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Title: X-ray interpretation: A self-assessment survey

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Body: AIM: To assess the confidence of hospital based doctors in reviewing plain radiographs. METHODS: An online e-survey tool collected responses from 600 doctors from the West Midlands area, UK. They were asked to rate their confidence as: not confident, will always need senior help; somewhat confident; confident in interpreting some conditions; confident of routine and common conditions; very confident, seek radiology advice occasionally; highly confident, almost never seek radiology advice. We also asked them to self assess their confidence in identifying some common findings on x-rays; and collected data on any formal or informal training they had received. RESULTS: 241(40%) responses were received; of these 165 were from medical and 76 from non-medical specialities. The level of confidence expressed by medical doctors in interpreting chest x-rays (48.5%) was significantly higher than abdominal (17.4%) and skeletal x-rays (6.2%). Doctors in non-medical specialties were better with skeletal x-rays (22.5%). Of the 241, 70 had been to a radiology course, 127 had some form of formal and 57 had only informal training. 11 (9 medical trainees) did not have any form of training. 177/241 felt that there should be radiology training for all doctors, and it should be a compulsory part of the training portfolio. CONCLUSION: There was variability in confidence amongst hospital doctors in interpreting x-rays across training grades and clinician groups. Basic radiology training as a separate competency may need to be considered in the training programmes and e-portfolio of hospital doctors. Training in chest radiograph interpretation should merit focused attention in the respiratory specialty training as well as the HERMES curricula.