

2012年8月24日
中華民國放射線醫學會
住院醫師閱片測驗-答案

出題醫院
中國醫藥大學附設醫院放射線部

NR

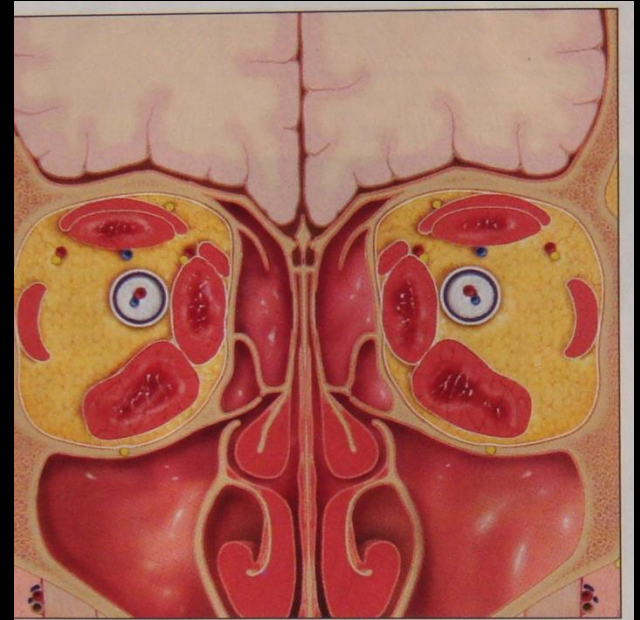
Q01

45/F Eyelid puffy and proptosis, Borderline IOP:21 mmHg



ANS : Thyroid associated
orbitopathy, both eyes

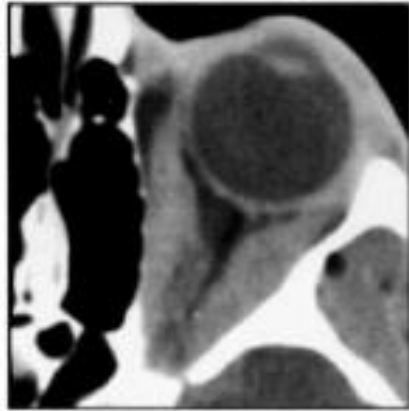
- Most common cause of proptosis in adults
- Most frequently associated with Graves disease.
- More frequently in women.
- Characterised by enlargement of the extraocular muscles (EOMs)
- Typical:
 - Sparing of tendon (although it can be involved in acute cases)
 - Bilateral(76-90%)
 - Symmetric (70%)
- Sites of predilection: mnemonic "I'M SLOW"
 - Inferior > medial > superior> lateral> oblique



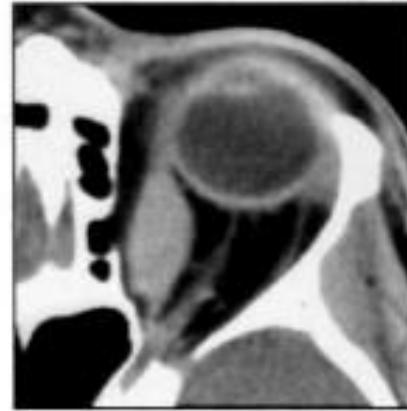
DDx: Extra-Ocular Muscle Enlargement



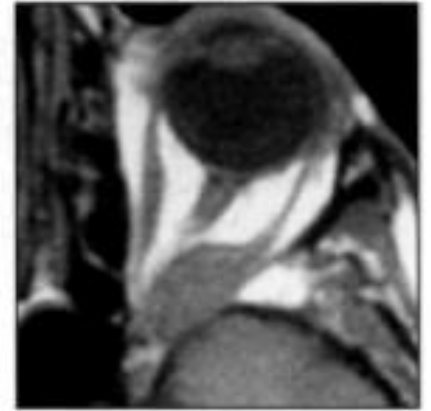
Pseudotumor



Sarcoidosis



Lymphoma



Metastasis

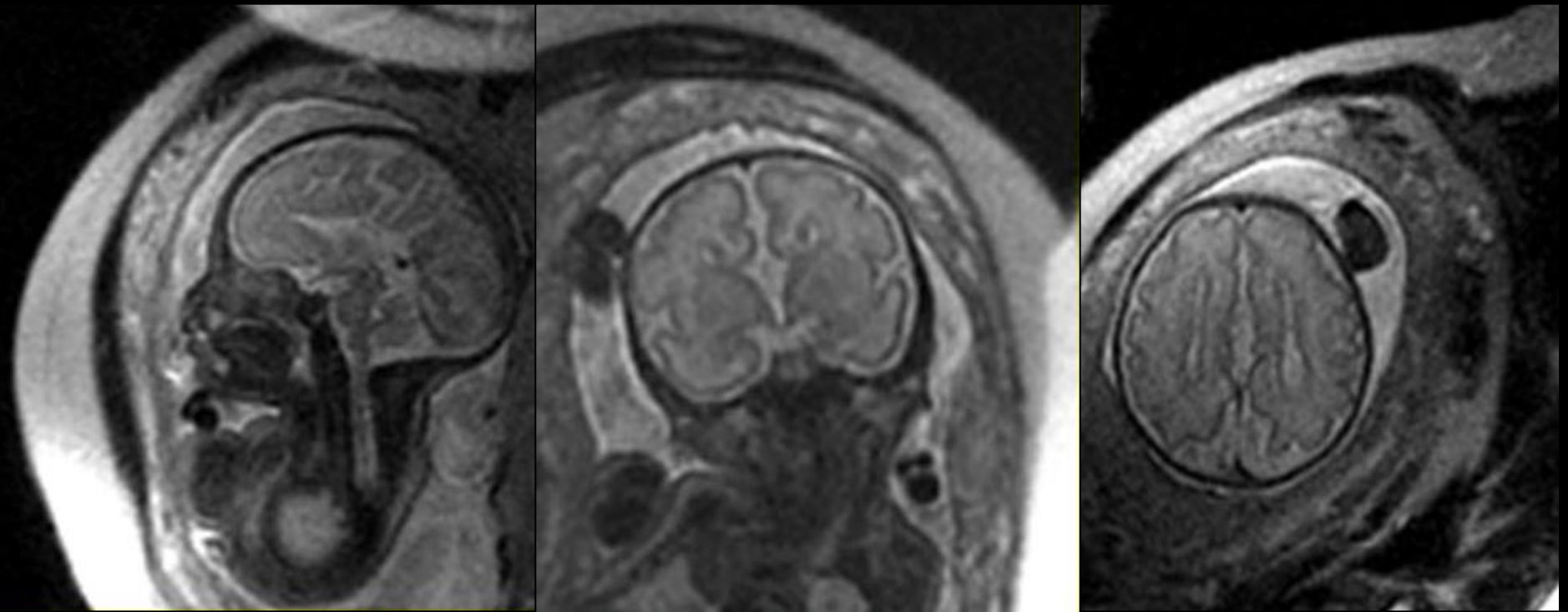
- **Idiopathic orbital pseudotumor**
 - Diffuse inflammatory changes with **painful** proptosis
 - Typically **unilateral**; equal distribution among EOMs

- **Infectious cellulitis-myositis**
 - Orbital cellulitis with medial rectus enlargement
 - Associated with **sinonasal infection** (ethmoids)
- **Sarcoidosis**
 - Granulomatous inflammatory process of orbit with varied manifestations involving **multiple areas**
 - Seen in 20% of patients with **systemic sarcoid**
- **Lymphoproliferative lesion**
 - Usually non-Hodgkin lymphoma (NHL)
 - Pliable mass may originate from or infiltrate EOM
 - Primary to orbit or associated with **systemic disease**
- **Metastasis**
 - **Breast primary** in 42%; lung primary in 11%
 - Melanoma primary in 5%, high predilection for EOM
 - EOM location less common than fat or bone

Q02

Fetus

孕婦懷孕27週



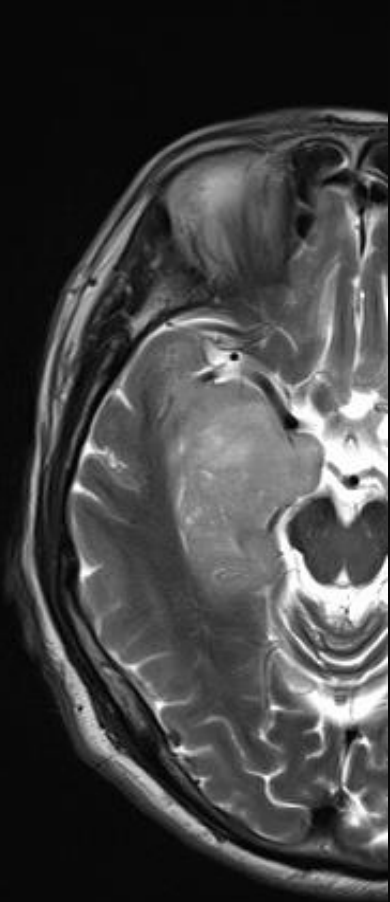
ANS : Aggenesis of corpus
callosum

Q03

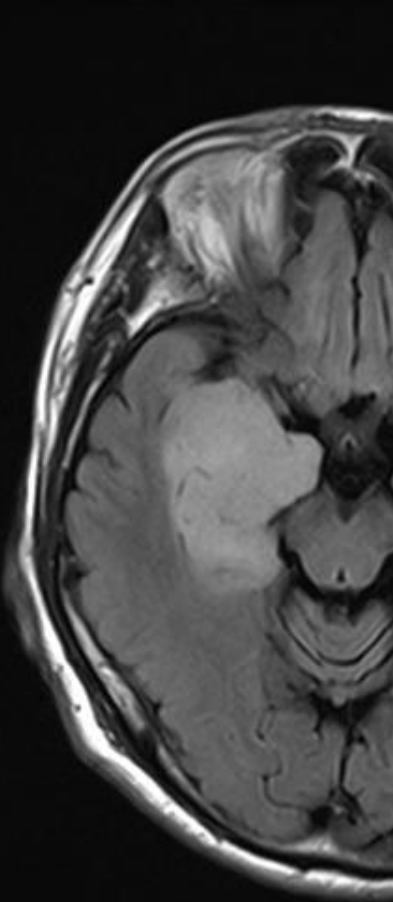
61/M, Hx of NPC s/p CCRT,
C.C: sudden onset of temporary conscious change

本題有兩張投影片，第一張

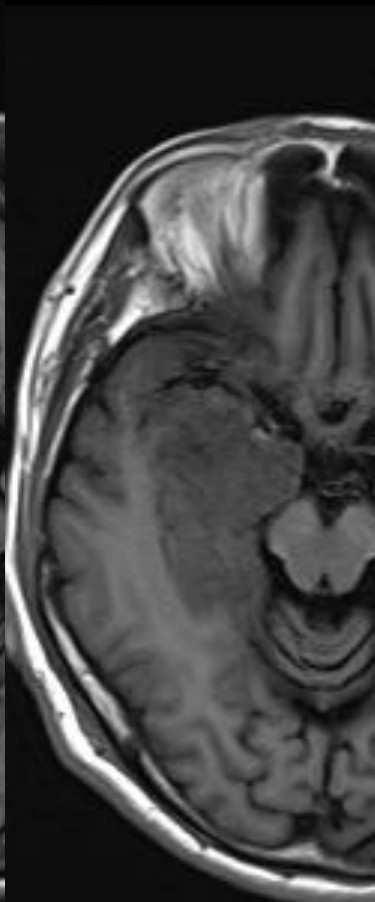
T2WI



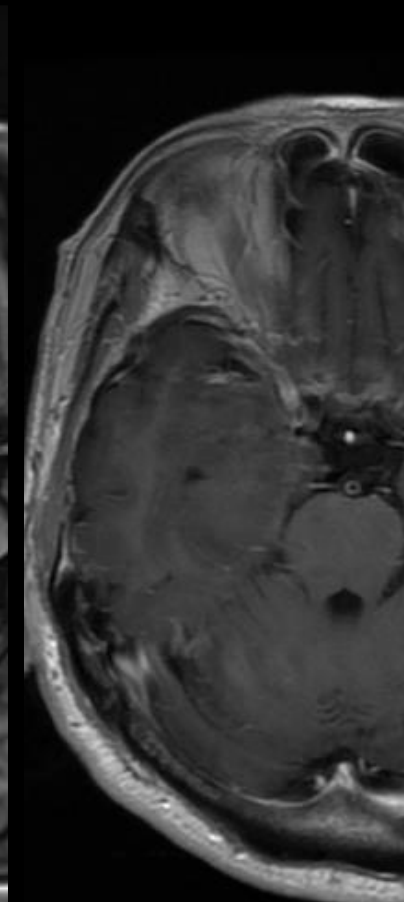
FLAIR



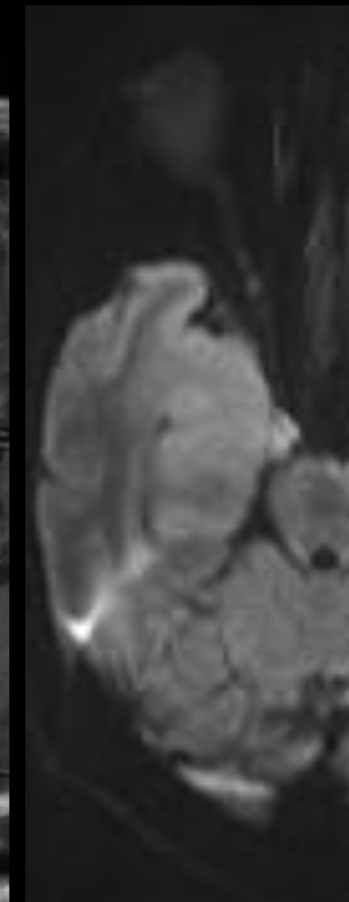
T1WI



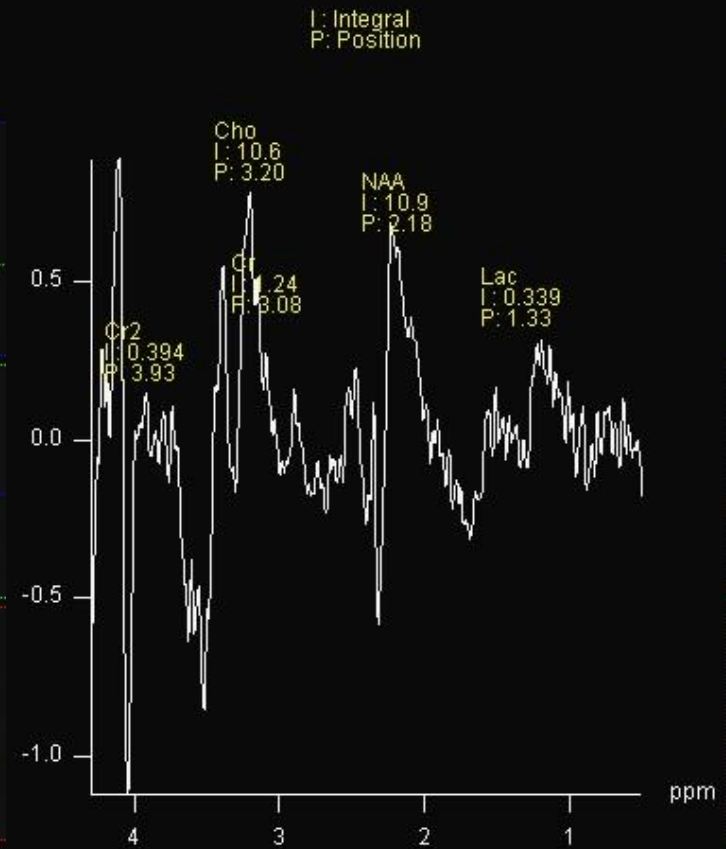
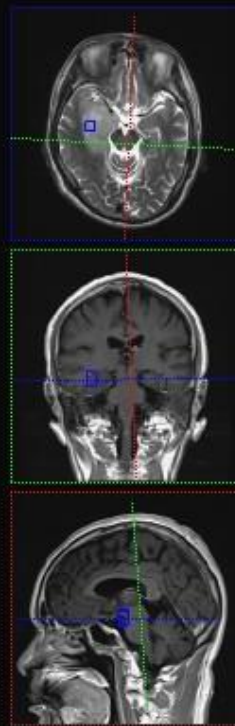
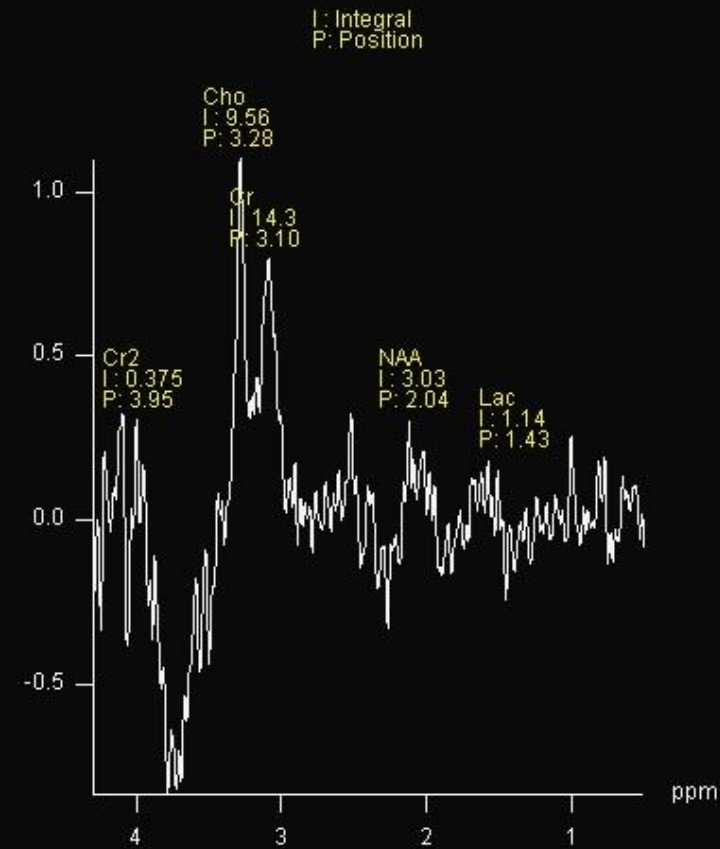
T1+C



DWI



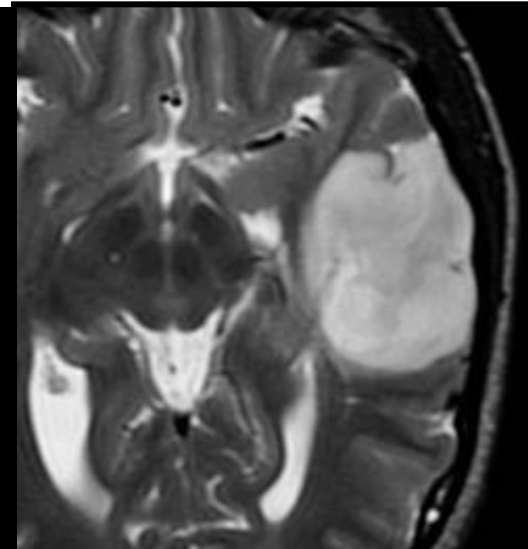
本題有兩張投影片，第二張



ANS : Oligodendroglioma

Oligodendroglioma

- 10-15% of all gliomas
- WHO II
- Longstanding seizure
- Partially Ca^{++} subcortical/cortical mass in **middle-aged** adult
 - Peak incidence 4th and 5th decades
- Majority supratentorial (85%), most common site is frontal lobe; may involve temporal, parietal or occipital lobes
 - 70 - 90% calcification, 20% cystic
 - T2WI / FLAIR: hyperintense
 - 50% Heterogeneous enhancement
 - DWI: No diffusion restriction is typical
 - MRS: Elevated Cho, decreased NAA



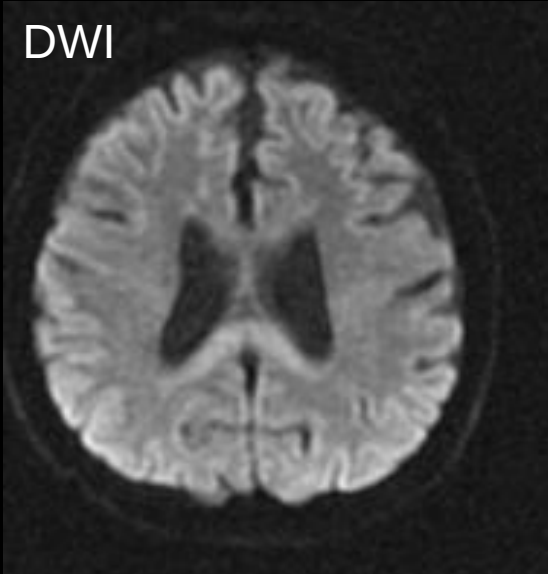
DDx:

1. Cortically-based tumor
 1. [Oligodendroglioma](#)
 2. [DNET](#): Well-demarcated, wedge-shaped bubbly intracortical mass in young patient
 3. [Ganglioglioma](#): partially cystic, enhancing, cortically based mass in child/young adult with temporal lobe epilepsy
 4. [PXA](#): Children/ young adults, Cyst and mural nodule typical
 5. [Astrocytoma](#): Usually involve white matter, cortex relatively spared
2. Metastasis from NPC
 - Rare, typically multiple lesions at gray-white junction
 - More frequency direct intracranial invasion
3. Radiation Necrosis.
 - Oligodendrocytes and white matter damage
 - White matter high signal
 - Typically low choline, creatine, and NAA

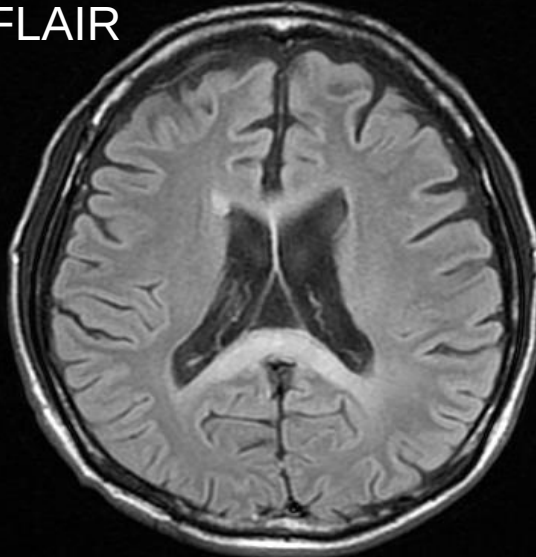
Q04

48/M with Hx of alcohol liver disease was sent to our ED due to irritable status

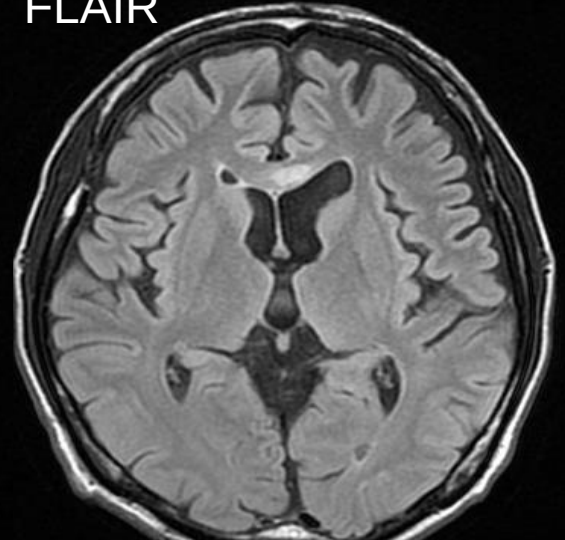
DWI



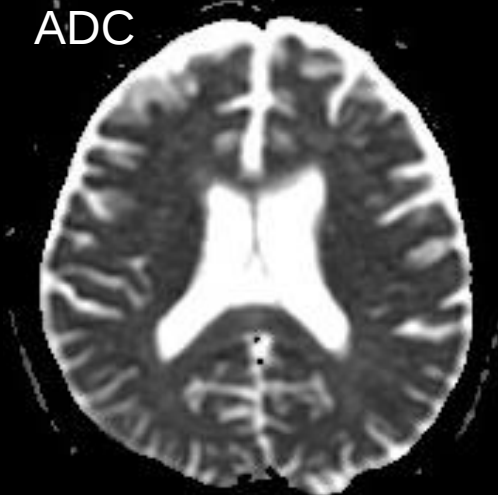
FLAIR



FLAIR



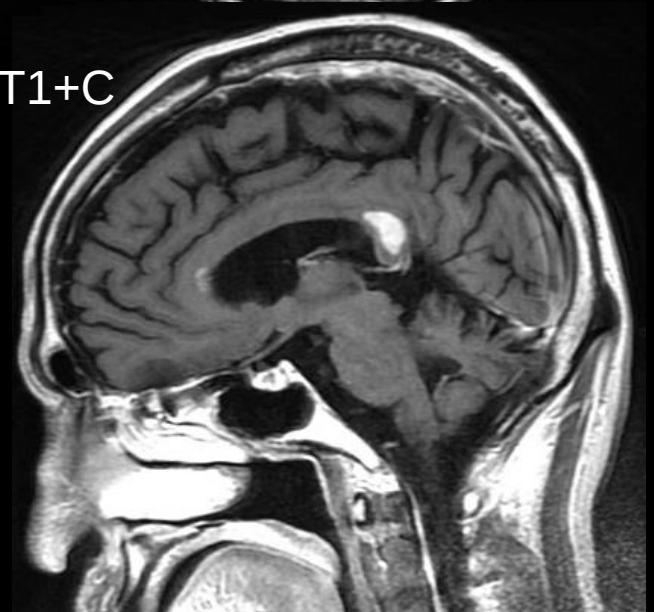
ADC



T1



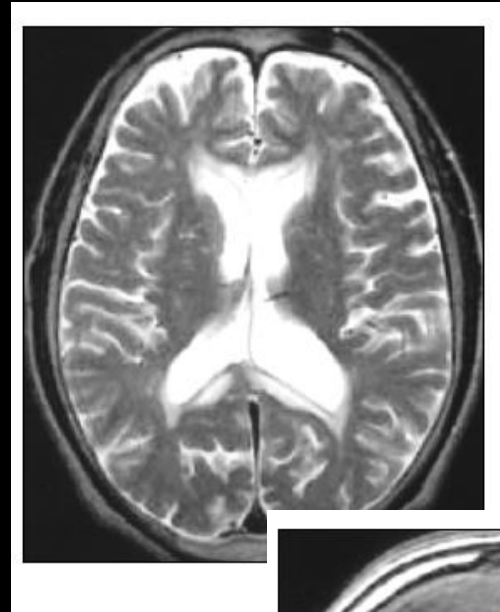
T1+C



ANS : Marchiafava-Bignami
disease

Marchiafava-Bignami disease

- Most in **chronic alcoholism** and malnutrition,
- Middle-aged to elderly male
- Clinical presentation: motor or cognitive disturbance , a hemispheric disconnection syndrome and/ or seizures.
- Pathology:
 - Deficiency in vitamin B complex
 - **Results in necrosis and demyelination of the corpus callosum**: body → genu → splenium



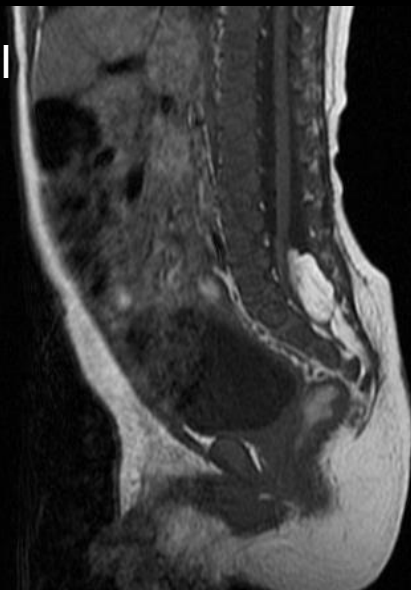
DDx:

1. Multiple sclerosis with callosal demyelination : occurs in a different clinical setting
2. Diffuse axonal injury (DAI) to the corpus callosum : preceding trauma
3. Callosal infarction : rare

Q05

2 m/o male infant, low back mass noted since birth

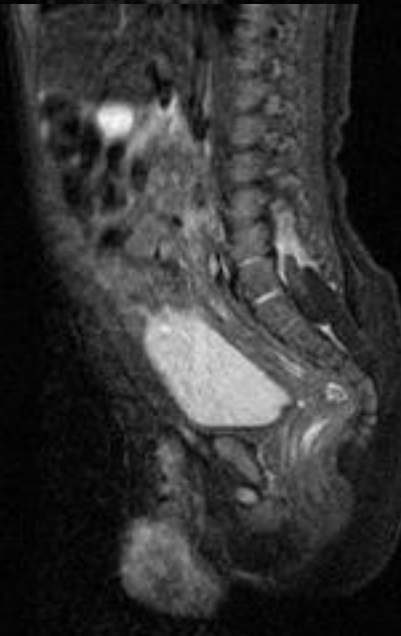
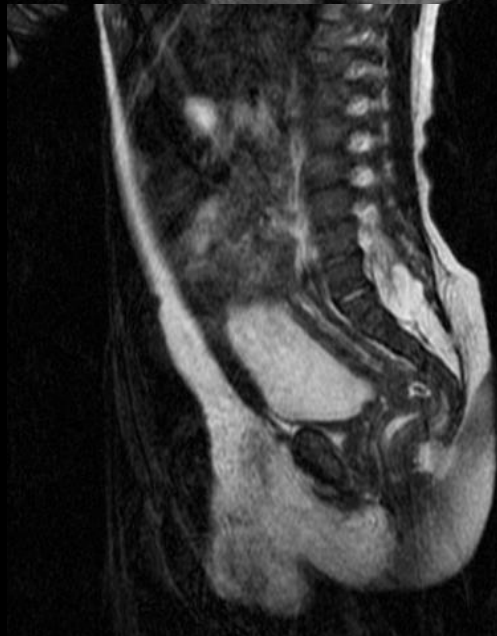
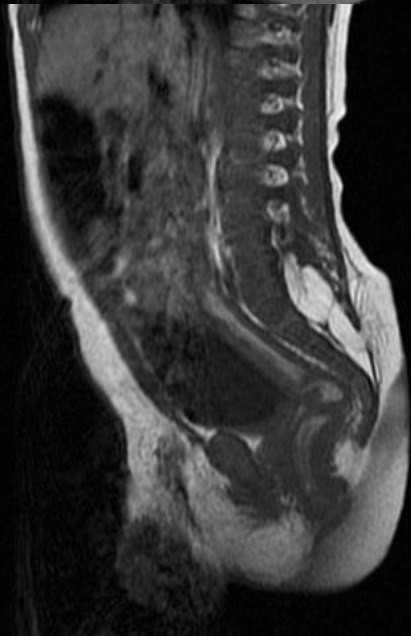
T2WI



T1WI



STIR



ANS : Lipomeningocoele with
tethered spinal cord

備註：只寫 Lipomeningocoele 或 tethered spinal cord
各得一分

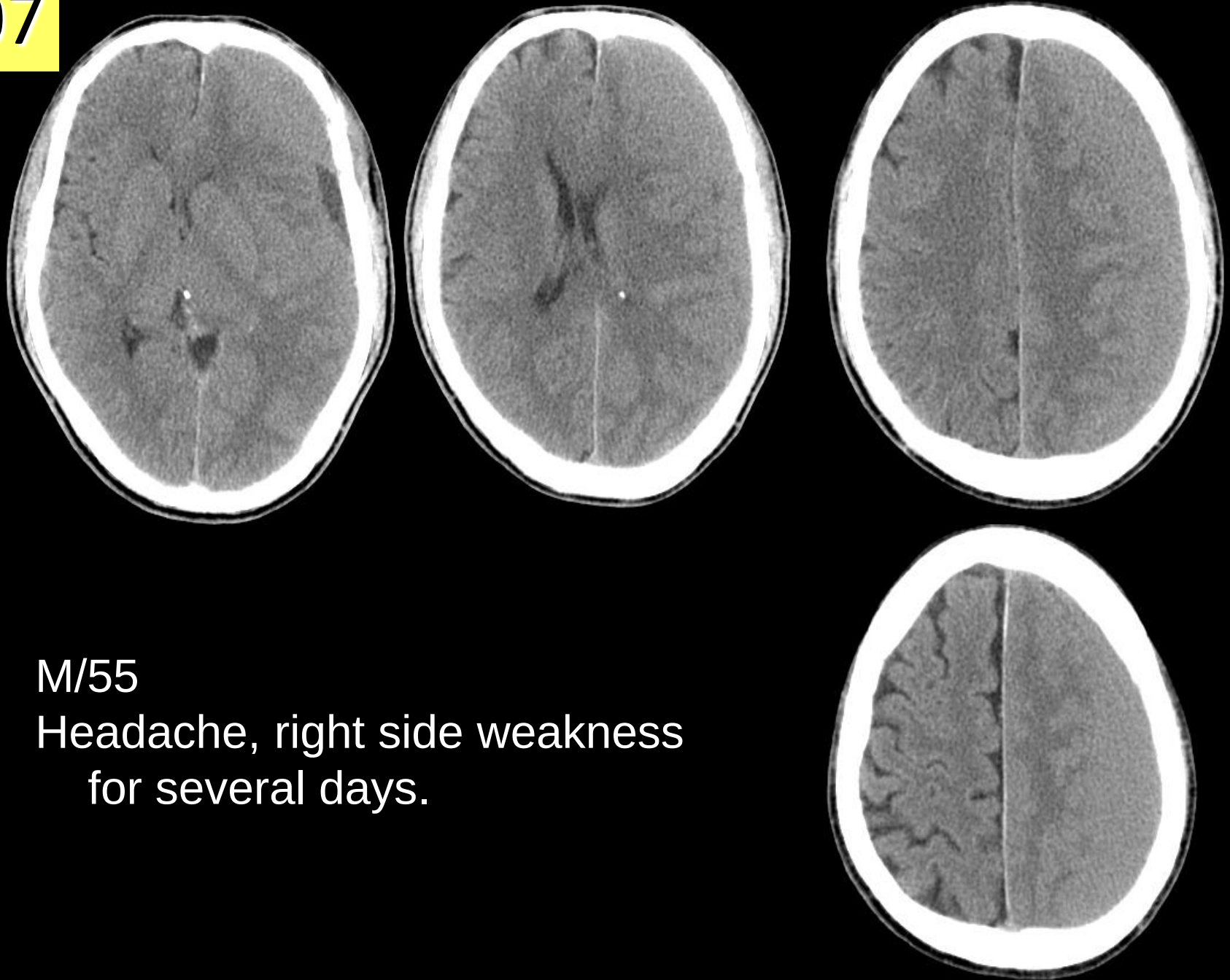
Q06

37y/o, headache for 3 days



ANS : Sinus thrombosis
(in right transverse sinus)

Q07



M/55

Headache, right side weakness
for several days.

ANS : Isodense chronic subdural
hematoma

Q08



M/54 severe right eye pain,
blindness after trauma

ANS : Right eyeball ruptured

Q09



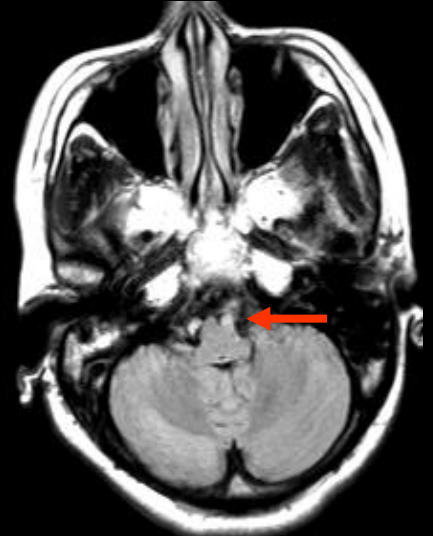
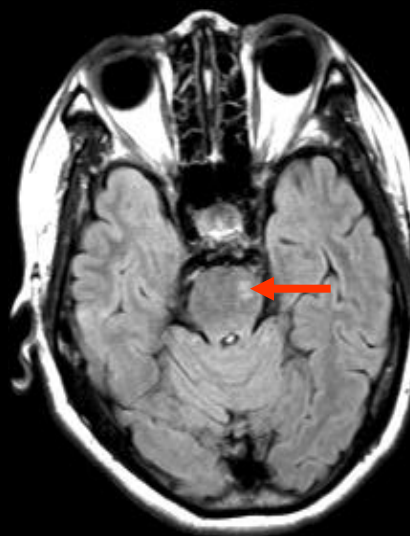
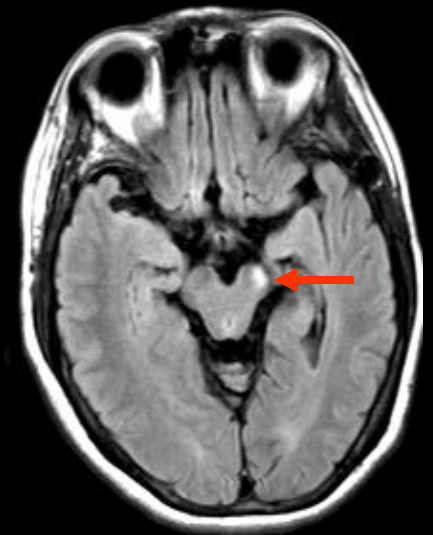
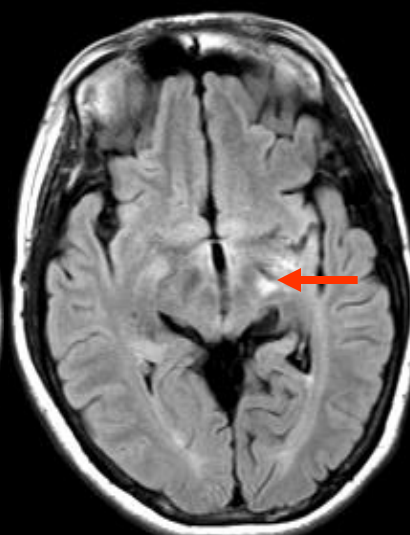
F/49

99/02/06 CT



99/09/14

MRI

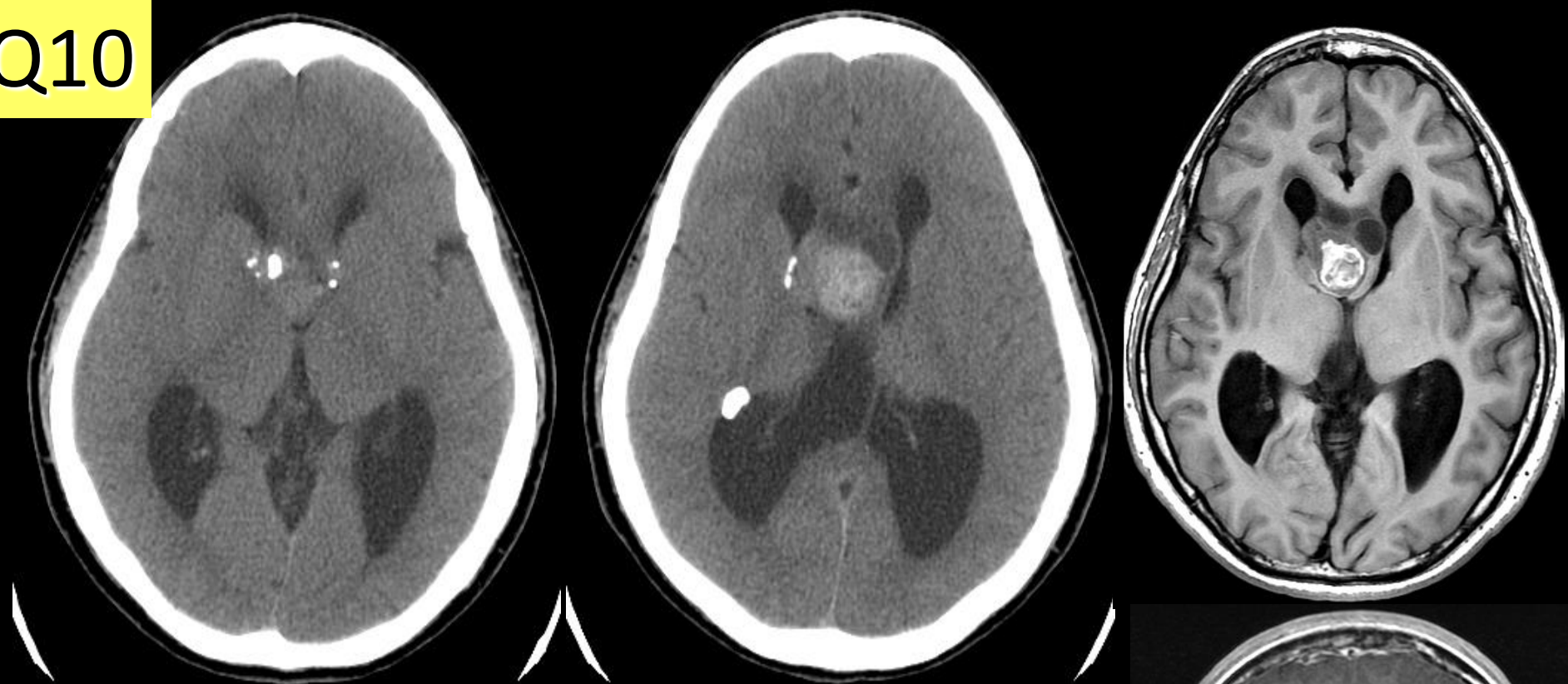


In 99/09/14 MRI

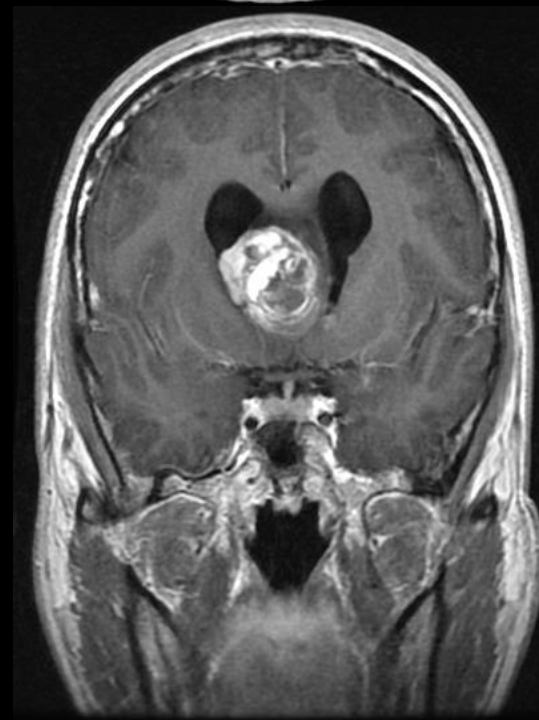
What is the red arrows point?

ANS : Wallerian degeneration
along the corticospinal tract

Q10



M/29
Epilepsy, headache

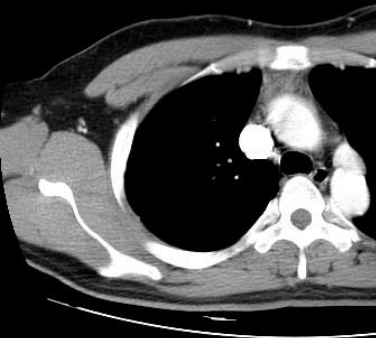


ANS : Tuberous sclerosis with
giant cell astrocytoma

CH

Q11

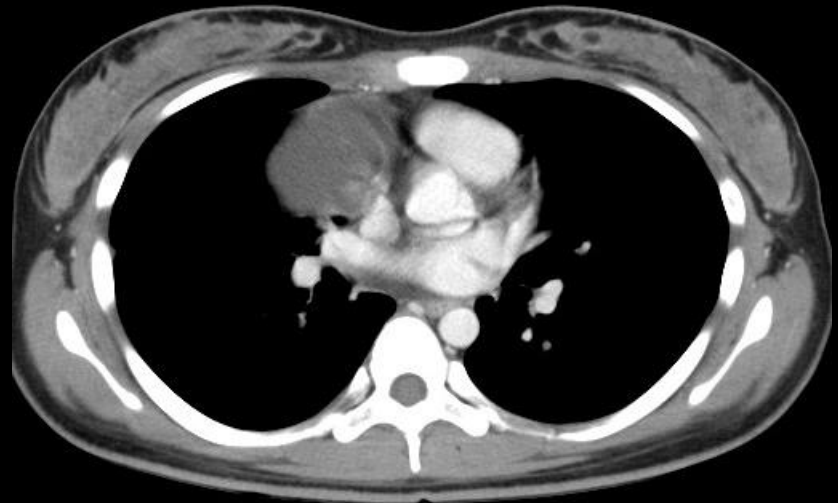
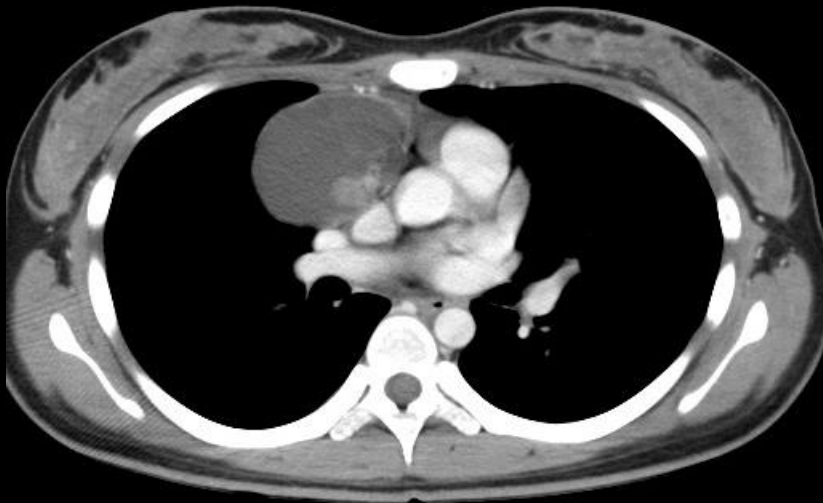
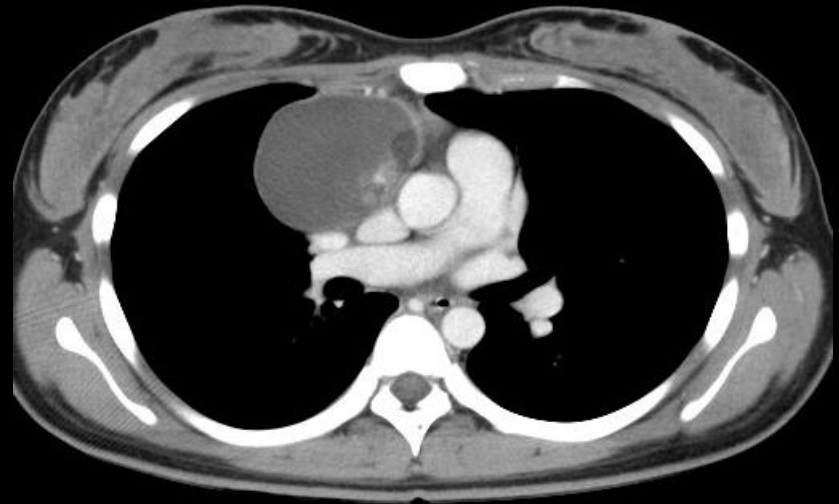
Male, 27y/o, elevated blood pressure for 9 years



ANS : Pseudocoarctation of
aorta

Q12

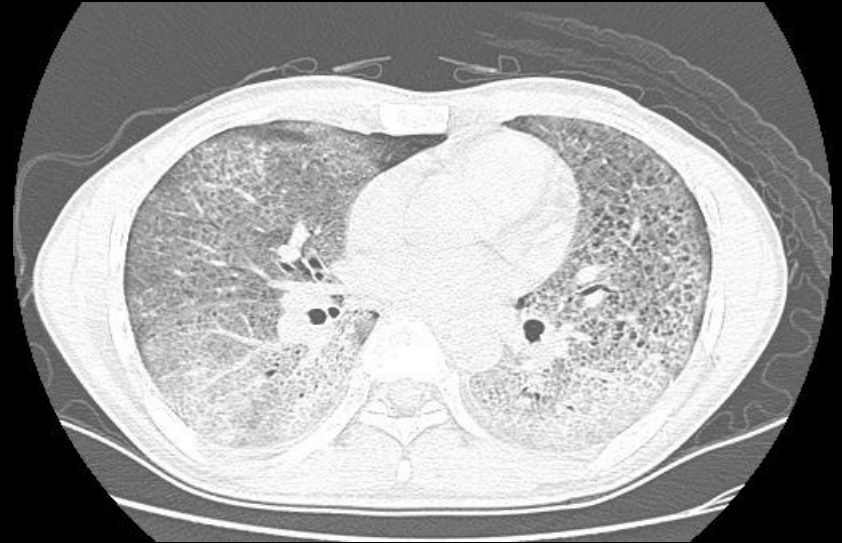
female, 16y/o, incidental finding at health examination.



ANS : Mature cystic teratoma

Q13

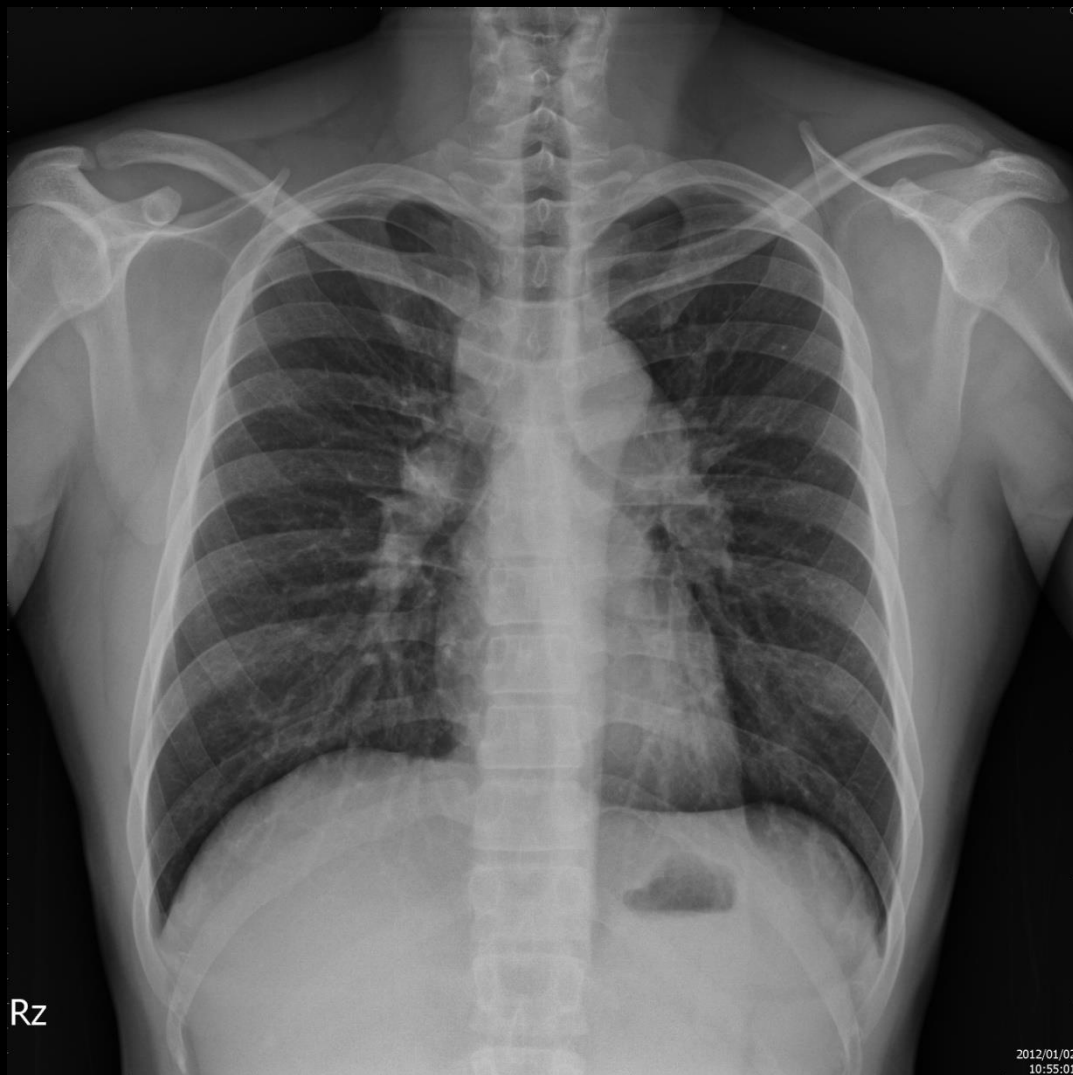
male, 45y/o, HIV (+)



ANS : Pneumocystis jiroveci
pneumonia

Q14

Male, 29y/o, asymptomatic



ANS : Sarcoidosis

GI

Q15

58 y/o male
palpable RLQ mass for months



ANS : Diagnosis:
**Appendical mucocele (mucinous
adenoma of appendix)**

Q16

48 y/o male
periumbilical pain for several days



ANS : **Diagnosis:**
TB intestine

Q17

19 y/o female
vomiting with coffee ground vomitus



ANS : **Diagnosis:**
Gastric duplication cyst

Q18

23 y/o female
epigastric pain and nausea for months



ANS : **Diagnosis:**
Ectopic pancreatic rest

Q19

52 y/o female
intermittent epigastric pain for 1 month



ANS : Diagnosis:

- (1) Islet cell tumor of pancreas (1分)**
- (2) blood supply from dorsal pancreatic artery (1分)**

Q20

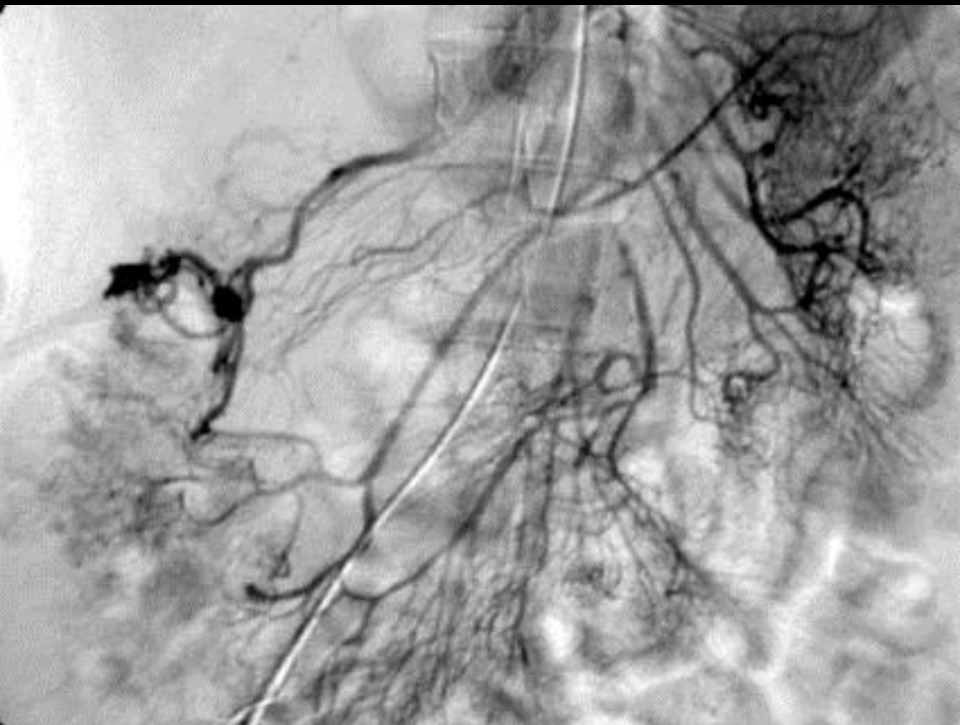
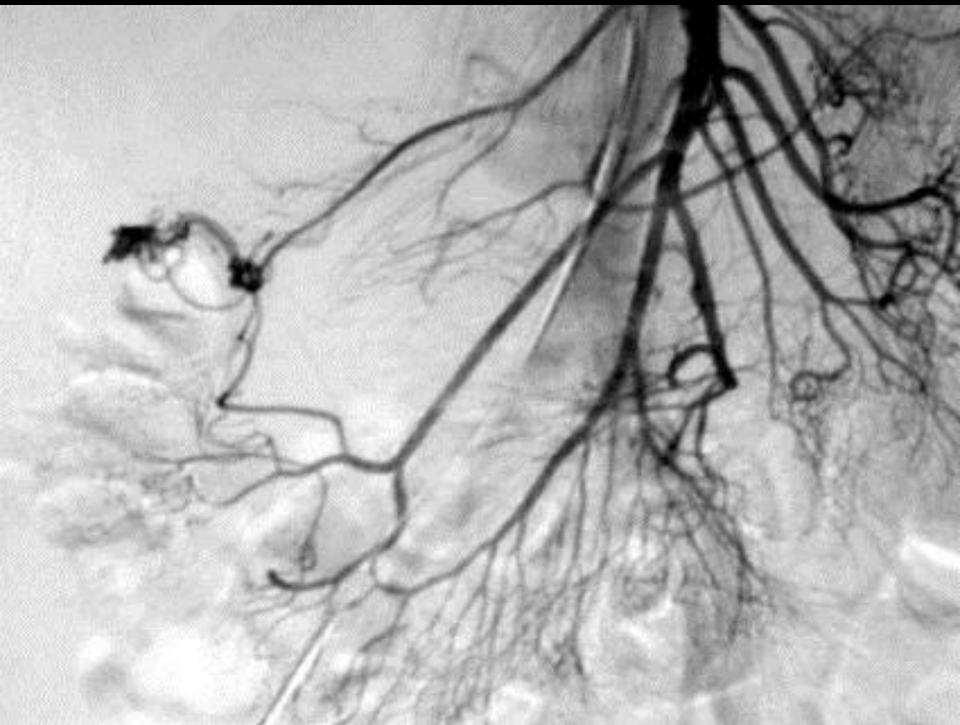


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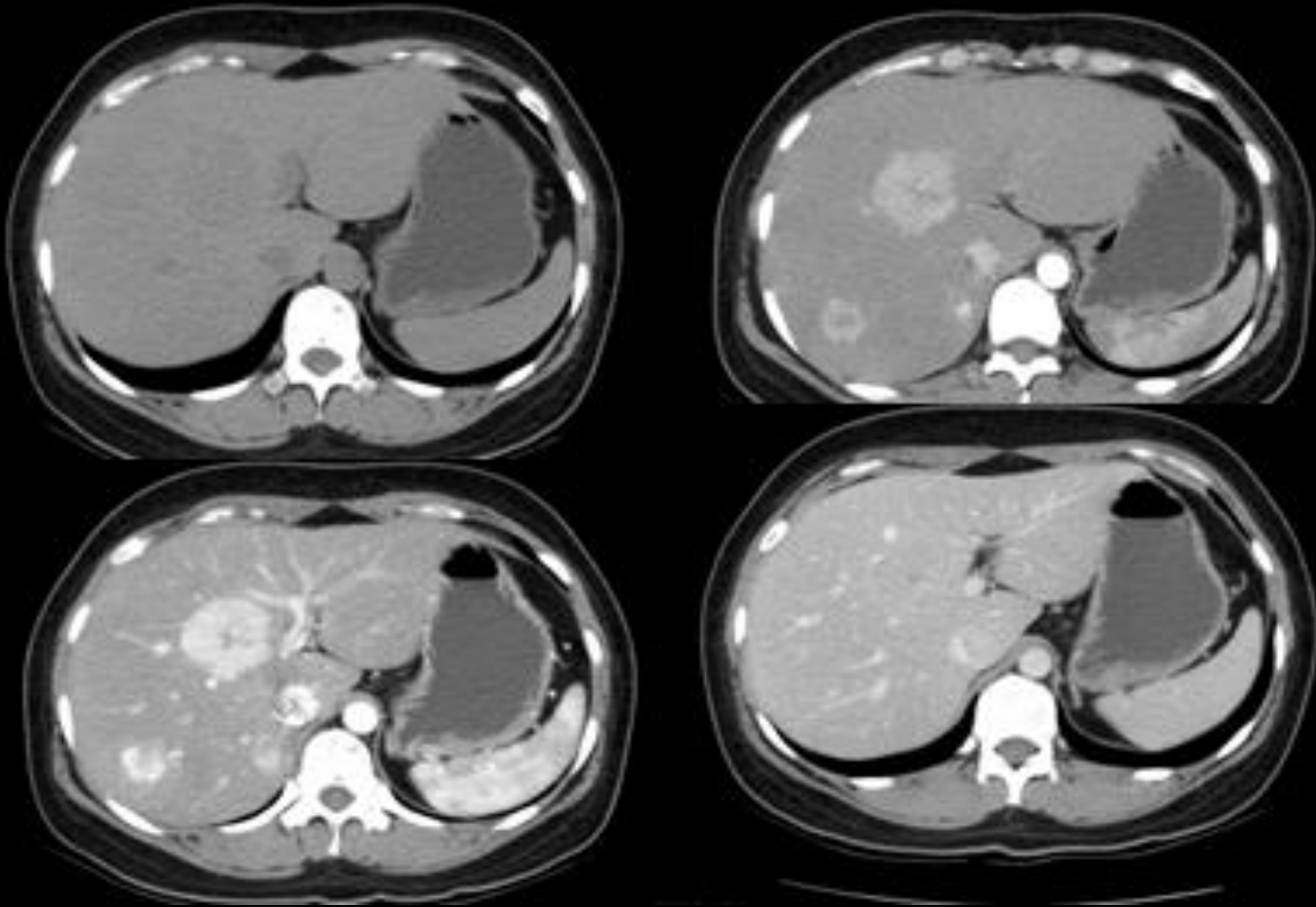
ANS : Phlebosclerotic colitis

Q21



ANS : angiodysplasia

Case :47 ,female 25 year-old



ANS : Focal nodular
hyperplasia

Q23

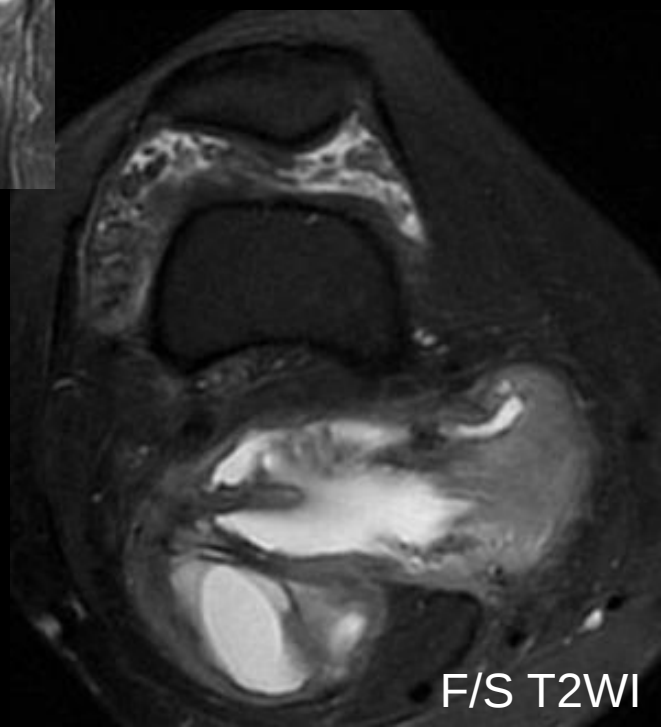
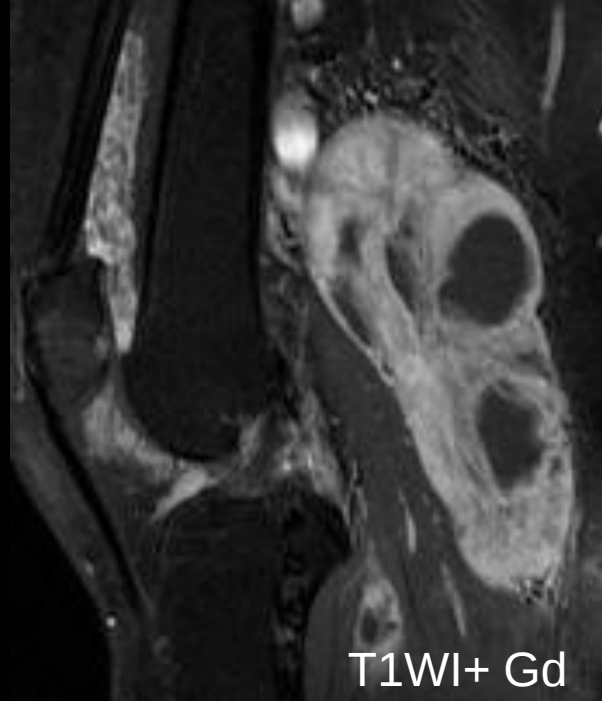
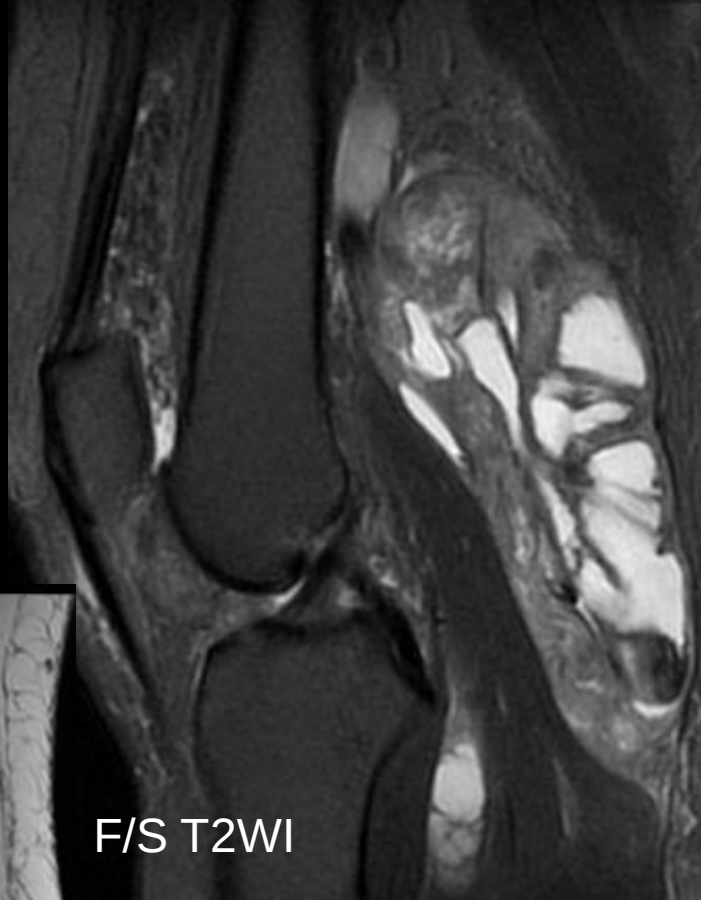
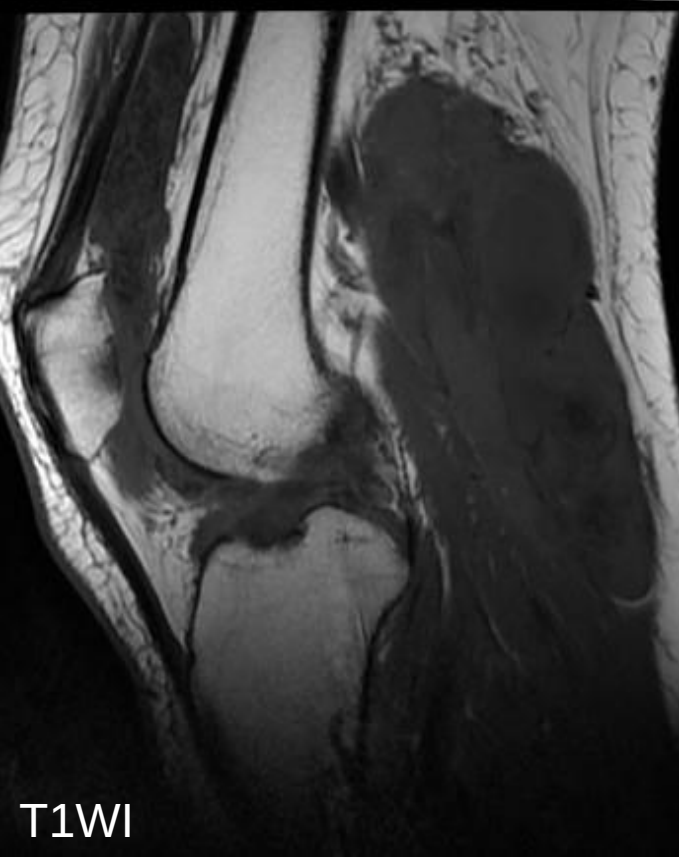
3 y/o boy



ANS : Osteopetrosis

Q24

CC: 45 y/o female,
palpable popliteal
mass for months



ANS : Pigmented villonodular
synovitis

Q25

5 y/o boy, coarse
face since birth



ANS : Mucopolysaccharidosis type I
(MPS, type I ; Hurler's syndrome)

Q26

45 y/o male, CC: wrist pain and foot pain for a long time and several palpable masses



ANS : Gouty arthritis

Q27

27y/o male, CC: knee pain for
several weeks



ANS : **Pellegrini Stieda disease**

Q28

20 y/o male, cc: wrist pain after
traffic accident



ANS : Lunate dislocation

Q29

60 y/o male, cc: right hip pain and palpable mass at right inguinal area



ANS : Chondrosarcoma

Q30

18 y/o, cc: knee
pain for
several
weeks



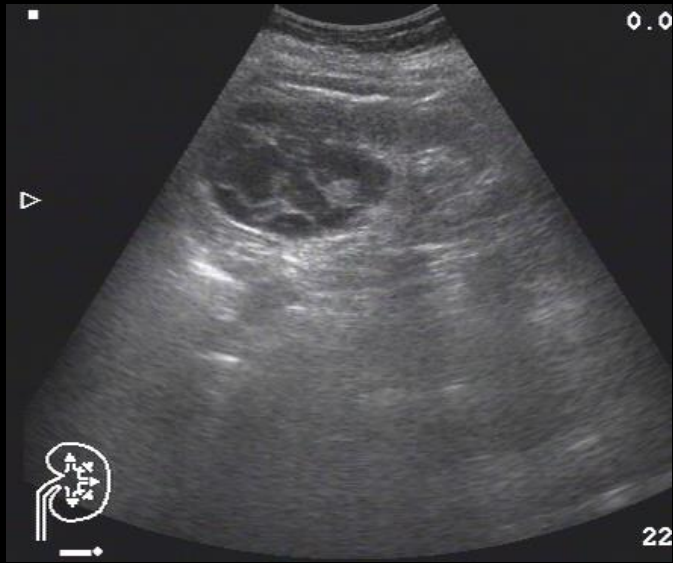
ANS :

- (1) Lateral meniscus tear (1分)
- (2) parameniscal cyst (1分)

GU

Q31

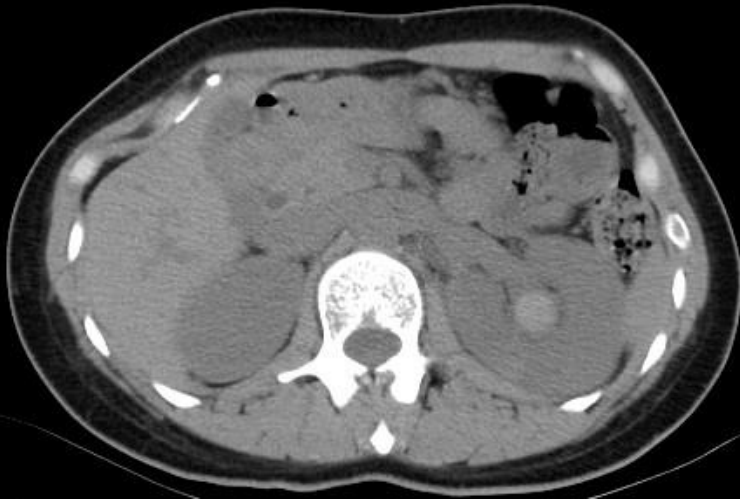
56 y/o female
sonogram showed left renal tumor



**ANS : Diagnosis:
Multiloculated cystic
nephroma**

Q32

38 y/o female
gross hematuria for 2 days

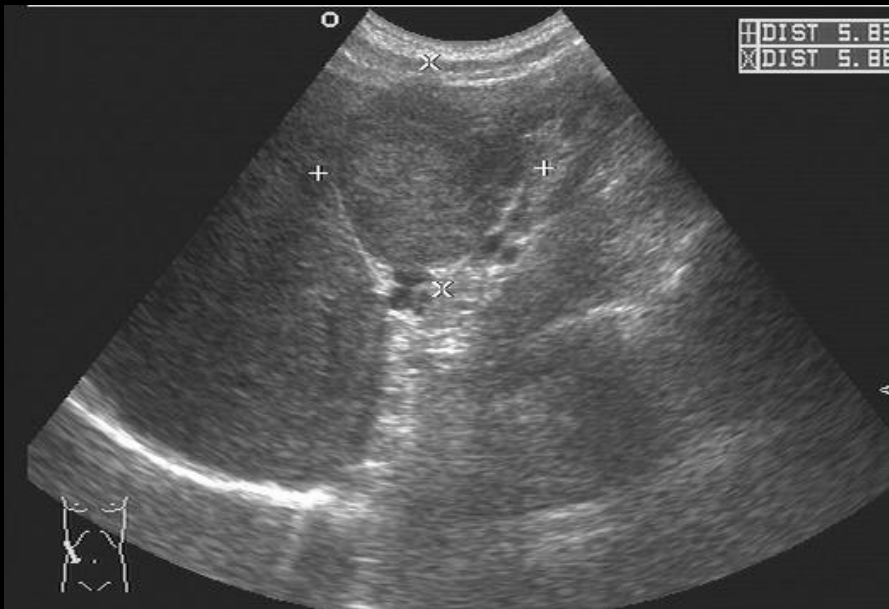


**ANS : Diagnosis:
Renal arteriovenous
malformation (AVM)**

Q33

69 y/o male

Right renal tumor noted in health examination

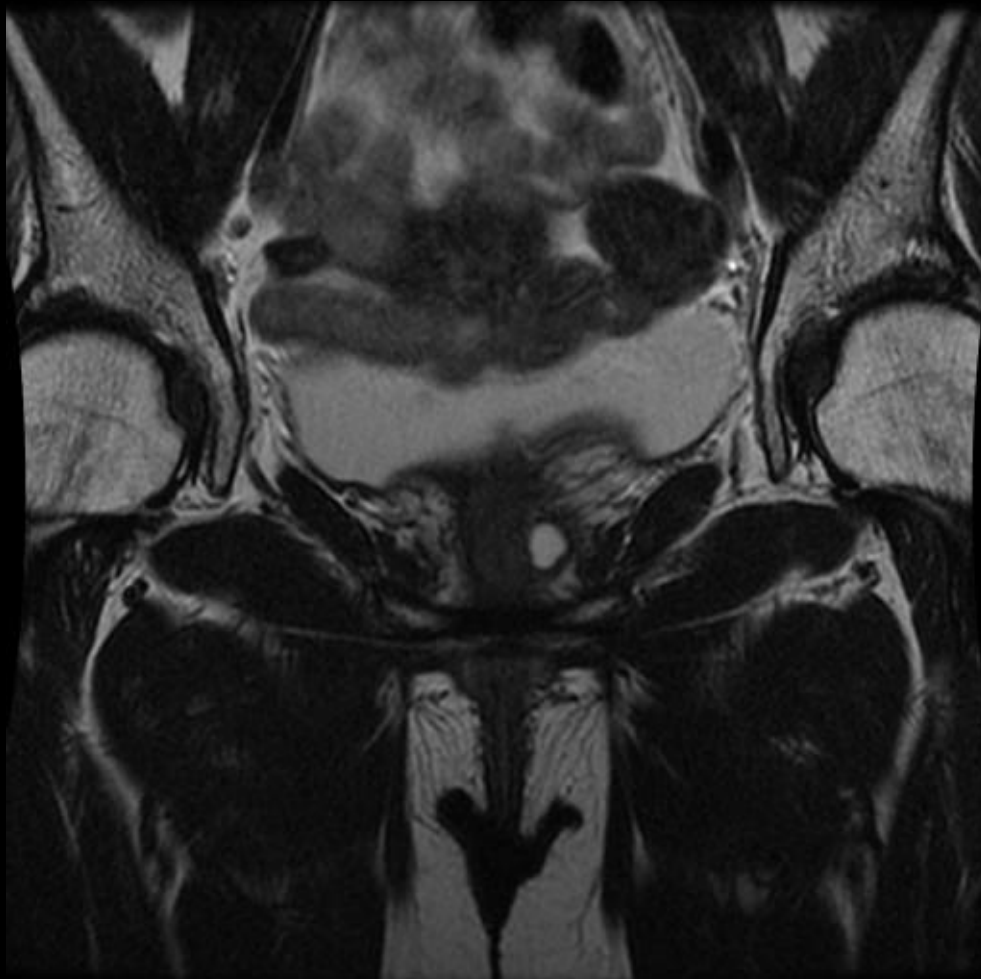


ANS : Diagnosis:
Metanephric adenoma of right kidney

Q34

dragging sensation

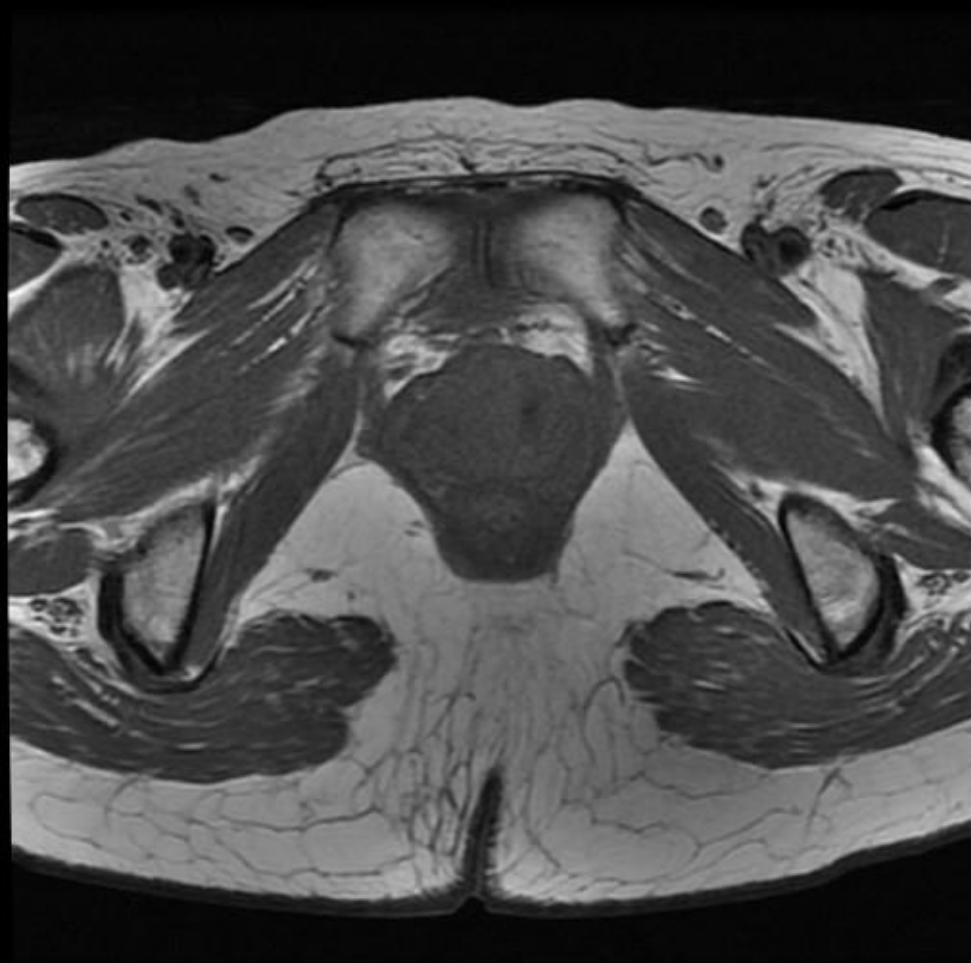
T2WI



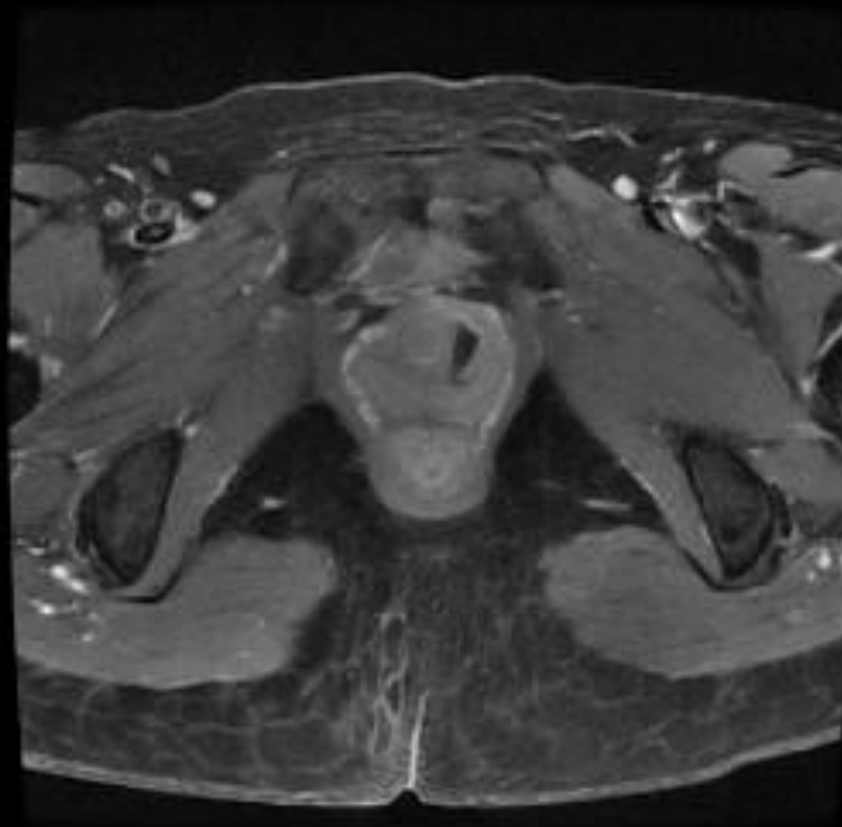
T2WI + F/S



T1WI



T1WI + Gd + F/S

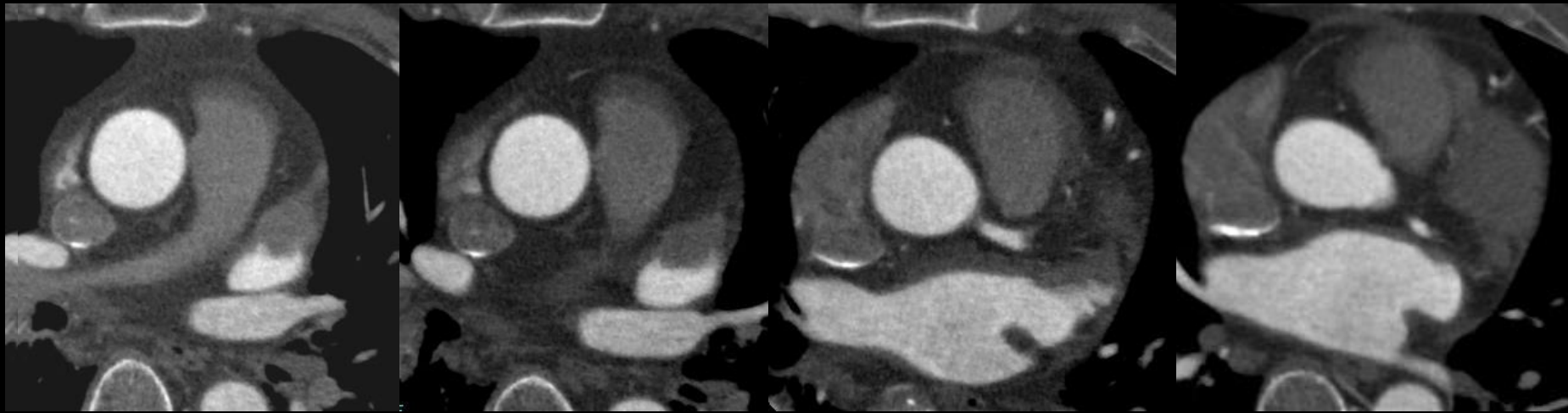


ANS : periurethral cyst

CV

Q35

55 y/o male, chest tightness for months



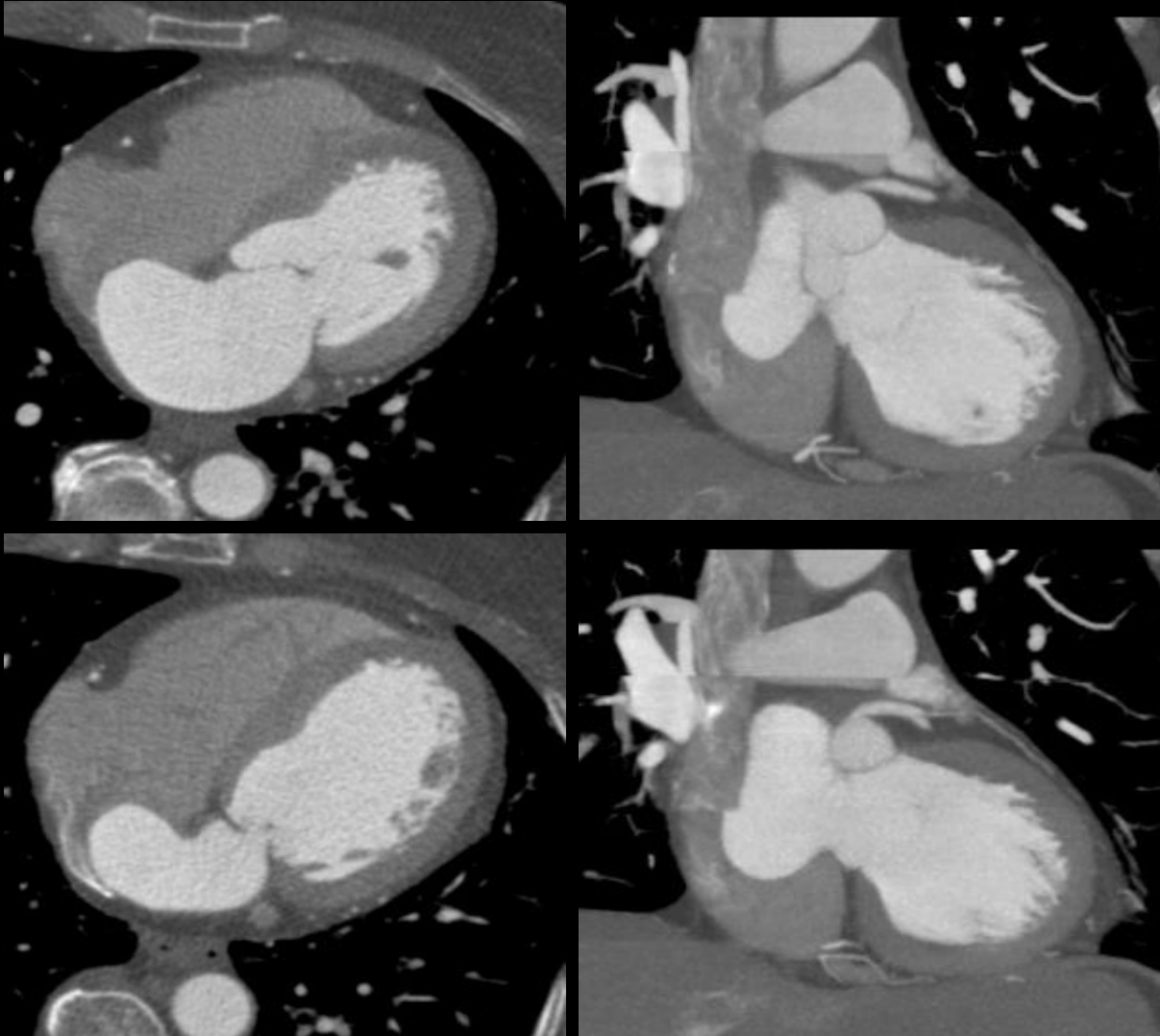
Coronary CTA

ANS : Left atrial appendage thrombus
Atrial fibrillation

Q36

61 y/o female

What is the abnormality between right atrium and left atrium ?

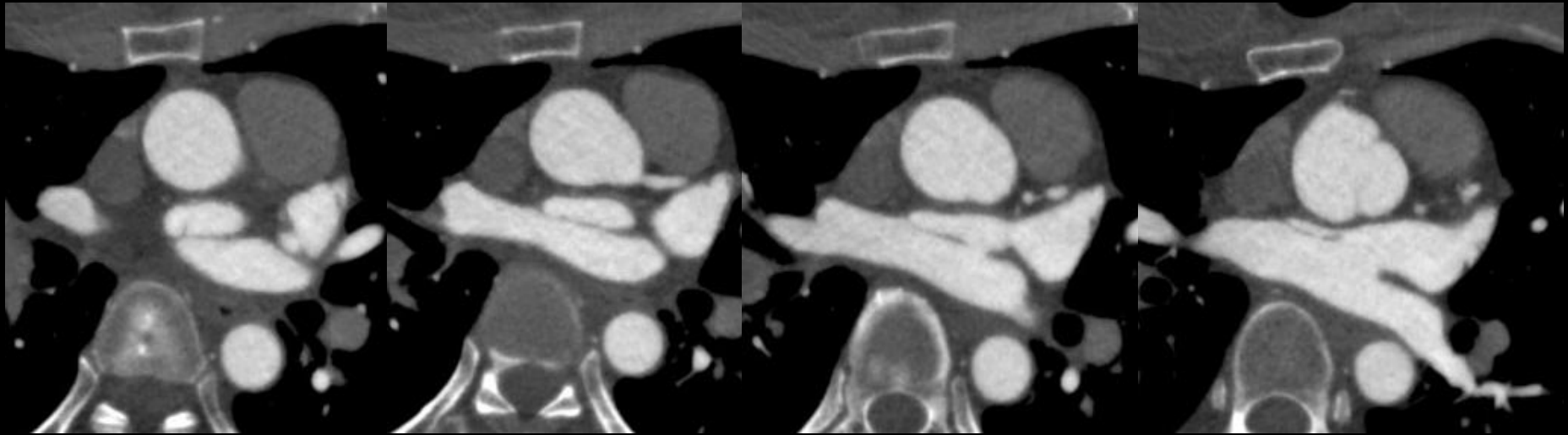


ANS : Atrial septal aneurysm

Q37

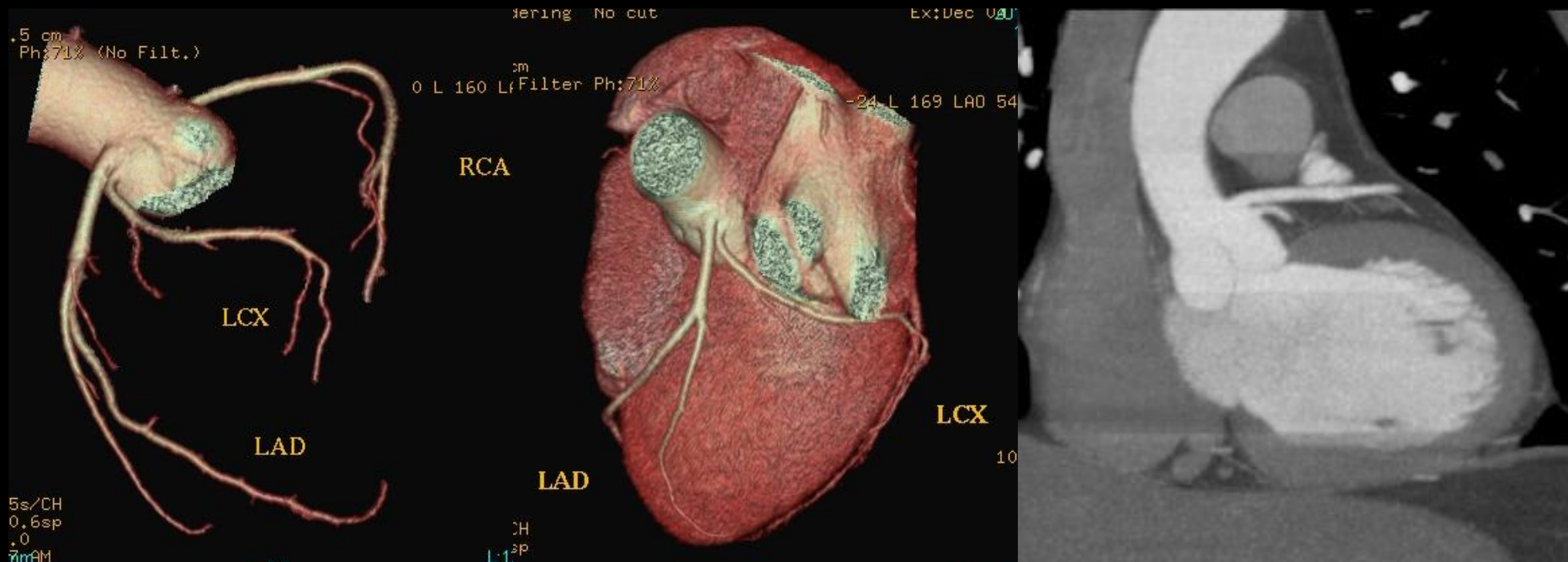
44 y/o female

What is the congenital abnormality in left atrium ?



ANS : Cor triatriatum

What is the congenital abnormality ?



ANS : Separate ostia of left anterior descending coronary artery (LAD) and left circumflex coronary artery (LCX) in left aortic sinus of Valsalva

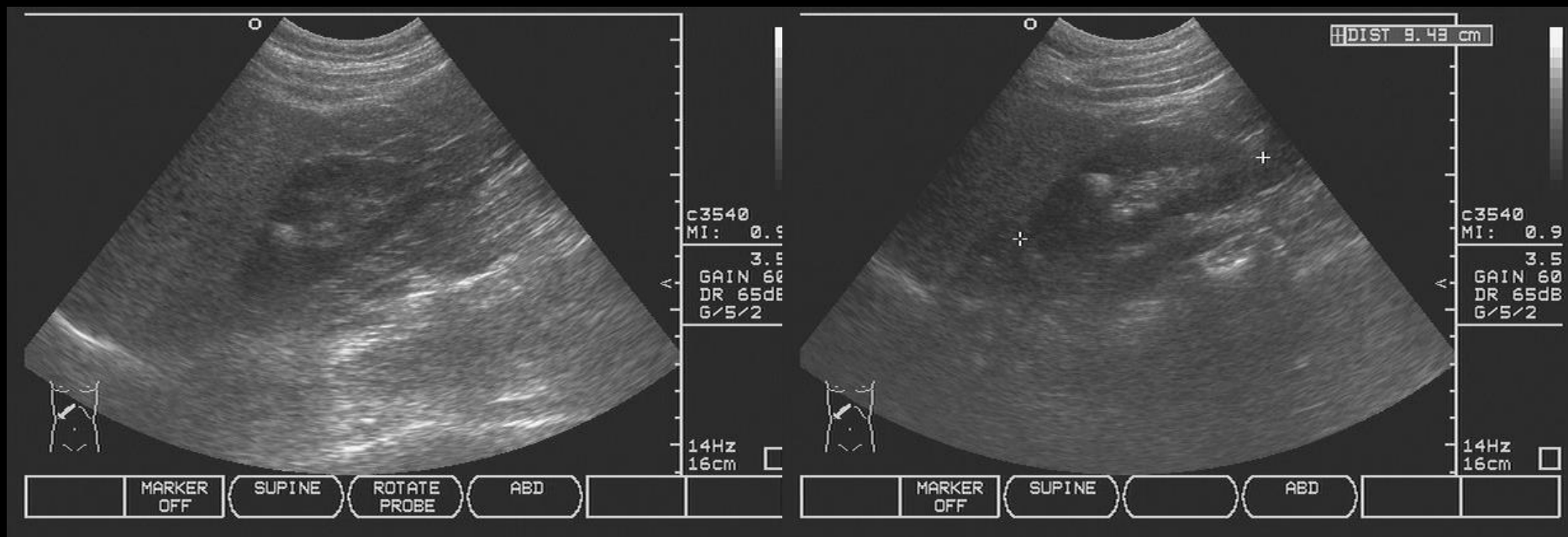
SN

Q39

性別：Female

年齡：68 y/o

主訴：Annual follow-up post breast cancer operation



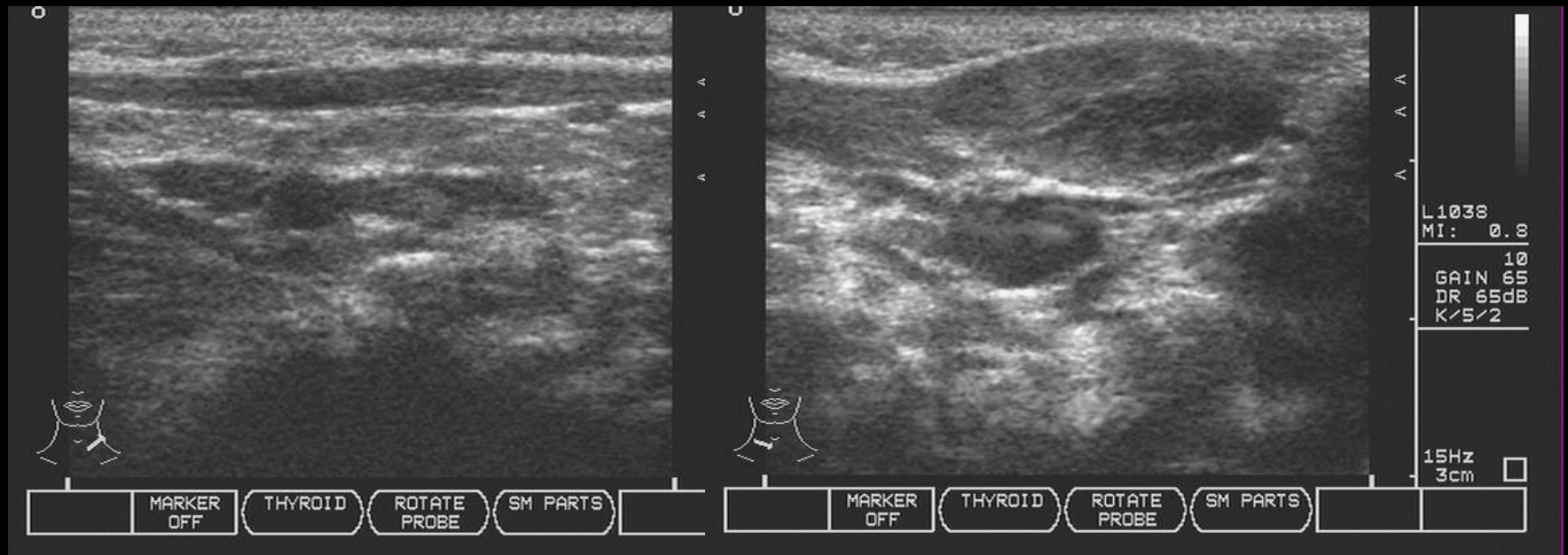
ANS : Calyceal diverticulum with
milk of calcium in the upper pole
of right kidney

Q40

性別：Female

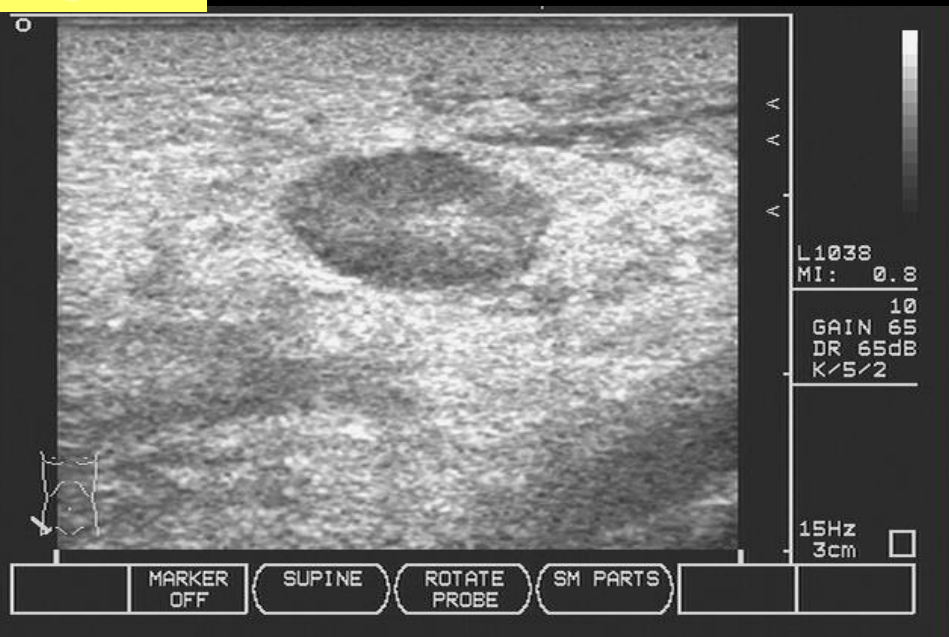
年齡：5 m/o

主訴：Right neck mass since birth



ANS : Right muscular torticollis

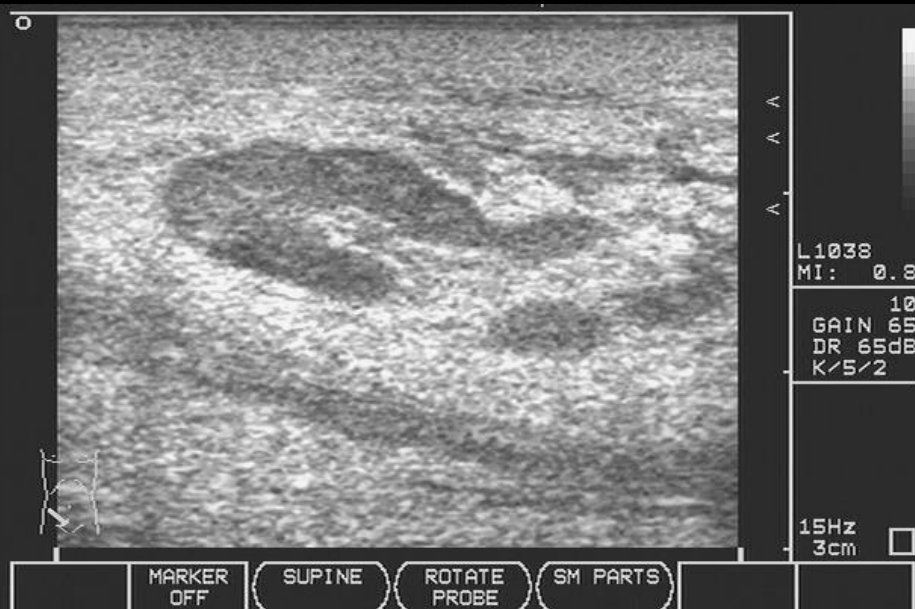
Q41



性別：Female

年齡：31 y/o

主訴：Right inguinal painful swelling



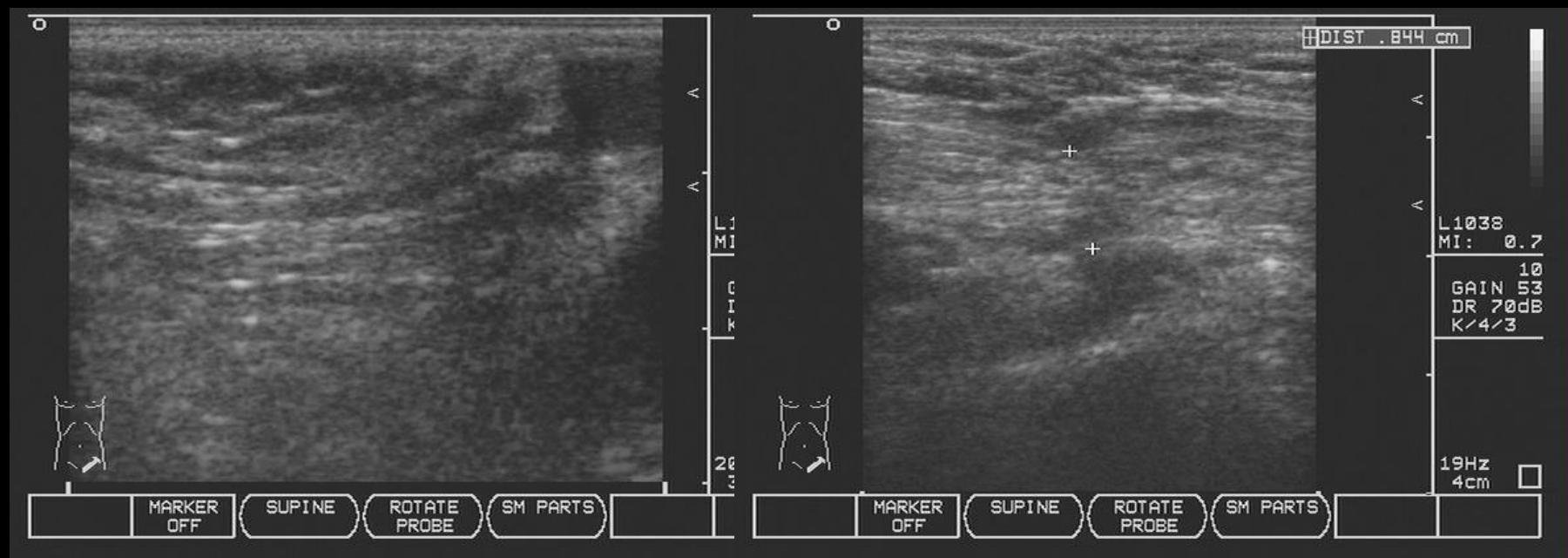
**ANS : Cellulitis with minimal abscess
and Multiple lymphadenopathy**

Q42

性別：Male

年齡：5 y/o

主訴：Left inguinal mass

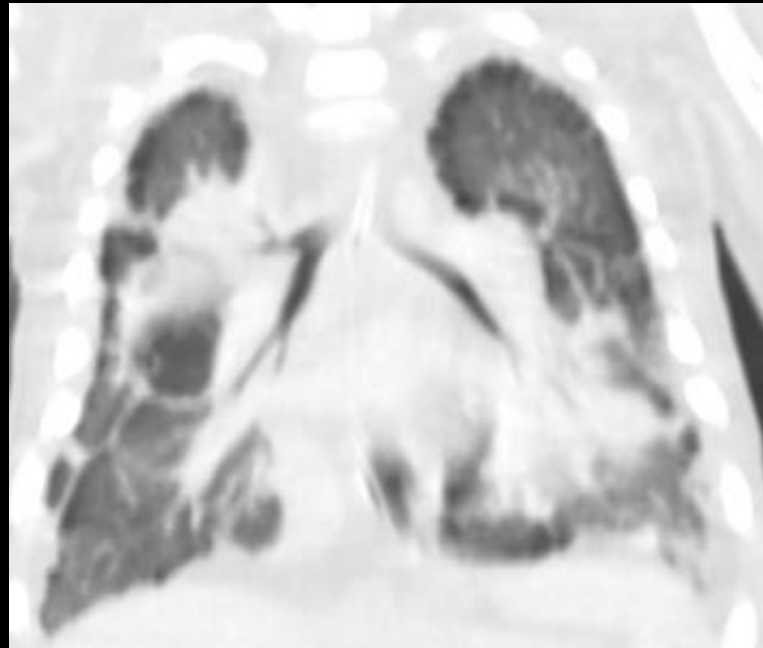
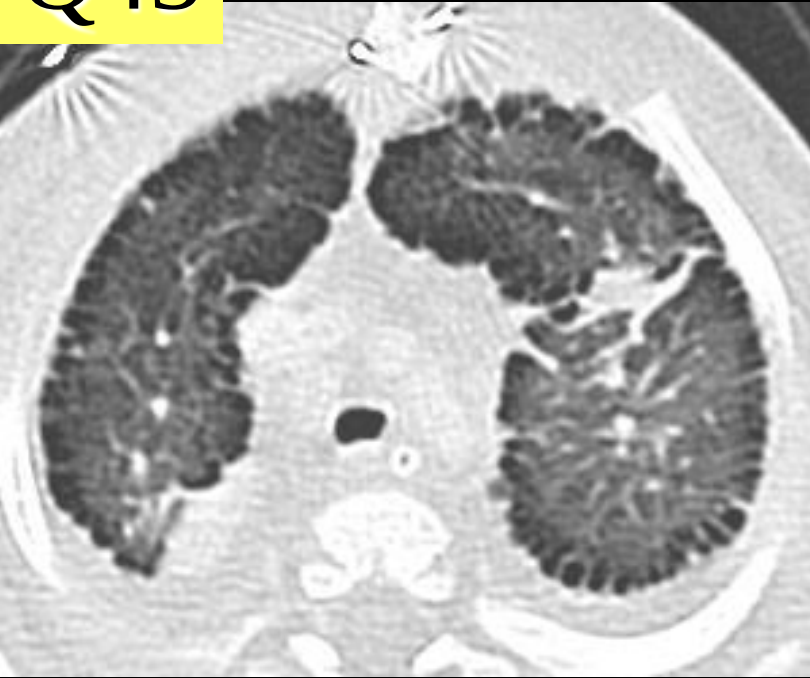


ANS : Left mesentery-content
inguinal herniation sac

PE

Q43

male, 6 months old, dyspnea



ANS : CCAM (congenital cystic adenomatoid malformation), type II

Q44

female, 13 yrs old,
epigastric pain

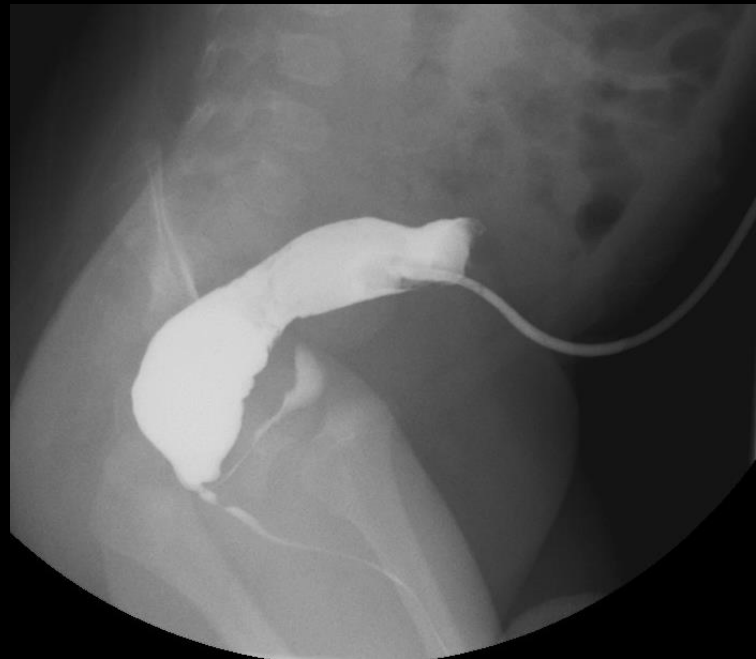




ANS : Peutz–Jeghers syndrome

Q45

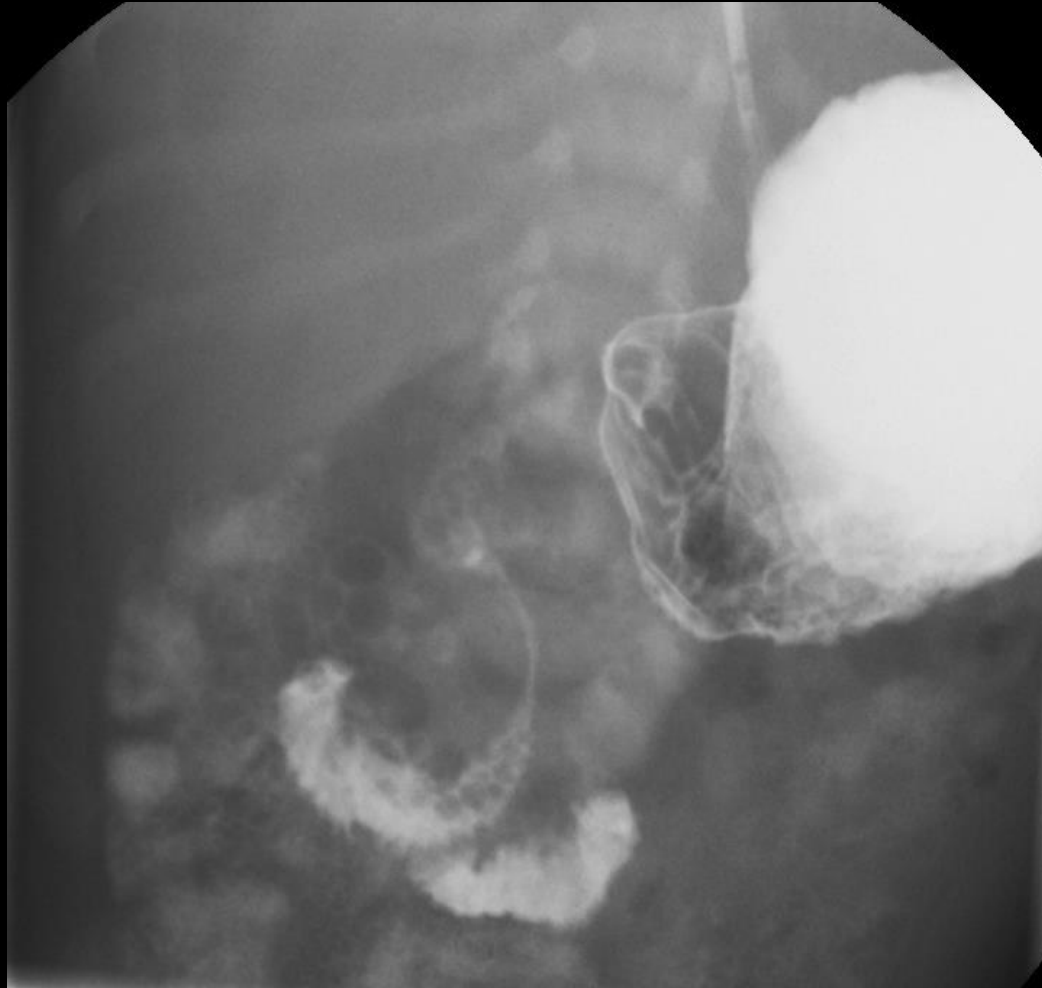
male, 1 yrs old



ANS : imperforate anus with
rectourethral fistula

Q46

male, 1 yrs old, vomiting



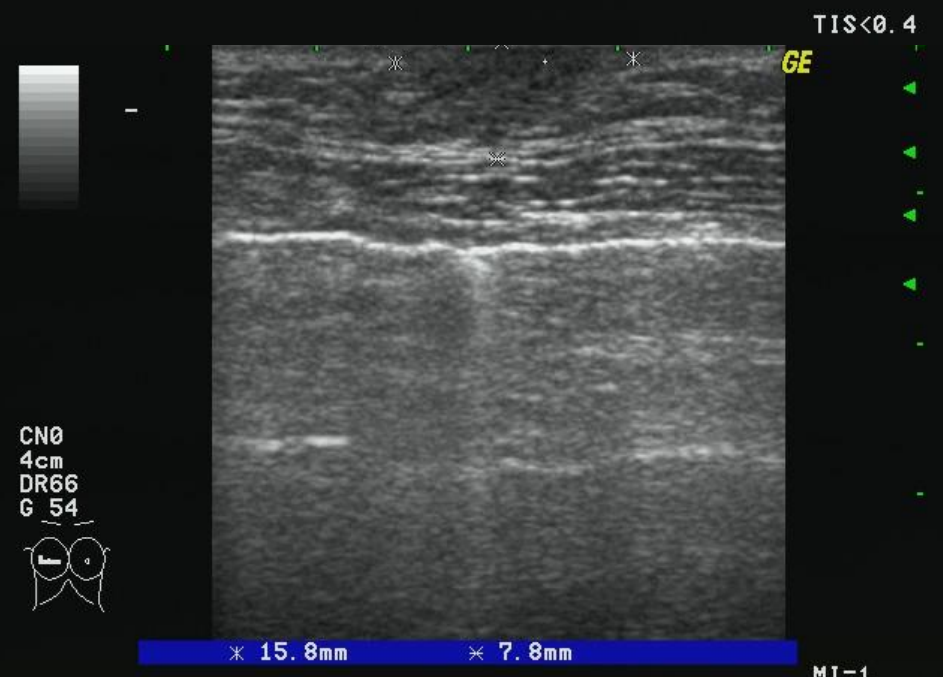
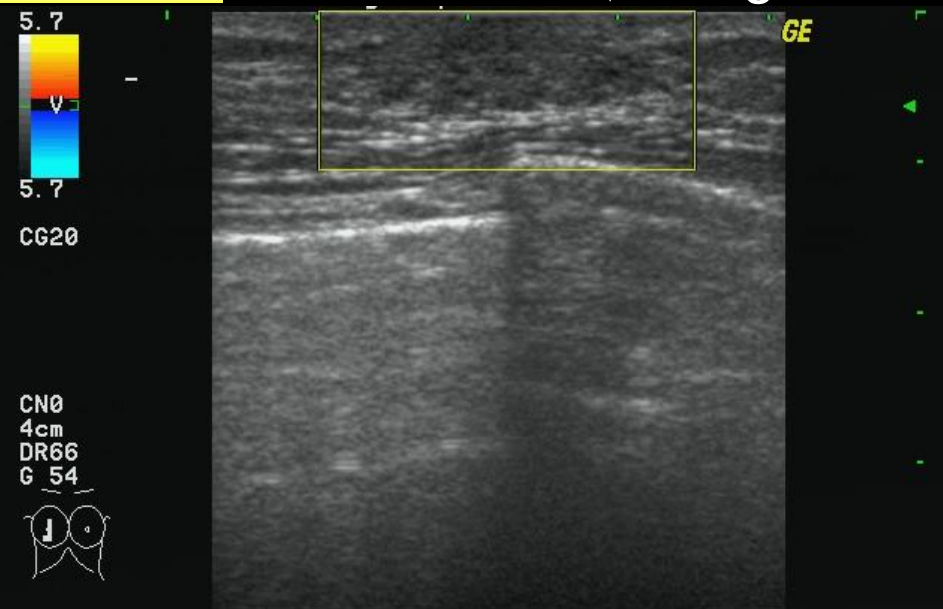
ANS : duodenal malrotation

BR

Q47

性別：Male 年齡：69 y/o

主訴：Right breast mass for 10 days



ANS : Right gynecomastia

Q48

性別：Female 年齡：39 y/o

主訴：Health examination

RMLO

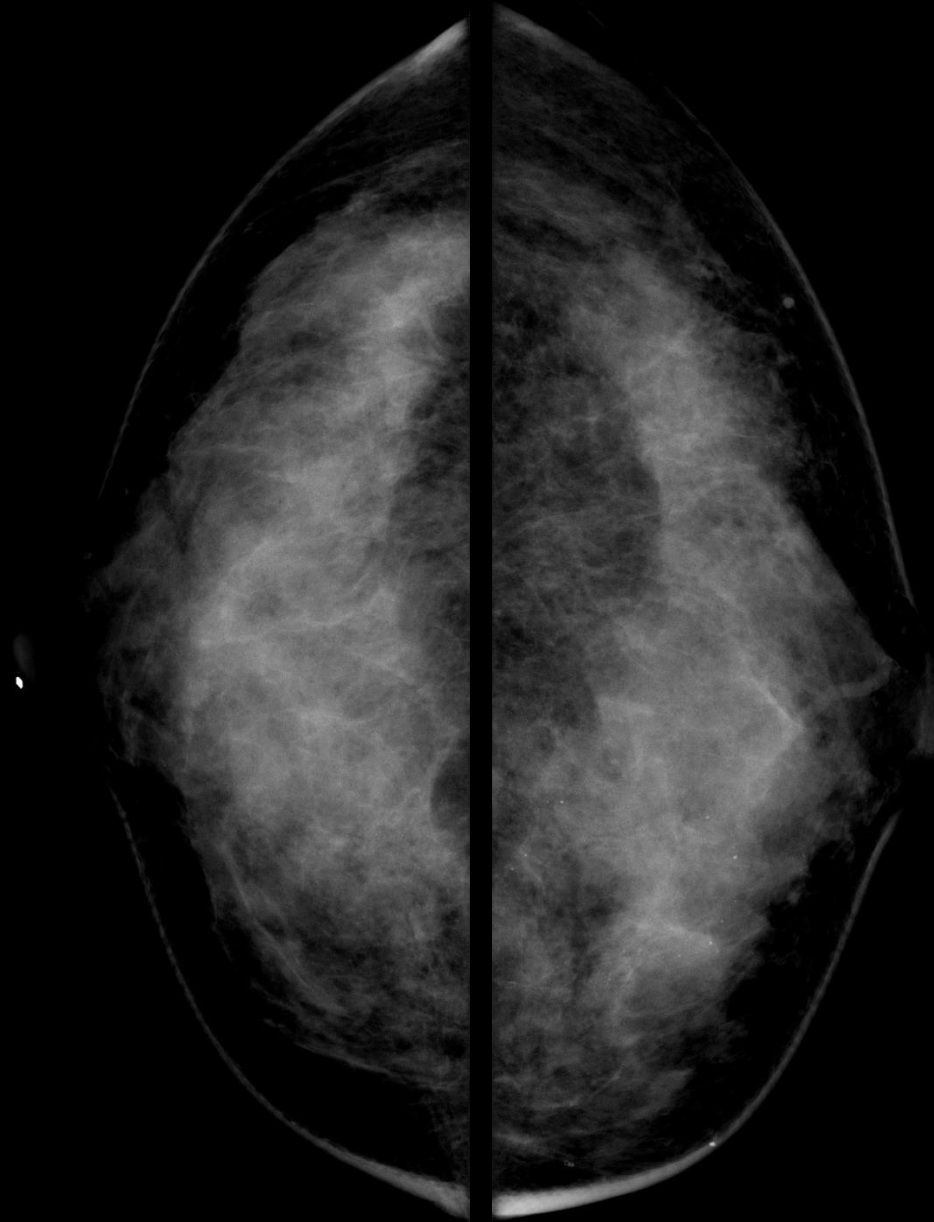


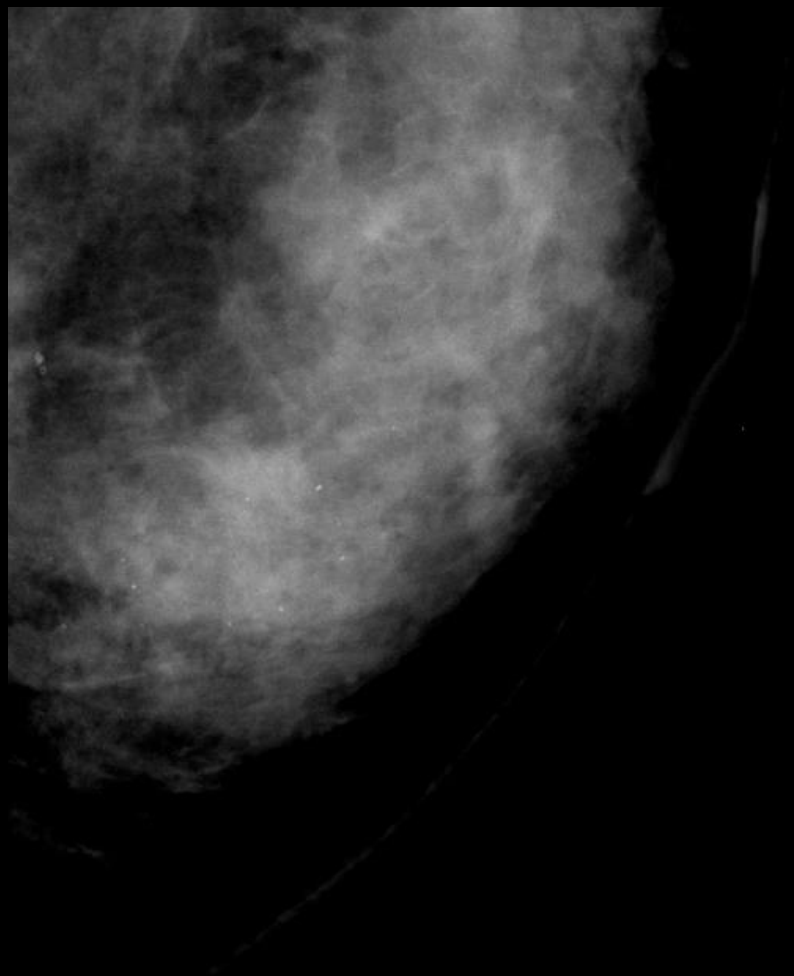
LMLO



RCC

LCC





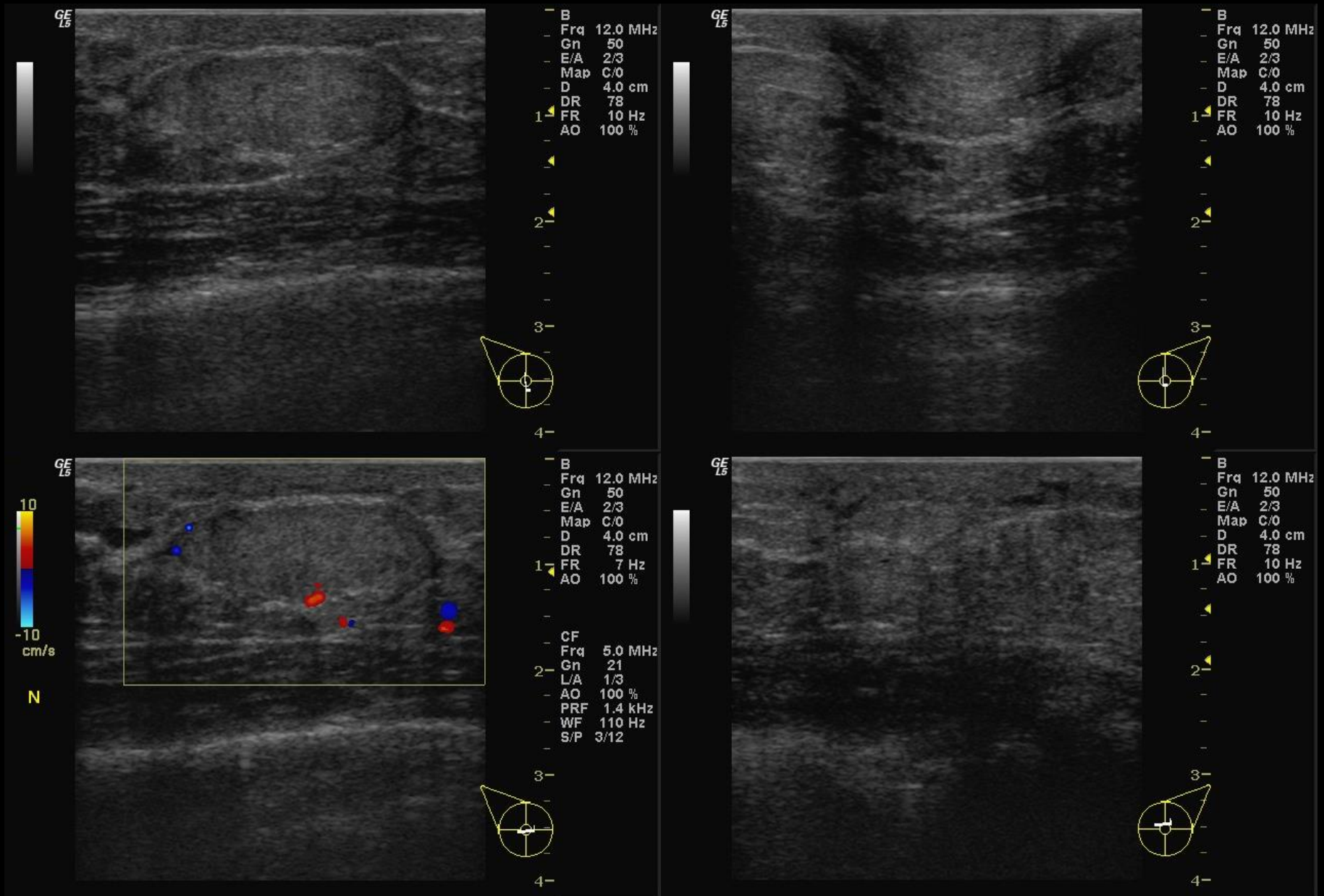
LLIQ magnification view

ANS : Segmental-distributed
amorphous microcalcification in
lower inner quadrant of left breast
with irregular obscure mass,
BIRADS-IV or V,

Q49

性別：Female 年齡：32 y/o

主訴：Heath examination. Breast-feeding(+).



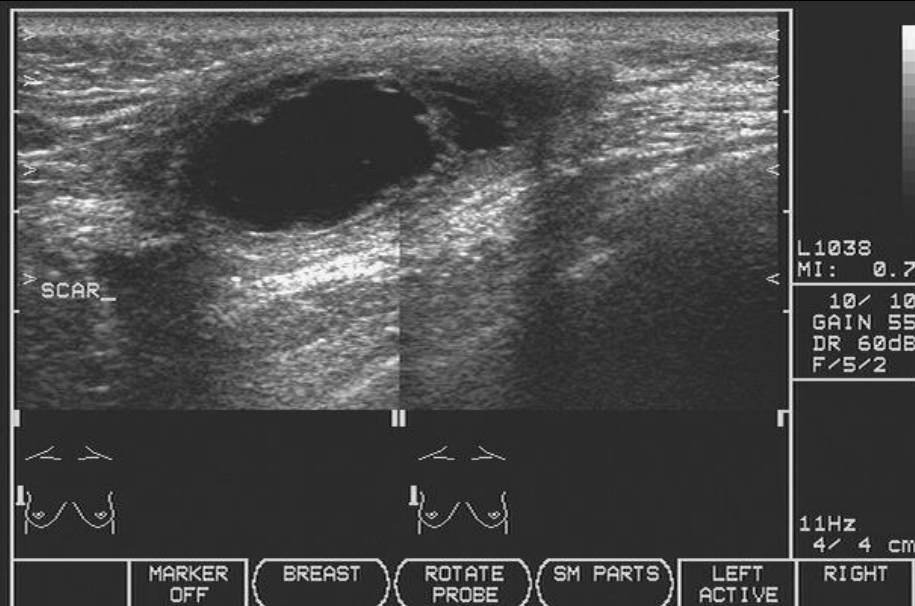
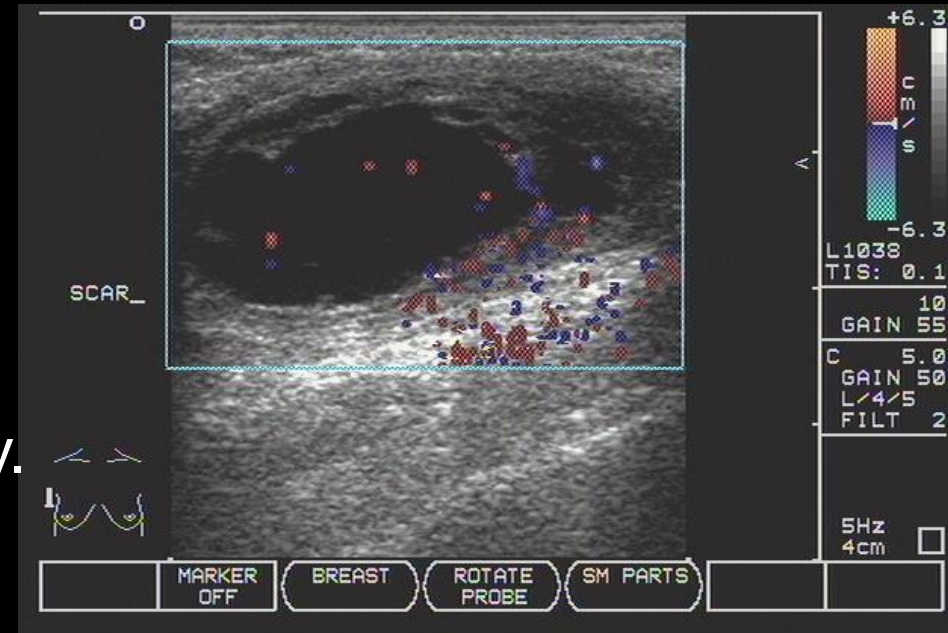
ANS : Galactocele

Q50

性別：Female

年齡：62 y/o

主訴：Right breast CA post
modified radical mastectomy.
Follow-up sonography.



A50

ANS : Seroma