



AAR 2027 ANNUAL MEETING

April 13-16, 2027 | The Grand America & Little America | Salt Lake City, Utah

Radiology Reimagined: Training and Practice in the AI Era

The premise

Foundation models will soon draft the comprehensive imaging report for the radiologist to review, revise or reject. This program assumes that scenario and asks what it changes.

The format

Every session is built around one question, and every speaker is assigned a part of the answer. One track, 8:00 to noon, Tuesday through Friday. A chief resident introduces every session. Afternoons are for affinity groups and hands-on AI workshops.

Twelve questions. One room. Four mornings.

TUESDAY

Frame

What is the field accepting, and refusing to look at?

Current and Future Generation AI

What AI does today, and what arrives in 3, 5 and 10 years.

What Holds Us Together

If AI drafts the report, what still makes us radiologists, and what binds us?

Safe Enough to Sign Off?

When can AI report without us, and who decides?

WEDNESDAY

Operate

How does the field run when AI drafts the read?

The Floor and the Ceiling

AI takes the routine work first. Where does our value go next?

When AI Fails, Who Is Accountable?

Real failure cases, legal experts, and the room assigns the blame.

BROGDON PANEL

AI as Teacher

How AI is already teaching residents, and where it should not.

THURSDAY

Train, Retrain

How do we educate, credential and support the workforce?

LUCY SQUIRE PANEL

Designing the AI Curriculum

What to add to training, and what to stop teaching.

AI Competence: Fluency to Board Requirement

How should boards test AI competence and AI-assisted practice?

SCARD CHAIRS PANEL

Skill Preservation and Retraining

As AI absorbs skills faculty spent decades building, how do they retrain and adapt?

FRIDAY

Prove

What is the evidence, who pays, and who is left behind?

Did the System Get Better?

Beyond the reader study: did quality, safety and cost improve?

ROBERT NOVELLINE PANEL

Did the Patient Get Better?

Did the gains reach every patient, or only some?

The Practice and the Margin

Some practices can afford AI and some cannot. How should payment adapt, and how do the rest compete?