Learn how to develop a CEUS program. 2) Learn what patients are appropriate for CEUS. 3) Review organs where CEUS can be used. 4) Discuss how to optimize CEUS imaging. 5) Review how to interpret CEUS studies.
Michelle	Robbin	MD, MS	1) Learn how to develop a CEUS program. 2) Learn what patients are appropriate for CEUS. 3) Review organs where CEUS can be used. 4) Discuss how to optimize CEUS imaging. 5) Review how to interpret CEUS studies.
Adrian	Lim	FRCR,MD	1) Learn how to develop a CEUS program. 2) Learn what patients are appropriate for CEUS. 3) Review organs where CEUS can be used. 4) Discuss how to optimize CEUS imaging. 5) Review how to interpret CEUS studies.

Mirko	D'Onofrio	MD	1) Learn how to develop a CEUS program. 2) Learn what patients are appropriate for CEUS. 3) Review organs where CEUS can be used. 4) Discuss how to optimize CEUS imaging. 5) Review how to interpret CEUS studies.
Louis	Mazzarelli	MD	1) Learn how to develop a CEUS program. 2) Learn what patients are appropriate for CEUS. 3) Review organs where CEUS can be used. 4) Discuss how to optimize CEUS imaging. 5) Review how to interpret CEUS studies.
Paul	Sidhu	FRCR,BSc	1) Learn how to develop a CEUS program. 2) Learn what patients are appropriate for CEUS. 3) Review organs where CEUS can be used. 4) Discuss how to optimize CEUS imaging. 5) Review how to interpret CEUS studies.
Yuko	Kono	PhD,MD	1) Learn how to develop a CEUS program. 2) Learn what patients are appropriate for CEUS. 3) Review organs where CEUS can be used. 4) Discuss how to optimize CEUS imaging. 5) Review how to interpret CEUS studies.
Pal Novak	Kaposi	MD, PhD	1) Learn how to develop a CEUS program. 2) Learn what patients are appropriate for CEUS. 3) Review organs where CEUS can be used. 4) Discuss how to optimize CEUS imaging. 5) Review how to interpret CEUS studies.
Vasileios	Rafailidis	MSc,MD	1) Learn how to develop a CEUS program. 2) Learn what patients are appropriate for CEUS. 3) Review organs where CEUS can be used. 4) Discuss how to optimize CEUS imaging. 5) Review how to interpret CEUS studies.
Rachel	Lange		1) Learn how to develop a CEUS program. 2) Learn what patients are appropriate for CEUS. 3) Review organs where CEUS can be used. 4) Discuss how to optimize CEUS imaging. 5) Review how to interpret CEUS studies.
Alyx	Escamilla		1) Learn how to develop a CEUS program. 2) Learn what patients are appropriate for CEUS. 3) Review organs where CEUS can be used. 4) Discuss how to optimize CEUS imaging. 5) Review how to interpret CEUS studies.

Sadhna	Verma	MD, MBA	1) Recognize characteristic imaging patterns of common systemic autoimmune diseases. 2) Differentiate immune-mediated disease from infection, malignancy, and treatment-related complications. 3) Identify imaging findings of immune checkpoint inhibitor–related toxicities across organ systems. 4) Apply a structured, organ-based differential diagnosis approach to immune-mediated disorders.
Stacy	Smith	MD	1) Recognize characteristic imaging patterns of common systemic autoimmune diseases. 2) Differentiate immune-mediated disease from infection, malignancy, and treatment-related complications. 3) Identify imaging findings of immune checkpoint inhibitor–related toxicities across organ systems. 4) Apply a structured, organ-based differential diagnosis approach to immune-mediated disorders.
Jayakrishna	Gollamudi	MD	1) Recognize characteristic imaging patterns of common systemic autoimmune diseases. 2) Differentiate immune-mediated disease from infection, malignancy, and treatment-related complications. 3) Identify imaging findings of immune checkpoint inhibitor–related toxicities across organ systems. 4) Apply a structured, organ-based differential diagnosis approach to immune-mediated disorders.
Juliana	Tobler	MD	1) Recognize characteristic imaging patterns of common systemic autoimmune diseases. 2) Differentiate immune-mediated disease from infection, malignancy, and treatment-related complications. 3) Identify imaging findings of immune checkpoint inhibitor–related toxicities across organ systems. 4) Apply a structured, organ-based differential diagnosis approach to immune-mediated disorders.
Yashant	Aswani	MD	1) Recognize characteristic imaging patterns of common systemic autoimmune diseases. 2) Differentiate immune-mediated disease from infection, malignancy, and treatment-related complications. 3) Identify imaging findings of immune checkpoint inhibitor–related toxicities across organ systems. 4) Apply a structured, organ-based differential diagnosis approach to immune-mediated disorders.
Ichiro	Ikuta	MMedSc, MD	1) Explain the basic mechanisms of immune checkpoint inhibitors and how they produce imaging patterns distinct from cytotoxic chemotherapy. 2) Apply iRECIST criteria in daily practice to differentiate pseudoprogression from true progression in patients treated with checkpoint inhibitors. 3) Recognize the imaging manifestations of immune-related adverse events across thoracic, abdominal, endocrine, cardiac, and musculoskeletal organ systems. 4) Explain how CT-derived body composition metrics including sarcopenia, myosteatosis, and visceral adiposity serve as prognostic biomarkers for immunotherapy response and toxicity. 5) Identify the acute imaging presentations of immunotherapy complications in the emergency setting, including immune-mediated pneumonitis, colitis, and myocarditis.

Caroline	Caramella	MD	1) Explain the basic mechanisms of immune checkpoint inhibitors and how they produce imaging patterns distinct from cytotoxic chemotherapy. 2) Apply iRECIST criteria in daily practice to differentiate pseudoprogression from true progression in patients treated with checkpoint inhibitors. 3) Recognize the imaging manifestations of immune-related adverse events across thoracic, abdominal, endocrine, cardiac, and musculoskeletal organ systems. 4) Explain how CT-derived body composition metrics including sarcopenia, myosteatosis, and visceral adiposity serve as prognostic biomarkers for immunotherapy response and toxicity. 5) Identify the acute imaging presentations of immunotherapy complications in the emergency setting, including immune-mediated pneumonitis, colitis, and myocarditis.
Mizuki	Nishino	MPH,MD	1) Explain the basic mechanisms of immune checkpoint inhibitors and how they produce imaging patterns distinct from cytotoxic chemotherapy. 2) Apply iRECIST criteria in daily practice to differentiate pseudoprogression from true progression in patients treated with checkpoint inhibitors. 3) Recognize the imaging manifestations of immune-related adverse events across thoracic, abdominal, endocrine, cardiac, and musculoskeletal organ systems. 4) Explain how CT-derived body composition metrics including sarcopenia, myosteatosis, and visceral adiposity serve as prognostic biomarkers for immunotherapy response and toxicity. 5) Identify the acute imaging presentations of immunotherapy complications in the emergency setting, including immune-mediated pneumonitis, colitis, and myocarditis.
Michel	Eisenblaetter	MD, PhD	1) Explain the basic mechanisms of immune checkpoint inhibitors and how they produce imaging patterns distinct from cytotoxic chemotherapy. 2) Apply iRECIST criteria in daily practice to differentiate pseudoprogression from true progression in patients treated with checkpoint inhibitors. 3) Recognize the imaging manifestations of immune-related adverse events across thoracic, abdominal, endocrine, cardiac, and musculoskeletal organ systems. 4) Explain how CT-derived body composition metrics including sarcopenia, myosteatosis, and visceral adiposity serve as prognostic biomarkers for immunotherapy response and toxicity. 5) Identify the acute imaging presentations of immunotherapy complications in the emergency setting, including immune-mediated pneumonitis, colitis, and myocarditis.

Isabel	Molwitz	MBA,MD	1) Explain the basic mechanisms of immune checkpoint inhibitors and how they produce imaging patterns distinct from cytotoxic chemotherapy. 2) Apply iRECIST criteria in daily practice to differentiate pseudoprogression from true progression in patients treated with checkpoint inhibitors. 3) Recognize the imaging manifestations of immune-related adverse events across thoracic, abdominal, endocrine, cardiac, and musculoskeletal organ systems. 4) Explain how CT-derived body composition metrics including sarcopenia, myosteatosis, and visceral adiposity serve as prognostic biomarkers for immunotherapy response and toxicity. 5) Identify the acute imaging presentations of immunotherapy complications in the emergency setting, including immune-mediated pneumonitis, colitis, and myocarditis.
Clarisse	Dromain	MD, PhD	1) Explain the basic mechanisms of immune checkpoint inhibitors and how they produce imaging patterns distinct from cytotoxic chemotherapy. 2) Apply iRECIST criteria in daily practice to differentiate pseudoprogression from true progression in patients treated with checkpoint inhibitors. 3) Recognize the imaging manifestations of immune-related adverse events across thoracic, abdominal, endocrine, cardiac, and musculoskeletal organ systems. 4) Explain how CT-derived body composition metrics including sarcopenia, myosteatosis, and visceral adiposity serve as prognostic biomarkers for immunotherapy response and toxicity. 5) Identify the acute imaging presentations of immunotherapy complications in the emergency setting, including immune-mediated pneumonitis, colitis, and myocarditis.
Summer	Decker	PhD	1) To familiarize radiologists with the history of autopsy and the reasons behind the decline in autopsy rates. 2) To discuss the impact of declining autopsy rates on vital statistics, quality control in hospitals, patient care, and public health services and planning. 3) To introduce postmortem and forensic imaging, including its history and ongoing development as an interdisciplinary subspecialty of radiology and pathology. 4) To introduce various postmortem imaging techniques and describe their utility in medicolegal death investigation. 5) To describe and compare the benefits and limitations of postmortem imaging and autopsy, with emphasis on the importance of integrating these investigative techniques while striving to promote and maintain autopsy clinical training and practice. 6) To specifically describe PMCT applications and interpretation, including the importance of recognizing postmortem changes, with strong emphasis on the importance of dedicated education and training in postmortem and forensic imaging for those interested in engaging in the field.

Nadia	Solomon	MSc,MA,MD	1) To familiarize radiologists with the history of autopsy and the reasons behind the decline in autopsy rates. 2) To discuss the impact of declining autopsy rates on vital statistics, quality control in hospitals, patient care, and public health services and planning. 3) To introduce postmortem and forensic imaging, including its history and ongoing development as an interdisciplinary subspecialty of radiology and pathology. 4) To introduce various postmortem imaging techniques and describe their utility in medicolegal death investigation. 5) To describe and compare the benefits and limitations of postmortem imaging and autopsy, with emphasis on the importance of integrating these investigative techniques while striving to promote and maintain autopsy clinical training and practice. 6) To specifically describe PMCT applications and interpretation, including the importance of recognizing postmortem changes, with strong emphasis on the importance of dedicated education and training in postmortem and forensic imaging for those interested in engaging in the field.
Megan	Marine	MD	1) To familiarize radiologists with the history of autopsy and the reasons behind the decline in autopsy rates. 2) To discuss the impact of declining autopsy rates on vital statistics, quality control in hospitals, patient care, and public health services and planning. 3) To introduce postmortem and forensic imaging, including its history and ongoing development as an interdisciplinary subspecialty of radiology and pathology. 4) To introduce various postmortem imaging techniques and describe their utility in medicolegal death investigation. 5) To describe and compare the benefits and limitations of postmortem imaging and autopsy, with emphasis on the importance of integrating these investigative techniques while striving to promote and maintain autopsy clinical training and practice. 6) To specifically describe PMCT applications and interpretation, including the importance of recognizing postmortem changes, with strong emphasis on the importance of dedicated education and training in postmortem and forensic imaging for those interested in engaging in the field.

Jonathan	Ford	PhD	1) To familiarize radiologists with the history of autopsy and the reasons behind the decline in autopsy rates. 2) To discuss the impact of declining autopsy rates on vital statistics, quality control in hospitals, patient care, and public health services and planning. 3) To introduce postmortem and forensic imaging, including its history and ongoing development as an interdisciplinary subspecialty of radiology and pathology. 4) To introduce various postmortem imaging techniques and describe their utility in medicolegal death investigation. 5) To describe and compare the benefits and limitations of postmortem imaging and autopsy, with emphasis on the importance of integrating these investigative techniques while striving to promote and maintain autopsy clinical training and practice. 6) To specifically describe PMCT applications and interpretation, including the importance of recognizing postmortem changes, with strong emphasis on the importance of dedicated education and training in postmortem and forensic imaging for those interested in engaging in the field.
Fabrice	Dedouit	PhD,MD	1) To familiarize radiologists with the history of autopsy and the reasons behind the decline in autopsy rates. 2) To discuss the impact of declining autopsy rates on vital statistics, quality control in hospitals, patient care, and public health services and planning. 3) To introduce postmortem and forensic imaging, including its history and ongoing development as an interdisciplinary subspecialty of radiology and pathology. 4) To introduce various postmortem imaging techniques and describe their utility in medicolegal death investigation. 5) To describe and compare the benefits and limitations of postmortem imaging and autopsy, with emphasis on the importance of integrating these investigative techniques while striving to promote and maintain autopsy clinical training and practice. 6) To specifically describe PMCT applications and interpretation, including the importance of recognizing postmortem changes, with strong emphasis on the importance of dedicated education and training in postmortem and forensic imaging for those interested in engaging in the field.

Jamie	Elifritz	MD,BS	1) To familiarize radiologists with the history of autopsy and the reasons behind the decline in autopsy rates. 2) To discuss the impact of declining autopsy rates on vital statistics, quality control in hospitals, patient care, and public health services and planning. 3) To introduce postmortem and forensic imaging, including its history and ongoing development as an interdisciplinary subspecialty of radiology and pathology. 4) To introduce various postmortem imaging techniques and describe their utility in medicolegal death investigation. 5) To describe and compare the benefits and limitations of postmortem imaging and autopsy, with emphasis on the importance of integrating these investigative techniques while striving to promote and maintain autopsy clinical training and practice. 6) To specifically describe PMCT applications and interpretation, including the importance of recognizing postmortem changes, with strong emphasis on the importance of dedicated education and training in postmortem and forensic imaging for those interested in engaging in the field.
Jamie	Schroeder	DPhil,MD	1) Understand the fundamentals of photon-counting imaging and its advantages over conventional CT. 2) Explore clinical applications across different organ systems, including cardiovascular, neuroimaging, oncology, musculoskeletal, and pulmonary imaging. 3) Learn how PCD-CT enhances lesion detection, artifact reduction, and vascular imaging. 4) Discuss real-world implementation, challenges, and future advancements in photon-counting technology.
Amir	Pourmorteza	PhD	1) Understand the fundamentals of photon-counting imaging and its advantages over conventional CT. 2) Explore clinical applications across different organ systems, including cardiovascular, neuroimaging, oncology, musculoskeletal, and pulmonary imaging. 3) Learn how PCD-CT enhances lesion detection, artifact reduction, and vascular imaging. 4) Discuss real-world implementation, challenges, and future advancements in photon-counting technology.
Alicia	Chen	MD	1) Understand the fundamentals of photon-counting imaging and its advantages over conventional CT. 2) Explore clinical applications across different organ systems, including cardiovascular, neuroimaging, oncology, musculoskeletal, and pulmonary imaging. 3) Learn how PCD-CT enhances lesion detection, artifact reduction, and vascular imaging. 4) Discuss real-world implementation, challenges, and future advancements in photon-counting technology.

Satomi	Kawamoto	MD	1) Understand the fundamentals of photon-counting imaging and its advantages over conventional CT. 2) Explore clinical applications across different organ systems, including cardiovascular, neuroimaging, oncology, musculoskeletal, and pulmonary imaging. 3) Learn how PCD-CT enhances lesion detection, artifact reduction, and vascular imaging. 4) Discuss real-world implementation, challenges, and future advancements in photon-counting technology.
Francis	Baffour	MD	1) Understand the fundamentals of photon-counting imaging and its advantages over conventional CT. 2) Explore clinical applications across different organ systems, including cardiovascular, neuroimaging, oncology, musculoskeletal, and pulmonary imaging. 3) Learn how PCD-CT enhances lesion detection, artifact reduction, and vascular imaging. 4) Discuss real-world implementation, challenges, and future advancements in photon-counting technology.
Matthias	Eberhard	MD	1) Understand the fundamentals of photon-counting imaging and its advantages over conventional CT. 2) Explore clinical applications across different organ systems, including cardiovascular, neuroimaging, oncology, musculoskeletal, and pulmonary imaging. 3) Learn how PCD-CT enhances lesion detection, artifact reduction, and vascular imaging. 4) Discuss real-world implementation, challenges, and future advancements in photon-counting technology.
Carolyn	Wang	MD	1) Recognize various types of contrast reactions and the proper management of various types of contrast reactions through hands-on simulation-based training. 2) Learn with hands-on practice the proper administration of various routes of epinephrine as well as other medications to treat the more common hypersensitivity contrast reactions. 3) Recognize and manage a contrast reaction in a sedated patient and pediatric patient.
Carina	Yang	MD	1) Recognize various types of contrast reactions and the proper management of various types of contrast reactions through hands-on simulation-based training. 2) Learn with hands-on practice the proper administration of various routes of epinephrine as well as other medications to treat the more common hypersensitivity contrast reactions. 3) Recognize and manage a contrast reaction in a sedated patient and pediatric patient.

Anup	Alexander	MD	1) Recognize various types of contrast reactions and the proper management of various types of contrast reactions through hands-on simulation-based training. 2) Learn with hands-on practice the proper administration of various routes of epinephrine as well as other medications to treat the more common hypersensitivity contrast reactions. 3) Recognize and manage a contrast reaction in a sedated patient and pediatric patient.
Daniella	Asch	MD	1) Recognize various types of contrast reactions and the proper management of various types of contrast reactions through hands-on simulation-based training. 2) Learn with hands-on practice the proper administration of various routes of epinephrine as well as other medications to treat the more common hypersensitivity contrast reactions. 3) Recognize and manage a contrast reaction in a sedated patient and pediatric patient.
Kirk	Banerian	BS,MD	1) Recognize various types of contrast reactions and the proper management of various types of contrast reactions through hands-on simulation-based training. 2) Learn with hands-on practice the proper administration of various routes of epinephrine as well as other medications to treat the more common hypersensitivity contrast reactions. 3) Recognize and manage a contrast reaction in a sedated patient and pediatric patient.
Minal	Jagtiani	MD	1) Recognize various types of contrast reactions and the proper management of various types of contrast reactions through hands-on simulation-based training. 2) Learn with hands-on practice the proper administration of various routes of epinephrine as well as other medications to treat the more common hypersensitivity contrast reactions. 3) Recognize and manage a contrast reaction in a sedated patient and pediatric patient.
Linda	Kelahan	MD	1) Recognize various types of contrast reactions and the proper management of various types of contrast reactions through hands-on simulation-based training. 2) Learn with hands-on practice the proper administration of various routes of epinephrine as well as other medications to treat the more common hypersensitivity contrast reactions. 3) Recognize and manage a contrast reaction in a sedated patient and pediatric patient.
Benjamin	Mervak	MD	1) Recognize various types of contrast reactions and the proper management of various types of contrast reactions through hands-on simulation-based training. 2) Learn with hands-on practice the proper administration of various routes of epinephrine as well as other medications to treat the more common hypersensitivity contrast reactions. 3) Recognize and manage a contrast reaction in a sedated patient and pediatric patient.

Stephen	O'Connor	MD	1) Recognize various types of contrast reactions and the proper management of various types of contrast reactions through hands-on simulation-based training. 2) Learn with hands-on practice the proper administration of various routes of epinephrine as well as other medications to treat the more common hypersensitivity contrast reactions. 3) Recognize and manage a contrast reaction in a sedated patient and pediatric patient.
Melissa	Picard	MD	1) Recognize various types of contrast reactions and the proper management of various types of contrast reactions through hands-on simulation-based training. 2) Learn with hands-on practice the proper administration of various routes of epinephrine as well as other medications to treat the more common hypersensitivity contrast reactions. 3) Recognize and manage a contrast reaction in a sedated patient and pediatric patient.
Jennifer	Schopp	MD	1) Recognize various types of contrast reactions and the proper management of various types of contrast reactions through hands-on simulation-based training. 2) Learn with hands-on practice the proper administration of various routes of epinephrine as well as other medications to treat the more common hypersensitivity contrast reactions. 3) Recognize and manage a contrast reaction in a sedated patient and pediatric patient.
Matthew	Silbergleit	MD	1) Recognize various types of contrast reactions and the proper management of various types of contrast reactions through hands-on simulation-based training. 2) Learn with hands-on practice the proper administration of various routes of epinephrine as well as other medications to treat the more common hypersensitivity contrast reactions. 3) Recognize and manage a contrast reaction in a sedated patient and pediatric patient.
Richard	Silbergleit	MBA,MD	1) Recognize various types of contrast reactions and the proper management of various types of contrast reactions through hands-on simulation-based training. 2) Learn with hands-on practice the proper administration of various routes of epinephrine as well as other medications to treat the more common hypersensitivity contrast reactions. 3) Recognize and manage a contrast reaction in a sedated patient and pediatric patient.
Alisa	Sumkin	DO	1) Recognize various types of contrast reactions and the proper management of various types of contrast reactions through hands-on simulation-based training. 2) Learn with hands-on practice the proper administration of various routes of epinephrine as well as other medications to treat the more common hypersensitivity contrast reactions. 3) Recognize and manage a contrast reaction in a sedated patient and pediatric patient.

Gerges	Abdelsayed	MD	1) Recognize various types of contrast reactions and the proper management of various types of contrast reactions through hands-on simulation-based training. 2) Learn with hands-on practice the proper administration of various routes of epinephrine as well as other medications to treat the more common hypersensitivity contrast reactions. 3) Recognize and manage a contrast reaction in a sedated patient and pediatric patient.
Alexandra	Aronowitz	MD	1) Recognize various types of contrast reactions and the proper management of various types of contrast reactions through hands-on simulation-based training. 2) Learn with hands-on practice the proper administration of various routes of epinephrine as well as other medications to treat the more common hypersensitivity contrast reactions. 3) Recognize and manage a contrast reaction in a sedated patient and pediatric patient.
Usman	Beg	DO	1) Recognize various types of contrast reactions and the proper management of various types of contrast reactions through hands-on simulation-based training. 2) Learn with hands-on practice the proper administration of various routes of epinephrine as well as other medications to treat the more common hypersensitivity contrast reactions. 3) Recognize and manage a contrast reaction in a sedated patient and pediatric patient.
Aman	Buttar	MD	1) Recognize various types of contrast reactions and the proper management of various types of contrast reactions through hands-on simulation-based training. 2) Learn with hands-on practice the proper administration of various routes of epinephrine as well as other medications to treat the more common hypersensitivity contrast reactions. 3) Recognize and manage a contrast reaction in a sedated patient and pediatric patient.
William	Chen	MD	1) Recognize various types of contrast reactions and the proper management of various types of contrast reactions through hands-on simulation-based training. 2) Learn with hands-on practice the proper administration of various routes of epinephrine as well as other medications to treat the more common hypersensitivity contrast reactions. 3) Recognize and manage a contrast reaction in a sedated patient and pediatric patient.
Jonathan	Dzielski	DO	1) Recognize various types of contrast reactions and the proper management of various types of contrast reactions through hands-on simulation-based training. 2) Learn with hands-on practice the proper administration of various routes of epinephrine as well as other medications to treat the more common hypersensitivity contrast reactions. 3) Recognize and manage a contrast reaction in a sedated patient and pediatric patient.

Adlai	Grayson	MD	1) Recognize various types of contrast reactions and the proper management of various types of contrast reactions through hands-on simulation-based training. 2) Learn with hands-on practice the proper administration of various routes of epinephrine as well as other medications to treat the more common hypersensitivity contrast reactions. 3) Recognize and manage a contrast reaction in a sedated patient and pediatric patient.
Rajangad	Gurtatta	MD,BS	1) Recognize various types of contrast reactions and the proper management of various types of contrast reactions through hands-on simulation-based training. 2) Learn with hands-on practice the proper administration of various routes of epinephrine as well as other medications to treat the more common hypersensitivity contrast reactions. 3) Recognize and manage a contrast reaction in a sedated patient and pediatric patient.
Julia	Miao	MD	1) Recognize various types of contrast reactions and the proper management of various types of contrast reactions through hands-on simulation-based training. 2) Learn with hands-on practice the proper administration of various routes of epinephrine as well as other medications to treat the more common hypersensitivity contrast reactions. 3) Recognize and manage a contrast reaction in a sedated patient and pediatric patient.
Sheila	Mullen	MD	1) Recognize various types of contrast reactions and the proper management of various types of contrast reactions through hands-on simulation-based training. 2) Learn with hands-on practice the proper administration of various routes of epinephrine as well as other medications to treat the more common hypersensitivity contrast reactions. 3) Recognize and manage a contrast reaction in a sedated patient and pediatric patient.
Nihal	Thapa	MD	1) Recognize various types of contrast reactions and the proper management of various types of contrast reactions through hands-on simulation-based training. 2) Learn with hands-on practice the proper administration of various routes of epinephrine as well as other medications to treat the more common hypersensitivity contrast reactions. 3) Recognize and manage a contrast reaction in a sedated patient and pediatric patient.
Jonathan	Wang	MD	1) Recognize various types of contrast reactions and the proper management of various types of contrast reactions through hands-on simulation-based training. 2) Learn with hands-on practice the proper administration of various routes of epinephrine as well as other medications to treat the more common hypersensitivity contrast reactions. 3) Recognize and manage a contrast reaction in a sedated patient and pediatric patient.

Jason	Allen	PhD,MD	1) Integrate the clinical presentation, laboratory testing, and multi-system radiologic imaging to know when paraneoplastic syndrome is appropriate to include in the differential diagnosis. 2) Recommend appropriate follow-up with multi-system imaging, laboratory testing, and clinical examinations to distinguish paraneoplastic syndrome from other mimicking pathologies. 3) Optimize multi-system imaging for paraneoplastic syndrome evaluation and monitoring.
David	Yousem	MD, MBA	1) Integrate the clinical presentation, laboratory testing, and multi-system radiologic imaging to know when paraneoplastic syndrome is appropriate to include in the differential diagnosis. 2) Recommend appropriate follow-up with multi-system imaging, laboratory testing, and clinical examinations to distinguish paraneoplastic syndrome from other mimicking pathologies. 3) Optimize multi-system imaging for paraneoplastic syndrome evaluation and monitoring.
Margarita	Revzin	MS,MD	1) Integrate the clinical presentation, laboratory testing, and multi-system radiologic imaging to know when paraneoplastic syndrome is appropriate to include in the differential diagnosis. 2) Recommend appropriate follow-up with multi-system imaging, laboratory testing, and clinical examinations to distinguish paraneoplastic syndrome from other mimicking pathologies. 3) Optimize multi-system imaging for paraneoplastic syndrome evaluation and monitoring.
Felix	Chew	MD, MEd	1) Integrate the clinical presentation, laboratory testing, and multi-system radiologic imaging to know when paraneoplastic syndrome is appropriate to include in the differential diagnosis. 2) Recommend appropriate follow-up with multi-system imaging, laboratory testing, and clinical examinations to distinguish paraneoplastic syndrome from other mimicking pathologies. 3) Optimize multi-system imaging for paraneoplastic syndrome evaluation and monitoring.
Mariam	Aboian	PhD,MD	1) Integrate the clinical presentation, laboratory testing, and multi-system radiologic imaging to know when paraneoplastic syndrome is appropriate to include in the differential diagnosis. 2) Recommend appropriate follow-up with multi-system imaging, laboratory testing, and clinical examinations to distinguish paraneoplastic syndrome from other mimicking pathologies. 3) Optimize multi-system imaging for paraneoplastic syndrome evaluation and monitoring.

Margarita	Revzin	MS,MD	1) Integrate the clinical presentation, laboratory testing, and multi-system radiologic imaging to know when paraneoplastic syndrome is appropriate to include in the differential diagnosis. 2) Recommend appropriate follow-up with multi-system imaging, laboratory testing, and clinical examinations to distinguish paraneoplastic syndrome from other mimicking pathologies. 3) Optimize multi-system imaging for paraneoplastic syndrome evaluation and monitoring.
Esma	Akin	MD	1) Provide an update on the role of PET/CT in imaging infection/inflammation. 2) Discuss importance of patient selection and preparation. 3) Discuss important physiologic mimics encountered when reading these studies. 4) Infiltrative Cardiomyopathies are best assessed by a multi-modality approach. 5) ATTR cardiomyopathy (ATTR CM) is often underdiagnosed, and when hereditary is associated with specific genotypes and phenotypes. 6) While 99mTc pyrophosphate (PYP) scanning currently yields the greatest specificity for the diagnosis of ATTR CM, cardiac MRI (CMR) can characterize structural abnormalities and diseases that mimic ATTR CM. 7) An algorithmic approach using echocardiography to direct the patient to initial CMR vs PYP scan is recommended. 8) Cardiac sarcoid can produce profound structural changes on CMR associated with acute inflammation and or chronic fibrosis. FDG PET/CT can precisely distinguish acute inflammation from fibrosis, and therefore inform the decision to treat. 9) Discuss the appropriate use of PET/CT for evaluation of fever of unknown origin. 10) Understand the role of PET/CT in the evaluation of infection/inflammation. 11) Discuss the future potential of PET/CT and PET/MR in the evaluation of infection/inflammation. 12) Discussion of appropriate use of nuclear medicine for diagnosis in infection and inflammation. 13) Provide an overview of potential pitfalls in pediatric interpretation. 14) Application of ALARA principles for rationalizing nuclear investigations in the setting of pediatric infectious/inflammatory diseases.

Esma	Akin	MD	1) Provide an update on the role of PET/CT in imaging infection/inflammation. 2) Discuss importance of patient selection and preparation. 3) Discuss important physiologic mimics encountered when reading these studies. 4) Infiltrative Cardiomyopathies are best assessed by a multi-modality approach. 5) ATTR cardiomyopathy (ATTR CM) is often underdiagnosed, and when hereditary is associated with specific genotypes and phenotypes. 6) While 99mTc pyrophosphate (PYP) scanning currently yields the greatest specificity for the diagnosis of ATTR CM, cardiac MRI (CMR) can characterize structural abnormalities and diseases that mimic ATTR CM. 7) An algorithmic approach using echocardiography to direct the patient to initial CMR vs PYP scan is recommended. 8) Cardiac sarcoid can produce profound structural changes on CMR associated with acute inflammation and or chronic fibrosis. FDG PET/CT can precisely distinguish acute inflammation from fibrosis, and therefore inform the decision to treat. 9) Discuss the appropriate use of PET/CT for evaluation of fever of unknown origin. 10) Understand the role of PET/CT in the evaluation of infection/inflammation. 11) Discuss the future potential of PET/CT and PET/MR in the evaluation of infection/inflammation. 12) Discussion of appropriate use of nuclear medicine for diagnosis in infection and inflammation. 13) Provide an overview of potential pitfalls in pediatric interpretation. 14) Application of ALARA principles for rationalizing nuclear investigations in the setting of pediatric infectious/inflammatory diseases.

Aileen	O'Shea	MBBCh	1) Provide an update on the role of PET/CT in imaging infection/inflammation. 2) Discuss importance of patient selection and preparation. 3) Discuss important physiologic mimics encountered when reading these studies. 4) Infiltrative Cardiomyopathies are best assessed by a multi-modality approach. 5) ATTR cardiomyopathy (ATTR CM) is often underdiagnosed, and when hereditary is associated with specific genotypes and phenotypes. 6) While 99mTc pyrophosphate (PYP) scanning currently yields the greatest specificity for the diagnosis of ATTR CM, cardiac MRI (CMR) can characterize structural abnormalities and diseases that mimic ATTR CM. 7) An algorithmic approach using echocardiography to direct the patient to initial CMR vs PYP scan is recommended. 8) Cardiac sarcoid can produce profound structural changes on CMR associated with acute inflammation and or chronic fibrosis. FDG PET/CT can precisely distinguish acute inflammation from fibrosis, and therefore inform the decision to treat. 9) Discuss the appropriate use of PET/CT for evaluation of fever of unknown origin. 10) Understand the role of PET/CT in the evaluation of infection/inflammation. 11) Discuss the future potential of PET/CT and PET/MR in the evaluation of infection/inflammation. 12) Discussion of appropriate use of nuclear medicine for diagnosis in infection and inflammation. 13) Provide an overview of potential pitfalls in pediatric interpretation. 14) Application of ALARA principles for rationalizing nuclear investigations in the setting of pediatric infectious/inflammatory diseases.

Robert	Zeman	MD	1) Provide an update on the role of PET/CT in imaging infection/inflammation. 2) Discuss importance of patient selection and preparation. 3) Discuss important physiologic mimics encountered when reading these studies. 4) Infiltrative Cardiomyopathies are best assessed by a multi-modality approach. 5) ATTR cardiomyopathy (ATTR CM) is often underdiagnosed, and when hereditary is associated with specific genotypes and phenotypes. 6) While 99mTc pyrophosphate (PYP) scanning currently yields the greatest specificity for the diagnosis of ATTR CM, cardiac MRI (CMR) can characterize structural abnormalities and diseases that mimic ATTR CM. 7) An algorithmic approach using echocardiography to direct the patient to initial CMR vs PYP scan is recommended. 8) Cardiac sarcoid can produce profound structural changes on CMR associated with acute inflammation and or chronic fibrosis. FDG PET/CT can precisely distinguish acute inflammation from fibrosis, and therefore inform the decision to treat. 9) Discuss the appropriate use of PET/CT for evaluation of fever of unknown origin. 10) Understand the role of PET/CT in the evaluation of infection/inflammation. 11) Discuss the future potential of PET/CT and PET/MR in the evaluation of infection/inflammation. 12) Discussion of appropriate use of nuclear medicine for diagnosis in infection and inflammation. 13) Provide an overview of potential pitfalls in pediatric interpretation. 14) Application of ALARA principles for rationalizing nuclear investigations in the setting of pediatric infectious/inflammatory diseases.

Samantha	Harrington	MD	1) Provide an update on the role of PET/CT in imaging infection/inflammation. 2) Discuss importance of patient selection and preparation. 3) Discuss important physiologic mimics encountered when reading these studies. 4) Infiltrative Cardiomyopathies are best assessed by a multi-modality approach. 5) ATTR cardiomyopathy (ATTR CM) is often underdiagnosed, and when hereditary is associated with specific genotypes and phenotypes. 6) While 99mTc pyrophosphate (PYP) scanning currently yields the greatest specificity for the diagnosis of ATTR CM, cardiac MRI (CMR) can characterize structural abnormalities and diseases that mimic ATTR CM. 7) An algorithmic approach using echocardiography to direct the patient to initial CMR vs PYP scan is recommended. 8) Cardiac sarcoid can produce profound structural changes on CMR associated with acute inflammation and or chronic fibrosis. FDG PET/CT can precisely distinguish acute inflammation from fibrosis, and therefore inform the decision to treat. 9) Discuss the appropriate use of PET/CT for evaluation of fever of unknown origin. 10) Understand the role of PET/CT in the evaluation of infection/inflammation. 11) Discuss the future potential of PET/CT and PET/MR in the evaluation of infection/inflammation. 12) Discussion of appropriate use of nuclear medicine for diagnosis in infection and inflammation. 13) Provide an overview of potential pitfalls in pediatric interpretation. 14) Application of ALARA principles for rationalizing nuclear investigations in the setting of pediatric infectious/inflammatory diseases.
Elizabeth	Dibble	MD	1) Become familiar with subtypes of breast cancer, the role of FDG and experimental tracers for imaging breast cancer, and emerging breast cancer theranostics. 2) List ways in which PET quantification helps with imaging interpretation. 3) Discuss components need to assure proper PET quantification. 4) Describe examples where PET quantification can help with diagnosis and/or response assesment. 5) Learn indications, pearls, and pitfalls of FES PET/CT. 6) List ways in which PET quantification helps with imaging interpretation with example cases. 7) Discuss components need to assure proper PET quantification.

Sophia	O'Brien	MD, MEd	1) Become familiar with subtypes of breast cancer, the role of FDG and experimental tracers for imaging breast cancer, and emerging breast cancer theranostics. 2) List ways in which PET quantification helps with imaging interpretation. 3) Discuss components need to assure proper PET quantification. 4) Describe examples where PET quantification can help with diagnosis and/or response assesment. 5) Learn indications, pearls, and pitfalls of FES PET/CT. 6) List ways in which PET quantification helps with imaging interpretation with example cases. 7) Discuss components need to assure proper PET quantification.
Elizabeth	Dibble	MD	1) Become familiar with subtypes of breast cancer, the role of FDG and experimental tracers for imaging breast cancer, and emerging breast cancer theranostics. 2) List ways in which PET quantification helps with imaging interpretation. 3) Discuss components need to assure proper PET quantification. 4) Describe examples where PET quantification can help with diagnosis and/or response assesment. 5) Learn indications, pearls, and pitfalls of FES PET/CT. 6) List ways in which PET quantification helps with imaging interpretation with example cases. 7) Discuss components need to assure proper PET quantification.
David	Mankoff	PhD,MD	1) Become familiar with subtypes of breast cancer, the role of FDG and experimental tracers for imaging breast cancer, and emerging breast cancer theranostics. 2) List ways in which PET quantification helps with imaging interpretation. 3) Discuss components need to assure proper PET quantification. 4) Describe examples where PET quantification can help with diagnosis and/or response assesment. 5) Learn indications, pearls, and pitfalls of FES PET/CT. 6) List ways in which PET quantification helps with imaging interpretation with example cases. 7) Discuss components need to assure proper PET quantification.
Helen	Nadel	MD, FRCPC	1) Learning about the implementation of the superior sensitivity and spatial resolution of 3D CZT imaging in reducing acquisition time or dose in pediatric scans. 2) Understand controversies in Ped GU Scinitgraphy. 3) Describe novel RPT approaches for evaluating and treatment children with Neuroblastoma. 4) Describe value of wholebody PET/CT in pediatrics.
Barry	Shulkin	MBA,MD	1) Learning about the implementation of the superior sensitivity and spatial resolution of 3D CZT imaging in reducing acquisition time or dose in pediatric scans. 2) Understand controversies in Ped GU Scinitgraphy. 3) Describe novel RPT approaches for evaluating and treatment children with Neuroblastoma. 4) Describe value of wholebody PET/CT in pediatrics.

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Zvi	Bar-Sever	MD	1) Learning about the implementation of the superior sensitivity and spatial resolution of 3D CZT imaging in reducing acquisition time or dose in pediatric scans. 2) Understand controversies in Ped GU Scinitgraphy. 3) Describe novel RPT approaches for evaluating and treatment children with Neuroblastoma. 4) Describe value of wholebody PET/CT in pediatrics.
Neeta	Pandit-Taskar	MD	1) Learning about the implementation of the superior sensitivity and spatial resolution of 3D CZT imaging in reducing acquisition time or dose in pediatric scans. 2) Understand controversies in Ped GU Scinitgraphy. 3) Describe novel RPT approaches for evaluating and treatment children with Neuroblastoma. 4) Describe value of wholebody PET/CT in pediatrics.
Phillip	Kuo	PhD,MD	1) Provide a practical approach to integrating quantification of amyloid-PET into clinical practice. 2) Provide a practical approach to integrating quantification of FDG-PET in dementia. 3) Provide a practical approach to integrating quantification of dopaminergic imaging in Parkinsonian disorders.
Maria	Ponisio	MD	1) Provide a practical approach to integrating quantification of amyloid-PET into clinical practice. 2) Provide a practical approach to integrating quantification of FDG-PET in dementia. 3) Provide a practical approach to integrating quantification of dopaminergic imaging in Parkinsonian disorders.
Maria	Ponisio	MD	1) Provide a practical approach to integrating quantification of amyloid-PET into clinical practice. 2) Provide a practical approach to integrating quantification of FDG-PET in dementia. 3) Provide a practical approach to integrating quantification of dopaminergic imaging in Parkinsonian disorders.
Jana	Ivanidze	PhD,MD	1) Provide a practical approach to integrating quantification of amyloid-PET into clinical practice. 2) Provide a practical approach to integrating quantification of FDG-PET in dementia. 3) Provide a practical approach to integrating quantification of dopaminergic imaging in Parkinsonian disorders.
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Joanna	Fair	PhD,MD	1) Understand current applications of nuclear medicine imaging in thyroid cancer and benign thyroid disease. 2) Compare and Contrast Traditional vs. Hybrid Modalities. 3) Analyze the Role of PET/CT in Parathyroid Imaging Optimize Imaging-Guided Surgical Planning.
Carlos	Garcia	MD	1) Understand current applications of nuclear medicine imaging in thyroid cancer and benign thyroid disease. 2) Compare and Contrast Traditional vs. Hybrid Modalities. 3) Analyze the Role of PET/CT in Parathyroid Imaging Optimize Imaging-Guided Surgical Planning.
Joanna	Fair	PhD,MD	1) Understand current applications of nuclear medicine imaging in thyroid cancer and benign thyroid disease. 2) Compare and Contrast Traditional vs. Hybrid Modalities. 3) Analyze the Role of PET/CT in Parathyroid Imaging Optimize Imaging-Guided Surgical Planning.
Maria	Gule-Monroe	MD	1) Understand current applications of nuclear medicine imaging in thyroid cancer and benign thyroid disease. 2) Compare and Contrast Traditional vs. Hybrid Modalities. 3) Analyze the Role of PET/CT in Parathyroid Imaging Optimize Imaging-Guided Surgical Planning.
Hillary	Kelly	MD	1) Understand current applications of nuclear medicine imaging in thyroid cancer and benign thyroid disease. 2) Compare and Contrast Traditional vs. Hybrid Modalities. 3) Analyze the Role of PET/CT in Parathyroid Imaging Optimize Imaging-Guided Surgical Planning.
Don	Yoo	MD	1) Review the evolution of oncologic radiopharmaceuticals used in prostate cancer in the United States. 2) Discuss the economic impact of recently approved diagnostic oncologic PET tracers and therapies for prostate cancer. 3) Discuss why the Nuclear Ragulatory Commission (NRC) is considering whether or not to allow new limited scope Authorized User (AU) pathway for certain therapeutic and theranostic radiopharmaceuticals. 4) The current status of PSMA PET/CT imaging in Türkiye, including availability, indications, and clinical integration. 5) How PSMA PET/CT findings change patient management, including systemic treatment selection, radiotherapy field design, metastasis-directed therapy. 6) The core principles of PSMA theranostics (diagnostic PSMA imaging guided patient selection and targeted radionuclide therapy). 7) Clinical outcomes of PSMA theranostics, and challenges encountered in routine practice. 8) Comparing Türkiye's experience with global trends in PSMA imaging and therapy.

Don	Yoo	MD	1) Review the evolution of oncologic radiopharmaceuticals used in prostate cancer in the United States. 2) Discuss the economic impact of recently approved diagnostic oncologic PET tracers and therapies for prostate cancer. 3) Discuss why the Nuclear Ragulatory Commission (NRC) is considering whether or not to allow new limited scope Authorized User (AU) pathway for certain therapeutic and theranostic radiopharmaceuticals. 4) The current status of PSMA PET/CT imaging in Türkiye, including availability, indications, and clinical integration. 5) How PSMA PET/CT findings change patient management, including systemic treatment selection, radiotherapy field design, metastasis-directed therapy. 6) The core principles of PSMA theranostics (diagnostic PSMA imaging guided patient selection and targeted radionuclide therapy). 7) Clinical outcomes of PSMA theranostics, and challenges encountered in routine practice. 8) Comparing Türkiye's experience with global trends in PSMA imaging and therapy.
Paulo Henrique	Rosado de Castro	MD, PhD	1) Review the evolution of oncologic radiopharmaceuticals used in prostate cancer in the United States. 2) Discuss the economic impact of recently approved diagnostic oncologic PET tracers and therapies for prostate cancer. 3) Discuss why the Nuclear Ragulatory Commission (NRC) is considering whether or not to allow new limited scope Authorized User (AU) pathway for certain therapeutic and theranostic radiopharmaceuticals. 4) The current status of PSMA PET/CT imaging in Türkiye, including availability, indications, and clinical integration. 5) How PSMA PET/CT findings change patient management, including systemic treatment selection, radiotherapy field design, metastasis-directed therapy. 6) The core principles of PSMA theranostics (diagnostic PSMA imaging guided patient selection and targeted radionuclide therapy). 7) Clinical outcomes of PSMA theranostics, and challenges encountered in routine practice. 8) Comparing Türkiye's experience with global trends in PSMA imaging and therapy.

Yasemin	Sanli	MD	1) Review the evolution of oncologic radiopharmaceuticals used in prostate cancer in the United States. 2) Discuss the economic impact of recently approved diagnostic oncologic PET tracers and therapies for prostate cancer. 3) Discuss why the Nuclear Ragulatory Commission (NRC) is considering whether or not to allow new limited scope Authorized User (AU) pathway for certain therapeutic and theranostic radiopharmaceuticals. 4) The current status of PSMA PET/CT imaging in Türkiye, including availability, indications, and clinical integration. 5) How PSMA PET/CT findings change patient management, including systemic treatment selection, radiotherapy field design, metastasis-directed therapy. 6) The core principles of PSMA theranostics (diagnostic PSMA imaging guided patient selection and targeted radionuclide therapy). 7) Clinical outcomes of PSMA theranostics, and challenges encountered in routine practice. 8) Comparing Türkiye's experience with global trends in PSMA imaging and therapy.
Jana	Ivanidze	PhD,MD	1) Provide a case-based overview of FDG-PET and other modalities for the assessment of the wide differential of dementia. 2) Review critical pearls and pitfalls of amyloid PET through a case-based approach.
Ilya	Nasrallah	MD, PhD	1) Provide a case-based overview of FDG-PET and other modalities for the assessment of the wide differential of dementia. 2) Review critical pearls and pitfalls of amyloid PET through a case-based approach.
Ilya	Nasrallah	MD, PhD	1) Provide a case-based overview of FDG-PET and other modalities for the assessment of the wide differential of dementia. 2) Review critical pearls and pitfalls of amyloid PET through a case-based approach.
Mary Ellen	Koran	PhD,MD	1) Provide a case-based overview of FDG-PET and other modalities for the assessment of the wide differential of dementia. 2) Review critical pearls and pitfalls of amyloid PET through a case-based approach.
Emily	Nia	MD	1) Understand the principles of selecting patients for PSMA-targeted radioligand therapy. 2) Review the roles of PET and SPECT in the monitoring of response to PSMA-targeted radioligand therapy.
Phillip	Kuo	PhD,MD	1) Understand the principles of selecting patients for PSMA-targeted radioligand therapy. 2) Review the roles of PET and SPECT in the monitoring of response to PSMA-targeted radioligand therapy.
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Yasemin	Sanli	MD	1) Understand the principles of selecting patients for PSMA-targeted radioligand therapy. 2) Review the roles of PET and SPECT in the monitoring of response to PSMA-targeted radioligand therapy.
Cristina	Matushita	PhD,MD	1) Review the critical role of FDG-PET in the staging and monitoring of response in lymphoma. 2) Understand the indications and the limitations of FDG-PET/CT for staging and treatment monitoring in multiple myeloma. 3) Apply current criteria to interpret PET/CT scans performed for lymphoma. 4) Discuss areas of evolving investigation for molecular imaging for patients with lymphoma. 5) Name two novel radiotracers for imaging lymphoma.
Jonathan	McConathy	PhD,MD	1) Review the critical role of FDG-PET in the staging and monitoring of response in lymphoma. 2) Understand the indications and the limitations of FDG-PET/CT for staging and treatment monitoring in multiple myeloma. 3) Apply current criteria to interpret PET/CT scans performed for lymphoma. 4) Discuss areas of evolving investigation for molecular imaging for patients with lymphoma. 5) Name two novel radiotracers for imaging lymphoma.
Heather	Jacene	MD	1) Review the critical role of FDG-PET in the staging and monitoring of response in lymphoma. 2) Understand the indications and the limitations of FDG-PET/CT for staging and treatment monitoring in multiple myeloma. 3) Apply current criteria to interpret PET/CT scans performed for lymphoma. 4) Discuss areas of evolving investigation for molecular imaging for patients with lymphoma. 5) Name two novel radiotracers for imaging lymphoma.
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Esma	Akin	MD	1) Provide a practical approach to understand the strengths and weaknesses of PET for the wide variety of gastrointestinal neoplasms. 2) Review through case examples the indications and limitations of PET for genitourinary malignancies for evaluation of primary tumor versus metastatic disease.
Giuseppe	Esposito	MBA,MD	1) Provide a practical approach to understand the strengths and weaknesses of PET for the wide variety of gastrointestinal neoplasms. 2) Review through case examples the indications and limitations of PET for genitourinary malignancies for evaluation of primary tumor versus metastatic disease.

Merissa	Zeman	MD	1) Provide a practical approach to understand the strengths and weaknesses of PET for the wide variety of gastrointestinal neoplasms. 2) Review through case examples the indications and limitations of PET for genitourinary malignancies for evaluation of primary tumor versus metastatic disease.
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Munir	Ghesani	MD	1) Evaluate the clinical necessity of SPECT/CT in the contemporary theranostic workflow, moving beyond qualitative assessment to evidence-based, quantitative precision. 2) Analyze the limitations of planar imaging and theoretical modeling in comparison to the real world diagnostic and dosimetric accuracy provided by modern SPECT/CT systems. 3) Implement Strategies for integrationg SPECT/CT into a cvommunity or academic theranostics program to optimize patient selection, treatment monitoring and personalized dosimetry. 4) Integrate current evidence on molecular and epigenetic regulation of SSTR2 in neuroendocrine tumors to inform patient selection and optimization of SSTR2-targeted theranostics. 5) Analyze the limitations of planar imaging and theoretical modeling in comparison to the real-world diagnostic and dosimetric accuracy provided by modern SPECT/CT systems. 6) Implement strategies for integrating SPECT/CT into a community or academic theranostics program to optimize patient selection, treatment monitoring, and personalized dosimetry. 7) Practical considerations for incorporating diagnostic CT with PET. 8) Present tracer specific contract enhanced CT protocols for SSTR and PSMA PET.

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Lisa	Bodei	PhD,MD	1) Evaluate the clinical necessity of SPECT/CT in the contemporary theranostic workflow, moving beyond qualitative assessment to evidence-based, quantitative precision. 2) Analyze the limitations of planar imaging and theoretical modeling in comparison to the real world diagnostic and dosimetric accuracy provided by modern SPECT/CT systems. 3) Implement Strategies for integrationg SPECT/CT into a cvommunity or academic theranostics program to optimize patient selection, treatment monitoring and personalized dosimetry. 4) Integrate current evidence on molecular and epigenetic regulation of SSTR2 in neuroendocrine tumors to inform patient selection and optimization of SSTR2-targeted theranostics. 5) Analyze the limitations of planar imaging and theoretical modeling in comparison to the real-world diagnostic and dosimetric accuracy provided by modern SPECT/CT systems. 6) Implement strategies for integrating SPECT/CT into a community or academic theranostics program to optimize patient selection, treatment monitoring, and personalized dosimetry. 7) Practical considerations for incorporating diagnostic CT with PET. 8) Present tracer specific contract enhanced CT protocols for SSTR and PSMA PET.

Terence	Wong	MD, PhD	1) Evaluate the clinical necessity of SPECT/CT in the contemporary theranostic workflow, moving beyond qualitative assessment to evidence-based, quantitative precision. 2) Analyze the limitations of planar imaging and theoretical modeling in comparison to the real world diagnostic and dosimetric accuracy provided by modern SPECT/CT systems. 3) Implement Strategies for integrationg SPECT/CT into a cvommunity or academic theranostics program to optimize patient selection, treatment monitoring and personalized dosimetry. 4) Integrate current evidence on molecular and epigenetic regulation of SSTR2 in neuroendocrine tumors to inform patient selection and optimization of SSTR2-targeted theranostics. 5) Analyze the limitations of planar imaging and theoretical modeling in comparison to the real-world diagnostic and dosimetric accuracy provided by modern SPECT/CT systems. 6) Implement strategies for integrating SPECT/CT into a community or academic theranostics program to optimize patient selection, treatment monitoring, and personalized dosimetry. 7) Practical considerations for incorporating diagnostic CT with PET. 8) Present tracer specific contract enhanced CT protocols for SSTR and PSMA PET.
Pedram	Heidari	MD	1) Evaluate the clinical necessity of SPECT/CT in the contemporary theranostic workflow, moving beyond qualitative assessment to evidence-based, quantitative precision. 2) Analyze the limitations of planar imaging and theoretical modeling in comparison to the real world diagnostic and dosimetric accuracy provided by modern SPECT/CT systems. 3) Implement Strategies for integrationg SPECT/CT into a cvommunity or academic theranostics program to optimize patient selection, treatment monitoring and personalized dosimetry. 4) Integrate current evidence on molecular and epigenetic regulation of SSTR2 in neuroendocrine tumors to inform patient selection and optimization of SSTR2-targeted theranostics. 5) Analyze the limitations of planar imaging and theoretical modeling in comparison to the real-world diagnostic and dosimetric accuracy provided by modern SPECT/CT systems. 6) Implement strategies for integrating SPECT/CT into a community or academic theranostics program to optimize patient selection, treatment monitoring, and personalized dosimetry. 7) Practical considerations for incorporating diagnostic CT with PET. 8) Present tracer specific contract enhanced CT protocols for SSTR and PSMA PET.

Helen	Nadel	MD, FRCPC	1) Understanding the limitations of visual assessment in determining benefits of deep-learning denoising. 2) Understand how AI leads to the discovery of novel prognostic/predictive biomarkers and models to enhance precision medicine using PET/CT. 3) Describe key principles and pitfalls in translating artificial intelligence models into clinically deployable tools for nuclear medicine practice, with emphasis on decision support, uncertainty modeling, and real-world workflow integration. 4) Understand fundamental strategies for automated lesion detection in oncologic PET/CT.
Sergios	Gatidis	MD	1) Understanding the limitations of visual assessment in determining benefits of deep-learning denoising. 2) Understand how AI leads to the discovery of novel prognostic/predictive biomarkers and models to enhance precision medicine using PET/CT. 3) Describe key principles and pitfalls in translating artificial intelligence models into clinically deployable tools for nuclear medicine practice, with emphasis on decision support, uncertainty modeling, and real-world workflow integration. 4) Understand fundamental strategies for automated lesion detection in oncologic PET/CT.
Ramsey	Badawi	PhD	1) Understanding the limitations of visual assessment in determining benefits of deep-learning denoising. 2) Understand how AI leads to the discovery of novel prognostic/predictive biomarkers and models to enhance precision medicine using PET/CT. 3) Describe key principles and pitfalls in translating artificial intelligence models into clinically deployable tools for nuclear medicine practice, with emphasis on decision support, uncertainty modeling, and real-world workflow integration. 4) Understand fundamental strategies for automated lesion detection in oncologic PET/CT.
Irene	Buvat		1) Understanding the limitations of visual assessment in determining benefits of deep-learning denoising. 2) Understand how AI leads to the discovery of novel prognostic/predictive biomarkers and models to enhance precision medicine using PET/CT. 3) Describe key principles and pitfalls in translating artificial intelligence models into clinically deployable tools for nuclear medicine practice, with emphasis on decision support, uncertainty modeling, and real-world workflow integration. 4) Understand fundamental strategies for automated lesion detection in oncologic PET/CT.

Guido	Davidzon	MD	1) Understanding the limitations of visual assessment in determining benefits of deep-learning denoising. 2) Understand how AI leads to the discovery of novel prognostic/predictive biomarkers and models to enhance precision medicine using PET/CT. 3) Describe key principles and pitfalls in translating artificial intelligence models into clinically deployable tools for nuclear medicine practice, with emphasis on decision support, uncertainty modeling, and real-world workflow integration. 4) Understand fundamental strategies for automated lesion detection in oncologic PET/CT.
Frank	Lexa	MBA,MD	1) To understand the factors that have contributed to the current state of academic radiology. 2) To provide an overview of the current state of academic radiology. 3) To describe strategies to Rieber and academic radiology.
Jay	Parikh	FRCPC,MD	1) To understand the factors that have contributed to the current state of academic radiology. 2) To provide an overview of the current state of academic radiology. 3) To describe strategies to Rieber and academic radiology.
Desiree	Morgan	MD	1) To understand the factors that have contributed to the current state of academic radiology. 2) To provide an overview of the current state of academic radiology. 3) To describe strategies to Rieber and academic radiology.
Katherine	Klein	MD	1) To understand the factors that have contributed to the current state of academic radiology. 2) To provide an overview of the current state of academic radiology. 3) To describe strategies to Rieber and academic radiology.
Erin	Cooke	MD	1) Describe emerging innovations in radiology residency education that extend beyond traditional image interpretation training, including augmented clinical, academic, and professional development experiences. 2) Identify the key motivations, institutional drivers, and learner needs that support the development and implementation of enhanced residency training pathways. 3) Evaluate the practical considerations, common challenges, and potential pitfalls involved in designing and sustaining innovative residency education models.
Ghaneh	Fananapazir	MD	1) Describe emerging innovations in radiology residency education that extend beyond traditional image interpretation training, including augmented clinical, academic, and professional development experiences. 2) Identify the key motivations, institutional drivers, and learner needs that support the development and implementation of enhanced residency training pathways. 3) Evaluate the practical considerations, common challenges, and potential pitfalls involved in designing and sustaining innovative residency education models.

Kara	Gaetke-Udager	MD	1) Describe emerging innovations in radiology residency education that extend beyond traditional image interpretation training, including augmented clinical, academic, and professional development experiences. 2) Identify the key motivations, institutional drivers, and learner needs that support the development and implementation of enhanced residency training pathways. 3) Evaluate the practical considerations, common challenges, and potential pitfalls involved in designing and sustaining innovative residency education models.
Constantine	Burgan	MD	1) Describe emerging innovations in radiology residency education that extend beyond traditional image interpretation training, including augmented clinical, academic, and professional development experiences. 2) Identify the key motivations, institutional drivers, and learner needs that support the development and implementation of enhanced residency training pathways. 3) Evaluate the practical considerations, common challenges, and potential pitfalls involved in designing and sustaining innovative residency education models.
Sophia	O'Brien	MD, MEd	1) Describe emerging innovations in radiology residency education that extend beyond traditional image interpretation training, including augmented clinical, academic, and professional development experiences. 2) Identify the key motivations, institutional drivers, and learner needs that support the development and implementation of enhanced residency training pathways. 3) Evaluate the practical considerations, common challenges, and potential pitfalls involved in designing and sustaining innovative residency education models.
Charles Xiao Bo	Yan	MD, PhD	1) Describe emerging innovations in radiology residency education that extend beyond traditional image interpretation training, including augmented clinical, academic, and professional development experiences. 2) Identify the key motivations, institutional drivers, and learner needs that support the development and implementation of enhanced residency training pathways. 3) Evaluate the practical considerations, common challenges, and potential pitfalls involved in designing and sustaining innovative residency education models.
Bettina	Siewert	MD	1) Understand the impact of rising RVUs on quality and safety. 2) Understand effective countermeasures. 3) Develop skills to successfully implement countermeasures.

Olga	Brook	MBA,MD	1) Understand the impact of rising RVUs on quality and safety. 2) Understand effective countermeasures. 3) Develop skills to successfully implement countermeasures.
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Olga	Brook	MBA,MD	1) Understand the impact of rising RVUs on quality and safety. 2) Understand effective countermeasures. 3) Develop skills to successfully implement countermeasures.
Hanna	Zafar	MS,MD	1) Understand the impact of rising RVUs on quality and safety. 2) Understand effective countermeasures. 3) Develop skills to successfully implement countermeasures.
Andrew	Moriarity	MBA,MD	1) Understand the impact of rising RVUs on quality and safety. 2) Understand effective countermeasures. 3) Develop skills to successfully implement countermeasures.
Shlomit	Goldberg-Stein	MD	1) Understand the impact of rising RVUs on quality and safety. 2) Understand effective countermeasures. 3) Develop skills to successfully implement countermeasures.
Ranjit	Chima	MD	1) Understand the impact of rising RVUs on quality and safety. 2) Understand effective countermeasures. 3) Develop skills to successfully implement countermeasures.

Jennifer	Kemp	MD	1) Understand the structure, priorities, strategies of RSNA's government relations initiative and understand the Society's role in shaping radiology practice, research, and patient care. 2) Discuss recent federal policy developments affecting radiology, including AI regulatory frameworks; medical imaging innovation; and workforce sustainability, and evaluate their implications for practices and patient care. 3) Identify specific ways in which RSNA members can engage in and support the Society's advocacy efforts to advance radiology's interests in a complex and evolving federal policy environment.
Alex	Towbin	MD	1) Understand the structure, priorities, strategies of RSNA's government relations initiative and understand the Society's role in shaping radiology practice, research, and patient care. 2) Discuss recent federal policy developments affecting radiology, including AI regulatory frameworks; medical imaging innovation; and workforce sustainability, and evaluate their implications for practices and patient care. 3) Identify specific ways in which RSNA members can engage in and support the Society's advocacy efforts to advance radiology's interests in a complex and evolving federal policy environment.
Melissa	Davis	MBA,MD	1) Understand the structure, priorities, strategies of RSNA's government relations initiative and understand the Society's role in shaping radiology practice, research, and patient care. 2) Discuss recent federal policy developments affecting radiology, including AI regulatory frameworks; medical imaging innovation; and workforce sustainability, and evaluate their implications for practices and patient care. 3) Identify specific ways in which RSNA members can engage in and support the Society's advocacy efforts to advance radiology's interests in a complex and evolving federal policy environment.
Shaunagh	McDermott	MBBCh	1) Understand the structure, priorities, strategies of RSNA's government relations initiative and understand the Society's role in shaping radiology practice, research, and patient care. 2) Discuss recent federal policy developments affecting radiology, including AI regulatory frameworks; medical imaging innovation; and workforce sustainability, and evaluate their implications for practices and patient care. 3) Identify specific ways in which RSNA members can engage in and support the Society's advocacy efforts to advance radiology's interests in a complex and evolving federal policy environment.

Benjamin	Pulli	MD	1) Understand the structure, priorities, strategies of RSNA's government relations initiative and understand the Society's role in shaping radiology practice, research, and patient care. 2) Discuss recent federal policy developments affecting radiology, including AI regulatory frameworks; medical imaging innovation; and workforce sustainability, and evaluate their implications for practices and patient care. 3) Identify specific ways in which RSNA members can engage in and support the Society's advocacy efforts to advance radiology's interests in a complex and evolving federal policy environment.
Summer	Decker	PhD	1) Discover what paleo-imaging and paleo-radiology is. 2) Discover how radiological tools may be used in an archaeological context on mummies. 3) Learn the different types of mummies: artificial and natural. 4) Learn that paleo-imaging is a collaborative and multidisciplinary work. 5) Discover what kind of pathological findings is possible through advanced imaging tools and visualization. 6) Learn that mummies can be autopsied in a forensic activity through postmortem computed tomography.
Fabrice	Dedouit	PhD,MD	1) Discover what paleo-imaging and paleo-radiology is. 2) Discover how radiological tools may be used in an archaeological context on mummies. 3) Learn the different types of mummies: artificial and natural. 4) Learn that paleo-imaging is a collaborative and multidisciplinary work. 5) Discover what kind of pathological findings is possible through advanced imaging tools and visualization. 6) Learn that mummies can be autopsied in a forensic activity through postmortem computed tomography.
Katherine	Van Schaik	PhD,MD	1) Discover what paleo-imaging and paleo-radiology is. 2) Discover how radiological tools may be used in an archaeological context on mummies. 3) Learn the different types of mummies: artificial and natural. 4) Learn that paleo-imaging is a collaborative and multidisciplinary work. 5) Discover what kind of pathological findings is possible through advanced imaging tools and visualization. 6) Learn that mummies can be autopsied in a forensic activity through postmortem computed tomography.
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Mislav	Cavka	MD	1) Discover what paleo-imaging and paleo-radiology is. 2) Discover how radiological tools may be used in an archaeological context on mummies. 3) Learn the different types of mummies: artificial and natural. 4) Learn that paleo-imaging is a collaborative and multidisciplinary work. 5) Discover what kind of pathological findings is possible through advanced imaging tools and visualization. 6) Learn that mummies can be autopsied in a forensic activity through postmortem computed tomography.
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Katherine	Van Schaik	PhD,MD	1) Understand the epidemiology and health impact of loneliness, including recent findings from the U.S. Surgeon General's 2023 and 2024 reports. 2) Recognize how features of radiology practice—workflow, technology, and culture—contribute to professional isolation. 3) Explore philosophical, historical, artistic, and bioethical frameworks that support empathy, reflection, and connectedness. 4) Identify actionable strategies for promoting belonging, collaboration, and well-being among radiologists, including the application of medical humanities tools to strengthen professional identity and mitigate burnout.
Priya	Dave	MD	1) Understand the epidemiology and health impact of loneliness, including recent findings from the U.S. Surgeon General's 2023 and 2024 reports. 2) Recognize how features of radiology practice—workflow, technology, and culture—contribute to professional isolation. 3) Explore philosophical, historical, artistic, and bioethical frameworks that support empathy, reflection, and connectedness. 4) Identify actionable strategies for promoting belonging, collaboration, and well-being among radiologists, including the application of medical humanities tools to strengthen professional identity and mitigate burnout.

Erin	Cooke	MD	1) Understand the epidemiology and health impact of loneliness, including recent findings from the U.S. Surgeon General's 2023 and 2024 reports. 2) Recognize how features of radiology practice—workflow, technology, and culture—contribute to professional isolation. 3) Explore philosophical, historical, artistic, and bioethical frameworks that support empathy, reflection, and connectedness. 4) Identify actionable strategies for promoting belonging, collaboration, and well-being among radiologists, including the application of medical humanities tools to strengthen professional identity and mitigate burnout.
Richard	Gunderman	PhD,MD	1) Understand the epidemiology and health impact of loneliness, including recent findings from the U.S. Surgeon General's 2023 and 2024 reports. 2) Recognize how features of radiology practice—workflow, technology, and culture—contribute to professional isolation. 3) Explore philosophical, historical, artistic, and bioethical frameworks that support empathy, reflection, and connectedness. 4) Identify actionable strategies for promoting belonging, collaboration, and well-being among radiologists, including the application of medical humanities tools to strengthen professional identity and mitigate burnout.
Allison	Tillack	MD, PhD	1) Understand the epidemiology and health impact of loneliness, including recent findings from the U.S. Surgeon General's 2023 and 2024 reports. 2) Recognize how features of radiology practice—workflow, technology, and culture—contribute to professional isolation. 3) Explore philosophical, historical, artistic, and bioethical frameworks that support empathy, reflection, and connectedness. 4) Identify actionable strategies for promoting belonging, collaboration, and well-being among radiologists, including the application of medical humanities tools to strengthen professional identity and mitigate burnout.
Hyewon	Hyun	MD	1) Understand the epidemiology and health impact of loneliness, including recent findings from the U.S. Surgeon General's 2023 and 2024 reports. 2) Recognize how features of radiology practice—workflow, technology, and culture—contribute to professional isolation. 3) Explore philosophical, historical, artistic, and bioethical frameworks that support empathy, reflection, and connectedness. 4) Identify actionable strategies for promoting belonging, collaboration, and well-being among radiologists, including the application of medical humanities tools to strengthen professional identity and mitigate burnout.

Ashley	Prosper	MD	1) Understand the importance of increasing access for radiologists and patients of different abilities is an important component of building health equity. 2) Identify ways to make radiology departments accessible for patients and physicians of different abilities.
Nolan	Kagetsu	MD	1) Understand the importance of increasing access for radiologists and patients of different abilities is an important component of building health equity. 2) Identify ways to make radiology departments accessible for patients and physicians of different abilities.
Peter	Poullos	MD	1) Understand the importance of increasing access for radiologists and patients of different abilities is an important component of building health equity. 2) Identify ways to make radiology departments accessible for patients and physicians of different abilities.
Jane	Harvey Lloyd	MSc,PhD	1) Understand the importance of increasing access for radiologists and patients of different abilities is an important component of building health equity. 2) Identify ways to make radiology departments accessible for patients and physicians of different abilities.
Juan	Guerrero-Calderon	MD	1) Understand the importance of increasing access for radiologists and patients of different abilities is an important component of building health equity. 2) Identify ways to make radiology departments accessible for patients and physicians of different abilities.
Kwaku	Obeng	MD	1) Understand the importance of increasing access for radiologists and patients of different abilities is an important component of building health equity. 2) Identify ways to make radiology departments accessible for patients and physicians of different abilities.

Randy	Miles	MPH,MD	1) Describe key components of integrated care models that enable academic medical centers to extend standardized, high-quality care across AMC-governed community, rural, and safety-net settings. 2) Identify strategies for aligning clinical pathways, research infrastructure, and educational programs between main campuses and off-site locations to promote consistency, coordination, and equity of care. 3) Apply learning health system principles to engage off-site practices as active partners in quality improvement and research while preserving locally responsive care. 4) Evaluate practical approaches for scaling academic expertise and standards into community settings in ways that strengthen community relationships and sustain the core academic mission.
Gwendolyn	Bryant-Smith	MD	1) Describe key components of integrated care models that enable academic medical centers to extend standardized, high-quality care across AMC-governed community, rural, and safety-net settings. 2) Identify strategies for aligning clinical pathways, research infrastructure, and educational programs between main campuses and off-site locations to promote consistency, coordination, and equity of care. 3) Apply learning health system principles to engage off-site practices as active partners in quality improvement and research while preserving locally responsive care. 4) Evaluate practical approaches for scaling academic expertise and standards into community settings in ways that strengthen community relationships and sustain the core academic mission.
Pari	Pandharipande	MPH,MD	1) Describe key components of integrated care models that enable academic medical centers to extend standardized, high-quality care across AMC-governed community, rural, and safety-net settings. 2) Identify strategies for aligning clinical pathways, research infrastructure, and educational programs between main campuses and off-site locations to promote consistency, coordination, and equity of care. 3) Apply learning health system principles to engage off-site practices as active partners in quality improvement and research while preserving locally responsive care. 4) Evaluate practical approaches for scaling academic expertise and standards into community settings in ways that strengthen community relationships and sustain the core academic mission.

Christoph	Lee	MS,MD	1) Describe key components of integrated care models that enable academic medical centers to extend standardized, high-quality care across AMC-governed community, rural, and safety-net settings. 2) Identify strategies for aligning clinical pathways, research infrastructure, and educational programs between main campuses and off-site locations to promote consistency, coordination, and equity of care. 3) Apply learning health system principles to engage off-site practices as active partners in quality improvement and research while preserving locally responsive care. 4) Evaluate practical approaches for scaling academic expertise and standards into community settings in ways that strengthen community relationships and sustain the core academic mission.
Francis	Deng	MD	1) Describe key components of integrated care models that enable academic medical centers to extend standardized, high-quality care across AMC-governed community, rural, and safety-net settings. 2) Identify strategies for aligning clinical pathways, research infrastructure, and educational programs between main campuses and off-site locations to promote consistency, coordination, and equity of care. 3) Apply learning health system principles to engage off-site practices as active partners in quality improvement and research while preserving locally responsive care. 4) Evaluate practical approaches for scaling academic expertise and standards into community settings in ways that strengthen community relationships and sustain the core academic mission.
Efren	Flores	MD	1) Describe key components of integrated care models that enable academic medical centers to extend standardized, high-quality care across AMC-governed community, rural, and safety-net settings. 2) Identify strategies for aligning clinical pathways, research infrastructure, and educational programs between main campuses and off-site locations to promote consistency, coordination, and equity of care. 3) Apply learning health system principles to engage off-site practices as active partners in quality improvement and research while preserving locally responsive care. 4) Evaluate practical approaches for scaling academic expertise and standards into community settings in ways that strengthen community relationships and sustain the core academic mission.
Saurabh	Jha	MS,MBBS	1) Understand the economics of imaging in with particular emphasis on entrepreneurship and academic and industry partnerships.
Godwin	Ogbole	MBBS,MD	1) Understand the economics of imaging in with particular emphasis on entrepreneurship and academic and industry partnerships.

Udunna	Anazodo	PhD	1) Understand the economics of imaging in with particular emphasis on entrepreneurship and academic and industry partnerships.
Saurabh	Jha	MS,MBBS	1) Understand the economics of imaging in with particular emphasis on entrepreneurship and academic and industry partnerships.
Elizabeth	Krupinski	PhD	1) Review how the circadian rhythm works and how inadequate daytime broad spectrum light disrupts circadian rhythm. 2) Discuss what the most recent scientific research reveals about how disruptions in circadian rhythm contribute to cardiometabolic disease, mental health issues, and potentially contribute to physician burnout. 3) Understand what constitutes proper daily light exposure and the associated health benefits based on published scientific human and animal research. 4) Review ways to integrate light into personal and workplace environments to improve quality of life.
Bettina	Siewert	MD	1) Review how the circadian rhythm works and how inadequate daytime broad spectrum light disrupts circadian rhythm. 2) Discuss what the most recent scientific research reveals about how disruptions in circadian rhythm contribute to cardiometabolic disease, mental health issues, and potentially contribute to physician burnout. 3) Understand what constitutes proper daily light exposure and the associated health benefits based on published scientific human and animal research. 4) Review ways to integrate light into personal and workplace environments to improve quality of life.
Kathryn	Milks	MD	1) Review how the circadian rhythm works and how inadequate daytime broad spectrum light disrupts circadian rhythm. 2) Discuss what the most recent scientific research reveals about how disruptions in circadian rhythm contribute to cardiometabolic disease, mental health issues, and potentially contribute to physician burnout. 3) Understand what constitutes proper daily light exposure and the associated health benefits based on published scientific human and animal research. 4) Review ways to integrate light into personal and workplace environments to improve quality of life.
Grayson	Baird	PhD, MS	1) Review how the circadian rhythm works and how inadequate daytime broad spectrum light disrupts circadian rhythm. 2) Discuss what the most recent scientific research reveals about how disruptions in circadian rhythm contribute to cardiometabolic disease, mental health issues, and potentially contribute to physician burnout. 3) Understand what constitutes proper daily light exposure and the associated health benefits based on published scientific human and animal research. 4) Review ways to integrate light into personal and workplace environments to improve quality of life.

Michael	Atalay	MD, PhD	1) Review how the circadian rhythm works and how inadequate daytime broad spectrum light disrupts circadian rhythm. 2) Discuss what the most recent scientific research reveals about how disruptions in circadian rhythm contribute to cardiometabolic disease, mental health issues, and potentially contribute to physician burnout. 3) Understand what constitutes proper daily light exposure and the associated health benefits based on published scientific human and animal research. 4) Review ways to integrate light into personal and workplace environments to improve quality of life.
Les	Folio	MPH,DO	1) Review how the circadian rhythm works and how inadequate daytime broad spectrum light disrupts circadian rhythm. 2) Discuss what the most recent scientific research reveals about how disruptions in circadian rhythm contribute to cardiometabolic disease, mental health issues, and potentially contribute to physician burnout. 3) Understand what constitutes proper daily light exposure and the associated health benefits based on published scientific human and animal research. 4) Review ways to integrate light into personal and workplace environments to improve quality of life.
Brandon K.K.	Fields	MD	1) Describe current trends in the radiology job market using updated national workforce data. 2) Identify key factors to consider when evaluating initial employment opportunities across different practice models. 3) Formulate a structured approach to assessing personal career priorities and aligning them with available job opportunities. 4) Recognize common challenges associated with early-career job transitions and outline strategies for navigating these changes professionally and effectively. 5) Discuss the diversity of radiology jobs, and gain insight from the personal experiences of the panelists.
Rylee	Friel	MD	1) Describe current trends in the radiology job market using updated national workforce data. 2) Identify key factors to consider when evaluating initial employment opportunities across different practice models. 3) Formulate a structured approach to assessing personal career priorities and aligning them with available job opportunities. 4) Recognize common challenges associated with early-career job transitions and outline strategies for navigating these changes professionally and effectively. 5) Discuss the diversity of radiology jobs, and gain insight from the personal experiences of the panelists.

Divya	Surabhi	MPH,MD	1) Describe current trends in the radiology job market using updated national workforce data. 2) Identify key factors to consider when evaluating initial employment opportunities across different practice models. 3) Formulate a structured approach to assessing personal career priorities and aligning them with available job opportunities. 4) Recognize common challenges associated with early-career job transitions and outline strategies for navigating these changes professionally and effectively. 5) Discuss the diversity of radiology jobs, and gain insight from the personal experiences of the panelists.
Megan	Mercer	MD	1) Describe current trends in the radiology job market using updated national workforce data. 2) Identify key factors to consider when evaluating initial employment opportunities across different practice models. 3) Formulate a structured approach to assessing personal career priorities and aligning them with available job opportunities. 4) Recognize common challenges associated with early-career job transitions and outline strategies for navigating these changes professionally and effectively. 5) Discuss the diversity of radiology jobs, and gain insight from the personal experiences of the panelists.
Elizabeth	Dibble	MD	1) Describe current trends in the radiology job market using updated national workforce data. 2) Identify key factors to consider when evaluating initial employment opportunities across different practice models. 3) Formulate a structured approach to assessing personal career priorities and aligning them with available job opportunities. 4) Recognize common challenges associated with early-career job transitions and outline strategies for navigating these changes professionally and effectively. 5) Discuss the diversity of radiology jobs, and gain insight from the personal experiences of the panelists.
Gilda	Borouman d	MD	1) Describe current trends in the radiology job market using updated national workforce data. 2) Identify key factors to consider when evaluating initial employment opportunities across different practice models. 3) Formulate a structured approach to assessing personal career priorities and aligning them with available job opportunities. 4) Recognize common challenges associated with early-career job transitions and outline strategies for navigating these changes professionally and effectively. 5) Discuss the diversity of radiology jobs, and gain insight from the personal experiences of the panelists.

Nathaniel	Meyer	MD	1) Describe current trends in the radiology job market using updated national workforce data. 2) Identify key factors to consider when evaluating initial employment opportunities across different practice models. 3) Formulate a structured approach to assessing personal career priorities and aligning them with available job opportunities. 4) Recognize common challenges associated with early-career job transitions and outline strategies for navigating these changes professionally and effectively. 5) Discuss the diversity of radiology jobs, and gain insight from the personal experiences of the panelists.
Jessica	Fried	MD	1) Describe current trends in the radiology job market using updated national workforce data. 2) Identify key factors to consider when evaluating initial employment opportunities across different practice models. 3) Formulate a structured approach to assessing personal career priorities and aligning them with available job opportunities. 4) Recognize common challenges associated with early-career job transitions and outline strategies for navigating these changes professionally and effectively. 5) Discuss the diversity of radiology jobs, and gain insight from the personal experiences of the panelists.
Maria Lucia	Brun	MD	1) Describe current trends in the radiology job market using updated national workforce data. 2) Identify key factors to consider when evaluating initial employment opportunities across different practice models. 3) Formulate a structured approach to assessing personal career priorities and aligning them with available job opportunities. 4) Recognize common challenges associated with early-career job transitions and outline strategies for navigating these changes professionally and effectively. 5) Discuss the diversity of radiology jobs, and gain insight from the personal experiences of the panelists.
Stephanie	Wu	MD	1) Describe current trends in the radiology job market using updated national workforce data. 2) Identify key factors to consider when evaluating initial employment opportunities across different practice models. 3) Formulate a structured approach to assessing personal career priorities and aligning them with available job opportunities. 4) Recognize common challenges associated with early-career job transitions and outline strategies for navigating these changes professionally and effectively. 5) Discuss the diversity of radiology jobs, and gain insight from the personal experiences of the panelists.

Michele	Pansini	MD	1) Describe current radiology workforce pressures and their impact on patient access and quality of care. 2) Understand and address patient expectations and concerns regarding the use of AI in imaging. 3) Critically evaluate whether current AI implementations improve patient outcomes or primarily increase system throughput.
Michele	Pansini	MD	1) Describe current radiology workforce pressures and their impact on patient access and quality of care. 2) Understand and address patient expectations and concerns regarding the use of AI in imaging. 3) Critically evaluate whether current AI implementations improve patient outcomes or primarily increase system throughput.
Tessa	Cook	MD, PhD	1) Describe current radiology workforce pressures and their impact on patient access and quality of care. 2) Understand and address patient expectations and concerns regarding the use of AI in imaging. 3) Critically evaluate whether current AI implementations improve patient outcomes or primarily increase system throughput.
Jordan	Perchik	MD	1) Describe current radiology workforce pressures and their impact on patient access and quality of care. 2) Understand and address patient expectations and concerns regarding the use of AI in imaging. 3) Critically evaluate whether current AI implementations improve patient outcomes or primarily increase system throughput.
Fiona	Gilbert	FRCR,MB ChB	1) To explain the rationale for early identification and intentional development of future radiology department chairs. 2) To describe scalable department- and institution-level models for effective mentoring and leadership development of academic radiologists. 3) To demonstrate how faculty can be formally coached to become confident, successful leaders who work effectively with administrators and policy makers.
Fiona	Fennessy	MBBCh, PhD	1) To explain the rationale for early identification and intentional development of future radiology department chairs. 2) To describe scalable department- and institution-level models for effective mentoring and leadership development of academic radiologists. 3) To demonstrate how faculty can be formally coached to become confident, successful leaders who work effectively with administrators and policy makers.
Hedvig	Hricak	MD, PhD	1) To explain the rationale for early identification and intentional development of future radiology department chairs. 2) To describe scalable department- and institution-level models for effective mentoring and leadership development of academic radiologists. 3) To demonstrate how faculty can be formally coached to become confident, successful leaders who work effectively with administrators and policy makers.

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Helen	Addley	BMBCh,FRCR	1) To explain the rationale for early identification and intentional development of future radiology department chairs. 2) To describe scalable department- and institution-level models for effective mentoring and leadership development of academic radiologists. 3) To demonstrate how faculty can be formally coached to become confident, successful leaders who work effectively with administrators and policy makers.
Jay	Parikh	FRCPC,MD	1) Speakers will discuss the current radiologist shortage, how to strategize recruitment in academic and private practice environments, and what newly graduated trainees and junior faculty are prioritizing in their job search.
Michael	Tuite	MD	1) Speakers will discuss the current radiologist shortage, how to strategize recruitment in academic and private practice environments, and what newly graduated trainees and junior faculty are prioritizing in their job search.
Kurt	Schoppe	MD	1) Speakers will discuss the current radiologist shortage, how to strategize recruitment in academic and private practice environments, and what newly graduated trainees and junior faculty are prioritizing in their job search.
Nita	Kommula	MD	1) Speakers will discuss the current radiologist shortage, how to strategize recruitment in academic and private practice environments, and what newly graduated trainees and junior faculty are prioritizing in their job search.
Jay	Parikh	FRCPC,MD	1) Using Australia as an example, the power of radiologist advocacy for radiologists. 2) Using Croatia as an example, the power of radiologist advocacy for education of future radiologists. 3) Using Egypt as an example, the power of radiologist advocacy for improving quality of breast imaging for patient care.
Rajiv	Rattan	FRANZCR, MD	1) Using Australia as an example, the power of radiologist advocacy for radiologists. 2) Using Croatia as an example, the power of radiologist advocacy for education of future radiologists. 3) Using Egypt as an example, the power of radiologist advocacy for improving quality of breast imaging for patient care.

Gordana	Ivanac	PhD,MD	1) Using Australia as an example, the power of radiologist advocacy for radiologists. 2) Using Croatia as an example, the power of radiologist advocacy for education of future radiologists. 3) Using Egypt as an example, the power of radiologist advocacy for improving quality of breast imaging for patient care.
Merit	ElMaadaw y	PhD,MD	1) Using Australia as an example, the power of radiologist advocacy for radiologists. 2) Using Croatia as an example, the power of radiologist advocacy for education of future radiologists. 3) Using Egypt as an example, the power of radiologist advocacy for improving quality of breast imaging for patient care.
Elizabeth	O'Hare	PhD	1) Describe how recent and emerging federal payment and regulatory policies are influencing radiology reimbursement, care delivery models, and technology adoption. 2) Analyze the practical implications of federal oversight of AI-enabled imaging technologies, including regulatory frameworks, data governance requirements, and post-market performance. 3) Identify approaches radiology leaders can use to anticipate policy shifts, engage with policymakers, and adapt organizational planning to a changing federal landscape.
Pina	Sanelli	MPH,MD	1) Describe how recent and emerging federal payment and regulatory policies are influencing radiology reimbursement, care delivery models, and technology adoption. 2) Analyze the practical implications of federal oversight of AI-enabled imaging technologies, including regulatory frameworks, data governance requirements, and post-market performance. 3) Identify approaches radiology leaders can use to anticipate policy shifts, engage with policymakers, and adapt organizational planning to a changing federal landscape.
Quentin	Moore	PhD	1) Describe how recent and emerging federal payment and regulatory policies are influencing radiology reimbursement, care delivery models, and technology adoption. 2) Analyze the practical implications of federal oversight of AI-enabled imaging technologies, including regulatory frameworks, data governance requirements, and post-market performance. 3) Identify approaches radiology leaders can use to anticipate policy shifts, engage with policymakers, and adapt organizational planning to a changing federal landscape.

Andrew	Menard	JD	1) Describe how recent and emerging federal payment and regulatory policies are influencing radiology reimbursement, care delivery models, and technology adoption. 2) Analyze the practical implications of federal oversight of AI-enabled imaging technologies, including regulatory frameworks, data governance requirements, and post-market performance. 3) Identify approaches radiology leaders can use to anticipate policy shifts, engage with policymakers, and adapt organizational planning to a changing federal landscape.
Kate	Hannemann	MPH,MD	1) Apply patient-centered, environmentally sustainable contrast strategies, including contrast dose reduction, multi-dose injector use, recycling initiatives, and AI-enabled contrast optimization. 2) Implement efficient and accelerated imaging protocols, with and without AI, to reduce scan time, energy use, and repeat imaging while improving patient comfort, access, and operational efficiency. 3) Promote high-value, evidence-based imaging utilization by using appropriate use criteria and decision support tools to reduce unnecessary studies and the downstream clinical and environmental impact of low-value imaging.
Helena	Dekker	MD, MBA	1) Apply patient-centered, environmentally sustainable contrast strategies, including contrast dose reduction, multi-dose injector use, recycling initiatives, and AI-enabled contrast optimization. 2) Implement efficient and accelerated imaging protocols, with and without AI, to reduce scan time, energy use, and repeat imaging while improving patient comfort, access, and operational efficiency. 3) Promote high-value, evidence-based imaging utilization by using appropriate use criteria and decision support tools to reduce unnecessary studies and the downstream clinical and environmental impact of low-value imaging.
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Michael	Atalay	MD, PhD	1) Apply patient-centered, environmentally sustainable contrast strategies, including contrast dose reduction, multi-dose injector use, recycling initiatives, and AI-enabled contrast optimization. 2) Implement efficient and accelerated imaging protocols, with and without AI, to reduce scan time, energy use, and repeat imaging while improving patient comfort, access, and operational efficiency. 3) Promote high-value, evidence-based imaging utilization by using appropriate use criteria and decision support tools to reduce unnecessary studies and the downstream clinical and environmental impact of low-value imaging.
Vikas	Agarwal	MBA,MD	1) Analyze current workforce challenges in neuroradiology, including radiologist shortages and increasing imaging volumes, and assess their impact on clinical operations, education, and patient care. 2) Evaluate strategies to balance clinical productivity with non-RVU–generating academic and administrative responsibilities, including teaching, committee work, and scholarly activity. 3) Develop effective approaches for coordinating remote and on-site faculty, with attention to communication, workflow integration, compensation, quality assurance, and team cohesion. 4) Examine the global neuroradiology landscape and the evolving role of artificial intelligence, assessing how international practice patterns and AI tools may influence workforce models, efficiency, and clinical decision-making.
Lily	Wang	MPH,MBBS	1) Analyze current workforce challenges in neuroradiology, including radiologist shortages and increasing imaging volumes, and assess their impact on clinical operations, education, and patient care. 2) Evaluate strategies to balance clinical productivity with non-RVU–generating academic and administrative responsibilities, including teaching, committee work, and scholarly activity. 3) Develop effective approaches for coordinating remote and on-site faculty, with attention to communication, workflow integration, compensation, quality assurance, and team cohesion. 4) Examine the global neuroradiology landscape and the evolving role of artificial intelligence, assessing how international practice patterns and AI tools may influence workforce models, efficiency, and clinical decision-making.

Paul	Bunch	MD	1) Analyze current workforce challenges in neuroradiology, including radiologist shortages and increasing imaging volumes, and assess their impact on clinical operations, education, and patient care. 2) Evaluate strategies to balance clinical productivity with non-RVU–generating academic and administrative responsibilities, including teaching, committee work, and scholarly activity. 3) Develop effective approaches for coordinating remote and on-site faculty, with attention to communication, workflow integration, compensation, quality assurance, and team cohesion. 4) Examine the global neuroradiology landscape and the evolving role of artificial intelligence, assessing how international practice patterns and AI tools may influence workforce models, efficiency, and clinical decision-making.
Rupa	Radhakrishnan	MS,MD	1) Analyze current workforce challenges in neuroradiology, including radiologist shortages and increasing imaging volumes, and assess their impact on clinical operations, education, and patient care. 2) Evaluate strategies to balance clinical productivity with non-RVU–generating academic and administrative responsibilities, including teaching, committee work, and scholarly activity. 3) Develop effective approaches for coordinating remote and on-site faculty, with attention to communication, workflow integration, compensation, quality assurance, and team cohesion. 4) Examine the global neuroradiology landscape and the evolving role of artificial intelligence, assessing how international practice patterns and AI tools may influence workforce models, efficiency, and clinical decision-making.
Scott	Rice	BDS,MBBS	1) Analyze current workforce challenges in neuroradiology, including radiologist shortages and increasing imaging volumes, and assess their impact on clinical operations, education, and patient care. 2) Evaluate strategies to balance clinical productivity with non-RVU–generating academic and administrative responsibilities, including teaching, committee work, and scholarly activity. 3) Develop effective approaches for coordinating remote and on-site faculty, with attention to communication, workflow integration, compensation, quality assurance, and team cohesion. 4) Examine the global neuroradiology landscape and the evolving role of artificial intelligence, assessing how international practice patterns and AI tools may influence workforce models, efficiency, and clinical decision-making.

Roy	Riascos	MBA,MD	1) Differentiate compressive and noncompressive causes of acute nontraumatic myelopathy using high yield MRI patterns (including diffusion and enhancement) that directly influence urgent management. 2) Identify imaging features that mandate prompt escalation in spinal infection and malignant epidural spinal cord compression, and incorporate essential management driving elements into the radiology report. 3) Recognize and evaluate vascular and hemorrhagic spine emergencies that mimic degenerative disease, and select appropriate next step imaging and referral pathways to reduce diagnostic delay.
Roy	Riascos	MBA,MD	1) Differentiate compressive and noncompressive causes of acute nontraumatic myelopathy using high yield MRI patterns (including diffusion and enhancement) that directly influence urgent management. 2) Identify imaging features that mandate prompt escalation in spinal infection and malignant epidural spinal cord compression, and incorporate essential management driving elements into the radiology report. 3) Recognize and evaluate vascular and hemorrhagic spine emergencies that mimic degenerative disease, and select appropriate next step imaging and referral pathways to reduce diagnostic delay.
Wende	Gibbs	MA,MD	1) Differentiate compressive and noncompressive causes of acute nontraumatic myelopathy using high yield MRI patterns (including diffusion and enhancement) that directly influence urgent management. 2) Identify imaging features that mandate prompt escalation in spinal infection and malignant epidural spinal cord compression, and incorporate essential management driving elements into the radiology report. 3) Recognize and evaluate vascular and hemorrhagic spine emergencies that mimic degenerative disease, and select appropriate next step imaging and referral pathways to reduce diagnostic delay.
Shekhar	Khanpara	MBBS,MD	1) Differentiate compressive and noncompressive causes of acute nontraumatic myelopathy using high yield MRI patterns (including diffusion and enhancement) that directly influence urgent management. 2) Identify imaging features that mandate prompt escalation in spinal infection and malignant epidural spinal cord compression, and incorporate essential management driving elements into the radiology report. 3) Recognize and evaluate vascular and hemorrhagic spine emergencies that mimic degenerative disease, and select appropriate next step imaging and referral pathways to reduce diagnostic delay.

Pia	Maly Sundgren	PhD,MD	1) Differentiate compressive and noncompressive causes of acute nontraumatic myelopathy using high yield MRI patterns (including diffusion and enhancement) that directly influence urgent management. 2) Identify imaging features that mandate prompt escalation in spinal infection and malignant epidural spinal cord compression, and incorporate essential management driving elements into the radiology report. 3) Recognize and evaluate vascular and hemorrhagic spine emergencies that mimic degenerative disease, and select appropriate next step imaging and referral pathways to reduce diagnostic delay.
Carlos	Torres	MD, FRCPC	1) Describe the major pathogens responsible for CNS infections, including bacterial, viral, fungal, and parasitic causes. 2) Recognize red flags that indicate severe disease or the need for urgent intervention. 3) Differentiate CNS infections from common mimics such as stroke, neoplasms and autoimmune disorders.
Carlos	Torres	MD, FRCPC	1) Describe the major pathogens responsible for CNS infections, including bacterial, viral, fungal, and parasitic causes. 2) Recognize red flags that indicate severe disease or the need for urgent intervention. 3) Differentiate CNS infections from common mimics such as stroke, neoplasms and autoimmune disorders.
Majda	Thurnher	MD	1) Describe the major pathogens responsible for CNS infections, including bacterial, viral, fungal, and parasitic causes. 2) Recognize red flags that indicate severe disease or the need for urgent intervention. 3) Differentiate CNS infections from common mimics such as stroke, neoplasms and autoimmune disorders.
Felipe	Pacheco	PhD,MD	1) Describe the major pathogens responsible for CNS infections, including bacterial, viral, fungal, and parasitic causes. 2) Recognize red flags that indicate severe disease or the need for urgent intervention. 3) Differentiate CNS infections from common mimics such as stroke, neoplasms and autoimmune disorders.
Maria	Borja	MD	1) Describe the major pathogens responsible for CNS infections, including bacterial, viral, fungal, and parasitic causes. 2) Recognize red flags that indicate severe disease or the need for urgent intervention. 3) Differentiate CNS infections from common mimics such as stroke, neoplasms and autoimmune disorders.

Mohit	Agarwal	MD	1) Analyze the role of social media in education, including its influence on learner engagement, knowledge dissemination, professionalism, and educational equity. 2) Compare traditional, in-person teaching methods with digital and hybrid educational models, identifying best practices for preserving educational quality in modern learning environments, especially in the light of recent changes in the ABR certifying exam. 3) Identify and address challenges associated with remote teaching, including learner engagement, communication barriers, assessment, and faculty presence. 4) Design an effective digital curriculum by applying principles of instructional design, learner-centered education, and technology integration to meet defined educational objectives.
Sven	Dekeyzer		1) Analyze the role of social media in education, including its influence on learner engagement, knowledge dissemination, professionalism, and educational equity. 2) Compare traditional, in-person teaching methods with digital and hybrid educational models, identifying best practices for preserving educational quality in modern learning environments, especially in the light of recent changes in the ABR certifying exam. 3) Identify and address challenges associated with remote teaching, including learner engagement, communication barriers, assessment, and faculty presence. 4) Design an effective digital curriculum by applying principles of instructional design, learner-centered education, and technology integration to meet defined educational objectives.
Joshua	Nickerson	MD	1) Analyze the role of social media in education, including its influence on learner engagement, knowledge dissemination, professionalism, and educational equity. 2) Compare traditional, in-person teaching methods with digital and hybrid educational models, identifying best practices for preserving educational quality in modern learning environments, especially in the light of recent changes in the ABR certifying exam. 3) Identify and address challenges associated with remote teaching, including learner engagement, communication barriers, assessment, and faculty presence. 4) Design an effective digital curriculum by applying principles of instructional design, learner-centered education, and technology integration to meet defined educational objectives.

Ann	Jay	MD	1) Analyze the role of social media in education, including its influence on learner engagement, knowledge dissemination, professionalism, and educational equity. 2) Compare traditional, in-person teaching methods with digital and hybrid educational models, identifying best practices for preserving educational quality in modern learning environments, especially in the light of recent changes in the ABR certifying exam. 3) Identify and address challenges associated with remote teaching, including learner engagement, communication barriers, assessment, and faculty presence. 4) Design an effective digital curriculum by applying principles of instructional design, learner-centered education, and technology integration to meet defined educational objectives.
Mohit	Agarwal	MD	1) Analyze the role of social media in education, including its influence on learner engagement, knowledge dissemination, professionalism, and educational equity. 2) Compare traditional, in-person teaching methods with digital and hybrid educational models, identifying best practices for preserving educational quality in modern learning environments, especially in the light of recent changes in the ABR certifying exam. 3) Identify and address challenges associated with remote teaching, including learner engagement, communication barriers, assessment, and faculty presence. 4) Design an effective digital curriculum by applying principles of instructional design, learner-centered education, and technology integration to meet defined educational objectives.
Jeremy	Ford	MBA,MD	1) Identify quantitative MRI patterns and metrics most relevant for diagnosing, staging, and longitudinally assessing patients with cognitive impairment. 2) Emerging quantitative biomarkers will also be discussed. 3) Understand how neurologists integrate MRI and amyloid PET findings to confirm diagnosis, determine eligibility, and monitor patients receiving anti-amyloid therapies. 4) Apply MRI-based eligibility criteria and recognize imaging features of ARIA using practical and standardized reporting approaches. 5) Recognize emerging quantitative and AI-enabled imaging tools in dementia care and distinguish which approaches are most likely to translate into routine clinical practice.

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Gloria	Chiang	MD	1) Identify quantitative MRI patterns and metrics most relevant for diagnosing, staging, and longitudinally assessing patients with cognitive impairment. 2) Emerging quantitative biomarkers will also be discussed. 3) Understand how neurologists integrate MRI and amyloid PET findings to confirm diagnosis, determine eligibility, and monitor patients receiving anti-amyloid therapies. 4) Apply MRI-based eligibility criteria and recognize imaging features of ARIA using practical and standardized reporting approaches. 5) Recognize emerging quantitative and AI-enabled imaging tools in dementia care and distinguish which approaches are most likely to translate into routine clinical practice.
Georges	El Fakhri	PhD	1) Identify quantitative MRI patterns and metrics most relevant for diagnosing, staging, and longitudinally assessing patients with cognitive impairment. 2) Emerging quantitative biomarkers will also be discussed. 3) Understand how neurologists integrate MRI and amyloid PET findings to confirm diagnosis, determine eligibility, and monitor patients receiving anti-amyloid therapies. 4) Apply MRI-based eligibility criteria and recognize imaging features of ARIA using practical and standardized reporting approaches. 5) Recognize emerging quantitative and AI-enabled imaging tools in dementia care and distinguish which approaches are most likely to translate into routine clinical practice.
Liliana	Ramirez Gomez	MD	1) Identify quantitative MRI patterns and metrics most relevant for diagnosing, staging, and longitudinally assessing patients with cognitive impairment. 2) Emerging quantitative biomarkers will also be discussed. 3) Understand how neurologists integrate MRI and amyloid PET findings to confirm diagnosis, determine eligibility, and monitor patients receiving anti-amyloid therapies. 4) Apply MRI-based eligibility criteria and recognize imaging features of ARIA using practical and standardized reporting approaches. 5) Recognize emerging quantitative and AI-enabled imaging tools in dementia care and distinguish which approaches are most likely to translate into routine clinical practice.

Nancy	Fischbein	MD	1) Recognize distinct neuroimaging patterns, specifically deep gray matter abnormalities, brainstem pathology, cortical ribboning, and white matter disease. 2) Formulate pattern-specific differential diagnoses that integrate vascular, metabolic, infectious, and inflammatory causes for acute intracranial abnormalities.
Nikdokht	Farid	MD	1) Recognize distinct neuroimaging patterns, specifically deep gray matter abnormalities, brainstem pathology, cortical ribboning, and white matter disease. 2) Formulate pattern-specific differential diagnoses that integrate vascular, metabolic, infectious, and inflammatory causes for acute intracranial abnormalities.
Brent	Weinberg	PhD,MD	1) Recognize distinct neuroimaging patterns, specifically deep gray matter abnormalities, brainstem pathology, cortical ribboning, and white matter disease. 2) Formulate pattern-specific differential diagnoses that integrate vascular, metabolic, infectious, and inflammatory causes for acute intracranial abnormalities.
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Hediyeh	Baradaran	MD, MS	1) Describe standardized MRI terminology, imaging features, and clinically relevant reporting considerations for cerebral small vessel disease. 2) Apply contemporary imaging concepts and etiologic frameworks to the evaluation and reporting of intracerebral hemorrhage, including updates informed by recent clinical trials. 3) Recognize imaging features of nontraditional stroke mechanisms, including venous infarction, reversible cerebral vasoconstriction syndrome, posterior reversible encephalopathy syndrome, air embolism, and septic emboli. 4) Differentiate acute ischemic stroke from key stroke mimics on MR imaging using pattern-based interpretation and awareness of common diagnostic pitfalls.

Achala	Vagal	MD	1) Describe standardized MRI terminology, imaging features, and clinically relevant reporting considerations for cerebral small vessel disease. 2) Apply contemporary imaging concepts and etiologic frameworks to the evaluation and reporting of intracerebral hemorrhage, including updates informed by recent clinical trials. 3) Recognize imaging features of nontraditional stroke mechanisms, including venous infarction, reversible cerebral vasoconstriction syndrome, posterior reversible encephalopathy syndrome, air embolism, and septic emboli. 4) Differentiate acute ischemic stroke from key stroke mimics on MR imaging using pattern-based interpretation and awareness of common diagnostic pitfalls.
Vivek	Yedavalli	MD, MS	1) Describe standardized MRI terminology, imaging features, and clinically relevant reporting considerations for cerebral small vessel disease. 2) Apply contemporary imaging concepts and etiologic frameworks to the evaluation and reporting of intracerebral hemorrhage, including updates informed by recent clinical trials. 3) Recognize imaging features of nontraditional stroke mechanisms, including venous infarction, reversible cerebral vasoconstriction syndrome, posterior reversible encephalopathy syndrome, air embolism, and septic emboli. 4) Differentiate acute ischemic stroke from key stroke mimics on MR imaging using pattern-based interpretation and awareness of common diagnostic pitfalls.
Eduardo	Portela de Oliveira	MD	1) Describe standardized MRI terminology, imaging features, and clinically relevant reporting considerations for cerebral small vessel disease. 2) Apply contemporary imaging concepts and etiologic frameworks to the evaluation and reporting of intracerebral hemorrhage, including updates informed by recent clinical trials. 3) Recognize imaging features of nontraditional stroke mechanisms, including venous infarction, reversible cerebral vasoconstriction syndrome, posterior reversible encephalopathy syndrome, air embolism, and septic emboli. 4) Differentiate acute ischemic stroke from key stroke mimics on MR imaging using pattern-based interpretation and awareness of common diagnostic pitfalls.
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Jessica	Houk	MD	1) Describe optimized imaging protocols for time-sensitive neurologic conditions, including rapid imaging of the spine in the emergent setting and imaging of Horner syndrome. 2) Understand clinical indication for MR imaging of GCA and protocol considerations when imaging the superficial tempral artery. 3) Compare MR perfusion imaging techniques (DSC, DCE, ASL) with respect to techical advantages, limitations, and clinical applications.
Karen	Buch	MD	1) Describe optimized imaging protocols for time-sensitive neurologic conditions, including rapid imaging of the spine in the emergent setting and imaging of Horner syndrome. 2) Understand clinical indication for MR imaging of GCA and protocol considerations when imaging the superficial tempral artery. 3) Compare MR perfusion imaging techniques (DSC, DCE, ASL) with respect to techical advantages, limitations, and clinical applications.
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Nancy	Pham	MD	1) Review the complex cross-sectional anatomy of the orbit, temporal bone, neck, and spine. 2) Formulate a space-based differential diagnosis for vascular and neoplastic lesions in each anatomical region. 3) Recognize critical imaging findings that help narrow the differential diagnosis and guide clinical management.
Blair	Winegar	MD	1) Review the complex cross-sectional anatomy of the orbit, temporal bone, neck, and spine. 2) Formulate a space-based differential diagnosis for vascular and neoplastic lesions in each anatomical region. 3) Recognize critical imaging findings that help narrow the differential diagnosis and guide clinical management.
Claudia	Kirsch	MD	1) Review the complex cross-sectional anatomy of the orbit, temporal bone, neck, and spine. 2) Formulate a space-based differential diagnosis for vascular and neoplastic lesions in each anatomical region. 3) Recognize critical imaging findings that help narrow the differential diagnosis and guide clinical management.
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Michael	Malinzak	PhD,MD	1) Review the complex cross-sectional anatomy of the orbit, temporal bone, neck, and spine. 2) Formulate a space-based differential diagnosis for vascular and neoplastic lesions in each anatomical region. 3) Recognize critical imaging findings that help narrow the differential diagnosis and guide clinical management.
Seyedmehdi	Payabvash	MD	1) Evaluate the clinical benefits and limitations of AI-assisted aneurysm imaging and identify appropriate scenarios for its effective integration into routine practice. 2) Assess the role of AI in stroke imaging workflows, including its impact on detection, triage, and clinical decision-making. 3) Determine the clinical value and limitations of vessel wall imaging and apply evidence-based criteria for its appropriate use in cerebrovascular disease. 4) Identify clinical scenarios in which dynamic 4D CTA/MRA provides meaningful added value over conventional vascular imaging and recognize its practical limitations.

Jae	Song	MS,MD	1) Evaluate the clinical benefits and limitations of AI-assisted aneurysm imaging and identify appropriate scenarios for its effective integration into routine practice. 2) Assess the role of AI in stroke imaging workflows, including its impact on detection, triage, and clinical decision-making. 3) Determine the clinical value and limitations of vessel wall imaging and apply evidence-based criteria for its appropriate use in cerebrovascular disease. 4) Identify clinical scenarios in which dynamic 4D CTA/MRA provides meaningful added value over conventional vascular imaging and recognize its practical limitations.
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Jae	Song	MS,MD	1) Apply the updated 2024 McDonald criteria using CVS and PRL to improve diagnostic accuracy in suspected MS. 2) Describe MRI acquisition methods for reliable evaluation of the Central Vein Sign and Paramagnetic Rim Lesions. 3) Interpret CVS and PRL features on clinical MRI and distinguish them from potential imaging mimics. 4) Integrate CVS/PRL interpretation into standardized neuroradiology reporting workflows.
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Yvonne	Purcell	MD	1) Apply the updated 2024 McDonald criteria using CVS and PRL to improve diagnostic accuracy in suspected MS. 2) Describe MRI acquisition methods for reliable evaluation of the Central Vein Sign and Paramagnetic Rim Lesions. 3) Interpret CVS and PRL features on clinical MRI and distinguish them from potential imaging mimics. 4) Integrate CVS/PRL interpretation into standardized neuroradiology reporting workflows.
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Nasim	Sheikh Bahaei	MD,FRCR	1) Review best practices and consensus guidelines for diagnostic imaging in SIH. 2) Learn tips and tricks for perfecting the challenging task of CSF-venous fistula localization. 3) Explore cutting edge advanced imaging techniques that will expand our knowledge of CSF leak pathophysiology. 4) Discuss how to build a sustainable practice in managing spinal CSF leaks.
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Sarah	Moum	MD, MSc	1) Learn how to apply advanced imaging techniques to the diagnosis and characterization of pediatric stroke across diverse etiologies. 2) Distinguish pediatric CNS inflammatory disorders from important mimics using key neuroimaging patterns. 3) Recognize imaging manifestations of pediatric cancer predisposition syndromes and their implications for diagnosis and surveillance. 4) Identify subtle and complex imaging findings relevant to the evaluation of pediatric epilepsy.
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Virginia	Hill	MD	1) Recognize subtle imaging clues of brain invasion by meningiomas and subtle differences between meningiomas, solitary fibrous tumors and dural-based metastases. 2) Identify key imaging differences between skull base meningiomas, chordomas and chondrosarcomas.
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Ryo	Kurokawa	PhD,MD	1) Recognize subtle imaging clues of brain invasion by meningiomas and subtle differences between meningiomas, solitary fibrous tumors and dural-based metastases. 2) Identify key imaging differences between skull base meningiomas, chordomas and chondrosarcomas.
Eric	Basappa	MD	1) Recognize subtle imaging clues of brain invasion by meningiomas and subtle differences between meningiomas, solitary fibrous tumors and dural-based metastases. 2) Identify key imaging differences between skull base meningiomas, chordomas and chondrosarcomas.

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Javier	Romero	MD	1) Apply a structured diagnostic approach to difficult neuroradiologic cases by correlating imaging features with relevant clinical history, laboratory data, and pathology findings. 2) Integrate conventional and advanced neuroimaging findings to develop comprehensive differential diagnoses for complex neurological conditions. 3) Recognize subtle and atypical imaging features of challenging intracranial, head & neck and spinal pathologies.
Amy	Juliano	MD	1) Apply a structured diagnostic approach to difficult neuroradiologic cases by correlating imaging features with relevant clinical history, laboratory data, and pathology findings. 2) Integrate conventional and advanced neuroimaging findings to develop comprehensive differential diagnoses for complex neurological conditions. 3) Recognize subtle and atypical imaging features of challenging intracranial, head & neck and spinal pathologies.
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Caroline	Reinhold	MD,MSc	1) Role of US and MR imaging in evaluating abnormal uterine bleeding. 2) Identify imaging findings of benign and malignant etiologies that may account for the patient's abnormal uterine bleeding.

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Akshya	Gupta	MD	1) Role of US and MR imaging in evaluating abnormal uterine bleeding. 2) Identify imaging findings of benign and malignant etiologies that may account for the patient's abnormal uterine bleeding.
Nishat	Bharwani	FRCR,MBBS	1) Role of US and MR imaging in evaluating abnormal uterine bleeding. 2) Identify imaging findings of benign and malignant etiologies that may account for the patient's abnormal uterine bleeding.
Giacomo	Avesani	MD	1) Understanding O-RADS US and MRI scoring. 2) Review the updated 2026 O-RADS US and MRI management guidelines.
Elizabeth	Sadowski	MD	1) Understanding O-RADS US and MRI scoring. 2) Review the updated 2026 O-RADS US and MRI management guidelines.
Loretta	Strachowski	MD	1) Understanding O-RADS US and MRI scoring. 2) Review the updated 2026 O-RADS US and MRI management guidelines.
Priyanka	Jha	MBBS	1) Understanding O-RADS US and MRI scoring. 2) Review the updated 2026 O-RADS US and MRI management guidelines.
Krupa	Patel-Lippmann	MD	1) Understanding O-RADS US and MRI scoring. 2) Review the updated 2026 O-RADS US and MRI management guidelines.
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Catherine	Phillips	MD	1) Apply evidence-based imaging criteria to accurately diagnose early pregnancy loss and distinguish normal from guarded prognosis. 2) Recognize high-risk ectopic pregnancies, including interstitial, cesarean scar, and cervical ectopics, and identify imaging features that directly impact urgency, management, and multidisciplinary communication. 3) Identify expected versus abnormal post-pregnancy findings in the first trimester, including normal post-pregnancy changes and complications that warrant escalation or follow-up. 4) Detect key first-trimester anomalies involving both the fetus and the mother, with emphasis on subtle sonographic findings that are commonly overlooked but clinically significant. 5) Communicate critical and uncertain findings effectively to referring providers to guide appropriate triage, follow-up imaging, and patient counseling.

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Andrea	Rockall	FRCR	1) Understanding when to refer patients for US and MRI when an incidental adnexal lesion is discovered on CT. 2) Review how imaging is used the pre-treatment evaluation of ovarian cancer, as well as how it is used to assess response post-treatment.
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Shaun	Wahab	MD	1) Develop practical diagnostic approaches for challenging and high-anxiety imaging scenarios such as pregnancy. 2) Integrate imaging findings with clinical and multidisciplinary management considerations to optimize patient care.
Luyao	Shen	MD	1) Develop practical diagnostic approaches for challenging and high-anxiety imaging scenarios such as pregnancy. 2) Integrate imaging findings with clinical and multidisciplinary management considerations to optimize patient care.

Erin	Gomez	MD	1) Develop practical diagnostic approaches for challenging and high-anxiety imaging scenarios such as pregnancy. 2) Integrate imaging findings with clinical and multidisciplinary management considerations to optimize patient care.
Melissa	McGettigan	MD	1) Develop practical diagnostic approaches for challenging and high-anxiety imaging scenarios such as pregnancy. 2) Integrate imaging findings with clinical and multidisciplinary management considerations to optimize patient care.
Paula	Woodward	MD	1) Develop practical diagnostic approaches for challenging and high-anxiety imaging scenarios such as pregnancy. 2) Integrate imaging findings with clinical and multidisciplinary management considerations to optimize patient care.
Scott	Young	MD	1) Apply the update consensus guidelines for diagnosisng endometriosis on routine pelvic ultrasound. 2) Understand the MRI appereance of endometriosis and role of imaging in presurgical planning with surgical correlation. 3) Recognzie the evolution in apperance of endometriosis with pregnancy, infertility treatments and postpartum states. 4) Understand the unique imaging work up for infertility with endometriosis. 5) Understand the nuances of structured reporting with the most commonly applied schema from North America, Europe and Brazil. 6) Understand the apperance of atypical endometriosis sites such as neural and extrapevic endometriosis.
Anuradha	Shenoy-Bhangle	MD	1) Apply the update consensus guidelines for diagnosisng endometriosis on routine pelvic ultrasound. 2) Understand the MRI appereance of endometriosis and role of imaging in presurgical planning with surgical correlation. 3) Recognzie the evolution in apperance of endometriosis with pregnancy, infertility treatments and postpartum states. 4) Understand the unique imaging work up for infertility with endometriosis. 5) Understand the nuances of structured reporting with the most commonly applied schema from North America, Europe and Brazil. 6) Understand the apperance of atypical endometriosis sites such as neural and extrapevic endometriosis.

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Myra	Feldman	MD	1) Apply the update consensus guidelines for diagnosisng endometriosis on routine pelvic ultrasound. 2) Understand the MRI appereance of endometriosis and role of imaging in presurgical planning with surgical correlation. 3) Recognzie the evolution in apperance of endometriosis with pregnancy, infertility treatments and postpartum states. 4) Understand the unique imaging work up for infertility with endometriosis. 5) Understand the nuances of structured reporting with the most commonly applied schema from North America, Europe and Brazil. 6) Understand the apperance of atypical endometriosis sites such as neural and extrapevic endometriosis.
Isabelle	Thomassin-Naggara	MD	1) Apply the update consensus guidelines for diagnosisng endometriosis on routine pelvic ultrasound. 2) Understand the MRI appereance of endometriosis and role of imaging in presurgical planning with surgical correlation. 3) Recognzie the evolution in apperance of endometriosis with pregnancy, infertility treatments and postpartum states. 4) Understand the unique imaging work up for infertility with endometriosis. 5) Understand the nuances of structured reporting with the most commonly applied schema from North America, Europe and Brazil. 6) Understand the apperance of atypical endometriosis sites such as neural and extrapevic endometriosis.
Alice Cristina	Brandao Salomao	MD	1) Apply the update consensus guidelines for diagnosisng endometriosis on routine pelvic ultrasound. 2) Understand the MRI appereance of endometriosis and role of imaging in presurgical planning with surgical correlation. 3) Recognzie the evolution in apperance of endometriosis with pregnancy, infertility treatments and postpartum states. 4) Understand the unique imaging work up for infertility with endometriosis. 5) Understand the nuances of structured reporting with the most commonly applied schema from North America, Europe and Brazil. 6) Understand the apperance of atypical endometriosis sites such as neural and extrapevic endometriosis.

Hailey	Choi	MD	1) Identify key imaging features of adnexal torsion and apply practical tips to improve diagnostic confidence. 2) Differentiate adnexal torsion from other adnexal causes of acute pelvic pain in the nonpregnant patient. 3) Recognize atypical adnexal pathologies and avoid common diagnostic pitfalls using case-based examples.
Dorothy	Shum	MD	1) Identify key imaging features of adnexal torsion and apply practical tips to improve diagnostic confidence. 2) Differentiate adnexal torsion from other adnexal causes of acute pelvic pain in the nonpregnant patient. 3) Recognize atypical adnexal pathologies and avoid common diagnostic pitfalls using case-based examples.
Patricia	Prando	PhD,MD	1) Identify key imaging features of adnexal torsion and apply practical tips to improve diagnostic confidence. 2) Differentiate adnexal torsion from other adnexal causes of acute pelvic pain in the nonpregnant patient. 3) Recognize atypical adnexal pathologies and avoid common diagnostic pitfalls using case-based examples.
Akshya	Gupta	MD	1) Identify key imaging features of adnexal torsion and apply practical tips to improve diagnostic confidence. 2) Differentiate adnexal torsion from other adnexal causes of acute pelvic pain in the nonpregnant patient. 3) Recognize atypical adnexal pathologies and avoid common diagnostic pitfalls using case-based examples.
Amandeep	Singh	MBBS,MD	1) Identify key imaging features of adnexal torsion and apply practical tips to improve diagnostic confidence. 2) Differentiate adnexal torsion from other adnexal causes of acute pelvic pain in the nonpregnant patient. 3) Recognize atypical adnexal pathologies and avoid common diagnostic pitfalls using case-based examples.
Rosemarie	Forstner	MD	1) Understanding the role of imaing in treatment planning and post-treatement monitoring in endometrial and cervical cancer.
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Lauren	Roller	MD	1) Understanding the role of imaing in treatment planning and post-treatement monitoring in endometrial and cervical cancer.
Aradhana	Venkatesan	MD	1) Understanding the role of imaing in treatment planning and post-treatement monitoring in endometrial and cervical cancer.
Jeanne	Horowitz	MD	1) Understanding the role of imaing in treatment planning and post-treatement monitoring in endometrial and cervical cancer.
Maitray	Patel	MD	1) Recognize some common errors.
Wendaline	VanBuren	MD	1) Recognize some common errors.
Luis	Goncalves	MSc,MD	1) Recognize some common errors.

Katherine	Maturen	MD, MS	1) Recognize some common errors.
Tatnai	Burnett		1) Recognize some common errors.
Anne	Kennedy	MBBCh	1) Apply advanced Doppler techniques in the second and third trimester to assess fetal well-being, placental function, and high-risk conditions. 2) Recognize key ultrasound and MRI features of placenta accreta spectrum and multifetal gestations, integrating imaging findings into risk stratification and delivery planning. 3) Integrate ultrasound and MRI into a collaborative, multidisciplinary care model, optimizing communication with maternal-fetal medicine, surgery, and neonatology teams.
Roya	Sohaey	MD	1) Apply advanced Doppler techniques in the second and third trimester to assess fetal well-being, placental function, and high-risk conditions. 2) Recognize key ultrasound and MRI features of placenta accreta spectrum and multifetal gestations, integrating imaging findings into risk stratification and delivery planning. 3) Integrate ultrasound and MRI into a collaborative, multidisciplinary care model, optimizing communication with maternal-fetal medicine, surgery, and neonatology teams.
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Edward	Oliver	PhD,MD	1) Apply advanced Doppler techniques in the second and third trimester to assess fetal well-being, placental function, and high-risk conditions. 2) Recognize key ultrasound and MRI features of placenta accreta spectrum and multifetal gestations, integrating imaging findings into risk stratification and delivery planning. 3) Integrate ultrasound and MRI into a collaborative, multidisciplinary care model, optimizing communication with maternal-fetal medicine, surgery, and neonatology teams.

Juan	Gonzalez Velez	MD,PhD	1) Apply advanced Doppler techniques in the second and third trimester to assess fetal well-being, placental function, and high-risk conditions. 2) Recognize key ultrasound and MRI features of placenta accreta spectrum and multifetal gestations, integrating imaging findings into risk stratification and delivery planning. 3) Integrate ultrasound and MRI into a collaborative, multidisciplinary care model, optimizing communication with maternal-fetal medicine, surgery, and neonatology teams.
Winnie	Chu	FRCR,MD	1) Differentiate benign developmental variants from true pathology in the pediatric brain and spine to prevent misdiagnosis. 2) Determine the need for surveillance versus dismissal for incidental vascular and structural findings. 3) Formulate clear reporting recommendations to minimize unnecessary follow-up imaging.
Selima	Siala	MD	1) Differentiate benign developmental variants from true pathology in the pediatric brain and spine to prevent misdiagnosis. 2) Determine the need for surveillance versus dismissal for incidental vascular and structural findings. 3) Formulate clear reporting recommendations to minimize unnecessary follow-up imaging.
Vanessa	Rameh	MD	1) Differentiate benign developmental variants from true pathology in the pediatric brain and spine to prevent misdiagnosis. 2) Determine the need for surveillance versus dismissal for incidental vascular and structural findings. 3) Formulate clear reporting recommendations to minimize unnecessary follow-up imaging.
Vivek	Pai	MD,MBBS	1) Differentiate benign developmental variants from true pathology in the pediatric brain and spine to prevent misdiagnosis. 2) Determine the need for surveillance versus dismissal for incidental vascular and structural findings. 3) Formulate clear reporting recommendations to minimize unnecessary follow-up imaging.
Jennifer	Hayes	MD, PhD	1) Differentiate benign developmental variants from true pathology in the pediatric brain and spine to prevent misdiagnosis. 2) Determine the need for surveillance versus dismissal for incidental vascular and structural findings. 3) Formulate clear reporting recommendations to minimize unnecessary follow-up imaging.
Fiorenza	Coppola		1) Differentiate benign developmental variants from true pathology in the pediatric brain and spine to prevent misdiagnosis. 2) Determine the need for surveillance versus dismissal for incidental vascular and structural findings. 3) Formulate clear reporting recommendations to minimize unnecessary follow-up imaging.
Jie	Nguyen	MD, MS	1) Analyze injury patterns specific to the maturing skeleton, including physeal and apophyseal injuries, across the knee, shoulder, hip, and ankle. 2) Differentiate true pathology from normal developmental variants to avoid potential diagnostic pitfalls. 3) Evaluate imaging findings of both acute trauma and chronic overuse injuries to guide appropriate management in the young athlete.

Kathryn	Milks	MD	1) Analyze injury patterns specific to the maturing skeleton, including physeal and apophyseal injuries, across the knee, shoulder, hip, and ankle. 2) Differentiate true pathology from normal developmental variants to avoid potential diagnostic pitfalls. 3) Evaluate imaging findings of both acute trauma and chronic overuse injuries to guide appropriate management in the young athlete.
Ara	Kassarjian	FRCPC,MD	1) Analyze injury patterns specific to the maturing skeleton, including physeal and apophyseal injuries, across the knee, shoulder, hip, and ankle. 2) Differentiate true pathology from normal developmental variants to avoid potential diagnostic pitfalls. 3) Evaluate imaging findings of both acute trauma and chronic overuse injuries to guide appropriate management in the young athlete.
Fernanda	Babler	MD	1) Analyze injury patterns specific to the maturing skeleton, including physeal and apophyseal injuries, across the knee, shoulder, hip, and ankle. 2) Differentiate true pathology from normal developmental variants to avoid potential diagnostic pitfalls. 3) Evaluate imaging findings of both acute trauma and chronic overuse injuries to guide appropriate management in the young athlete.
J.	Kan	MD	1) Analyze injury patterns specific to the maturing skeleton, including physeal and apophyseal injuries, across the knee, shoulder, hip, and ankle. 2) Differentiate true pathology from normal developmental variants to avoid potential diagnostic pitfalls. 3) Evaluate imaging findings of both acute trauma and chronic overuse injuries to guide appropriate management in the young athlete.
Ola	Kvist	PhD,MD	1) Analyze injury patterns specific to the maturing skeleton, including physeal and apophyseal injuries, across the knee, shoulder, hip, and ankle. 2) Differentiate true pathology from normal developmental variants to avoid potential diagnostic pitfalls. 3) Evaluate imaging findings of both acute trauma and chronic overuse injuries to guide appropriate management in the young athlete.
Maddy	Artunduaga	MD	1) Identify key imaging features of high-acuity infections across the pediatric brain, chest, abdomen, and musculoskeletal system. 2) Differentiate true infectious emergencies from common non-infectious mimics to avoid diagnostic errors. 3) Evaluate imaging findings to distinguish uncomplicated processes from those requiring urgent medical or surgical intervention.
Fabricio	Goncalves	MD	1) Identify key imaging features of high-acuity infections across the pediatric brain, chest, abdomen, and musculoskeletal system. 2) Differentiate true infectious emergencies from common non-infectious mimics to avoid diagnostic errors. 3) Evaluate imaging findings to distinguish uncomplicated processes from those requiring urgent medical or surgical intervention.

Jungwhan	Choi	MD	1) Identify key imaging features of high-acuity infections across the pediatric brain, chest, abdomen, and musculoskeletal system. 2) Differentiate true infectious emergencies from common non-infectious mimics to avoid diagnostic errors. 3) Evaluate imaging findings to distinguish uncomplicated processes from those requiring urgent medical or surgical intervention.
Savvas	Andronikou	MBBCh,PhD	1) Identify key imaging features of high-acuity infections across the pediatric brain, chest, abdomen, and musculoskeletal system. 2) Differentiate true infectious emergencies from common non-infectious mimics to avoid diagnostic errors. 3) Evaluate imaging findings to distinguish uncomplicated processes from those requiring urgent medical or surgical intervention.
Claudia	Lazarte	MD	1) Identify key imaging features of high-acuity infections across the pediatric brain, chest, abdomen, and musculoskeletal system. 2) Differentiate true infectious emergencies from common non-infectious mimics to avoid diagnostic errors. 3) Evaluate imaging findings to distinguish uncomplicated processes from those requiring urgent medical or surgical intervention.
Jonathan	Samet	MD	1) Identify key imaging features of high-acuity infections across the pediatric brain, chest, abdomen, and musculoskeletal system. 2) Differentiate true infectious emergencies from common non-infectious mimics to avoid diagnostic errors. 3) Evaluate imaging findings to distinguish uncomplicated processes from those requiring urgent medical or surgical intervention.
Hassan	Aboughalia	MD	1) Identify critical findings on neonatal head ultrasound and apply a systematic approach to interpretation. 2) Recognize essential and commonly missed findings on NICU plain radiographs. 3) Understand the indications and limitations of ultrasound for acute abdomen beyond necrotizing enterocolitis. 4) Optimize imaging for guiding management in children with necrotising enterocolitis using current best practices.
Judy	Squires	MD	1) Identify critical findings on neonatal head ultrasound and apply a systematic approach to interpretation. 2) Recognize essential and commonly missed findings on NICU plain radiographs. 3) Understand the indications and limitations of ultrasound for acute abdomen beyond necrotizing enterocolitis. 4) Optimize imaging for guiding management in children with necrotising enterocolitis using current best practices.

Pallavi	Sagar	MD	1) Identify critical findings on neonatal head ultrasound and apply a systematic approach to interpretation. 2) Recognize essential and commonly missed findings on NICU plain radiographs. 3) Understand the indications and limitations of ultrasound for acute abdomen beyond necrotizing enterocolitis. 4) Optimize imaging for guiding management in children with necrotising enterocolitis using current best practices.
Cicero	Silva	MD	1) Identify critical findings on neonatal head ultrasound and apply a systematic approach to interpretation. 2) Recognize essential and commonly missed findings on NICU plain radiographs. 3) Understand the indications and limitations of ultrasound for acute abdomen beyond necrotizing enterocolitis. 4) Optimize imaging for guiding management in children with necrotising enterocolitis using current best practices.
Bianca	Guedes Ribeiro	MSc,MD	1) Identify critical findings on neonatal head ultrasound and apply a systematic approach to interpretation. 2) Recognize essential and commonly missed findings on NICU plain radiographs. 3) Understand the indications and limitations of ultrasound for acute abdomen beyond necrotizing enterocolitis. 4) Optimize imaging for guiding management in children with necrotising enterocolitis using current best practices.
Sherwin	Chan	PhD,MD	1) Identify critical findings on neonatal head ultrasound and apply a systematic approach to interpretation. 2) Recognize essential and commonly missed findings on NICU plain radiographs. 3) Understand the indications and limitations of ultrasound for acute abdomen beyond necrotizing enterocolitis. 4) Optimize imaging for guiding management in children with necrotising enterocolitis using current best practices.
Emilio	Inarejos Clemente	MD	1) Distinguish normal variants of ossification and physeal closure from true pathology, including fractures and other osseous abnormalities. 2) Analyze normal versus abnormal bone marrow signal patterns on MRI across different pediatric age groups. 3) Evaluate the changing appearance of articular cartilage and epiphyses in major joints to avoid common diagnostic pitfalls.
Atsuhiko	Handa	MD	1) Distinguish normal variants of ossification and physeal closure from true pathology, including fractures and other osseous abnormalities. 2) Analyze normal versus abnormal bone marrow signal patterns on MRI across different pediatric age groups. 3) Evaluate the changing appearance of articular cartilage and epiphyses in major joints to avoid common diagnostic pitfalls.

Diego	Jaramillo	MPH,MD	1) Distinguish normal variants of ossification and physeal closure from true pathology, including fractures and other osseous abnormalities. 2) Analyze normal versus abnormal bone marrow signal patterns on MRI across different pediatric age groups. 3) Evaluate the changing appearance of articular cartilage and epiphyses in major joints to avoid common diagnostic pitfalls.
Stacey	Elangovan	MD	1) Distinguish normal variants of ossification and physeal closure from true pathology, including fractures and other osseous abnormalities. 2) Analyze normal versus abnormal bone marrow signal patterns on MRI across different pediatric age groups. 3) Evaluate the changing appearance of articular cartilage and epiphyses in major joints to avoid common diagnostic pitfalls.
Bamidele	Kammen	MD	1) Distinguish normal variants of ossification and physeal closure from true pathology, including fractures and other osseous abnormalities. 2) Analyze normal versus abnormal bone marrow signal patterns on MRI across different pediatric age groups. 3) Evaluate the changing appearance of articular cartilage and epiphyses in major joints to avoid common diagnostic pitfalls.
Eric	Tung	MD	1) Distinguish normal variants of ossification and physeal closure from true pathology, including fractures and other osseous abnormalities. 2) Analyze normal versus abnormal bone marrow signal patterns on MRI across different pediatric age groups. 3) Evaluate the changing appearance of articular cartilage and epiphyses in major joints to avoid common diagnostic pitfalls.
Andrea	Doria	MD, PhD	1) Review the anatomy and ultrasound imaging techniques used to evaluate the wrist, elbow, and upper extremity nerves. 2) Describe dynamic imaging techniques that enhance the assessment of elbow.3) Discuss common MSK pathologies involving the wrist, elbow, and upper extremity nerves, including key ultrasound findings and potential pitfalls.
Jonathan	Samet	MD	1) Review the anatomy and ultrasound imaging techniques used to evaluate the wrist, elbow, and upper extremity nerves. 2) Describe dynamic imaging techniques that enhance the assessment of elbow.3) Discuss common MSK pathologies involving the wrist, elbow, and upper extremity nerves, including key ultrasound findings and potential pitfalls.
Vivek	Kalia	MD, MPH	1) Review the anatomy and ultrasound imaging techniques used to evaluate the wrist, elbow, and upper extremity nerves. 2) Describe dynamic imaging techniques that enhance the assessment of elbow.3) Discuss common MSK pathologies involving the wrist, elbow, and upper extremity nerves, including key ultrasound findings and potential pitfalls.

Christabel l	Ndibe	MD	1) Review the anatomy and ultrasound imaging techniques used to evaluate the wrist, elbow, and upper extremity nerves. 2) Describe dynamic imaging techniques that enhance the assessment of elbow.3) Discuss common MSK pathologies involving the wrist, elbow, and upper extremity nerves, including key ultrasound findings and potential pitfalls.
Jeffrey	Tutman	MD	1) Review the anatomy and ultrasound imaging techniques used to evaluate the wrist, elbow, and upper extremity nerves. 2) Describe dynamic imaging techniques that enhance the assessment of elbow.3) Discuss common MSK pathologies involving the wrist, elbow, and upper extremity nerves, including key ultrasound findings and potential pitfalls.
Erica	Schallert	MD	1) Review the anatomy and ultrasound imaging techniques used to evaluate the wrist, elbow, and upper extremity nerves. 2) Describe dynamic imaging techniques that enhance the assessment of elbow.3) Discuss common MSK pathologies involving the wrist, elbow, and upper extremity nerves, including key ultrasound findings and potential pitfalls.
Matthew	Hammer	MD	1) Review the anatomy and ultrasound imaging techniques used to evaluate the wrist, elbow, and upper extremity nerves. 2) Describe dynamic imaging techniques that enhance the assessment of elbow.3) Discuss common MSK pathologies involving the wrist, elbow, and upper extremity nerves, including key ultrasound findings and potential pitfalls.
Sandra	Taves Bhutto	MEd, MSc,BSC	1) Review the anatomy and ultrasound imaging techniques used to evaluate the wrist, elbow, and upper extremity nerves. 2) Describe dynamic imaging techniques that enhance the assessment of elbow.3) Discuss common MSK pathologies involving the wrist, elbow, and upper extremity nerves, including key ultrasound findings and potential pitfalls.
Falguni	Patel	RDMS, RVT	1) Review the anatomy and ultrasound imaging techniques used to evaluate the wrist, elbow, and upper extremity nerves. 2) Describe dynamic imaging techniques that enhance the assessment of elbow.3) Discuss common MSK pathologies involving the wrist, elbow, and upper extremity nerves, including key ultrasound findings and potential pitfalls.
Swati	Patel	BS, RDMS	1) Review the anatomy and ultrasound imaging techniques used to evaluate the wrist, elbow, and upper extremity nerves. 2) Describe dynamic imaging techniques that enhance the assessment of elbow.3) Discuss common MSK pathologies involving the wrist, elbow, and upper extremity nerves, including key ultrasound findings and potential pitfalls.

Julia	Michalek	RDMS, BS	1) Review the anatomy and ultrasound imaging techniques used to evaluate the wrist, elbow, and upper extremity nerves. 2) Describe dynamic imaging techniques that enhance the assessment of elbow.3) Discuss common MSK pathologies involving the wrist, elbow, and upper extremity nerves, including key ultrasound findings and potential pitfalls.
Laura	Jurgens		1) Review the anatomy and ultrasound imaging techniques used to evaluate the wrist, elbow, and upper extremity nerves. 2) Describe dynamic imaging techniques that enhance the assessment of elbow.3) Discuss common MSK pathologies involving the wrist, elbow, and upper extremity nerves, including key ultrasound findings and potential pitfalls.
Ayla	Kljako	RDMS	1) Review the anatomy and ultrasound imaging techniques used to evaluate the wrist, elbow, and upper extremity nerves. 2) Describe dynamic imaging techniques that enhance the assessment of elbow.3) Discuss common MSK pathologies involving the wrist, elbow, and upper extremity nerves, including key ultrasound findings and potential pitfalls.
Jason	Weinman	MD	1) Identify the imaging features of pediatric mediastinal masses and recognize common diagnostic pitfalls. 2) Apply lung and diaphragm ultrasound techniques to evaluate common pediatric thoracic conditions. 3) Recognize commonly missed pediatric chest emergencies and identify strategies to avoid diagnostic errors. 4) Outline an evidence-based approach to the evaluation and management of incidental pulmonary nodules in children.
Sarah	Desoky	MD	1) Identify the imaging features of pediatric mediastinal masses and recognize common diagnostic pitfalls. 2) Apply lung and diaphragm ultrasound techniques to evaluate common pediatric thoracic conditions. 3) Recognize commonly missed pediatric chest emergencies and identify strategies to avoid diagnostic errors. 4) Outline an evidence-based approach to the evaluation and management of incidental pulmonary nodules in children.
Edward	Lee	MD, MPH	1) Identify the imaging features of pediatric mediastinal masses and recognize common diagnostic pitfalls. 2) Apply lung and diaphragm ultrasound techniques to evaluate common pediatric thoracic conditions. 3) Recognize commonly missed pediatric chest emergencies and identify strategies to avoid diagnostic errors. 4) Outline an evidence-based approach to the evaluation and management of incidental pulmonary nodules in children.

Pedro	Daltro	MD	1) Identify the imaging features of pediatric mediastinal masses and recognize common diagnostic pitfalls. 2) Apply lung and diaphragm ultrasound techniques to evaluate common pediatric thoracic conditions. 3) Recognize commonly missed pediatric chest emergencies and identify strategies to avoid diagnostic errors. 4) Outline an evidence-based approach to the evaluation and management of incidental pulmonary nodules in children.
Aki	Tanimoto	MD	1) Identify the imaging features of pediatric mediastinal masses and recognize common diagnostic pitfalls. 2) Apply lung and diaphragm ultrasound techniques to evaluate common pediatric thoracic conditions. 3) Recognize commonly missed pediatric chest emergencies and identify strategies to avoid diagnostic errors. 4) Outline an evidence-based approach to the evaluation and management of incidental pulmonary nodules in children.
Jovan	Lovrenski		1) Identify the imaging features of pediatric mediastinal masses and recognize common diagnostic pitfalls. 2) Apply lung and diaphragm ultrasound techniques to evaluate common pediatric thoracic conditions. 3) Recognize commonly missed pediatric chest emergencies and identify strategies to avoid diagnostic errors. 4) Outline an evidence-based approach to the evaluation and management of incidental pulmonary nodules in children.
Pablo	Caro-Domingue z	MD	1) Identify current indications for fetal surgery and the imaging findings required for intervention. 2) Revisit fetal MRI to characterize complex brain and spine anomalies. 3) Apply a systematic approach to diagnose a variety of fetal pathologies through rapid-fire case analysis.
Teresa	Victoria	PhD,MD	1) Identify current indications for fetal surgery and the imaging findings required for intervention. 2) Revisit fetal MRI to characterize complex brain and spine anomalies. 3) Apply a systematic approach to diagnose a variety of fetal pathologies through rapid-fire case analysis.
Julie	Moldenha uer		1) Identify current indications for fetal surgery and the imaging findings required for intervention. 2) Revisit fetal MRI to characterize complex brain and spine anomalies. 3) Apply a systematic approach to diagnose a variety of fetal pathologies through rapid-fire case analysis.
Mariana	Meyers	MD	1) Identify current indications for fetal surgery and the imaging findings required for intervention. 2) Revisit fetal MRI to characterize complex brain and spine anomalies. 3) Apply a systematic approach to diagnose a variety of fetal pathologies through rapid-fire case analysis.

David	Mirsky	MD	1) Identify current indications for fetal surgery and the imaging findings required for intervention. 2) Revisit fetal MRI to characterize complex brain and spine anomalies. 3) Apply a systematic approach to diagnose a variety of fetal pathologies through rapid-fire case analysis.
Usha	Nagaraj	MD	1) Identify current indications for fetal surgery and the imaging findings required for intervention. 2) Revisit fetal MRI to characterize complex brain and spine anomalies. 3) Apply a systematic approach to diagnose a variety of fetal pathologies through rapid-fire case analysis.
Pablo	Caro-Dominguez	MD	1) Apply pediatric radiology knowledge to diagnose a broad range of clinical cases. 2) Identify key imaging findings across multiple pediatric organ systems. 3) Reinforce diagnostic reasoning through interactive, game-based learning.
Ailish	Coblentz	MD	1) Apply pediatric radiology knowledge to diagnose a broad range of clinical cases. 2) Identify key imaging findings across multiple pediatric organ systems. 3) Reinforce diagnostic reasoning through interactive, game-based learning.
Monica	Epelman	MD	1) Apply pediatric radiology knowledge to diagnose a broad range of clinical cases. 2) Identify key imaging findings across multiple pediatric organ systems. 3) Reinforce diagnostic reasoning through interactive, game-based learning.
Carolina	Guimaraes	MD	1) Apply pediatric radiology knowledge to diagnose a broad range of clinical cases. 2) Identify key imaging findings across multiple pediatric organ systems. 3) Reinforce diagnostic reasoning through interactive, game-based learning.
Ramesh	Iyer	MBA,MD	1) Apply pediatric radiology knowledge to diagnose a broad range of clinical cases. 2) Identify key imaging findings across multiple pediatric organ systems. 3) Reinforce diagnostic reasoning through interactive, game-based learning.
Janet	Reid	MD,FRCPC	1) Apply pediatric radiology knowledge to diagnose a broad range of clinical cases. 2) Identify key imaging findings across multiple pediatric organ systems. 3) Reinforce diagnostic reasoning through interactive, game-based learning.
Brian	Coley	MD	1) Apply pediatric radiology knowledge to diagnose a broad range of clinical cases. 2) Identify key imaging findings across multiple pediatric organ systems. 3) Reinforce diagnostic reasoning through interactive, game-based learning.
Marla	Sammer	MD	1) Apply pediatric radiology knowledge to diagnose a broad range of clinical cases. 2) Identify key imaging findings across multiple pediatric organ systems. 3) Reinforce diagnostic reasoning through interactive, game-based learning.

Marcelo	Takahashi	PhD,MD	1) Apply adult-derived interpretation skills to the adolescent pelvis to improve the detection and characterization of endometriosis. 2) Recognize imaging patterns of benign versus malignant adnexal lesions to guide appropriate follow-up and management. 3) Evaluate congenital Müllerian anomalies using ultrasound and MRI to direct surgical planning and fertility preservation.
Hee Mang	Yoon	PhD,MD	1) Apply adult-derived interpretation skills to the adolescent pelvis to improve the detection and characterization of endometriosis. 2) Recognize imaging patterns of benign versus malignant adnexal lesions to guide appropriate follow-up and management. 3) Evaluate congenital Müllerian anomalies using ultrasound and MRI to direct surgical planning and fertility preservation.
Luciana	Chamie	PhD,MD	1) Apply adult-derived interpretation skills to the adolescent pelvis to improve the detection and characterization of endometriosis. 2) Recognize imaging patterns of benign versus malignant adnexal lesions to guide appropriate follow-up and management. 3) Evaluate congenital Müllerian anomalies using ultrasound and MRI to direct surgical planning and fertility preservation.
Shailee	Lala	MD	1) Apply adult-derived interpretation skills to the adolescent pelvis to improve the detection and characterization of endometriosis. 2) Recognize imaging patterns of benign versus malignant adnexal lesions to guide appropriate follow-up and management. 3) Evaluate congenital Müllerian anomalies using ultrasound and MRI to direct surgical planning and fertility preservation.
Ellen	Chung	MD	1) Apply adult-derived interpretation skills to the adolescent pelvis to improve the detection and characterization of endometriosis. 2) Recognize imaging patterns of benign versus malignant adnexal lesions to guide appropriate follow-up and management. 3) Evaluate congenital Müllerian anomalies using ultrasound and MRI to direct surgical planning and fertility preservation.
Aurelie	D'Hondt	MD	1) Apply adult-derived interpretation skills to the adolescent pelvis to improve the detection and characterization of endometriosis. 2) Recognize imaging patterns of benign versus malignant adnexal lesions to guide appropriate follow-up and management. 3) Evaluate congenital Müllerian anomalies using ultrasound and MRI to direct surgical planning and fertility preservation.
Alex	Towbin	MD	1) Review the Image Defined Risk Factors (IDRF) for neuroblastoma with leading experts. 2) Understand the nuances of PRETEXT staging for pediatric liver tumors. 3) Learn from expert analysis of challenging and complex oncologic cases to avoid staging errors.
Govind	Chavhan	MD	1) Review the Image Defined Risk Factors (IDRF) for neuroblastoma with leading experts. 2) Understand the nuances of PRETEXT staging for pediatric liver tumors. 3) Learn from expert analysis of challenging and complex oncologic cases to avoid staging errors.

Daddy	Mata-Mbemba	PhD,MD	1) Review the Image Defined Risk Factors (IDRF) for neuroblastoma with leading experts. 2) Understand the nuances of PRETEXT staging for pediatric liver tumors. 3) Learn from expert analysis of challenging and complex oncologic cases to avoid staging errors.
Adina	Alazraki	MD	1) Review the Image Defined Risk Factors (IDRF) for neuroblastoma with leading experts. 2) Understand the nuances of PRETEXT staging for pediatric liver tumors. 3) Learn from expert analysis of challenging and complex oncologic cases to avoid staging errors.
Akshay	Baheti	MD	1) Review the Image Defined Risk Factors (IDRF) for neuroblastoma with leading experts. 2) Understand the nuances of PRETEXT staging for pediatric liver tumors. 3) Learn from expert analysis of challenging and complex oncologic cases to avoid staging errors.
Laura	Acosta	MD	1) Identify and describe the expected imaging appearance and common complications of pediatric cardiac devices across modalities. 2) Apply a systematic approach to the classification and imaging evaluation of soft tissue vascular lesions in children. 3) Recognize the imaging findings of pediatric vasculitis and distinguish true vasculitis from clinical and radiologic mimics. 4) Identify emergent and life-threatening complications in Fontan patients and understand the radiologist's role in timely diagnosis.
Abass	Noor	MD	1) Identify and describe the expected imaging appearance and common complications of pediatric cardiac devices across modalities. 2) Apply a systematic approach to the classification and imaging evaluation of soft tissue vascular lesions in children. 3) Recognize the imaging findings of pediatric vasculitis and distinguish true vasculitis from clinical and radiologic mimics. 4) Identify emergent and life-threatening complications in Fontan patients and understand the radiologist's role in timely diagnosis.
Christopher	Lam	MD	1) Identify and describe the expected imaging appearance and common complications of pediatric cardiac devices across modalities. 2) Apply a systematic approach to the classification and imaging evaluation of soft tissue vascular lesions in children. 3) Recognize the imaging findings of pediatric vasculitis and distinguish true vasculitis from clinical and radiologic mimics. 4) Identify emergent and life-threatening complications in Fontan patients and understand the radiologist's role in timely diagnosis.
Maria	Navallas	MD	1) Identify and describe the expected imaging appearance and common complications of pediatric cardiac devices across modalities. 2) Apply a systematic approach to the classification and imaging evaluation of soft tissue vascular lesions in children. 3) Recognize the imaging findings of pediatric vasculitis and distinguish true vasculitis from clinical and radiologic mimics. 4) Identify emergent and life-threatening complications in Fontan patients and understand the radiologist's role in timely diagnosis.

Shravan	Sridhar	MS,MD	1) Identify and describe the expected imaging appearance and common complications of pediatric cardiac devices across modalities. 2) Apply a systematic approach to the classification and imaging evaluation of soft tissue vascular lesions in children. 3) Recognize the imaging findings of pediatric vasculitis and distinguish true vasculitis from clinical and radiologic mimics. 4) Identify emergent and life-threatening complications in Fontan patients and understand the radiologist's role in timely diagnosis.
Oscar	Navarro	MD	1) Identify and describe the expected imaging appearance and common complications of pediatric cardiac devices across modalities. 2) Apply a systematic approach to the classification and imaging evaluation of soft tissue vascular lesions in children. 3) Recognize the imaging findings of pediatric vasculitis and distinguish true vasculitis from clinical and radiologic mimics. 4) Identify emergent and life-threatening complications in Fontan patients and understand the radiologist's role in timely diagnosis.
Grace	Gang	PhD	1) Understand the current state of CBCT in different clinical applications. 2) Understand the differences in system configurations and imaging requirements for different applications. 3) Identify opportunities to improve CBCT imaging performance.
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Marc	Kachelries s	PhD	1) Understand the current state of CBCT in different clinical applications. 2) Understand the differences in system configurations and imaging requirements for different applications. 3) Identify opportunities to improve CBCT imaging performance.
Joseph	Stayman	PhD	1) Understand the current state of CBCT in different clinical applications. 2) Understand the differences in system configurations and imaging requirements for different applications. 3) Identify opportunities to improve CBCT imaging performance.
Samuel	Einstein	PhD	1) This AAPM/RSNA physics lecture is for RTs. This course will focus on the practical implementation of MRI safety. More details will be forthcoming.
Emanuel	Kanal	MD	1) This AAPM/RSNA physics lecture is for RTs. This course will focus on the practical implementation of MRI safety. More details will be forthcoming.
Leigha	Johnson		1) This AAPM/RSNA physics lecture is for RTs. This course will focus on the practical implementation of MRI safety. More details will be forthcoming.

Vrinda	Narayana	PhD	1) Recognize common diagnostic MRI artifacts. 2) Explain mechanisms of key artifacts. 3) Implement practical mitigation strategies.
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Xiaohong	Zhou	PhD	1) Recognize common diagnostic MRI artifacts. 2) Explain mechanisms of key artifacts. 3) Implement practical mitigation strategies.
Nathan	Yanasak	PhD	1) Recognize common diagnostic MRI artifacts. 2) Explain mechanisms of key artifacts. 3) Implement practical mitigation strategies.
Trevor	Andrews	PhD	1) Recognize common diagnostic MRI artifacts. 2) Explain mechanisms of key artifacts. 3) Implement practical mitigation strategies.
Zheng Feng	Lu	PhD	1) To describe the principles of breast acoustic computed tomography technology and learn its clinical applications in breast tissue characterization. 2) To know the principles of photoacoustic imaging as an emerging technology and learn its potential applications in non-invasive breast cancer detection. 3) To be familiar with the clinical challenges in breast cancer imaging from a radiologist's perspective and evaluate the potential clinical value of photoacoustic imaging.
James	Wiskin	PhD, MSc	1) To describe the principles of breast acoustic computed tomography technology and learn its clinical applications in breast tissue characterization. 2) To know the principles of photoacoustic imaging as an emerging technology and learn its potential applications in non-invasive breast cancer detection. 3) To be familiar with the clinical challenges in breast cancer imaging from a radiologist's perspective and evaluate the potential clinical value of photoacoustic imaging.
Sophia	Zackrisson	MD, PhD	1) To describe the principles of breast acoustic computed tomography technology and learn its clinical applications in breast tissue characterization. 2) To know the principles of photoacoustic imaging as an emerging technology and learn its potential applications in non-invasive breast cancer detection. 3) To be familiar with the clinical challenges in breast cancer imaging from a radiologist's perspective and evaluate the potential clinical value of photoacoustic imaging.

Matthew	Hoerner	PHD	1) Describe exam data pathways from acquisition through, including the role and limitations of the Radiation Dose Structured Report (RDSR). 2) Interpret and apply dose/exposure metrics appropriately. Learn the about the limitations of the IEC Exposure Index (EI) and using the registry to analyze Target EI values. 3) Design and execute quality improvement initiatives using a Plan–Do–Study–Act (PDSA) framework informed by Digital Radiography analytics.
Kevin	Little	PhD	1) Describe exam data pathways from acquisition through, including the role and limitations of the Radiation Dose Structured Report (RDSR). 2) Interpret and apply dose/exposure metrics appropriately. Learn the about the limitations of the IEC Exposure Index (EI) and using the registry to analyze Target EI values. 3) Design and execute quality improvement initiatives using a Plan–Do–Study–Act (PDSA) framework informed by Digital Radiography analytics.
Zachary	Carr	BA	1) Describe exam data pathways from acquisition through, including the role and limitations of the Radiation Dose Structured Report (RDSR). 2) Interpret and apply dose/exposure metrics appropriately. Learn the about the limitations of the IEC Exposure Index (EI) and using the registry to analyze Target EI values. 3) Design and execute quality improvement initiatives using a Plan–Do–Study–Act (PDSA) framework informed by Digital Radiography analytics.
Ryan	Bosca	PhD	1) Describe exam data pathways from acquisition through, including the role and limitations of the Radiation Dose Structured Report (RDSR). 2) Interpret and apply dose/exposure metrics appropriately. Learn the about the limitations of the IEC Exposure Index (EI) and using the registry to analyze Target EI values. 3) Design and execute quality improvement initiatives using a Plan–Do–Study–Act (PDSA) framework informed by Digital Radiography analytics.
Xiang	Li	PhD	1) Describe exam data pathways from acquisition through, including the role and limitations of the Radiation Dose Structured Report (RDSR). 2) Interpret and apply dose/exposure metrics appropriately. Learn the about the limitations of the IEC Exposure Index (EI) and using the registry to analyze Target EI values. 3) Design and execute quality improvement initiatives using a Plan–Do–Study–Act (PDSA) framework informed by Digital Radiography analytics.
Shreyas	Vasanawala	PhD,MD	1) Explain the principles fundamental MRI acceleration techniques, including SENSE, GRAPPA, CAIPIRINHA, and SMS and identify their advantages and limitations in clinical practice. 2) Understand how Compressed Sensing works in MRI, its advantages and limitations on scan time reduction, image quality, and implementation in different MRI protocols. 3) Explain how AI-based technologies are used in MRI reconstruction and acceleration, and their advantages and limitations.

Kazim	Gumus	PhD	1) Explain the principles fundamental MRI acceleration techniques, including SENSE, GRAPPA, CAIPIRINHA, and SMS and identify their advantages and limitations in clinical practice. 2) Understand how Compressed Sensing works in MRI, its advantages and limitations on scan time reduction, image quality, and implementation in different MRI protocols. 3) Explain how AI-based technologies are used in MRI reconstruction and acceleration, and their advantages and limitations.
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Patricia	Johnson	PhD	1) Explain the principles fundamental MRI acceleration techniques, including SENSE, GRAPPA, CAIPIRINHA, and SMS and identify their advantages and limitations in clinical practice. 2) Understand how Compressed Sensing works in MRI, its advantages and limitations on scan time reduction, image quality, and implementation in different MRI protocols. 3) Explain how AI-based technologies are used in MRI reconstruction and acceleration, and their advantages and limitations.
Cynthia	McCollough	PhD	1) Understand the current status and clinical deployment of PCD-CT. 2) Gain insights into the clinical benefits of PCD-CT. 3) Learn strategies to optimize image quality and reduce radiation dose in PCD-CT. 4) Discover best practices for streamlining workflow with PCD-CT systems.
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Giuseppe	Toia	MS,MD	1) Understand the current status and clinical deployment of PCD-CT. 2) Gain insights into the clinical benefits of PCD-CT. 3) Learn strategies to optimize image quality and reduce radiation dose in PCD-CT. 4) Discover best practices for streamlining workflow with PCD-CT systems.
Tom	Kimpe	PhD,MSc	1) Understand the fundamental physics of grayscale and color calibration & QA of medical displays, including the DICOM GSDF and extensions for color displays. 2) Implement practical QA protocols for medical displays in a clinical environment (in the hospital and at home), including measurements and visual assessment. 3) Evaluate the scientific evidence linking display characteristics to diagnostic accuracy and radiologists' workflow efficiency. 4) Navigate the current regulatory landscape and (emerging) international standards (such as IEC 62563-3) for display color calibration and QA.
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Ingrid	Reiser	PhD	1) Understand the fundamental physics of grayscale and color calibration & QA of medical displays, including the DICOM GSDF and extensions for color displays. 2) Implement practical QA protocols for medical displays in a clinical environment (in the hospital and at home), including measurements and visual assessment. 3) Evaluate the scientific evidence linking display characteristics to diagnostic accuracy and radiologists' workflow efficiency. 4) Navigate the current regulatory landscape and (emerging) international standards (such as IEC 62563-3) for display color calibration and QA.

Elizabeth	Krupinski	PhD	1) Understand the fundamental physics of grayscale and color calibration & QA of medical displays, including the DICOM GSDF and extensions for color displays. 2) Implement practical QA protocols for medical displays in a clinical environment (in the hospital and at home), including measurements and visual assessment. 3) Evaluate the scientific evidence linking display characteristics to diagnostic accuracy and radiologists' workflow efficiency. 4) Navigate the current regulatory landscape and (emerging) international standards (such as IEC 62563-3) for display color calibration and QA.
Aldo	Badano	PhD	1) Understand the fundamental physics of grayscale and color calibration & QA of medical displays, including the DICOM GSDF and extensions for color displays. 2) Implement practical QA protocols for medical displays in a clinical environment (in the hospital and at home), including measurements and visual assessment. 3) Evaluate the scientific evidence linking display characteristics to diagnostic accuracy and radiologists' workflow efficiency. 4) Navigate the current regulatory landscape and (emerging) international standards (such as IEC 62563-3) for display color calibration and QA.
Ioannis	Sechopoulos	PhD	1) Discuss the current state of AI-based interpretation of mammography and what might be possible in the future. 2) Recognize what AI outputs, what it means, and its limitations. 3) Summarize evidence for AI in breast cancer screening, including technical validation, post-implementation studies, and randomized clinical trials. 4) Discuss how workflow, reader behavior, and screening setting may influence real-world AI performance and interpretation of study results, with case examples.
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Peter	Noel	PhD	1) Gain practical insights into how statistical principles connect quantitative physics in medical imaging modalities with AI-derived imaging biomarkers, supporting informed evaluation and utilization. 2) Understand the medical physics workflow and resources for cross-platform harmonization in MRI techniques to enable quantitative use of PDFF, ADC, and other quantitative techniques in multi-site clinical trials. 3) Understand spectral CT and their technical benefits for quantitative diagnostic imaging.
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Michael	Boss	PhD	1) Gain practical insights into how statistical principles connect quantitative physics in medical imaging modalities with AI-derived imaging biomarkers, supporting informed evaluation and utilization. 2) Understand the medical physics workflow and resources for cross-platform harmonization in MRI techniques to enable quantitative use of PDFF, ADC, and other quantitative techniques in multi-site clinical trials. 3) Understand spectral CT and their technical benefits for quantitative diagnostic imaging.
Leening	Liu	PhD	1) Gain practical insights into how statistical principles connect quantitative physics in medical imaging modalities with AI-derived imaging biomarkers, supporting informed evaluation and utilization. 2) Understand the medical physics workflow and resources for cross-platform harmonization in MRI techniques to enable quantitative use of PDFF, ADC, and other quantitative techniques in multi-site clinical trials. 3) Understand spectral CT and their technical benefits for quantitative diagnostic imaging.

Courtney	Morrison	PhD	1) This AAPM/RSNA physics tutorial course will focus on the technological development and clinical implementation of contrast-enhanced breast imaging, using contrast agent (Iodine/Gadolinium - based agents) with mammography and MRI. More details will be forthcoming.
Courtney	Morrison	PhD	1) This AAPM/RSNA physics tutorial course will focus on the technological development and clinical implementation of contrast-enhanced breast imaging, using contrast agent (Iodine/Gadolinium - based agents) with mammography and MRI. More details will be forthcoming.
Cecile	Jeukens	PhD	1) This AAPM/RSNA physics tutorial course will focus on the technological development and clinical implementation of contrast-enhanced breast imaging, using contrast agent (Iodine/Gadolinium - based agents) with mammography and MRI. More details will be forthcoming.
Andrew	Hernandez	PhD	1) Explore the emerging role of contrast-enhanced mammography (CEM) in breast cancer screening, diagnosis, and biopsy, and discuss considerations and hurdles to clinical implementation. 2) Discuss the latest developments in software and hardware technology in clinical and research digital breast tomosynthesis (DBT) systems and the emerging role of machine learning/AI on DBT workflow, computer-aided diagnosis, reconstruction, dose reduction, and risk prediction. 3) Describe the proven clinical utility of dedicated breast CT (bCT) for breast cancer diagnosis, the next-generation developments in bCT, and how they may further enhance clinical utility of this modality.
Katie	Hulme	MS	1) Explore the emerging role of contrast-enhanced mammography (CEM) in breast cancer screening, diagnosis, and biopsy, and discuss considerations and hurdles to clinical implementation. 2) Discuss the latest developments in software and hardware technology in clinical and research digital breast tomosynthesis (DBT) systems and the emerging role of machine learning/AI on DBT workflow, computer-aided diagnosis, reconstruction, dose reduction, and risk prediction. 3) Describe the proven clinical utility of dedicated breast CT (bCT) for breast cancer diagnosis, the next-generation developments in bCT, and how they may further enhance clinical utility of this modality.

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Donald	Frush	MD	1) To understand the difficulties in determining cancer risks from medical imaging and review current data in the field. 2) To become familiar with studies and data that provide tangible evidence of the benefit of medical imaging that uses radiation and discuss the problem of overuse. 3) To appreciate the difficulties in communicating about radiation risk and review best practices for radiation risk communication.
Donald	Frush	MD	1) To understand the difficulties in determining cancer risks from medical imaging and review current data in the field. 2) To become familiar with studies and data that provide tangible evidence of the benefit of medical imaging that uses radiation and discuss the problem of overuse. 3) To appreciate the difficulties in communicating about radiation risk and review best practices for radiation risk communication.
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Saurabh	Jha	MS,MBBS	1) To understand the difficulties in determining cancer risks from medical imaging and review current data in the field. 2) To become familiar with studies and data that provide tangible evidence of the benefit of medical imaging that uses radiation and discuss the problem of overuse. 3) To appreciate the difficulties in communicating about radiation risk and review best practices for radiation risk communication.
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Hersh	Chandarana	MBA,MD	1) Describe the technical components of a high-quality 3T Whole Body MRI protocol for precision early detection. 2) Summarize current evidence for WB-MRI cancer detection in asymptomatic populations. 3) Recognize quantitative imaging biomarkers relevant to metabolic syndrome, cardiovascular disease, and neurodegeneration. 4) Discuss integration of WB-MRI with genomics, liquid biopsy, wearables and serum chemistries and other multimodal analytics. 5) Identify implementation challenges, reporting standards, and strategies to manage incidental findings responsibly.
David	Karow	MD, PhD	1) Describe the technical components of a high-quality 3T Whole Body MRI protocol for precision early detection. 2) Summarize current evidence for WB-MRI cancer detection in asymptomatic populations. 3) Recognize quantitative imaging biomarkers relevant to metabolic syndrome, cardiovascular disease, and neurodegeneration. 4) Discuss integration of WB-MRI with genomics, liquid biopsy, wearables and serum chemistries and other multimodal analytics. 5) Identify implementation challenges, reporting standards, and strategies to manage incidental findings responsibly.
Rebecca	Rakow-Penner	PhD,MD	1) Describe the technical components of a high-quality 3T Whole Body MRI protocol for precision early detection. 2) Summarize current evidence for WB-MRI cancer detection in asymptomatic populations. 3) Recognize quantitative imaging biomarkers relevant to metabolic syndrome, cardiovascular disease, and neurodegeneration. 4) Discuss integration of WB-MRI with genomics, liquid biopsy, wearables and serum chemistries and other multimodal analytics. 5) Identify implementation challenges, reporting standards, and strategies to manage incidental findings responsibly.

Preethi	Guniganti	MD	1) Describe the technical components of a high-quality 3T Whole Body MRI protocol for precision early detection. 2) Summarize current evidence for WB-MRI cancer detection in asymptomatic populations. 3) Recognize quantitative imaging biomarkers relevant to metabolic syndrome, cardiovascular disease, and neurodegeneration. 4) Discuss integration of WB-MRI with genomics, liquid biopsy, wearables and serum chemistries and other multimodal analytics. 5) Identify implementation challenges, reporting standards, and strategies to manage incidental findings responsibly.
Nima	Kasraie	PhD	1) Distinguish regulatory clearance requirements from institution-level responsibilities for pediatric AI deployment. 2) Describe physics-based acceptance testing and QA strategies for AI tools used in pediatric imaging. 3) Develop practical governance frameworks for monitoring AI performance over time in pediatric clinical settings.
Andrea	Doria	MD, PhD	1) Distinguish regulatory clearance requirements from institution-level responsibilities for pediatric AI deployment. 2) Describe physics-based acceptance testing and QA strategies for AI tools used in pediatric imaging. 3) Develop practical governance frameworks for monitoring AI performance over time in pediatric clinical settings.
Sarah	Verboom	MSc	1) Distinguish regulatory clearance requirements from institution-level responsibilities for pediatric AI deployment. 2) Describe physics-based acceptance testing and QA strategies for AI tools used in pediatric imaging. 3) Develop practical governance frameworks for monitoring AI performance over time in pediatric clinical settings.
Elim	Thompson	PhD	1) Distinguish regulatory clearance requirements from institution-level responsibilities for pediatric AI deployment. 2) Describe physics-based acceptance testing and QA strategies for AI tools used in pediatric imaging. 3) Develop practical governance frameworks for monitoring AI performance over time in pediatric clinical settings.
Kishore	Rajendran	PhD	1) Understand how opportunistic CT-based measurements employing AI techniques can support individual- and population-level risk assessment and preventive care across multiple disease domains. 2) Understand the technical features and benefits of photon-counting detector CT for opportunistic imaging. 3) Understand economic evaluation concepts and analytical methods to quantify the value of opportunistic CT in clinical practice.

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Mathias	Prokop	PhD,MD	1) Understand how opportunistic CT-based measurements employing AI techniques can support individual- and population-level risk assessment and preventive care across multiple disease domains. 2) Understand the technical features and benefits of photon-counting detector CT for opportunistic imaging. 3) Understand economic evaluation concepts and analytical methods to quantify the value of opportunistic CT in clinical practice.
Ryoko	Sato	PhD	1) Understand how opportunistic CT-based measurements employing AI techniques can support individual- and population-level risk assessment and preventive care across multiple disease domains. 2) Understand the technical features and benefits of photon-counting detector CT for opportunistic imaging. 3) Understand economic evaluation concepts and analytical methods to quantify the value of opportunistic CT in clinical practice.
Kevin	Fung	MBBS, FRCR	1) Recognize common challenges and pitfalls in difficult workplace conversations. 2) Apply structured communication strategies using clear, specific, and behavior-focused language. 3) Deliver constructive feedback in challenging situations while balancing empathy and accountability.
Mark	Hoegger	MD, PhD	1) Recognize common challenges and pitfalls in difficult workplace conversations. 2) Apply structured communication strategies using clear, specific, and behavior-focused language. 3) Deliver constructive feedback in challenging situations while balancing empathy and accountability.
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Khushboo	Jhala	MBA,MD	1) Recognize common challenges and pitfalls in difficult workplace conversations. 2) Apply structured communication strategies using clear, specific, and behavior-focused language. 3) Deliver constructive feedback in challenging situations while balancing empathy and accountability.

Victoria	Chernyak	MS,MD	1) Recognize common challenges and pitfalls in difficult workplace conversations. 2) Apply structured communication strategies using clear, specific, and behavior-focused language. 3) Deliver constructive feedback in challenging situations while balancing empathy and accountability.
Michele	Johnson	MD	1) Recognize common challenges and pitfalls in difficult workplace conversations. 2) Apply structured communication strategies using clear, specific, and behavior-focused language. 3) Deliver constructive feedback in challenging situations while balancing empathy and accountability.
Geraldine	McGinty	MBA,MD	1) Recognize common challenges and pitfalls in difficult workplace conversations. 2) Apply structured communication strategies using clear, specific, and behavior-focused language. 3) Deliver constructive feedback in challenging situations while balancing empathy and accountability.
Prasaanthan	Gopee-Ramanan	MD,FRCPC	1) Apply practical strategies to improve presentation delivery, including techniques to manage common barriers and anxieties. 2) Incorporate audience engagement techniques to maintain attention during presentations, with interactive polling, audience reflection, and participation integrated throughout each session segment to model effective engagement strategies in real time. 3) Develop presentations with a clear central message, ensuring key teaching points are effectively communicated and retained by learners. 4) Design visually effective slides with live “before and after” slide transformation from interactive audience participation and feedback.
Maya	Grisaru Kacen	MBA,MD	1) Apply practical strategies to improve presentation delivery, including techniques to manage common barriers and anxieties. 2) Incorporate audience engagement techniques to maintain attention during presentations, with interactive polling, audience reflection, and participation integrated throughout each session segment to model effective engagement strategies in real time. 3) Develop presentations with a clear central message, ensuring key teaching points are effectively communicated and retained by learners. 4) Design visually effective slides with live “before and after” slide transformation from interactive audience participation and feedback.

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Supriya	Kulkarni	FRCPC,DMRD	1) Apply practical strategies to improve presentation delivery, including techniques to manage common barriers and anxieties. 2) Incorporate audience engagement techniques to maintain attention during presentations, with interactive polling, audience reflection, and participation integrated throughout each session segment to model effective engagement strategies in real time. 3) Develop presentations with a clear central message, ensuring key teaching points are effectively communicated and retained by learners. 4) Design visually effective slides with live “before and after” slide transformation from interactive audience participation and feedback.
Grace	Zhu	MD	1) Apply practical strategies to improve presentation delivery, including techniques to manage common barriers and anxieties. 2) Incorporate audience engagement techniques to maintain attention during presentations, with interactive polling, audience reflection, and participation integrated throughout each session segment to model effective engagement strategies in real time. 3) Develop presentations with a clear central message, ensuring key teaching points are effectively communicated and retained by learners. 4) Design visually effective slides with live “before and after” slide transformation from interactive audience participation and feedback.
Prasaanthan	Gopee-Ramanan	MD,FRCPC	1) Identify imaging findings and interpretive scenarios commonly associated with diagnostic error. 2) Describe the role of cognitive bias and contextual factors in missed or delayed radiologic diagnoses. 3) Implement practical strategies to reduce similar errors in future clinical practice.
Adriano	Basso Dias	MSc,MD	1) Identify imaging findings and interpretive scenarios commonly associated with diagnostic error. 2) Describe the role of cognitive bias and contextual factors in missed or delayed radiologic diagnoses. 3) Implement practical strategies to reduce similar errors in future clinical practice.

Ariadne	DeSimone	MPH,MD	1) Identify imaging findings and interpretive scenarios commonly associated with diagnostic error. 2) Describe the role of cognitive bias and contextual factors in missed or delayed radiologic diagnoses. 3) Implement practical strategies to reduce similar errors in future clinical practice.
Shweta	Kumar	MD	1) Identify imaging findings and interpretive scenarios commonly associated with diagnostic error. 2) Describe the role of cognitive bias and contextual factors in missed or delayed radiologic diagnoses. 3) Implement practical strategies to reduce similar errors in future clinical practice.
Khushboo	Jhala	MBA,MD	1) Describe the principles of Virtual Reality, Augmented Reality, and Mixed Reality, and explain how these technologies relate to current radiology workflows. 2) Assess the role of immersive technologies in radiology, including diagnostic visualization, interventional guidance, and training. 3) Demonstrate practical understanding of AR/VR/MR tools by engaging in hands-on breakout demos, and identify potential use cases for adoption within participants' own clinical or academic practice.
Niraj	Pandey	MD	1) Describe the principles of Virtual Reality, Augmented Reality, and Mixed Reality, and explain how these technologies relate to current radiology workflows. 2) Assess the role of immersive technologies in radiology, including diagnostic visualization, interventional guidance, and training. 3) Demonstrate practical understanding of AR/VR/MR tools by engaging in hands-on breakout demos, and identify potential use cases for adoption within participants' own clinical or academic practice.
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Madhusudan	Ganigara		1) Describe the principles of Virtual Reality, Augmented Reality, and Mixed Reality, and explain how these technologies relate to current radiology workflows. 2) Assess the role of immersive technologies in radiology, including diagnostic visualization, interventional guidance, and training. 3) Demonstrate practical understanding of AR/VR/MR tools by engaging in hands-on breakout demos, and identify potential use cases for adoption within participants' own clinical or academic practice.

Francois	Cornelis	PhD,MD	1) Describe the principles of Virtual Reality, Augmented Reality, and Mixed Reality, and explain how these technologies relate to current radiology workflows. 2) Assess the role of immersive technologies in radiology, including diagnostic visualization, interventional guidance, and training. 3) Demonstrate practical understanding of AR/VR/MR tools by engaging in hands-on breakout demos, and identify potential use cases for adoption within participants' own clinical or academic practice.
Carol	Ng	MBBS	1) Describe the principles of Virtual Reality, Augmented Reality, and Mixed Reality, and explain how these technologies relate to current radiology workflows. 2) Assess the role of immersive technologies in radiology, including diagnostic visualization, interventional guidance, and training. 3) Demonstrate practical understanding of AR/VR/MR tools by engaging in hands-on breakout demos, and identify potential use cases for adoption within participants' own clinical or academic practice.
Laetitia	Saccenti	MD	1) Describe the principles of Virtual Reality, Augmented Reality, and Mixed Reality, and explain how these technologies relate to current radiology workflows. 2) Assess the role of immersive technologies in radiology, including diagnostic visualization, interventional guidance, and training. 3) Demonstrate practical understanding of AR/VR/MR tools by engaging in hands-on breakout demos, and identify potential use cases for adoption within participants' own clinical or academic practice.
Heather	Hinton	RT	1) Describe the principles of Virtual Reality, Augmented Reality, and Mixed Reality, and explain how these technologies relate to current radiology workflows. 2) Assess the role of immersive technologies in radiology, including diagnostic visualization, interventional guidance, and training. 3) Demonstrate practical understanding of AR/VR/MR tools by engaging in hands-on breakout demos, and identify potential use cases for adoption within participants' own clinical or academic practice.
Maya	Grisaru Kacen	MBA,MD	1) Explain the purpose and structure of a radiology malpractice deposition and the distinct roles of the fact witness, expert witness, and attorneys. 2) Identify communication behaviors that strengthen or undermine a radiologist's credibility during sworn testimony. 3) Apply medicolegal risk-reduction principles to everyday radiology practice by improving reporting and communication habits.
Francis	Deng	MD	1) Explain the purpose and structure of a radiology malpractice deposition and the distinct roles of the fact witness, expert witness, and attorneys. 2) Identify communication behaviors that strengthen or undermine a radiologist's credibility during sworn testimony. 3) Apply medicolegal risk-reduction principles to everyday radiology practice by improving reporting and communication habits.

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Shailin	Thomas	MD, JD	1) Explain the purpose and structure of a radiology malpractice deposition and the distinct roles of the fact witness, expert witness, and attorneys. 2) Identify communication behaviors that strengthen or undermine a radiologist's credibility during sworn testimony. 3) Apply medicolegal risk-reduction principles to everyday radiology practice by improving reporting and communication habits.
Daniel	Cousin	MD	1) Explain the purpose and structure of a radiology malpractice deposition and the distinct roles of the fact witness, expert witness, and attorneys. 2) Identify communication behaviors that strengthen or undermine a radiologist's credibility during sworn testimony. 3) Apply medicolegal risk-reduction principles to everyday radiology practice by improving reporting and communication habits.
Christina	Tsien	MD	1) To understand the role of advanced neuroimaging modalities and their clinical applications in improving care of brain tumor patients. 2) Apply imaging to assess treatment response and differentiate true progression from treatment-related changes. 3) Review new treatments and approaches in the management of low-grade glioma. 4) Integrate emerging imaging tools in surgical resection and treatment planning.
Soonmee	Cha	MD	1) To understand the role of advanced neuroimaging modalities and their clinical applications in improving care of brain tumor patients. 2) Apply imaging to assess treatment response and differentiate true progression from treatment-related changes. 3) Review new treatments and approaches in the management of low-grade glioma. 4) Integrate emerging imaging tools in surgical resection and treatment planning.
Roger	Stupp	MD	1) To understand the role of advanced neuroimaging modalities and their clinical applications in improving care of brain tumor patients. 2) Apply imaging to assess treatment response and differentiate true progression from treatment-related changes. 3) Review new treatments and approaches in the management of low-grade glioma. 4) Integrate emerging imaging tools in surgical resection and treatment planning.

Clark	Chen	PhD	1) To understand the role of advanced neuroimaging modalities and their clinical applications in improving care of brain tumor patients. 2) Apply imaging to assess treatment response and differentiate true progression from treatment-related changes. 3) Review new treatments and approaches in the management of low-grade glioma. 4) Integrate emerging imaging tools in surgical resection and treatment planning.
Suresh	Mukherji	MBA,MD	1) Review a variety of head and neck tumors. 2) Describe the characteristic imaging findings. 3) Provide a list of ""Key Elements"" that you should include in your report that will make a difference in staging, treatment, and outcome.
Sung	Kim	MD	1) Review a variety of head and neck tumors. 2) Describe the characteristic imaging findings. 3) Provide a list of ""Key Elements"" that you should include in your report that will make a difference in staging, treatment, and outcome.
Alice	Tang	MD	1) Review a variety of head and neck tumors. 2) Describe the characteristic imaging findings. 3) Provide a list of ""Key Elements"" that you should include in your report that will make a difference in staging, treatment, and outcome.
Francis	Worden	MD	1) Review a variety of head and neck tumors. 2) Describe the characteristic imaging findings. 3) Provide a list of ""Key Elements"" that you should include in your report that will make a difference in staging, treatment, and outcome.
Varsha	Joshi	MD	1) Review a variety of head and neck tumors. 2) Describe the characteristic imaging findings. 3) Provide a list of ""Key Elements"" that you should include in your report that will make a difference in staging, treatment, and outcome.
Edward	Kim	MD	1) Identify common bone and soft tissue tumor imaging characteristics. 2) Review the appropriate workup and staging for bone and soft tissue tumors. 3) Evaluate different treatment strategies for bone and soft tissue tumors.
Jack	Jennings	PhD,MD	1) Identify common bone and soft tissue tumor imaging characteristics. 2) Review the appropriate workup and staging for bone and soft tissue tumors. 3) Evaluate different treatment strategies for bone and soft tissue tumors.
Lara	Davis	MD	1) Identify common bone and soft tissue tumor imaging characteristics. 2) Review the appropriate workup and staging for bone and soft tissue tumors. 3) Evaluate different treatment strategies for bone and soft tissue tumors.
Elyse	Brinkman n	MD	1) Identify common bone and soft tissue tumor imaging characteristics. 2) Review the appropriate workup and staging for bone and soft tissue tumors. 3) Evaluate different treatment strategies for bone and soft tissue tumors.

Ann	Raldow	MPH,MD	1) Review the epidemiology, staging, and risk stratification of rectal cancer using current guidelines and imaging modalities. 2) Apply multidisciplinary treatment strategies to rectal cancer cases, including sequencing of chemotherapy, radiation therapy, and surgery. 3) Evaluate indications and outcomes for total neoadjuvant therapy, sphincter-preserving approaches, and non-operative ("watch-and-wait") management. 4) Interpret radiologic and pathologic findings to guide treatment planning and assess response to therapy. 5) Discuss management of treatment-related toxicities, postoperative complications, and quality-of-life considerations. 6) Incorporate emerging evidence and clinical trial data into individualized patient care decisions.
Spencer	Behr	MD	1) Review the epidemiology, staging, and risk stratification of rectal cancer using current guidelines and imaging modalities. 2) Apply multidisciplinary treatment strategies to rectal cancer cases, including sequencing of chemotherapy, radiation therapy, and surgery. 3) Evaluate indications and outcomes for total neoadjuvant therapy, sphincter-preserving approaches, and non-operative ("watch-and-wait") management. 4) Interpret radiologic and pathologic findings to guide treatment planning and assess response to therapy. 5) Discuss management of treatment-related toxicities, postoperative complications, and quality-of-life considerations. 6) Incorporate emerging evidence and clinical trial data into individualized patient care decisions.
Diane	Ling	MD	1) Review the epidemiology, staging, and risk stratification of rectal cancer using current guidelines and imaging modalities. 2) Apply multidisciplinary treatment strategies to rectal cancer cases, including sequencing of chemotherapy, radiation therapy, and surgery. 3) Evaluate indications and outcomes for total neoadjuvant therapy, sphincter-preserving approaches, and non-operative ("watch-and-wait") management. 4) Interpret radiologic and pathologic findings to guide treatment planning and assess response to therapy. 5) Discuss management of treatment-related toxicities, postoperative complications, and quality-of-life considerations. 6) Incorporate emerging evidence and clinical trial data into individualized patient care decisions.

Konstantin	Umanskiy	MD	1) Review the epidemiology, staging, and risk stratification of rectal cancer using current guidelines and imaging modalities. 2) Apply multidisciplinary treatment strategies to rectal cancer cases, including sequencing of chemotherapy, radiation therapy, and surgery. 3) Evaluate indications and outcomes for total neoadjuvant therapy, sphincter-preserving approaches, and non-operative ("watch-and-wait") management. 4) Interpret radiologic and pathologic findings to guide treatment planning and assess response to therapy. 5) Discuss management of treatment-related toxicities, postoperative complications, and quality-of-life considerations. 6) Incorporate emerging evidence and clinical trial data into individualized patient care decisions.
Sidharth	Anand	MD	1) Review the epidemiology, staging, and risk stratification of rectal cancer using current guidelines and imaging modalities. 2) Apply multidisciplinary treatment strategies to rectal cancer cases, including sequencing of chemotherapy, radiation therapy, and surgery. 3) Evaluate indications and outcomes for total neoadjuvant therapy, sphincter-preserving approaches, and non-operative ("watch-and-wait") management. 4) Interpret radiologic and pathologic findings to guide treatment planning and assess response to therapy. 5) Discuss management of treatment-related toxicities, postoperative complications, and quality-of-life considerations. 6) Incorporate emerging evidence and clinical trial data into individualized patient care decisions.
Tarita	Thomas	PhD,MD	1) Review the neurological syndromes related to functional radiation medicine as described above. 2) Review anatomy related to these syndromes. 3) Understand the radiation therapy targeting. 4) Review current data to support these treatments.
Virginia	Hill	MD	1) Review the neurological syndromes related to functional radiation medicine as described above. 2) Review anatomy related to these syndromes. 3) Understand the radiation therapy targeting. 4) Review current data to support these treatments.
Austin	Kirschner	MD, PhD	1) Review the neurological syndromes related to functional radiation medicine as described above. 2) Review anatomy related to these syndromes. 3) Understand the radiation therapy targeting. 4) Review current data to support these treatments.
Sarah	Bick	MD	1) Review the neurological syndromes related to functional radiation medicine as described above. 2) Review anatomy related to these syndromes. 3) Understand the radiation therapy targeting. 4) Review current data to support these treatments.
Tyler	Seibert	PhD,MD	1) Understand how modern imaging affects treatment decisions for prostate cancer. 2) Improve radiologists' contributions to multi-disciplinary team discussions. 3) Consider how active clinical trials seek to further optimize use of imaging in prostate cancer care*.

Sophia	Kamran	MD	1) Understand how modern imaging affects treatment decisions for prostate cancer. 2) Improve radiologists' contributions to multi-disciplinary team discussions. 3) Consider how active clinical trials seek to further optimize use of imaging in prostate cancer care*.
Anca	Grosu	MD	1) Understand how modern imaging affects treatment decisions for prostate cancer. 2) Improve radiologists' contributions to multi-disciplinary team discussions. 3) Consider how active clinical trials seek to further optimize use of imaging in prostate cancer care*.
Tristan	Barrett	MBBS, MD	1) Understand how modern imaging affects treatment decisions for prostate cancer. 2) Improve radiologists' contributions to multi-disciplinary team discussions. 3) Consider how active clinical trials seek to further optimize use of imaging in prostate cancer care*.
Michael	Leapman	MD	1) Understand how modern imaging affects treatment decisions for prostate cancer. 2) Improve radiologists' contributions to multi-disciplinary team discussions. 3) Consider how active clinical trials seek to further optimize use of imaging in prostate cancer care*.
Anna	Shapiro	MD	1) Describe the role of breast imaging in multidisciplinary breast cancer management using a tumor board–based approach. 2) Correlate imaging findings with pathology and clinical presentation in common and challenging breast cancer cases. 3) Identify how imaging influences surgical and oncologic treatment decisions. 4) Apply multidisciplinary perspectives to optimize diagnostic evaluation and patient management in breast cancer care.
Bethany	Niell	PhD,MD	1) Describe the role of breast imaging in multidisciplinary breast cancer management using a tumor board–based approach. 2) Correlate imaging findings with pathology and clinical presentation in common and challenging breast cancer cases. 3) Identify how imaging influences surgical and oncologic treatment decisions. 4) Apply multidisciplinary perspectives to optimize diagnostic evaluation and patient management in breast cancer care.
Avan	Armaghani	MD	1) Describe the role of breast imaging in multidisciplinary breast cancer management using a tumor board–based approach. 2) Correlate imaging findings with pathology and clinical presentation in common and challenging breast cancer cases. 3) Identify how imaging influences surgical and oncologic treatment decisions. 4) Apply multidisciplinary perspectives to optimize diagnostic evaluation and patient management in breast cancer care.
Youlia	Kirova		1) Describe the role of breast imaging in multidisciplinary breast cancer management using a tumor board–based approach. 2) Correlate imaging findings with pathology and clinical presentation in common and challenging breast cancer cases. 3) Identify how imaging influences surgical and oncologic treatment decisions. 4) Apply multidisciplinary perspectives to optimize diagnostic evaluation and patient management in breast cancer care.

Lorena	Gonzalez	MD	1) Describe the role of breast imaging in multidisciplinary breast cancer management using a tumor board–based approach. 2) Correlate imaging findings with pathology and clinical presentation in common and challenging breast cancer cases. 3) Identify how imaging influences surgical and oncologic treatment decisions. 4) Apply multidisciplinary perspectives to optimize diagnostic evaluation and patient management in breast cancer care.
Rohin	Mehta	MD	1) Describe the role of breast imaging in multidisciplinary breast cancer management using a tumor board–based approach. 2) Correlate imaging findings with pathology and clinical presentation in common and challenging breast cancer cases. 3) Identify how imaging influences surgical and oncologic treatment decisions. 4) Apply multidisciplinary perspectives to optimize diagnostic evaluation and patient management in breast cancer care.
Meng	Welliver	PhD,MD	1) Recognize characteristic imaging patterns of Hodgkin and non-Hodgkin lymphoma across nodal and extranodal sites. 2) Apply appropriate imaging strategies for initial staging using Ann Arbor/Lugano classification. 3) Interpret FDG PET/CT using Deauville scoring for response assessment. 4) Distinguish treatment-related changes from residual or recurrent disease. 5) Understand the imaging implications of modern therapies, including immunotherapy and CAR-T cell therapy. 6) Identify common pitfalls in post-treatment imaging interpretation.
Sarah	Johnson	FRCPC,MD	1) Recognize characteristic imaging patterns of Hodgkin and non-Hodgkin lymphoma across nodal and extranodal sites. 2) Apply appropriate imaging strategies for initial staging using Ann Arbor/Lugano classification. 3) Interpret FDG PET/CT using Deauville scoring for response assessment. 4) Distinguish treatment-related changes from residual or recurrent disease. 5) Understand the imaging implications of modern therapies, including immunotherapy and CAR-T cell therapy. 6) Identify common pitfalls in post-treatment imaging interpretation.
Anupama	Chundury	MD	1) Recognize characteristic imaging patterns of Hodgkin and non-Hodgkin lymphoma across nodal and extranodal sites. 2) Apply appropriate imaging strategies for initial staging using Ann Arbor/Lugano classification. 3) Interpret FDG PET/CT using Deauville scoring for response assessment. 4) Distinguish treatment-related changes from residual or recurrent disease. 5) Understand the imaging implications of modern therapies, including immunotherapy and CAR-T cell therapy. 6) Identify common pitfalls in post-treatment imaging interpretation.

Yucai	Wang	PhD,MD	1) Recognize characteristic imaging patterns of Hodgkin and non-Hodgkin lymphoma across nodal and extranodal sites. 2) Apply appropriate imaging strategies for initial staging using Ann Arbor/Lugano classification. 3) Interpret FDG PET/CT using Deauville scoring for response assessment. 4) Distinguish treatment-related changes from residual or recurrent disease. 5) Understand the imaging implications of modern therapies, including immunotherapy and CAR-T cell therapy. 6) Identify common pitfalls in post-treatment imaging interpretation.
Suresh	Mukherji	MBA,MD	1) Recognize characteristic imaging patterns of Hodgkin and non-Hodgkin lymphoma across nodal and extranodal sites. 2) Apply appropriate imaging strategies for initial staging using Ann Arbor/Lugano classification. 3) Interpret FDG PET/CT using Deauville scoring for response assessment. 4) Distinguish treatment-related changes from residual or recurrent disease. 5) Understand the imaging implications of modern therapies, including immunotherapy and CAR-T cell therapy. 6) Identify common pitfalls in post-treatment imaging interpretation.
Michael	Gee	MD,PhD, MBA	1) Engage in a multidisciplinary discussion concerning complex pediatric oncology cases, focusing on their clinical and imaging characteristics. 2) Present recommendations from the COG/SPR consensus papers pertaining to image acquisition and interpretation. 3) Examine the role of radiation therapy in these cases, emphasizing strategic planning and delivery considerations.
Lisa	Ni	MD	1) Engage in a multidisciplinary discussion concerning complex pediatric oncology cases, focusing on their clinical and imaging characteristics. 2) Present recommendations from the COG/SPR consensus papers pertaining to image acquisition and interpretation. 3) Examine the role of radiation therapy in these cases, emphasizing strategic planning and delivery considerations.
Jennifer	Reichek		1) Apply evidence-based multidisciplinary strategies to manage complex thoracic malignancies. 2) Interpret radiographic findings with clinical nuance to guide treatment sequencing and modality selection in thoracic oncology cases. 3) Discuss the role and optimal timing of radiation therapy through thoracic malignancy cases. 4) Interpret radiographic findings after treatment.
Michelle	Ginsberg	MD	

John	Kang	PhD,MD	1) Apply evidence-based multidisciplinary strategies to manage complex thoracic malignancies. 2) Interpret radiographic findings with clinical nuance to guide treatment sequencing and modality selection in thoracic oncology cases. 3) Discuss the role and optimal timing of radiation therapy through thoracic malignancy cases. 4) Interpret radiographic findings after treatment.
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David	Johnstone	MD	1) Apply evidence-based multidisciplinary strategies to manage complex thoracic malignancies. 2) Interpret radiographic findings with clinical nuance to guide treatment sequencing and modality selection in thoracic oncology cases. 3) Discuss the role and optimal timing of radiation therapy through thoracic malignancy cases. 4) Interpret radiographic findings after treatment.
Rafael	Santana-Davila	MD	1) Apply evidence-based multidisciplinary strategies to manage complex thoracic malignancies. 2) Interpret radiographic findings with clinical nuance to guide treatment sequencing and modality selection in thoracic oncology cases. 3) Discuss the role and optimal timing of radiation therapy through thoracic malignancy cases. 4) Interpret radiographic findings after treatment.
Maria Clara	Lorca	MD	1) Identify and classify acute aortic syndrome on CTA/MRA, distinguishing dissection, intramural hematoma, and penetrating atherosclerotic ulcer, and recognizing time-sensitive complications. 2) Recognize limited intimal tears and ulcer-like aortic lesions, describe their imaging hallmarks, and differentiate them from common mimics and post-inflammatory/atherosclerotic changes. 3) Provide actionable imaging for surgical and endovascular planning in aortic dissection, including standardized measurements, tear localization, extent mapping, branch vessel involvement, and features associated with malperfusion and rupture risk. 4) Interpret chronic aortic dissection imaging by assessing remodeling, true/false lumen patency, aneurysmal degeneration, end-organ perfusion, and interval change to guide surveillance and re-intervention decisions.

Kate	Hannemann	MPH,MD	1) Identify and classify acute aortic syndrome on CTA/MRA, distinguishing dissection, intramural hematoma, and penetrating atherosclerotic ulcer, and recognizing time-sensitive complications. 2) Recognize limited intimal tears and ulcer-like aortic lesions, describe their imaging hallmarks, and differentiate them from common mimics and post-inflammatory/atherosclerotic changes. 3) Provide actionable imaging for surgical and endovascular planning in aortic dissection, including standardized measurements, tear localization, extent mapping, branch vessel involvement, and features associated with malperfusion and rupture risk. 4) Interpret chronic aortic dissection imaging by assessing remodeling, true/false lumen patency, aneurysmal degeneration, end-organ perfusion, and interval change to guide surveillance and re-intervention decisions.
Erica	Tirr	MD	1) Identify and classify acute aortic syndrome on CTA/MRA, distinguishing dissection, intramural hematoma, and penetrating atherosclerotic ulcer, and recognizing time-sensitive complications. 2) Recognize limited intimal tears and ulcer-like aortic lesions, describe their imaging hallmarks, and differentiate them from common mimics and post-inflammatory/atherosclerotic changes. 3) Provide actionable imaging for surgical and endovascular planning in aortic dissection, including standardized measurements, tear localization, extent mapping, branch vessel involvement, and features associated with malperfusion and rupture risk. 4) Interpret chronic aortic dissection imaging by assessing remodeling, true/false lumen patency, aneurysmal degeneration, end-organ perfusion, and interval change to guide surveillance and re-intervention decisions.
Kacie	Kuykendall	MD	1) Identify and classify acute aortic syndrome on CTA/MRA, distinguishing dissection, intramural hematoma, and penetrating atherosclerotic ulcer, and recognizing time-sensitive complications. 2) Recognize limited intimal tears and ulcer-like aortic lesions, describe their imaging hallmarks, and differentiate them from common mimics and post-inflammatory/atherosclerotic changes. 3) Provide actionable imaging for surgical and endovascular planning in aortic dissection, including standardized measurements, tear localization, extent mapping, branch vessel involvement, and features associated with malperfusion and rupture risk. 4) Interpret chronic aortic dissection imaging by assessing remodeling, true/false lumen patency, aneurysmal degeneration, end-organ perfusion, and interval change to guide surveillance and re-intervention decisions.

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Tessa	Cook	MD, PhD	1) Describe clinical, non-cardiac vascular use cases for photon-counting CT and recognize where it may improve image quality, characterization, and protocol efficiency. 2) Apply emerging approaches to aortic quantification, including best practices for measurement standardization, segmentation concepts, and longitudinal change assessment. 3) Use 4D Flow principles for clinical problem solving, selecting appropriate indications and interpreting key outputs (e.g., flow patterns, velocity, wall shear–related metrics) in a vascular imaging context. 4) Integrate AI into clinical vascular imaging workflows by identifying high-yield tasks (triage, detection, quantification, structured reporting), understanding validation basics, and anticipating pitfalls, bias, and implementation constraints.

Prabhakar	Rajiah	FRCR,MD	1) Describe clinical, non-cardiac vascular use cases for photon-counting CT and recognize where it may improve image quality, characterization, and protocol efficiency. 2) Apply emerging approaches to aortic quantification, including best practices for measurement standardization, segmentation concepts, and longitudinal change assessment. 3) Use 4D Flow principles for clinical problem solving, selecting appropriate indications and interpreting key outputs (e.g., flow patterns, velocity, wall shear–related metrics) in a vascular imaging context. 4) Integrate AI into clinical vascular imaging workflows by identifying high-yield tasks (triage, detection, quantification, structured reporting), understanding validation basics, and anticipating pitfalls, bias, and implementation constraints.
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Nicholas	Burris	MD	1) Describe clinical, non-cardiac vascular use cases for photon-counting CT and recognize where it may improve image quality, characterization, and protocol efficiency. 2) Apply emerging approaches to aortic quantification, including best practices for measurement standardization, segmentation concepts, and longitudinal change assessment. 3) Use 4D Flow principles for clinical problem solving, selecting appropriate indications and interpreting key outputs (e.g., flow patterns, velocity, wall shear–related metrics) in a vascular imaging context. 4) Integrate AI into clinical vascular imaging workflows by identifying high-yield tasks (triage, detection, quantification, structured reporting), understanding validation basics, and anticipating pitfalls, bias, and implementation constraints.

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Martin	Willemink	PhD,MD	1) Describe clinical, non-cardiac vascular use cases for photon-counting CT and recognize where it may improve image quality, characterization, and protocol efficiency. 2) Apply emerging approaches to aortic quantification, including best practices for measurement standardization, segmentation concepts, and longitudinal change assessment. 3) Use 4D Flow principles for clinical problem solving, selecting appropriate indications and interpreting key outputs (e.g., flow patterns, velocity, wall shear–related metrics) in a vascular imaging context. 4) Integrate AI into clinical vascular imaging workflows by identifying high-yield tasks (triage, detection, quantification, structured reporting), understanding validation basics, and anticipating pitfalls, bias, and implementation constraints.
Felipe	Castillo Aravena	MD	1) Recognize imaging patterns of large-vessel malignancy (primary and secondary) and differentiate tumor from thrombus, vasculitis, and post-treatment change using multimodality clues. 2) Identify common congenital abnormalities of the great vessels and describe their key anatomic relationships and clinically relevant associated findings that impact symptoms, procedures, and follow-up. 3) Apply a structured approach to acquired central venous disease, including stenosis/occlusion, thrombosis, catheter- and device-related complications, and extrinsic compression, with clear guidance for intervention planning. 4) Diagnose and appropriately narrow differentials for other non-aortic vascular diseases, including aneurysms/dissections of non-aortic arteries, vasculitides, vascular malformations, and key mimics—communicating the “what matters” elements in the impression.

Arzu	Canan	MD	1) Recognize imaging patterns of large-vessel malignancy (primary and secondary) and differentiate tumor from thrombus, vasculitis, and post-treatment change using multimodality clues. 2) Identify common congenital abnormalities of the great vessels and describe their key anatomic relationships and clinically relevant associated findings that impact symptoms, procedures, and follow-up. 3) Apply a structured approach to acquired central venous disease, including stenosis/occlusion, thrombosis, catheter- and device-related complications, and extrinsic compression, with clear guidance for intervention planning. 4) Diagnose and appropriately narrow differentials for other non-aortic vascular diseases, including aneurysms/dissections of non-aortic arteries, vasculitides, vascular malformations, and key mimics—communicating the “what matters” elements in the impression.
Carlos	Restrepo	MD	1) Recognize imaging patterns of large-vessel malignancy (primary and secondary) and differentiate tumor from thrombus, vasculitis, and post-treatment change using multimodality clues. 2) Identify common congenital abnormalities of the great vessels and describe their key anatomic relationships and clinically relevant associated findings that impact symptoms, procedures, and follow-up. 3) Apply a structured approach to acquired central venous disease, including stenosis/occlusion, thrombosis, catheter- and device-related complications, and extrinsic compression, with clear guidance for intervention planning. 4) Diagnose and appropriately narrow differentials for other non-aortic vascular diseases, including aneurysms/dissections of non-aortic arteries, vasculitides, vascular malformations, and key mimics—communicating the “what matters” elements in the impression.

Sarv	Priya	MBBS,MD	1) Recognize imaging patterns of large-vessel malignancy (primary and secondary) and differentiate tumor from thrombus, vasculitis, and post-treatment change using multimodality clues. 2) Identify common congenital abnormalities of the great vessels and describe their key anatomic relationships and clinically relevant associated findings that impact symptoms, procedures, and follow-up. 3) Apply a structured approach to acquired central venous disease, including stenosis/occlusion, thrombosis, catheter- and device-related complications, and extrinsic compression, with clear guidance for intervention planning. 4) Diagnose and appropriately narrow differentials for other non-aortic vascular diseases, including aneurysms/dissections of non-aortic arteries, vasculitides, vascular malformations, and key mimics—communicating the “what matters” elements in the impression.
Camila	Urzua Fresno	MD, MSc	1) Recognize imaging patterns of large-vessel malignancy (primary and secondary) and differentiate tumor from thrombus, vasculitis, and post-treatment change using multimodality clues. 2) Identify common congenital abnormalities of the great vessels and describe their key anatomic relationships and clinically relevant associated findings that impact symptoms, procedures, and follow-up. 3) Apply a structured approach to acquired central venous disease, including stenosis/occlusion, thrombosis, catheter- and device-related complications, and extrinsic compression, with clear guidance for intervention planning. 4) Diagnose and appropriately narrow differentials for other non-aortic vascular diseases, including aneurysms/dissections of non-aortic arteries, vasculitides, vascular malformations, and key mimics—communicating the “what matters” elements in the impression.

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Elsie	Nguyen	FRCPC,MD	1) Recognize imaging features of vasculitis and inflammatory aortic disease, distinguish active inflammation from chronic sequelae, and suggest appropriate modality and follow-up when clinically indicated. 2) Identify fibromuscular dysplasia and related non-inflammatory arteriopathies across vascular territories, differentiate them from atherosclerosis and vasculitis, and report findings relevant to management and screening. 3) Describe congenital large-vessel abnormalities in adults (including variants with procedural implications), and communicate anatomic relationships that affect symptoms, interventions, and surveillance. 4) Apply an imaging approach to genetic aortopathies, including characteristic phenotypes, essential measurements, risk features for dissection, and recommended surveillance concepts to support multidisciplinary care.
Daniel	Vargas	MD	1) Recognize imaging features of vasculitis and inflammatory aortic disease, distinguish active inflammation from chronic sequelae, and suggest appropriate modality and follow-up when clinically indicated. 2) Identify fibromuscular dysplasia and related non-inflammatory arteriopathies across vascular territories, differentiate them from atherosclerosis and vasculitis, and report findings relevant to management and screening. 3) Describe congenital large-vessel abnormalities in adults (including variants with procedural implications), and communicate anatomic relationships that affect symptoms, interventions, and surveillance. 4) Apply an imaging approach to genetic aortopathies, including characteristic phenotypes, essential measurements, risk features for dissection, and recommended surveillance concepts to support multidisciplinary care.

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Margarita	Revzin	MS,MD	1) Recognize imaging features of vasculitis and inflammatory aortic disease, distinguish active inflammation from chronic sequelae, and suggest appropriate modality and follow-up when clinically indicated. 2) Identify fibromuscular dysplasia and related non-inflammatory arteriopathies across vascular territories, differentiate them from atherosclerosis and vasculitis, and report findings relevant to management and screening. 3) Describe congenital large-vessel abnormalities in adults (including variants with procedural implications), and communicate anatomic relationships that affect symptoms, interventions, and surveillance. 4) Apply an imaging approach to genetic aortopathies, including characteristic phenotypes, essential measurements, risk features for dissection, and recommended surveillance concepts to support multidisciplinary care.
Rodrigo	Salgado	PhD,MD	1) Recognize imaging features of vasculitis and inflammatory aortic disease, distinguish active inflammation from chronic sequelae, and suggest appropriate modality and follow-up when clinically indicated. 2) Identify fibromuscular dysplasia and related non-inflammatory arteriopathies across vascular territories, differentiate them from atherosclerosis and vasculitis, and report findings relevant to management and screening. 3) Describe congenital large-vessel abnormalities in adults (including variants with procedural implications), and communicate anatomic relationships that affect symptoms, interventions, and surveillance. 4) Apply an imaging approach to genetic aortopathies, including characteristic phenotypes, essential measurements, risk features for dissection, and recommended surveillance concepts to support multidisciplinary care.

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Jeremy	Collins	MD	1) Apply an anatomic, modality-based approach to peripheral vascular imaging of the upper and lower extremities, including appropriate protocol selection. 2) Recognize imaging findings of thoracic outlet syndrome across arterial, venous, and neurogenic presentations, and distinguish common mimics. 3) Diagnose and grade peripheral arterial and venous disease in the upper and lower extremities using CTA/MRA/ultrasound, including clinically relevant variants and pitfalls.
Dominika	Sucha	PhD,MD	1) Apply an anatomic, modality-based approach to peripheral vascular imaging of the upper and lower extremities, including appropriate protocol selection. 2) Recognize imaging findings of thoracic outlet syndrome across arterial, venous, and neurogenic presentations, and distinguish common mimics. 3) Diagnose and grade peripheral arterial and venous disease in the upper and lower extremities using CTA/MRA/ultrasound, including clinically relevant variants and pitfalls.
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Anup	Shetty	MD	1) Apply an anatomic, modality-based approach to peripheral vascular imaging of the upper and lower extremities, including appropriate protocol selection. 2) Recognize imaging findings of thoracic outlet syndrome across arterial, venous, and neurogenic presentations, and distinguish common mimics. 3) Diagnose and grade peripheral arterial and venous disease in the upper and lower extremities using CTA/MRA/ultrasound, including clinically relevant variants and pitfalls.
Sasan	Partovi	MD	1) Apply an anatomic, modality-based approach to peripheral vascular imaging of the upper and lower extremities, including appropriate protocol selection. 2) Recognize imaging findings of thoracic outlet syndrome across arterial, venous, and neurogenic presentations, and distinguish common mimics. 3) Diagnose and grade peripheral arterial and venous disease in the upper and lower extremities using CTA/MRA/ultrasound, including clinically relevant variants and pitfalls.
Satheesh	Krishna	MD	1) Identify imaging findings of acute mesenteric ischemia on CTA and complementary modalities, distinguish arterial vs venous etiologies, and recognize signs that predict bowel infarction and need for urgent intervention. 2) Perform a structured evaluation of renal artery disease, including stenosis, dissection, aneurysm, fibromuscular dysplasia, and post-intervention appearances, and communicate clinically relevant severity and downstream perfusion effects. 3) Recognize acute abdominal aortic pathology and common mimics, including rupture/impending rupture, infectious/inflammatory aortitis, acute thrombosis/embolus, and retroperitoneal hemorrhage patterns that affect management. 4) Choose and interpret the appropriate imaging strategy for GI bleeding, including CTA technique and key reporting elements to localize bleeding, estimate activity, identify underlying causes, and guide endoscopic, interventional, or surgical management.

Roberta	Catania	MD	1) Identify imaging findings of acute mesenteric ischemia on CTA and complementary modalities, distinguish arterial vs venous etiologies, and recognize signs that predict bowel infarction and need for urgent intervention. 2) Perform a structured evaluation of renal artery disease, including stenosis, dissection, aneurysm, fibromuscular dysplasia, and post-intervention appearances, and communicate clinically relevant severity and downstream perfusion effects. 3) Recognize acute abdominal aortic pathology and common mimics, including rupture/impending rupture, infectious/inflammatory aortitis, acute thrombosis/embolus, and retroperitoneal hemorrhage patterns that affect management. 4) Choose and interpret the appropriate imaging strategy for GI bleeding, including CTA technique and key reporting elements to localize bleeding, estimate activity, identify underlying causes, and guide endoscopic, interventional, or surgical management.
Iain	Kirkpatrick	FRCPC,MD	1) Identify imaging findings of acute mesenteric ischemia on CTA and complementary modalities, distinguish arterial vs venous etiologies, and recognize signs that predict bowel infarction and need for urgent intervention. 2) Perform a structured evaluation of renal artery disease, including stenosis, dissection, aneurysm, fibromuscular dysplasia, and post-intervention appearances, and communicate clinically relevant severity and downstream perfusion effects. 3) Recognize acute abdominal aortic pathology and common mimics, including rupture/impending rupture, infectious/inflammatory aortitis, acute thrombosis/embolus, and retroperitoneal hemorrhage patterns that affect management. 4) Choose and interpret the appropriate imaging strategy for GI bleeding, including CTA technique and key reporting elements to localize bleeding, estimate activity, identify underlying causes, and guide endoscopic, interventional, or surgical management.

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Joseph	Leach	PhD,MD	1) Identify imaging findings of acute mesenteric ischemia on CTA and complementary modalities, distinguish arterial vs venous etiologies, and recognize signs that predict bowel infarction and need for urgent intervention. 2) Perform a structured evaluation of renal artery disease, including stenosis, dissection, aneurysm, fibromuscular dysplasia, and post-intervention appearances, and communicate clinically relevant severity and downstream perfusion effects. 3) Recognize acute abdominal aortic pathology and common mimics, including rupture/impending rupture, infectious/inflammatory aortitis, acute thrombosis/embolus, and retroperitoneal hemorrhage patterns that affect management. 4) Choose and interpret the appropriate imaging strategy for GI bleeding, including CTA technique and key reporting elements to localize bleeding, estimate activity, identify underlying causes, and guide endoscopic, interventional, or surgical management.

Olga	Brook	MBA,MD	1) Identify imaging findings of acute mesenteric ischemia on CTA and complementary modalities, distinguish arterial vs venous etiologies, and recognize signs that predict bowel infarction and need for urgent intervention. 2) Perform a structured evaluation of renal artery disease, including stenosis, dissection, aneurysm, fibromuscular dysplasia, and post-intervention appearances, and communicate clinically relevant severity and downstream perfusion effects. 3) Recognize acute abdominal aortic pathology and common mimics, including rupture/impending rupture, infectious/inflammatory aortitis, acute thrombosis/embolus, and retroperitoneal hemorrhage patterns that affect management. 4) Choose and interpret the appropriate imaging strategy for GI bleeding, including CTA technique and key reporting elements to localize bleeding, estimate activity, identify underlying causes, and guide endoscopic, interventional, or surgical management.
Linda	Haramati	MS,MD	1) Differentiate expected post-operative findings from common mimics after open and endovascular aortic repair. 2) Identify and appropriately triage imaging complications of aortic surgery, including emergent and delayed entities. 3) Evaluate endografts on CT/MR, recognizing acute technical issues and chronic failure modes (e.g., endoleaks, migration, structural compromise). 4) Recommend and justify surveillance imaging strategies after aortic repair, tailoring modality and interval to procedure type, risk, and clinical scenario.
Felipe	Sanchez	MD	1) Differentiate expected post-operative findings from common mimics after open and endovascular aortic repair. 2) Identify and appropriately triage imaging complications of aortic surgery, including emergent and delayed entities. 3) Evaluate endografts on CT/MR, recognizing acute technical issues and chronic failure modes (e.g., endoleaks, migration, structural compromise). 4) Recommend and justify surveillance imaging strategies after aortic repair, tailoring modality and interval to procedure type, risk, and clinical scenario.
Maria	Ferrario	MD	1) Differentiate expected post-operative findings from common mimics after open and endovascular aortic repair. 2) Identify and appropriately triage imaging complications of aortic surgery, including emergent and delayed entities. 3) Evaluate endografts on CT/MR, recognizing acute technical issues and chronic failure modes (e.g., endoleaks, migration, structural compromise). 4) Recommend and justify surveillance imaging strategies after aortic repair, tailoring modality and interval to procedure type, risk, and clinical scenario.

Katie	Marchak	MD	1) Differentiate expected post-operative findings from common mimics after open and endovascular aortic repair. 2) Identify and appropriately triage imaging complications of aortic surgery, including emergent and delayed entities. 3) Evaluate endografts on CT/MR, recognizing acute technical issues and chronic failure modes (e.g., endoleaks, migration, structural compromise). 4) Recommend and justify surveillance imaging strategies after aortic repair, tailoring modality and interval to procedure type, risk, and clinical scenario.
Katie	Marchak	MD	1) Differentiate expected post-operative findings from common mimics after open and endovascular aortic repair. 2) Identify and appropriately triage imaging complications of aortic surgery, including emergent and delayed entities. 3) Evaluate endografts on CT/MR, recognizing acute technical issues and chronic failure modes (e.g., endoleaks, migration, structural compromise). 4) Recommend and justify surveillance imaging strategies after aortic repair, tailoring modality and interval to procedure type, risk, and clinical scenario.
Muhammad	Aftab	MD	1) Differentiate expected post-operative findings from common mimics after open and endovascular aortic repair. 2) Identify and appropriately triage imaging complications of aortic surgery, including emergent and delayed entities. 3) Evaluate endografts on CT/MR, recognizing acute technical issues and chronic failure modes (e.g., endoleaks, migration, structural compromise). 4) Recommend and justify surveillance imaging strategies after aortic repair, tailoring modality and interval to procedure type, risk, and clinical scenario.
Sandeep	Hedgire	MD	1) Interpret acute aortic presentations on imaging by recognizing key patterns (e.g., dissection variants, intramural hematoma, penetrating ulcer, rupture/impending rupture) and identifying complications requiring immediate escalation. 2) Evaluate chronic aortic disease by assessing interval change, aneurysmal degeneration, remodeling after dissection, branch vessel involvement, and imaging features that inform follow-up versus re-intervention. 3) Diagnose inflammatory and infectious aortic conditions and mimics, including large-vessel vasculitis and mycotic/infectious aortitis, and recommend appropriate next steps based on imaging red flags. 4) Communicate findings in a management-oriented manner by using structured descriptions, essential measurements, and clear impression statements tailored to surgical/endovascular decision-making and surveillance planning.

Joanna	Escalon	MD	1) Interpret acute aortic presentations on imaging by recognizing key patterns (e.g., dissection variants, intramural hematoma, penetrating ulcer, rupture/impending rupture) and identifying complications requiring immediate escalation. 2) Evaluate chronic aortic disease by assessing interval change, aneurysmal degeneration, remodeling after dissection, branch vessel involvement, and imaging features that inform follow-up versus re-intervention. 3) Diagnose inflammatory and infectious aortic conditions and mimics, including large-vessel vasculitis and mycotic/infectious aortitis, and recommend appropriate next steps based on imaging red flags. 4) Communicate findings in a management-oriented manner by using structured descriptions, essential measurements, and clear impression statements tailored to surgical/endovascular decision-making and surveillance planning.
Constantine	Raptis	MD	1) Interpret acute aortic presentations on imaging by recognizing key patterns (e.g., dissection variants, intramural hematoma, penetrating ulcer, rupture/impending rupture) and identifying complications requiring immediate escalation. 2) Evaluate chronic aortic disease by assessing interval change, aneurysmal degeneration, remodeling after dissection, branch vessel involvement, and imaging features that inform follow-up versus re-intervention. 3) Diagnose inflammatory and infectious aortic conditions and mimics, including large-vessel vasculitis and mycotic/infectious aortitis, and recommend appropriate next steps based on imaging red flags. 4) Communicate findings in a management-oriented manner by using structured descriptions, essential measurements, and clear impression statements tailored to surgical/endovascular decision-making and surveillance planning.

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Amanda	Marrero-Gonzalez	MD, BS	1) Interpret acute aortic presentations on imaging by recognizing key patterns (e.g., dissection variants, intramural hematoma, penetrating ulcer, rupture/impending rupture) and identifying complications requiring immediate escalation. 2) Evaluate chronic aortic disease by assessing interval change, aneurysmal degeneration, remodeling after dissection, branch vessel involvement, and imaging features that inform follow-up versus re-intervention. 3) Diagnose inflammatory and infectious aortic conditions and mimics, including large-vessel vasculitis and mycotic/infectious aortitis, and recommend appropriate next steps based on imaging red flags. 4) Communicate findings in a management-oriented manner by using structured descriptions, essential measurements, and clear impression statements tailored to surgical/endovascular decision-making and surveillance planning.