

# Clinical Radiology Training Requirements Policy

1 JULY 2023



The Royal Australian  
and New Zealand  
College of Radiologists®

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The Faculty of Clinical Radiology

Name of document and version:  
Training Requirements (Clinical Radiology) Policy, Version 1.2

Approved by:  
Faculty of Clinical Radiology Council

Date of approval:  
1 July 2023

ABN 37 000 029 863

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## About the College

The Royal Australian and New Zealand College of Radiologists (RANZCR) is a not-for-profit professional organisation for clinical radiologists and radiation oncologists in Australia, New Zealand, and Singapore. RANZCR is a membership organisation led by clinicians who are elected by the membership, with oversight from a Board of Directors.

We are the leaders in medical imaging and cancer care. We enable the best practice of clinical radiology, radiation oncology and associated subspecialty areas through engagement, education, and advocacy; and by supporting clinical excellence. Our Fellows play a critical role in the diagnosis and monitoring of disease, provide interventional treatments and targeted treatments for cancer.

Our evidence-based culture focuses on best practice outcomes for patients and equity of access to high quality care, underpinned by an attitude of compassion and empathy. As an organisation we are committed to diversity and inclusion, and to the training and professional development of our Fellows and Trainees throughout their career. We are dedicated to enhancing the health outcomes of Māori, Aboriginal and Torres Strait Islander peoples and to increasing their participation in the professions of clinical radiology and radiation oncology by ensuring our educational programs support best outcomes for them. This includes a commitment to cultural safety in our organisation, for staff and members.

## Purpose

To enable the safe and appropriate use of clinical radiology and radiation oncology to optimise health outcomes for our patients and society.

## Values

Our leadership values underpin all that we do and embody our focus on quality patient outcomes:

### Integrity

We maintain the confidence and trust of our stakeholders through our honesty, transparency, and authenticity.

### Accountability

We take responsibility for all our actions, behaviours, performance, commitments, and decisions.

### Inclusivity

We foster an inclusive workplace and clinical environments for people in Australia and New Zealand.

### Innovation

We constantly strive to reimagine excellence in everything we do.

## Code of Ethics

The Code defines the values and principles that underpin the best practice of clinical radiology and radiation oncology and makes explicit the standards of ethical conduct the College expects of its members.

# 1. INTRODUCTION

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## 1.1 Approval and Commencement

This policy commences operation on 1 July 2023.

## 1.2 Background

The College sets the standards of training and practice in Clinical Radiology in Australia and New Zealand.

In doing so, the College aims to ensure transparency by delineating the requirements of training within the Clinical Radiology Training Program ('Training Program').

This policy outlines the requirements of the Training Program leading to the qualification of FRANZCR and is applicable to all applicants and trainees undertaking the Training Program. It also specifies the progression requirements for each phase of the Training Program and time limits to complete phases of training and the Training Program in its entirety.

The College accredits training sites for the purposes of the Training Program and trainees must hold an accredited training position at a training site for the duration of the Training Program. Completion of training requirements and progression through the Training Program are confirmed by Fellows appointed to specific training roles and/or various Committees. Position descriptions of roles and terms of reference for Committees provide further detail on the objectives of these key stakeholders.

## 1.3 Purpose

This Training Requirements (Clinical Radiology) Policy is designed to stipulate the requirements trainees must complete during the Training Program. Applicants for the Training Program and trainees must comply with this policy, the Training Program Handbook ('Handbook') and other relevant policies and requirements of the College.

## 1.4 Scope

This policy:

- (a) Applies from 1 July 2023 to all trainees undertaking training within the current Training Program irrespective of the date they commenced their training and all applicants to the Training Program.

**Note:** Trainees who have transitioned from the legacy Training Program (active prior to February 2022) must also abide by the transition arrangements detailed in the Handbook.

- (b) Prescribes the requirements of, and progression through, the Training Program.
- (c) This policy does not describe:
  - Specialist or vocational registration by regulatory authorities;
  - Admission to RANZCR as a Fellow, which is described within College materials such as the Handbook; and
  - The specialist international medical graduate assessment process, which is described in the International Medical Graduate Assessment Policy (Australia).

To the extent that there are any inconsistencies between this Policy and the Handbook, this Policy prevails.

## 1.5 Definitions

In this Training Requirements (Clinical Radiology) Policy:

**Accredited Training Time** means the duration of time a trainee in an accredited training position is required to accrue in order to complete all Clinical Radiology Training Program requirements

**Annual Membership Subscription Fee** means a fee payable by a member as outlined under the RANZCR Fees Policy

**Annual Training Fee** means a fee payable by a student member as outlined under the RANZCR Fees Policy

**Applicant** means a prospective trainee who has formally requested to apply to the Clinical Radiology Training Program

**Application Form** means the Clinical Radiology Training Program Application Form that prospective trainees must submit to commence the Training Program

**Assessment** means an activity used to gauge a trainee's progression through the the Clinical Radiology Training Program and/or their competency against the requirements of the Clinical Radiology Training Program. Note: for the purpose of this Policy, the term 'assessment' is distinct to the term 'examination'

**Chief Censor** means the clinician appointed under the Faculty By-laws to oversee all aspects of training and assessment conducted as part of the Clinical Radiology Training Program

**Clinical Radiology Education and Training Committee (CRETc)** means the governing body under the Faculty By-laws that develops the educational content, assessments and accreditation mechanisms that ensure that trainees can become competent Clinical Radiologists

**Clinical Supervisor** means any consultant radiologist at a College-accredited training site that is involved in teaching, assessment and/or feedback

**College** means The Royal Australian and New Zealand College of Radiologists

**Director of Training (DoT)** means the clinician/s appointed by the College, with overall responsibility for the structure and quality of training in a College-accredited training site in line with College policies and the specific arrangements within their training network. The Director of Training is also responsible for providing trainees with information and feedback on their progress

**DoT Review** means the process whereby the Director of Training (DoT) and the trainee jointly evaluate a trainee's progress with learning and assessment requirements for the phase of training or the Training Program

**ePortfolio System or ePortfolio** means the online system which serves the purpose of managing a trainee's assessments and progression in the Clinical Radiology Training Program

**Examination** means a form of assessment as defined in the College's Examination Policies

**Fellow** means a College member admitted to Fellowship of the Royal Australian and New Zealand College of Radiologists

**FTE** means full time equivalent i.e. 1.0 is the equivalent of training/working at full time status

**Head of Department (HoD)** means the person responsible for the administrative running of a clinical radiology hospital department or practice

**Interrupted Training Period** means the duration of time in which a trainee is on 'interrupted training' as defined under the Interrupted and Part-Time Training Policy

**Leave** means all time not spent in training. Examples of leave include annual leave, bereavement

leave, sick leave, study leave, examination leave, personal leave and industrial action

**Local Governance Committee (LGC)** means the governing body responsible for oversight of the local area network (LAN), resolution of local issues and development of the local area network training program

**Maximum Duration of Training** means the upper limit of 10 years in which a trainee must complete all Clinical Radiology Training Program requirements

**Medical Registration** means registration with the medical registration authority being the Medical Board of Australia, Medical Council of New Zealand or other authority

**Member** means a member of the College as specified under the RANZCR Articles of Association

**Multi-source Feedback (MSF)** means a tool to assist with the evaluation of communication skills, teamwork, professionalism and management/administrative skills

**Network Governance Committee (NGC)** means the governing body responsible for oversight of the wide area network (WAN), selection and recruitment of trainees across the WAN and resolution of issues that have been referred by local area networks (LANs)

**Recommencement of training** means when a trainee who has been out of an accredited training position for a period of less than one calendar year is approved to commence accredited training again

**Re-entry into training** means when a trainee who has been withdrawn from training is approved to enter the Training Program again

**Structured Learning Experiences** means experiences outlined in the Training Program Handbook which are designed to drive learning toward competence in all areas of the Clinical Radiology Learning Outcomes

**Student Member** means means a person who has been granted student membership in accordance with the Articles of Association. Student Members are also referred to as trainees

**The Clinical Radiology Curriculum Learning Outcomes** articulates the competencies a trainee must achieve by the end of the Clinical Radiology Training Program

**Trainee Assessment of Training Sites (TATS)** means a confidential assessment where a trainee is asked to rate the training location and training experience on a range of dimensions

**Trainee** means a College member actively participating in the Clinical Radiology Training Program and is considered a student member under the RANZCR Articles of Association

**Trainee Compact** means a document signed by a prospective trainee which outlines the expectations, responsibilities, rights and obligations (to RANZCR, the training site and employer) of trainees undertaking specialist training with RANZCR

**Training Network** is a formalised system of delivery whereby training sites are linked for the purpose of providing trainees with access to all experiences to fulfil the Training Program requirements

**Training Site** means an organisation that actively engages and is responsible and accountable for the delivery of training in Clinical Radiology. These organisations may be public or private entities who are accredited by the College and are required to follow the relevant training curriculum and accreditation standards as set out by the College

**Training Rotation** means a rotation undertaken by an accredited trainee to a separate accredited training site (other than their main/commencement site) for a set period of time

**Variation to Training** means a change to the expected rate of progression through the Clinical Radiology Training Program by virtue of interrupted training ('break in training') or a change to a

trainee's FTE status

**Work-based Assessments (WBAs)** means assessments outlined in the Training Program Handbook regularly conducted by a DoT, Clinical Supervisor or sonographer/sonologist which provide feedback to trainees on their performance in the clinical setting

## 2. TRAINEE STATUS

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### 2.1 Training Program Application

- (a) All medical practitioners wishing to commence the Training Program must complete and submit the Clinical Radiology Training Program Application Form.
- (b) To qualify as a RANZCR trainee, the applicant must:
  - (i) Have obtained a position at a RANZCR accredited training site. The Director of Training (DoT) or Head of Department (HoD) must confirm the appointment and the proposed course of training on the application form.
  - (ii) Have citizenship or have been granted permanent residency status in the country of application at the time of application to join the Training Program or provide satisfactory evidence that the applicant will have all necessary approvals to undertake training in Australia or New Zealand or Singapore at the time of application to join the Training Program.
  - (iii) Have MBBS or equivalent medical qualifications as recognised by the registering authority of the country in which the RANZCR Training Program is conducted and the Board of RANZCR.
  - (iv) Be registered as a medical practitioner by the registered authority recognised by the Board of the College in the state or country where they are training (Australia, New Zealand or Singapore).
  - (v) Have completed at least two full years at 1.0 full-time equivalent (FTE), in an approved hospital as an intern or resident (PGY1 and PGY2) and any other current prerequisites for entry.
- (c) When applying, the application form and all supporting documents must be submitted. Required supporting documents are listed on the application form.
- (d) An application can only be accepted if the applicant addresses all the requirements specified as part of the application process.
- (e) Trainees must sign the RANZCR trainee compact on commencement, submit it with the application form and sign any other agreements required during the Training Program. The trainee compact is a legally binding formal statement of the obligations and expectations of the trainee.

### 2.2 Fees

- (a) An invoice for the Annual Membership Subscription Fee and Annual Training Fee will be made available to the trainee, which must be paid in accordance with the timeframe stipulated on the invoice.
- (b) Annual Membership Subscription fees must be paid by the due date each year to maintain student membership of the College.
- (c) Annual Training Fees must be paid by the due date each year to maintain status as a trainee.
- (d) Trainees must remain financial and in good standing with the College for the duration of training.

**Refer to the RANZCR Fees Policy for further information.**

### **2.3 Registration Status**

- (a) Trainees must maintain medical registration, without conditions or limitations that would limit clinical practice in the relevant jurisdiction.
- (b) Trainees must notify the College within seven calendar days of their medical registration being suspended or withdrawn for any reason whatsoever, or if conditions, restrictions or agreed undertakings to limit practice have been placed on their medical registration.
- (c) Trainees who have conditions or restrictions placed on their practice, and/or if undertakings have been agreed to limit the trainee's practice (voluntary or imposed) or if a trainee's medical registration is suspended or cancelled, the trainee will have their trainee status reviewed by the CRETC. The College will be guided by conditions or undertakings (if any) stipulated by the MBA, MCNZ or other authority in determining whether the trainee will be withdrawn from the Training Program.
- (d) Trainees who fail to maintain medical registration with the MBA, MCNZ or other authority will be considered for withdrawal from the Training Program.

**Refer to the RANZCR Withdrawal from Training Policy for further information.**

### **2.4 Accredited Training Positions**

- (a) Trainees must hold an accredited training position (i.e. remain on contract for an accredited training position). A trainee who is no longer holding an accredited training position must immediately inform the College of their circumstances and provide the College with the date from which they no longer held an accredited training position.
- (b) Should a trainee no longer be actively engaged in the Training Program (i.e. hold an accredited training position), they are no longer eligible to maintain student membership with the College.
- (c) A trainee who is no longer holding an accredited training position will be withdrawn from the Training Program.

**Refer to the RANZCR Withdrawal from Training Policy for further information.**

- (d) A trainee who has been withdrawn from training must write to the College outlining their circumstances and seek permission to recommence training (upon securing an accredited training position) or seek permission to re-enter training (before subsequently securing an accredited training position).
- (e) A trainee who is aware that they will not be in an accredited training position by virtue of relocation (i.e. moving to a new accredited training site outside their network) and can justify that they have a guaranteed accredited training position to continue training, will not be withdrawn from training.
- (f) With reference to 2.4(e), a trainee must immediately inform the College of their circumstances and provide the College with confirmation evidencing commencement at a new training site. A trainee in this circumstance will not have their training time accredited for the period between:
  - (i) concluding training at their former accredited training site; and
  - (ii) commencing training at their new accredited training site.
- (g) A trainee who remains out of an accredited training position (i.e. off contract for an accredited training position) for a period of up to one calendar year (from the date in which they last held an accredited training position) will have their situation considered by the Chief Censor and/or the CRETC. Subject to the approval of the Chief Censor and/or the CRETC, the trainee will be permitted to recommence training. In making their

determination, the Chief Censor and/or the CRETC will consider suitability to recommence training and if appropriate to the circumstances, determine the phase of training the trainee will resume training from; as well as make determinations on any other training program requirements (e.g. work-based assessments completed, examinations completed etc.).

- (h) A trainee who remains out of an accredited training position (i.e. off contract for an accredited training position) for a period greater than one calendar year (from the date in which they last held an accredited training position) will be required to apply to re-enter the Training Program in accordance with the provisions outlined under the Re-entry into the Training Programs Policy.

**Refer to the RANZCR Re-entry into the Training Programs Policy for further information.**

## **2.5 ePortfolio System**

- (a) Trainees are required to maintain accurate and up to date information within the ePortfolio System.
- (b) Trainees are responsible for the timely submission of all required training data and completion of requirements within the relevant timeframes.
- (c) Any work-based assessment (WBA) or structured learning experiences completed during a period of interrupted training will not be counted toward completion of training program requirements.

## **3. CLINICAL TRAINING**

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### **3.1 Training Rotations**

- (a) All training sites require RANZCR accreditation for the provision of training which is recognised by the College. Training rotations and therefore accredited training can only occur via accredited training sites, unless alternate arrangements have been approved prospectively by the CRETC.
- (b) Trainees must undertake training rotations at different training sites within the network, as approved by the Local Governance Committee and/or Network Governance Committee.
- (c) Trainees must rotate to another training site (other than their home training site) for a minimum of 12 months (in total) at 1.0 FTE, during the Training Program.

**Refer to the RANZCR Clinical Radiology Accreditation Standards for Education, Training and Supervision of Clinical Radiology Trainees for further information.**

### **3.2 Accredited Training Time**

- (a) Trainees are expected to complete the program at 1.0 FTE unless they apply to the College for a variation to training.
- (b) Accredited training time will accrue from the trainee's commencement date (as recorded by the College) at an accredited training site.
- (c) Accredited training time is not accrued during periods of interrupted training or whilst the trainee is completing a period of remediation.

**Refer to the RANZCR Interrupted and Part-Time Training Policy and the RANZCR Remediation in Training Policy for further information.**

### **3.3 Leave**

- (a) Trainees who wish to take consecutive leave in excess of six weeks must apply for a period of interrupted training.

- (b) A trainee's maximum leave entitlements in any 12-month training year (outside of 'interrupted training' as defined in the Interrupted and Part-Time Training Policy) is ten weeks (pro-rata for shorter training periods).

**Refer to the RANZCR Interrupted and Part-Time Training Policy for further information.**

### **3.4 Maximum Duration of Training / Timeframe for Completion of the Training Program**

- (a) Training commences on the date as recorded by the College and continues until the trainee is elected to Fellowship of the College, formally withdraws from the Training Program or is withdrawn from the Training Program.
- (b) Trainees must complete all requirements of the Training Program and be eligible for election to Fellowship within 10 years of their commencement date. This is irrespective of the full-time equivalent status of the trainee during their time in the Training Program.

**Refer to the RANZCR Interrupted and Part-Time Training Policy for further information.**

## **4. TRAINING REQUIREMENTS**

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### **4.1 Work-based Assessment and Structured Learning Experiences**

- (a) Work-based assessments (WBA) must be completed via the ePortfolio. The WBAs in the Training Program include the Reporting Assessment, Performed Ultrasound Assessment, Fluoroscopic Procedures Assessment, Procedural Radiology Assessment and the Clinical Radiology/Multidisciplinary Meeting Assessment.
- (b) Clinical Supervisors or DoTs must contribute to the completion of WBAs.
- (c) Clinical Supervisors and DoTs are responsible for providing feedback to the trainee, as relevant, and confirming the documented feedback and assessment outcome/s. Except for the Performed Ultrasound Assessment, a WBA is not valid unless it has been confirmed by a Clinical Supervisor or DoT within the ePortfolio.
- (d) For a Performed Ultrasound Assessment to be valid, a sonographer or sonologist or must sign the completed assessment.
- (e) Trainees must complete any specific WBAs requested by Clinical Supervisors and DoTs during the Training Program.

### **4.2 Monitoring and Review**

- (a) Progression through the Training Program depends on satisfactory clinical performance and regular completion of WBAs.
- (b) A Director of Training Review must be completed with the DoT/s every six months within the ePortfolio.
- (c) Trainees are expected to implement feedback provided and documented during these monitoring and review meetings.
- (d) If there are concerns about a trainee's performance or progress, the DoT/s may initiate an action plan or, with approval from the Network Governance Committee and/or Local Governance Committee, a remediation plan.

**Refer to the RANZCR Performance and Progression Policy and the RANZCR Remediation in Training Policy for further information.**

### 4.3 Phase 1 Requirements

- (a) All trainees must complete Phase 1 of training.
- (b) To apply for a portfolio review to progress to Phase 2 of training, trainees must have satisfactorily completed:
  - (i) A minimum of 12 months FTE accredited training time in Phase 1;
  - (ii) Competencies of Early Training;
  - (iii) All prescribed work-based assessments and structured learning experiences specified by the College;
  - (iv) Research requirements;
  - (v) Phase 1 Examinations;
  - (vi) A Multisource Feedback;
  - (vii) Clinical Supervisor Feedback;
  - (viii) Director of Training Reviews; and
  - (ix) Trainee Assessment of Training Sites (TATS) every six months.
- (c) Trainees must complete all Phase 1 requirements within 24 months FTE accredited time. Trainees who are not able to do so will be referred to the Chief Censor for consideration of withdrawal from the Training Program.

**Refer to the RANZCR Withdrawal from Training Policy for further information.**

### 4.4 Phase 2 Requirements

- (a) All trainees must complete Phase 2 of training.
- (b) To apply for a portfolio review to progress to Phase 3 of training, trainees must have satisfactorily completed:
  - (i) A minimum of 24 months FTE accredited training time in Phase 2
  - (ii) A minimum of 48 months FTE accredited training time (Phase 1 + Phase 2);
  - (iii) All prescribed work-based assessments and structured learning experiences specified by the College;
  - (iv) A Multisource Feedback;
  - (v) Phase 2 Examinations;
  - (vi) Research requirements;
  - (vii) Clinical Supervisor Feedback;
  - (viii) Director of Training Reviews; and
  - (ix) Trainee Assessment of Training Sites (TATS) every six months.
- (c) Trainees must complete all Phase 2 requirements within 48 months FTE accredited time. Trainees who are not able to do so will be referred to the Chief Censor for consideration of withdrawal from the Training Program.

**Refer to the RANZCR Withdrawal from Training Policy for further information.**

#### **4.5 Phase 3 Requirements**

- (a) All trainees must complete Phase 3 of training.
- (b) To apply for a portfolio review to assess completion of training, trainees must have satisfactorily completed:
  - (i) A minimum of 12 months FTE accredited training time;
  - (ii) All prescribed work-based assessments and structured learning experiences specified by the College;
  - (iii) A Multisource Feedback;
  - (iv) Research requirements;
  - (v) Clinical Supervisor Feedback;
  - (vi) Director of Training Reviews; and
  - (vii) Trainee Assessment of Training Sites (TATS) every six months.

#### **4.6 Withdrawal from Training and Re-Entry**

- (a) Trainees seeking to withdraw from training must advise RANZCR in writing. Trainees who voluntarily withdraw from the Training Program will be eligible to apply for re-entry.
- (b) The College reserves the right to withdraw a trainee from the Training Program if they do not achieve (or are unable to achieve) the required standards (including ethical and professional standards as stipulated by the appropriate regulating body) of training and practice.
- (c) A trainee who has been withdrawn from the Training Program due to not meeting their responsibilities outlined under College policies, or in accordance with the Clinical Radiology Handbook may not be eligible for re-entry.

**Refer to the RANZCR Withdrawal from Training Policy and the RANZCR Re-Entry into the Training Programs Policy for further information.**

### **5. PROGRESSION**

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#### **5.1 Portfolio Review**

- (a) All trainees shall have their progress through the Training Program reviewed by the applicable Local Governance Committee (LGC) and/or the Network Governance Committee (NGC), and if required, the CRETC.
- (b) Trainee portfolio reviews will be conducted having regard to all relevant forms of evidence within the ePortfolio, specified by the College for this purpose.

#### **5.2 Progression to Phase 2 and Phase 3**

- (a) Possible outcomes of a Phase 1 and Phase 2 trainee portfolio review are:
  - (i) Approval to progress to Phase 2 or Phase 3; or
  - (ii) Progression to Phase 2 or Phase 3 is conditional on clarification or additional information; or
  - (iii) Portfolio must be resubmitted for review at the next meeting.

- (b) The College will notify the trainee in writing of decisions made by the LGC and/or the NGC.
- (c) Trainees who are not approved to progress to Phase 2 by the LGC and/or NGC within 24 months (1.0 FTE) of accredited training time, will be referred to the Chief Censor for consideration of withdrawal from the Training Program.
- (d) Trainees who are not approved to progress to Phase 3 by the LGC and/or NGC within 72 months (1.0 FTE) of accredited training time (Phase 1 + Phase 2), will be referred to the Chief Censor for consideration of withdrawal from the Training Program.

**Refer to the RANZCR Training Program Handbook and the RANZCR Withdrawal from Training Policy for further information.**

### **5.3 Completion of Training and Eligibility for Fellowship**

- (a) Possible outcomes of a Phase 3 trainee portfolio review are:
  - (i) Approval of completion of training and eligibility for Fellowship; or
  - (ii) Completion of training is conditional on clarification or additional information; or
  - (iii) Portfolio must be resubmitted for review at the next meeting.
- (b) The College will notify the trainee in writing of decisions made by the LGC and/or NGC.
- (c) Trainees who have not been approved for completion of training by the LGC and/or NGC within 10 years of their commencement date of the Training Program, will be referred to the Chief Censor for consideration of withdrawal from the Training Program.
- (d) To be eligible for Fellowship, trainees must have completed all the requirements of Phase 1, Phase 2 and Phase 3 of training, as specified by the College.
- (e) The LGC and/or NGC must confirm completion of training and recommend eligibility for Fellowship to the Chief Censor.

## **6. RECONSIDERATION, REVIEW AND APPEAL OF DECISIONS**

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Any person who is dissatisfied with and adversely affected by a decision made under this policy may apply to have the decision Reconsidered, Reviewed or Appealed in accordance with the Reconsideration Review and Appeal of Decisions Policy.

**Refer to the RANZCR Reconsideration Review and Appeal of Decisions Policy for further information.**

## **7. RELATED POLICIES AND DOCUMENTS**

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- Withdrawal from Training Policy
- Re-Entry into the Training Programs Policy
- Interrupted and Part-Time Training Policy
- Performance and Progression Policy
- Remediation in Training Policy
- Phase 1 Examinations (Clinical Radiology) Policy
- Phase 2 Examinations (Clinical Radiology) Policy
- RANZCR Code of Ethics

These policies and documents can be downloaded from the College website.

