Progress Report – Nuclear Medicine

Trainee details

Trainee name and MIN *Title, preferred name, surname, MIN*	**Training Phase**
Dr Jane Citizen, 123456	2 - Specialty consolidation

Rotations

Please list the rotation plan(s) for the training period this rotation progress report covers.

Plan type	Training Setting	Start date	End date	FTE	Rotation type	Rotation supervisors
Accredited	Royal Melbourne Hospital	05/08/2026	04/11/2026	1.0	Core Nuclear Medicine, PET/CT and radionuclide therapy exposure	Dr Emily Smith, Dr James Lee
Choose an item.	Click or tap here to enter text.	Select date	Select date	FTE	Click or tap here to enter text.	Click or tap here to enter text.

Trainee leave

Please enter any leave taken during the rotation (excludes periods of interruption already applied for). Refer to the RACP Education policies for leave types.

Leave type	Start Date – End Date	Number of workdays
Standard	10/09/2025–10/09/2025	1
Standard	22/10/2025–23/10/2025	2
Choose an item.	Click or tap here to enter text.	Click or tap here to enter text.
Choose an item.	Click or tap here to enter text.	Click or tap here to enter text.

☒ I confirm I have not taken any other leave during this training period which is NOT already covered as an Interruption of Training.

Assessments completed during the rotation

Learning captures completed	**Observation captures completed**
6	3

Learning goals			
Learning goals *The curriculum is available on the RACP Online Learning website.*		**Trainee Assessment** *Make a self-assessment against each of the learning goals, refer to the learning opportunities outlined in your rotation plans as well as the expected standards for each goal in Appendix 1.*	**Rotation Supervisor Assessment** *Assess the trainee against each of the learning goals, refer to the expected standards for each goal in Appendix 1.*
	1. Professional behaviours	5 - I consistently behave in line with each of the ten domains of professional practice	5 - The trainee consistently behaves in line with each of the ten domains of professional practice
Entrustable Professional Activities (EPA)	**2. Leadership in the nuclear medicine department** Lead a team of health and clerical professionals in the nuclear medicine context, encompassing inpatients, outpatients and multidisciplinary	3 - I am able to act with indirect supervision (i.e., ready access to a supervisor)	3 - The trainee is able to act with indirect supervision (i.e., ready access to a supervisor)
	3. Supervision and teaching: Supervise and teach professional colleagues	2 - I am able to act with direct supervision	2 - The trainee is able to act with direct supervision
	4. Quality improvement: Identify and address failures in health care delivery	3 - I am able to act with indirect supervision (i.e., ready access to a supervisor)	3 - The trainee is able to act with indirect supervision (i.e., ready access to a supervisor)
	5. Clinical assessment and management, including prescribing radioisotopes: Clinically assess and manage the ongoing care of patients, including prescribing radioisotopes	3 - I am able to act with indirect supervision (i.e., ready access to a supervisor)	3 - The trainee is able to act with indirect supervision (i.e., ready access to a supervisor)

Learning goals			
	Learning goals *The curriculum is available on the RACP Online Learning website.*	**Trainee Assessment** *Make a self-assessment against each of the learning goals, refer to the learning opportunities outlined in your rotation plans as well as the expected standards for each goal in Appendix 1.*	**Rotation Supervisor Assessment** *Assess the trainee against each of the learning goals, refer to the expected standards for each goal in Appendix 1.*
	6. Longitudinal care of patients, including those receiving Theranostics and transitions in care: Manage and coordinate the longitudinal care and transitions in care of nuclear medicine patients, including those receiving Theranostics	2 - I am able to act with direct supervision	2 - The trainee is able to act with direct supervision
	7. Communication: Communication to optimise the care of nuclear medicine patients	3 - I am able to act with indirect supervision (i.e., ready access to a supervisor)	3 - The trainee is able to act with indirect supervision (i.e., ready access to a supervisor)
	8. Investigations and procedures: Plan, prepare for, perform, and provide aftercare for important investigations and practical procedures in nuclear medicine	3 - I am able to act with indirect supervision (i.e., ready access to a supervisor)	3 - The trainee is able to act with indirect supervision (i.e., ready access to a supervisor)
Knowledge guides	**14. Musculoskeletal nuclear medicine**	3 - I know how to apply this knowledge to practice	3 - The trainee knows how to apply this knowledge to practice
	19. Radionuclide therapies / Theranostics	3 - I know how to apply this knowledge to practice	3 - I know how to apply this knowledge to practice
	12. Gastrointestinal nuclear medicine	3 - I know how to apply this knowledge to practice	3 - The trainee knows how to apply this knowledge to practice
	13. Genitourinary nuclear medicine	3 - I know how to apply this knowledge to practice	3 - The trainee knows how to apply this knowledge to practice
	15. Neurological nuclear medicine	3 - I know how to apply this knowledge to practice	3 - The trainee knows how to apply this knowledge to practice

Learning goals

Learning goals *The curriculum is available on the RACP Online Learning website.*	**Trainee Assessment** *Make a self-assessment against each of the learning goals, refer to the learning opportunities outlined in your rotation plans as well as the expected standards for each goal in Appendix 1.*	**Rotation Supervisor Assessment** *Assess the trainee against each of the learning goals, refer to the expected standards for each goal in Appendix 1.*
18. Inflammation and infection	3 - I know how to apply this knowledge to practice	3 - The trainee knows how to apply this knowledge to practice
20. Pulmonary nuclear medicine	3 - I know how to apply this knowledge to practice	3 - The trainee knows how to apply this knowledge to practice
16. Oncological nuclear medicine	3 - I know how to apply this knowledge to practice	3 - The trainee knows how to apply this knowledge to practice
9. Scientific basis of nuclear medicine, including radiation safety	3 - I know how to apply this knowledge to practice	3 - The trainee knows how to apply this knowledge to practice
10. Cardiovascular nuclear medicine	3 - I know how to apply this knowledge to practice	3 - The trainee knows how to apply this knowledge to practice
11. Endocrine nuclear medicine	3 - I know how to apply this knowledge to practice	3 - The trainee knows how to apply this knowledge to practice

Trainee comments

Provide overall comments about your rotation period for your Rotation Supervisor to consider. These comments may also be viewed by your other supervisors and the Progress Review Panel.

What did you do well during this rotation of training?

During this rotation I developed a more structured approach to Nuclear Medicine referrals, including clarifying the clinical question, understanding the indication for the study, and identifying how the imaging result would influence patient management. I found cardiovascular cases particularly valuable. For example, reviewing a myocardial perfusion study in a patient with ongoing exertional chest pain despite only mild-to-moderate coronary artery disease on angiography helped me understand how functional imaging can identify inducible ischaemia and guide decisions about medical versus interventional management. This improved my understanding of how Nuclear Medicine findings contribute directly to clinical decision-making rather than simply describing imaging abnormalities.

What could you do to improve in the future?

I would like to continue building confidence in more complex Nuclear Medicine decision-making, particularly in oncological PET/CT, therapy-related consultations, and cases where scan findings need to be interpreted alongside prior imaging, pathology, and evolving clinical context. I still need more experience in formulating management-focused conclusions, especially when the imaging result has implications for further investigation, treatment escalation, or multidisciplinary planning.

☒ **I have had the opportunity to discuss the content of this report with my supervisor(s).**

☒ **I understand my obligation to complete the training requirements outlined in the relevant curriculum**

☒ **I understand the College may share this information with current and future supervisors. This information may also be shared with other Training Committees if I'm a dual trainee or change training programs.**

☒ **I understand my obligation to comply with the relevant College education policies.**

Date completed by trainee
23/11/2026

Supervisor review

Provide your feedback on the trainee's progress throughout the rotation. Your comments will be visible to the trainee, other supervisors, and the Progress Review Panel.

What did the trainee do well during this rotation of training?

Jane has demonstrated very good early progress in the core practice of Nuclear Medicine. She approaches imaging referrals thoughtfully, seeks to understand the clinical indication for each study, and is increasingly able to explain how a particular Nuclear Medicine investigation or therapy contributes to diagnosis or management. She has shown steady development in common studies including bone scan, renal scan, thyroid imaging, V/Q imaging, and PET/CT, and she is becoming more reliable in correlating functional imaging findings with anatomy, prior investigations, and the broader clinical context.

Her communication with patients has been a particular strength. In observed consultations she explained investigations and therapies clearly, including the goals of radioiodine therapy, expected outcomes, and appropriate radiation precautions. She demonstrated a good ability to gauge patient understanding, adjust explanations to the patient's circumstances, and communicate professionally and empathetically.

What could they improve on in the future?

Jane would benefit from broader exposure to more complex oncological PET/CT and radionuclide therapy cases, with progressive development clinical reasoning around the assessment of disease response and producing reports and conclusions which will help management decisions. The next step will be moving from accurate interpretation of studies to more confident synthesis of the clinical question, imaging findings, limitations, and practical

implications for referrers. Active participation at multidisciplinary meetings would be helpful.

Has the trainee demonstrated the ability to plan and manage their learning and complete their learning and assessments in a timely manner?	**Is the trainee on track to meet the RACP's expected performance standard for the phase?**
Yes	Yes

Progression recommendation

This trainee is progressing satisfactorily

Comments/Notes
General comments are optional, however if the progression recommendation is that a trainee is NOT progressing satisfactorily, please provide additional comments to support your recommendation.

☒ **I have had the opportunity to discuss the content of this report with my trainee.**

☒ **I have discussed the trainee's progress with other supervisors if required.**

Completed by	**Date completed**
Name: Dr James Lee Email: j.lee@hospital.org.au	23/11/2026

Additional supervisor assessment

Feedback and a progression recommendation has already been provided by another supervisor for this progress report. If you agree with their assessment of the trainee, please check the box below and provide optional feedback for the trainee and other supervisors to see.

If you would prefer to complete your own assessment, use the Additional Supervisor - Rotation Progress Report.

☒ **Agree with the assessment and recommendation**

Comments on recommendation *(optional)*

Click or tap here to enter text.

Completed by	**Date completed**
Name: Dr Emily Smith Email: e.smith@hospital.org.au	25/11/2026

Trainee reflection *(optional)*

Provide any comments or reflections relating to your supervisor's comments or the rotation in general.

Reflection	Date
I have discussed the feedback with my supervisor. This term helped me better understand the breadth of Nuclear Medicine practice and how the specialty contributes to both diagnosis and treatment. In future rotations I hope to build more confidence in PET/CT, participating in MDM meetings and become more confident with independent clinical decision-making.	2/12/2026

— End of report —

		Entry criteria	Progression criteria		Completion criteria
		Entry into training *At entry into training, trainees will:*	Specialty foundation *By the end of this phase, trainees will:*	Specialty consolidation RANZCR trainees first phase of training *By the end of this phase, trainees will:*	Transition to fellowship (RACP trainees) Completion phase (RANZCR trainees *By the end of training, trainees will:*
Be	**1. Professional behaviours**	**Level 5** consistently behave in line with all ten domains of professional practice	**Level 5** consistently behave in line with all ten domains of professional practice	**Level 5** consistently behave in line with all ten domains of professional practice	**Level 5** consistently behave in line with all ten domains of professional practice
Do	**2. Leadership in the nuclear medicine department:** Lead a team of health and clerical professionals in the nuclear medicine context, encompassing inpatients, outpatients and multidisciplinary	**Level 1** be able to be present and observe	**Level 2** be able to act with direct supervision	**Level 3** be able to act with indirect supervision	**Level 5** be able to supervise others
	3. Supervision and teaching: Supervise and teach professional colleagues	**Level 1** be able to be present and observe	**Level 2** be able to act with direct supervision	**Level 3** be able to act with indirect supervision	**Level 5** be able to supervise others
	4. Quality improvement: Identify and address failures in health care delivery	**Level 1** be able to be present and observe	**Level 2** be able to act with direct supervision	**Level 3** be able to act with indirect supervision	**Level 5** be able to supervise others
	5. Clinical assessment and management, including prescribing radioisotopes: Clinically assess and manage the ongoing care of patients, including prescribing radioisotopes	**Level 1** be able to be present and observe	**Level 2** be able to act with direct supervision	**Level 3** be able to act with indirect supervision	**Level 5** be able to supervise others
	6. Longitudinal care of patients, including those receiving Theranostics and transitions in care: Manage and coordinate the longitudinal care and transitions in care of nuclear medicine patients, including those receiving Theranostics	**Level 1** be able to be present and observe	**Level 2** be able to act with direct supervision	**Level 3** be able to act with indirect supervision	**Level 5** be able to supervise others
	7. Communication: Communication to optimise the care of nuclear medicine patients	**Level 1** be able to be present and observe	**Level 2** be able to act with direct supervision	**Level 3** be able to act with indirect supervision	**Level 5** be able to supervise others
	8. Investigations and procedures: Plan, prepare for, perform, and provide aftercare for important investigations and practical procedures in nuclear medicine	**Level 1** be able to be present and observe	**Level 2** be able to act with direct supervision	**Level 3** be able to act with indirect supervision	**Level 5** be able to supervise others

		Entry criteria	Progression criteria		Completion criteria
		Entry into training *At entry into training, trainees will:*	Specialty foundation *By the end of this phase, trainees will:*	Specialty consolidation RANZCR trainees first phase of training *By the end of this phase, trainees will:*	Transition to fellowship (RACP trainees) Completion phase (RANZCR trainees *By the end of training, trainees will:*
Know	**9. Scientific basis of nuclear medicine, including radiation safety**	**Level 1** have heard of some of the topics in this knowledge guide	**Level 2** know the topics and concepts in this knowledge guide	**Level 3** know how to apply this knowledge to practice	**Level 5** consistently demonstrate application of this knowledge to practice
	10. Cardiovascular nuclear medicine	**Level 1** have heard of some of the topics in this knowledge guide	**Level 2** know the topics and concepts in this knowledge guide	**Level 3** know how to apply this knowledge to practice	**Level 5** consistently demonstrate application of this knowledge to practice
	11. Endocrine nuclear medicine	**Level 1** have heard of some of the topics in this knowledge guide	**Level 2** know the topics and concepts in this knowledge guide	**Level 3** know how to apply this knowledge to practice	**Level 5** consistently demonstrate application of this knowledge to practice
	12. Gastrointestinal nuclear medicine	**Level 1** have heard of some of the topics in this knowledge guide	**Level 2** know the topics and concepts in this knowledge guide	**Level 3** know how to apply this knowledge to practice	**Level 5** consistently demonstrate application of this knowledge to practice
	13. Genitourinary nuclear medicine	**Level 1** have heard of some of the topics in this knowledge guide	**Level 2** know the topics and concepts in this knowledge guide	**Level 3** know how to apply this knowledge to practice	**Level 5** consistently demonstrate application of this knowledge to practice
	14. Musculoskeletal nuclear medicine	**Level 1** have heard of some of the topics in this knowledge guide	**Level 2** know the topics and concepts in this knowledge guide	**Level 3** know how to apply this knowledge to practice	**Level 5** consistently demonstrate application of this knowledge to practice
	15. Neurological nuclear medicine	**Level 1** have heard of some of the topics in this knowledge guide	**Level 2** know the topics and concepts in this knowledge guide	**Level 3** know how to apply this knowledge to practice	**Level 5** consistently demonstrate application of this knowledge to practice
	16. Oncological nuclear medicine	**Level 1** have heard of some of the topics in this knowledge guide	**Level 2** know the topics and concepts in this knowledge guide	**Level 3** know how to apply this knowledge to practice	**Level 5** consistently demonstrate application of this knowledge to practice
	17. Pulmonary nuclear medicine	**Level 1** have heard of some of the topics in this knowledge guide	**Level 2** know the topics and concepts in this knowledge guide	**Level 3** know how to apply this knowledge to practice	**Level 5** consistently demonstrate application of this knowledge to practice

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	18. Inflammation and infection	**Level 1** have heard of some of the topics in this knowledge guide	**Level 2** know the topics and concepts in this knowledge guide	**Level 3** know how to apply this knowledge to practice	**Level 5** consistently demonstrate application of this knowledge to practice
	19. Radionuclide therapies / Theranostics	**Level 1** have heard of some of the topics in this knowledge guide	**Level 2** know the topics and concepts in this knowledge guide	**Level 3** know how to apply this knowledge to practice	**Level 4** frequently shows they apply this knowledge to practice