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PURPOSE

The American Board of Radiology (ABR) Alternate Pathway (AP) provides a structured route for International medical graduates (IMGs) to become board eligible in diagnostic radiology. While prior studies have evaluated performance within individual subspecialties, a comprehensive multi-specialty assessment of Alternate Pathway Candidates (APCs) compared with U.S. diagnostic radiology (DR) graduates remains limited.

This study aimed to evaluate program director perceptions of APC performance across research, clinical skills, teaching ability, and board examination outcomes across radiology subspecialties.

METHODS

A structured, anonymous survey was distributed to U.S. radiology fellowship program directors across multiple subspecialties, including neuroradiology, body imaging, pediatrics, chest, interventional radiology, musculoskeletal radiology, nuclear medicine, and breast imaging. Program directors compared APCs with U.S. DR graduates across multiple domains: **Research skills, Clinical skills, Teaching ability, ABR Core Examination performance, and First-attempt pass rates** for Certificate of Added Qualification (CAQ/APC) and U.S. DR board examinations. Responses were aggregated across all specialties and summarized using descriptive statistics.

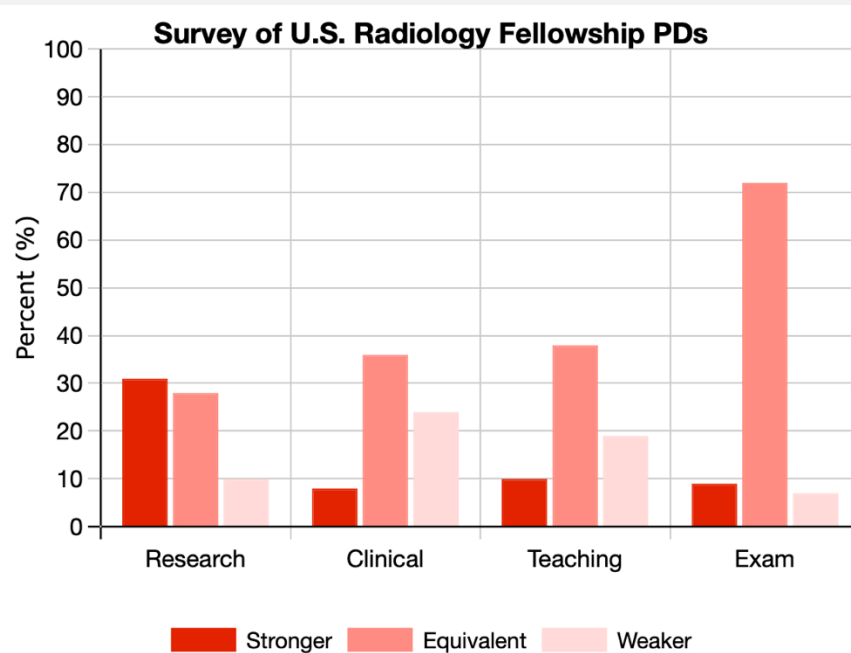


Figure 1. Survey results of U.S. Radiology Fellowship Program Directors asked to compare APCs vs. U.S. DR Graduates in the following areas: Research skills, Clinical skills, Teaching ability, ABR Core Exam performance.

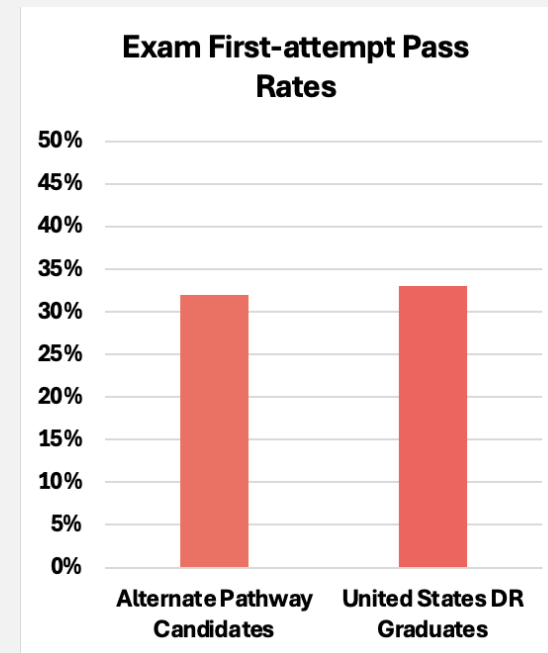


Figure 2. Survey results regarding APC/CAQ or U.S. Board exam First-attempt pass rates for APCs vs. U.S. DR Graduates.

CONCLUSION

Across radiology subspecialties, program directors generally perceive ABR Alternate Pathway Candidates as performing comparably to U.S. diagnostic radiology graduates in most domains. APCs were viewed most favorably in research, while clinical skills and teaching ability demonstrated more mixed evaluations but remained predominantly equivalent. These findings support the role of the ABR Alternate Pathway as a viable mechanism for integrating IMGs into U.S. radiology training and practice, including nuclear medicine, while highlighting areas for continued mentorship and support.