and sclerotherapy is an affordable, cost-effective, and acceptable method of treatment for the varicose veins compared to the Thermal ablation.

OC409

Assessing Perceptions About Inclusion, Career Deterrents, and the Specialty of Interventional Radiology Among Medical Students and Female Trainees

Vishal Kumar, Yilun Koethe, Evan Lehrman, Maureen Kohi

*University of California, San Francisco, US.
E-mail: vishal.kumar@ucsf.edu*

Background: A diverse health-care workforce in radiology, as in other medical services, helps expand health-care access for diverse communities, including traditionally underserved populations. Radiology ranks 20th out of 20 of the largest medical specialties in terms of under-represented minorities (URM) in medicine representation (Chapman *et al.*, 2014), and interventional radiology (IR) demonstrated the lowest levels of URM representation (West *et al.*, 2017). In 2015, women comprised 47.6% of the US medical graduates, which translated into 26.7% female radiology and diagnostic radiology residents and fellows, and only 9.3% of IR female residents and fellows. The purpose of this study was to identify perceptions medical students and female IR trainees (residents and fellows) have regarding the field of IR, including issues of inclusion and occupational deterrents. **Methods:** Medical students, female residents, and female fellows were asked to complete an anonymous web-based survey to gauge understanding of and interest in IR, perceptions of diversity, and inclusion of underrepresented minorities and female physicians, and career deterrents when considering IR as a specialty. The survey responses used a 5-point Likert scale and were collected and stored using Google Forms cloud-based software. Data were examined using generalized mixed modeling assuming a binomial distribution and sandwich estimation with SAS and GLIMMIX. The study was IRB approved and HIPAA compliant. **Results:** A majority of medical students have negative or neutral perceptions when it pertains to issues of inclusivity of both female and minority physicians in IR. In addition, females perceived the length of training and male predominance within the specialty as deterrents to pursuing a career. Furthermore, female students were less likely to view IR as being inclusive of female physicians (all results statistically significant; $P < 0.05$). Regardless of gender, students expressed concerns over occupational radiation exposure, lack of direct patient care, and work-life balance. The majority of female resident and fellow respondents demonstrated that the presence of a female IR mentor influenced their decision to pursue a career in IR. Furthermore, mentorship was equally influential during medical school (46%) and residency (46%). While all female resident and fellow trainees believed that pursuing IR can fulfill potential career goals of direct patient care, high percentage of procedural work, and high salary, 38.5% did not believe that work-life balance can be achieved. Regarding lifestyle changes, many considered duration of training of 6–7 years (23.1%), extended daily work hours beyond training (38.5%), and call responsibilities in IR (46.2%) as deterrents in their pursuit of IR. Furthermore, despite existing data that pregnancy and fetal outcome among pregnant interventional

radiologists matches that of the general population, nearly half (46.2%) were worried about occupational radiation exposure. About 38.5% of attendees did not consider IR to be inclusive of women, and equal number considered male predominance in the field of IR as a deterrent to their pursuit of IR. **Conclusion:** While limited by small sample size, our experience has identified critical perceptions medical students and female trainees have that may hinder women and URM from pursuing a career in the specialty. As our specialty looks to increase diversity and inclusion efforts, issues of diversity and inclusiveness, occupational radiation exposure, and career life balance should be discussed openly to promote recruitment and retention.

OC410

Reporting Early Results and Potential Impact of an Online Webinar-Based Interventional Radiology Elective

Vishal Kumar, Evan Lehrman, Maureen P. Kohi

*University of California, San Francisco, US.
E-mail: vishal.kumar@ucsf.edu*

Background: A review of the 2016–2017 American Association of Medical Colleges Total Enrollment by the United States of America (US) Medical School and Race/Ethnicity illustrates that medical student enrollment by race is not uniform across US medical schools. Previous studies have demonstrated a majority of medical students do not understand that radiologists perform interventional procedures, have a poor knowledge of IR, and are not interested in IR as a career. Interventional Radiology (IR) is now a new specialty and requires exposure and education at the medical student level. The purpose of this study was to evaluate the efficacy of a webinar-based IR elective for outreach to institutions without robust preclinical IR exposure. **Methods:** Between January and March of 2017, eight 50-min didactic sessions were broadcast, recorded, and distributed over the internet in the form of a webinar-based elective using GoToWebinar software (GoToWebinar, Boston, MA, USA). SIR Connect Portal and social media platforms Twitter, Facebook, and LinkedIn were used for promotion and advertising. Registrants and attendance were measured at each session, including the location of all registrants/attendants. This information was cross-referenced with a list of IR Interest Groups, the SIR directory, and the list of approved IR residency and fellowship programs. Student perceptions of IR careers were surveyed after the first session and after the final elective sessions. All statistical analyses used Fisher's exact test. **Results:** An average of 65 individuals (range 88–46) registered for the weekly elective sessions from 92 distinct institutions. Geographically, registration included 29 states and 9 countries. Eight Doctor of Osteopathy (DO) medical programs were included (9%). A weekly average of 39 male (65%) and 20 female (35%) students registered. Registrants included first (26%), second (36%), third (27%), and fourth (12%) year medical students. Additional registrants included radiology technologist and nursing students, as well as administrative staff. Out of 83 US institutions, 62% did not have their own Interventional Radiology Interest Group (IRIG) interest group, 57% did not have faculty listed in the SIR directory, and 74% did not have an integrated IR residency. Total attendance included 48 distinct institutions viewing five different countries,