

Background

- Diversity in radiology is important for improving patient communication, cultural competence, and equitable care.
- Prior studies have shown persistent gender and racial/ethnic underrepresentation within diagnostic radiology.
- While neuroradiology fellowship diversity has been studied, abdominal radiology fellowship demographics remain less well characterized.
- This study evaluates gender and racial/ethnic representation among abdominal radiology fellows over a 10-year period.
- **Objective:** To evaluate gender and racial/ethnic representation among abdominal radiology fellows in

Methods

- Public ACGME Data Resource Book data were reviewed for abdominal radiology fellows from **2014–2015 through 2023–2024**.
- Self-reported gender and race/ethnicity were extracted.
- URM status included Hispanic/Latino, Black/African American, American Indian/Alaskan Native, and Native Hawaiian/Pacific Islander fellows.
- Temporal trends were assessed using logistic regression and Cochran-Armitage trend testing.

Results

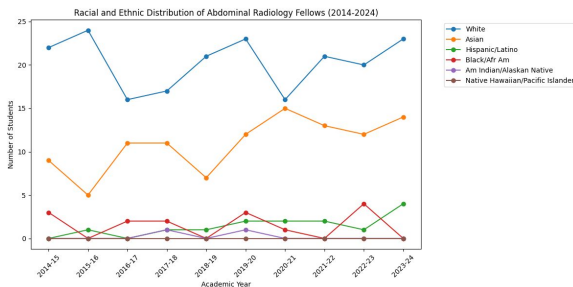


Figure 1. Distribution of major racial and ethnic groups among abdominal radiology fellows from 2014–2024

- A total of **468 abdominal radiology fellows** were identified across 10 academic years.
- Overall, **29.9%** of fellows were female and **68.2%** were male.
- Underrepresented in Medicine fellows represented **6.6%** of the total cohort.
- Female representation ranged from **17.8% to 38.8%** without a significant temporal trend.
- URM representation ranged from **2.2% to 12.2%** without significant improvement over time.
- Abdominal radiology showed modestly higher female representation than published neuroradiology data, but similarly low Underrepresented in Medicine representation.

Discussion

- Abdominal radiology fellowships remain male-predominant, with women comprising approximately one-third of fellows.
- URM representation remained consistently low across the decade, suggesting persistent pipeline barriers.
- The lack of significant improvement despite national diversity initiatives suggests passive efforts may be insufficient.
- Targeted mentorship, earlier trainee exposure, and intentional fellowship recruitment strategies may be needed to improve representation.
- Because abdominal imaging plays a key role in diseases affecting diverse populations, workforce diversity may have important implications for equitable care delivery.

Limitations

- Reliance on aggregate, self-reported ACGME data.
- A substantial proportion of race/ethnicity data was categorized as unknown.
- Only ACGME-accredited abdominal radiology fellowships were included.

References

- AAMC. *Diversity in Medical Education: Facts & Figures*. 2021.
- Wu X, et al. *Acad Radiol*. 2023;30(11):2736–2740.
- Betancourt JR, et al. *J Am Coll Radiol*. 2019;16(4):547–553.
- Bitar I, et al. *Acad Radiol*. 2025;32(12):6998–7003.
- Doddi S, et al. *Curr Probl Diagn Radiol*. 2024;53(5):570–575.
- ACGME. *Data Resource Book*. Accessed March 2025