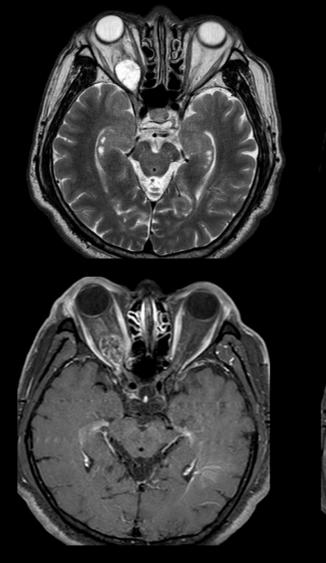
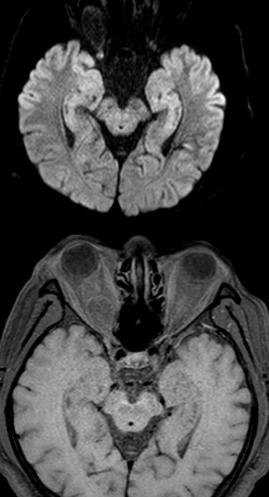
2014年11月21日 中華民國放射線醫學會 住院醫師閱片測驗-答案

出題醫院 三軍總醫院放射診斷部

Case 1. F/45 with diplopia





Diagnosis:
Orbital hemangioma

Case 2. M/38 with headache



Diagnosis:
Pericallosal lipoma

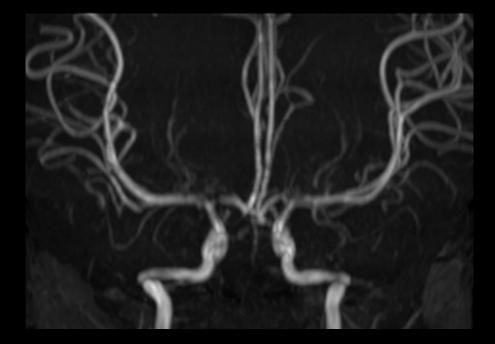
Case 3. M/18 with seizure

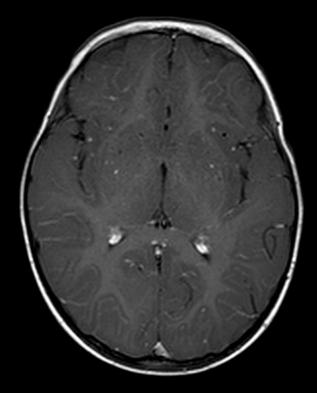


• Diagnosis:

Sturge-Weber syndrome

Case 4. M/8 with left limb weakness

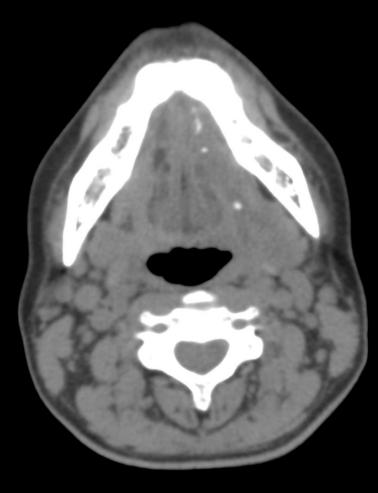




Diagnosis:

Moyamoya disease

Case 5. M/45 with recurrent swelling of the submandibular region

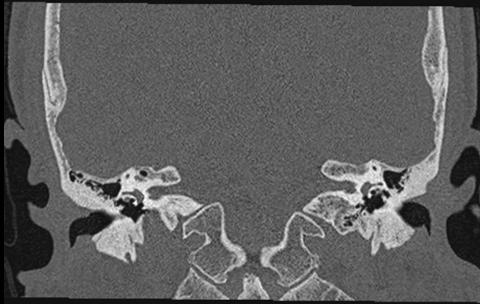




Diagnosis:
Sialolithiasis

Case 6. M/69 Right side pulsatile tinnitus for 2 months

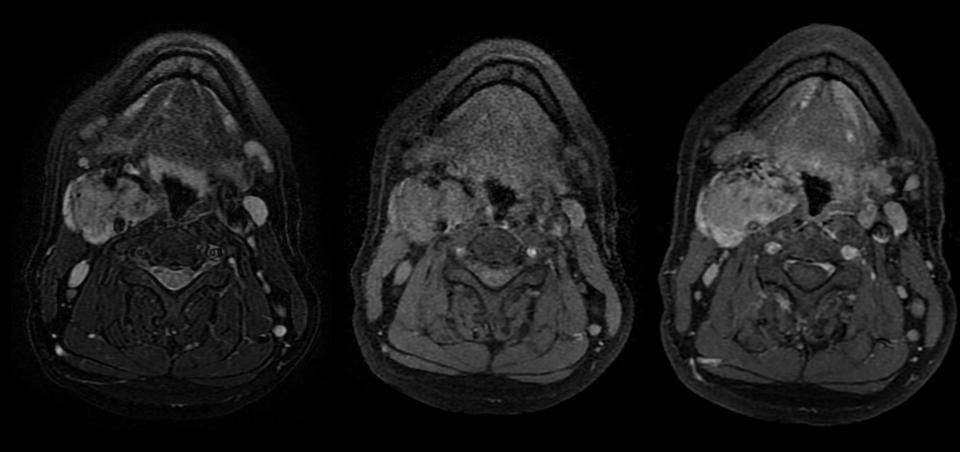




• Diagnosis:

Right side high jugular bulb with dehiscence

Case 7. M/31 Right side neck mass for several months



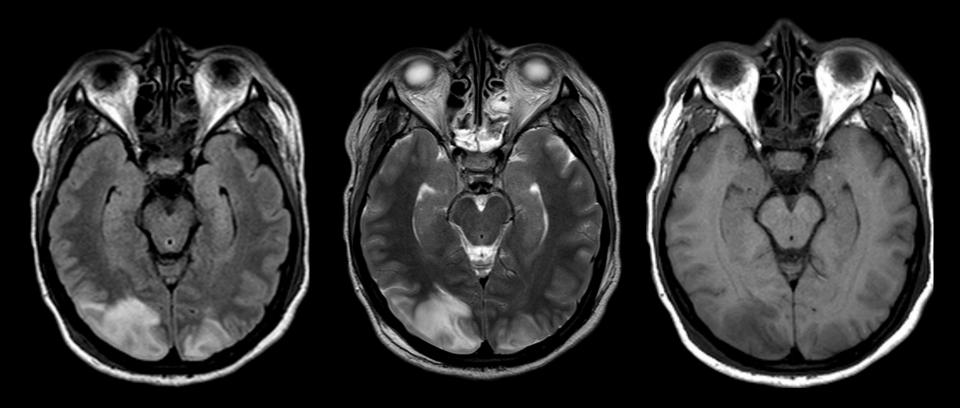


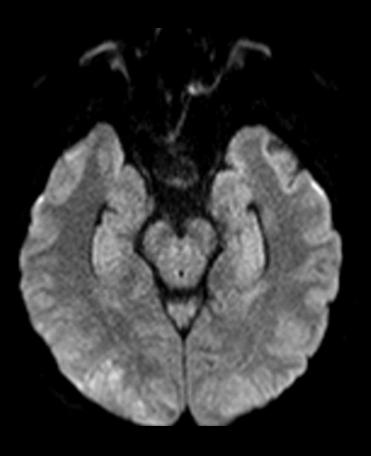


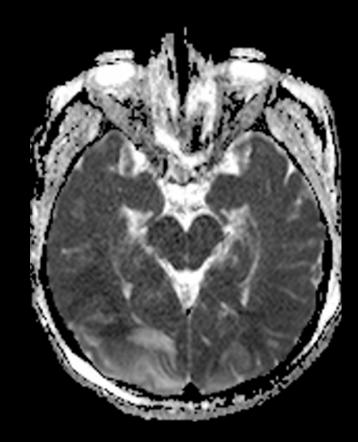
• Diagnosis:

Carotid body paraganglioma

Case 8. F/32 post-partum hemorrhage s/p TAE



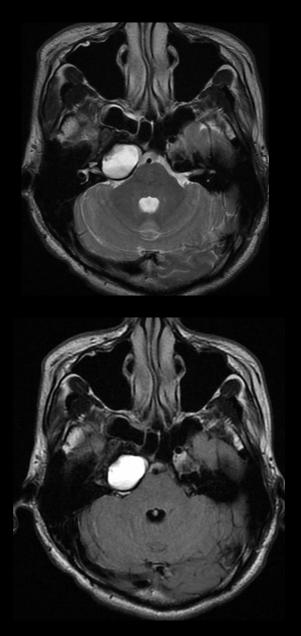




• Diagnosis:

PRES (posterior reversible encephalopathy syndrome)

Case 9. M/24 seizure attack during the flight

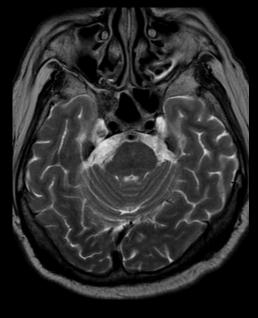


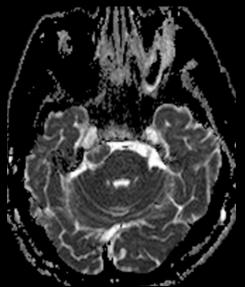


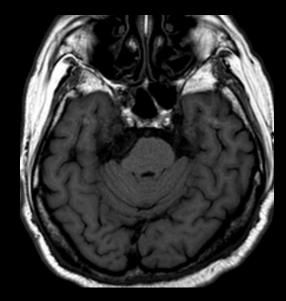
• Diagnosis:

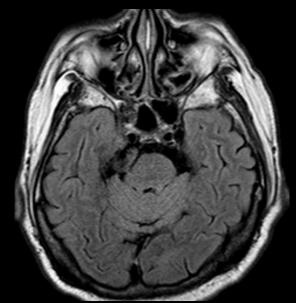
Cholesterol granuloma in right petrous apex

Case 10. M/63 painful sensation inside left ear for 6months, an incidental finding

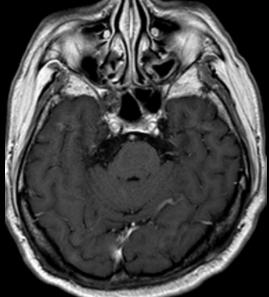












• Diagnosis:

Epidermoid cyst in right CP angle

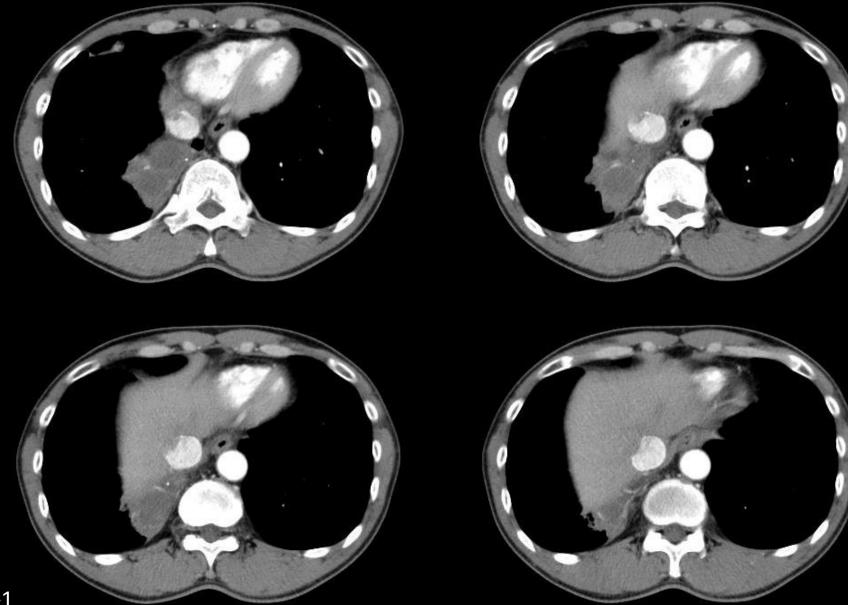
Case 11. 70 y/o male, old TB, right arm weakness

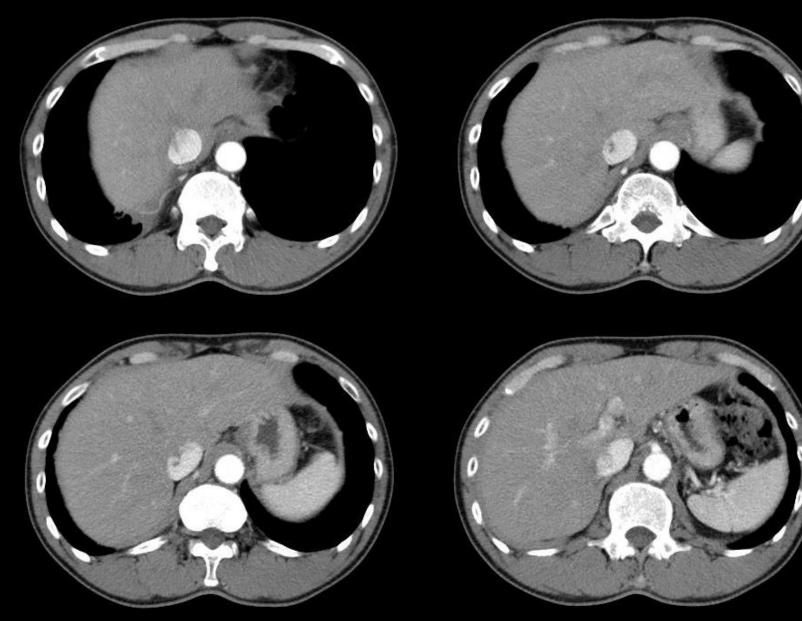


Diagnosis:

Pancoast tumor

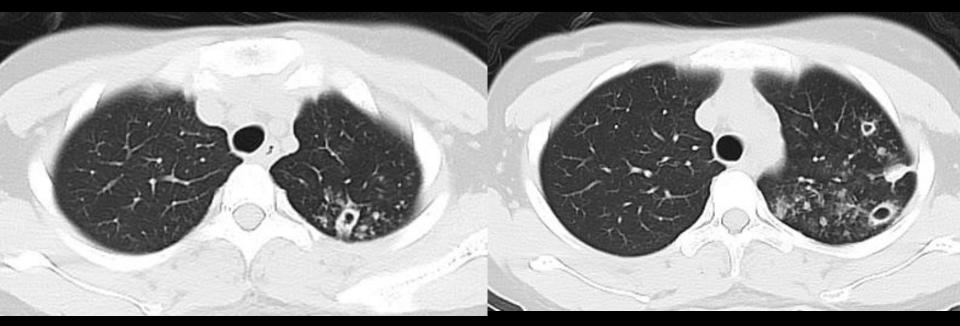
Case 12. 70 y/o male, fever

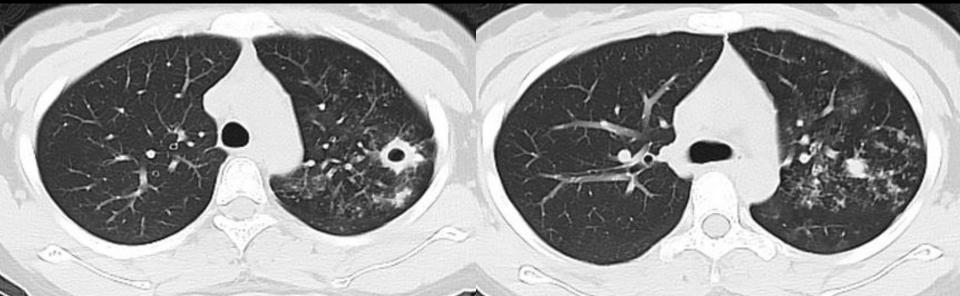




Diagnosis:
Pulmonary sequestration

Case 13. 18 y/o female, Hemoptysis

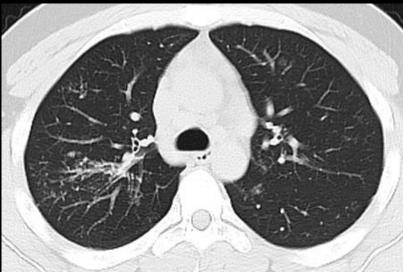




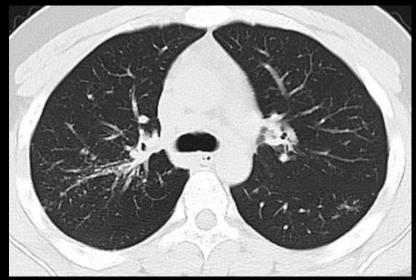
Diagnosis:
Pulmonary TB

Case 14. 21 y/o male, asymptomatic



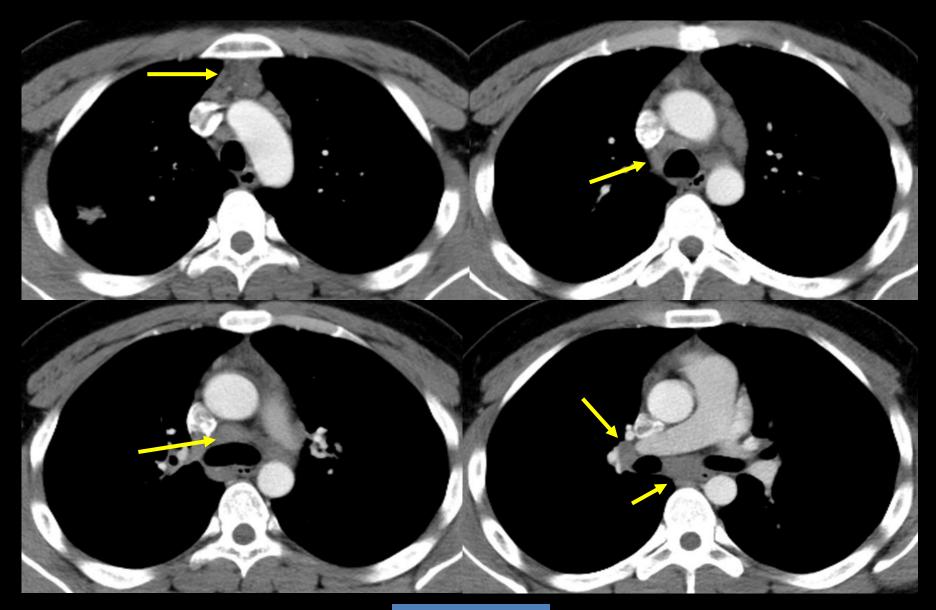












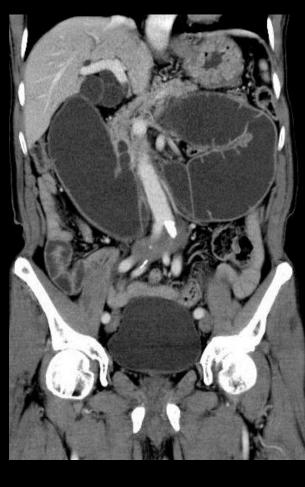
Contrast-CT

Diagnosis:
Sarcoidosis

A 74 y/o male with vomiting and epigastric pain for 3 days. Case 15. Past history shows gastric carcinoma S/P subtotal gastrectomy. Imaging findings are as below. What is the diagnosis?

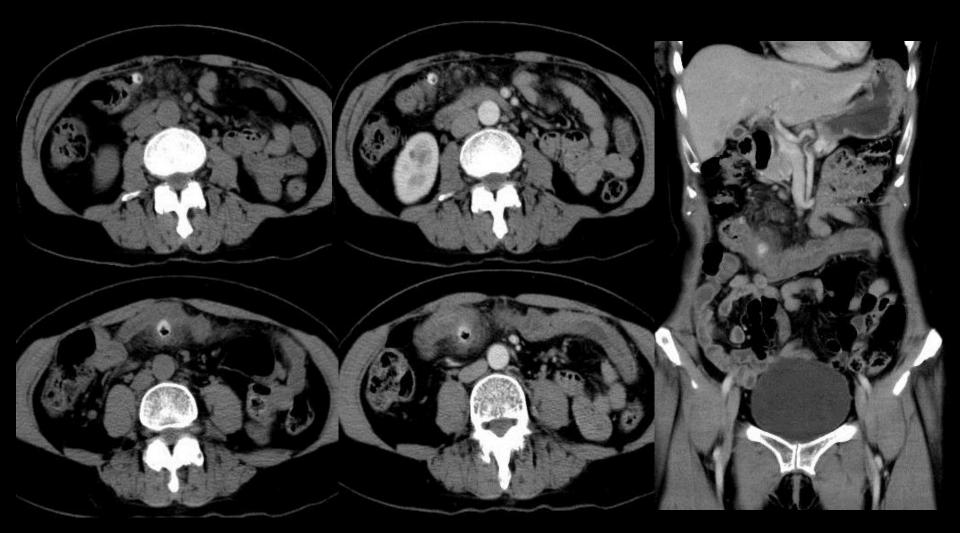






Diagnosis:
Afferent loop syndrome

Case 16. A 57 y/o female with fever for 3 days. Physical examination shows right upper quadrant pain. Lab data shows leucocytosis. Imaging findings are as below. What is the diagnosis?



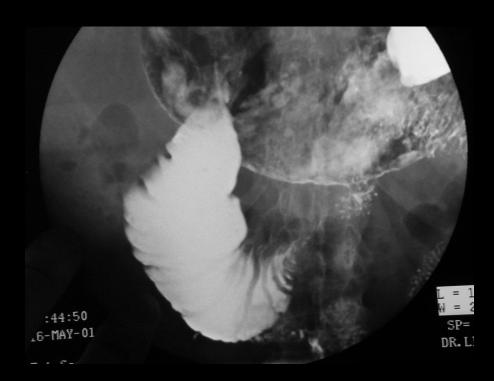
• Diagnosis:

Acute diverticulitis (T-colon)

Imaging findings:

- 1. Circumferential bowel wall thickening.
- 2. Diverticula.
- 3. Fatty stranding of adjacent mesocolon.
- 4. Colonic obstruction.

Case 17. F/63, CC: epigastric fullness and post-prandial vomiting for 6 Months

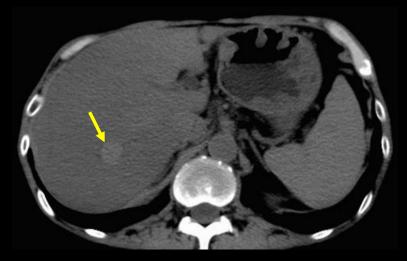




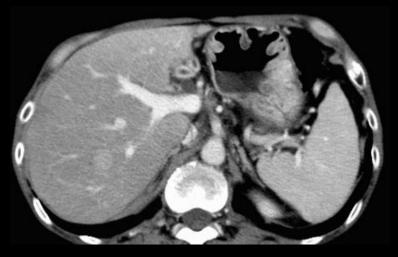
• Diagnosis:

Adenocarcinoma of the pancreatic uncinate process

Case 18. M/43, general weakness and poor appetite for days



Non-enhanced



Portal venous phase



Arterial phase



Delayed phase

Diagnosis:
Focal fat sparing area

Case 19. Epigastric pain. What's your diagnosis?



• Diagnosis:

Pneumoperitoneum Falciform ligament sign

Case 20. M/23, CC: epigastric discomfort for 6 months.



Arterial phase images in Right Portal Vein level (Fig. 1), Left Portal Vein level (Fig. 2) and Superior Mesenteric Vein level (Fig. 3)



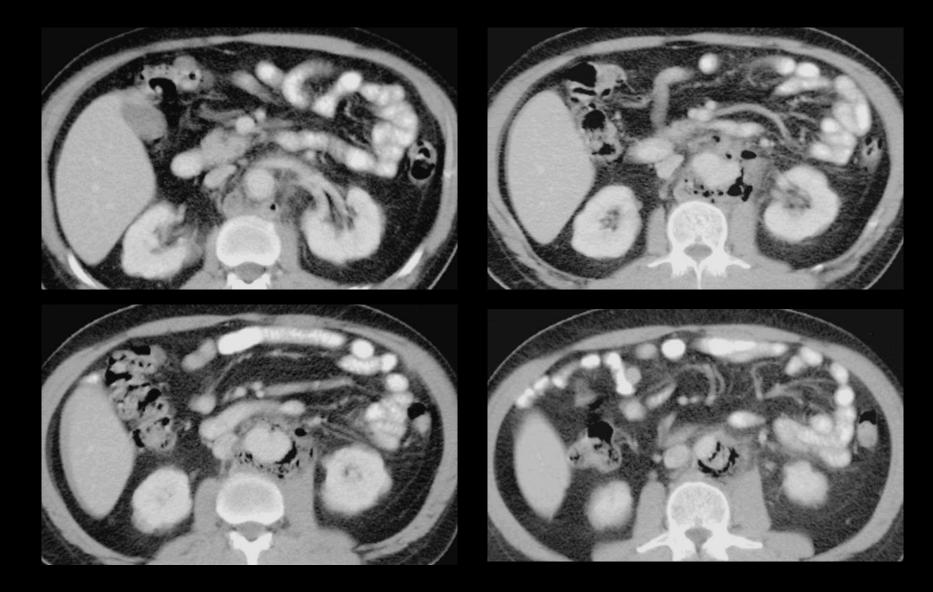
What is the diagnosis?

(There are three findings)

Portal venous phase images in Right Portal Vein level (Fig.4)

- Diagnosis:
- Infiltrative HCC with left lobe portal vein tumor thrombosis: 1分
- Infiltrative HCC induce arterio-portal shunting and left lobe portal vein thrombosis: 2 分

Case 21. M/50, CC: fever and back pain

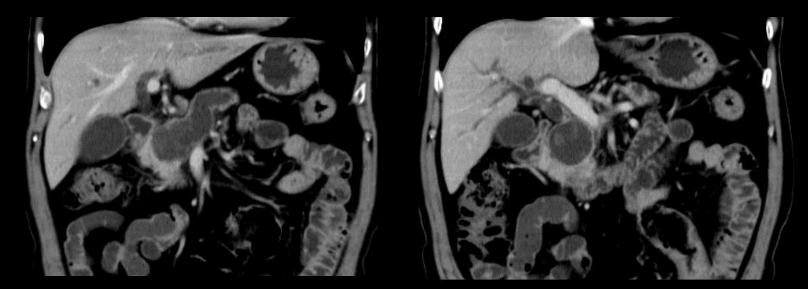


Diagnosis:

Mycotic aneurysm

Case 22. M/70, Intermittent epigastric pain for 1 year

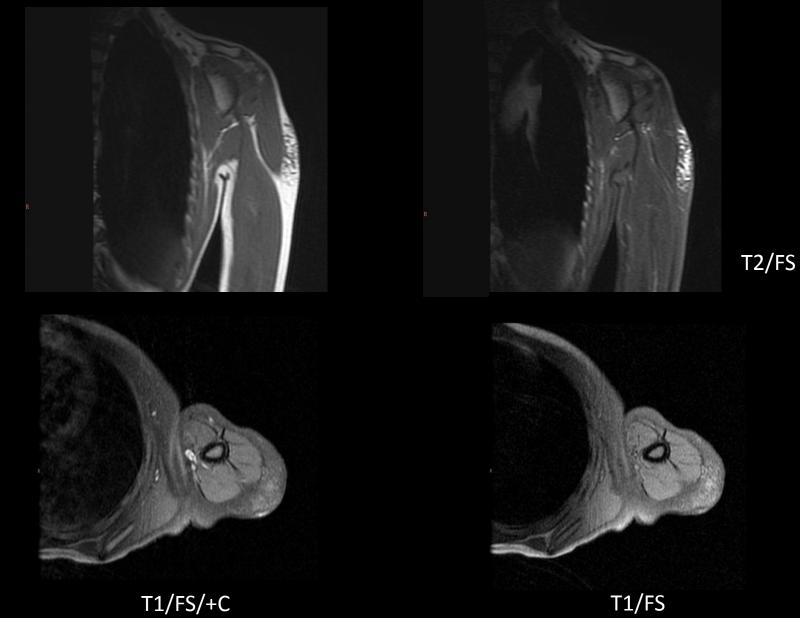




• Diagnosis:

Intraductal Papillary Mucinous Tumor (IPMT)

Case 23. 8 y/o female, palpable mass in left upper arm since birth



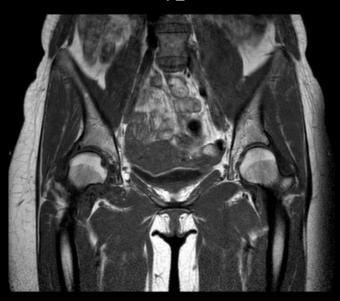
T1

Diagnosis:
Lymphangioma

Case 24.

37 y/o female, right hip pain

T1







T1/FS

T1/FS/C+

• Diagnosis:

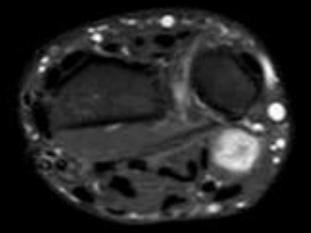
Osteochondromatosis

Case 25. 39 y/o male, progressively enlarged mass in wrist for years



T2/FS





L

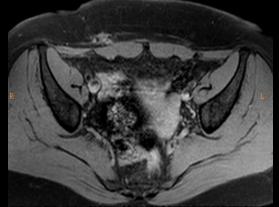
T1/FS/C+

T1/FS

Diagnosis:
Schwannoma

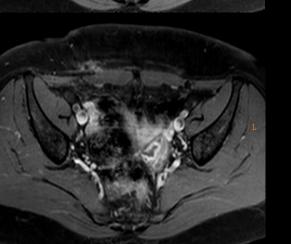
Case 26.

36 y/o female, palpable mass in the abdominal wall

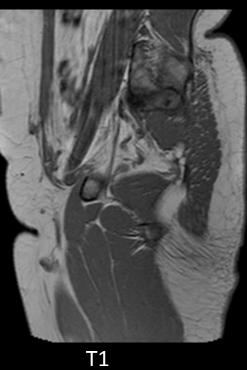




T1/FS

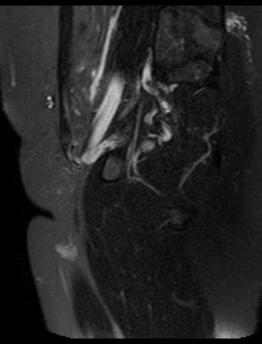








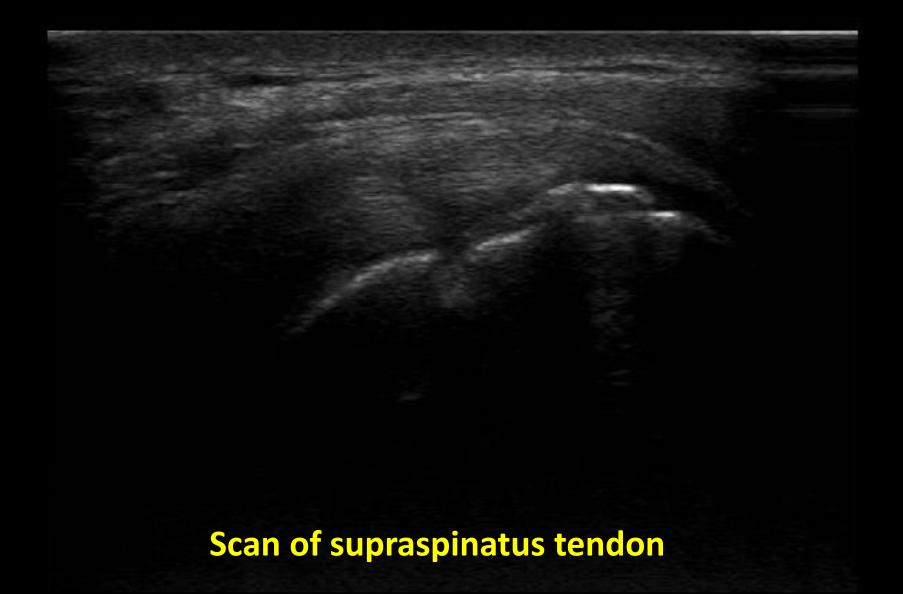
T2/FS





Diagnosis:
Endometriosis

Case 27. M/24 with a history of shoulder contusion



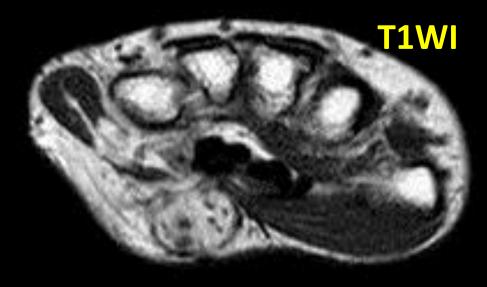
• Diagnosis:

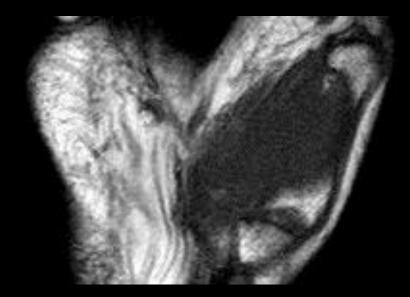
Fracture of greater tuberosity

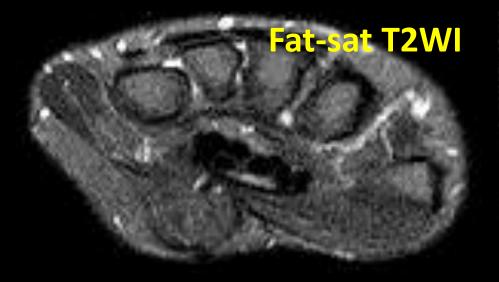


Case 28.

F/38 with claw hand for 25 years







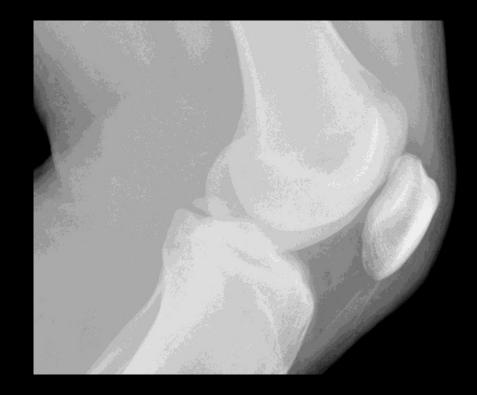


• Diagnosis:

Lipofibromatous harmatoma (fibrolipoma) of ulnar nerve

Case 29. M/21 with left knee pain

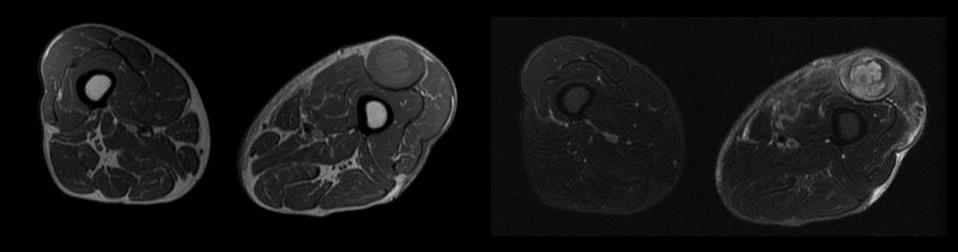


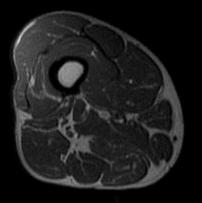


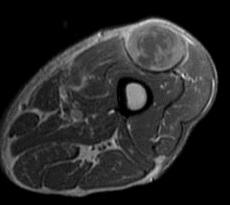
Diagnosis:
Meniscal ossicle



Case 30. M/54 palpable thigh mass for 3 months





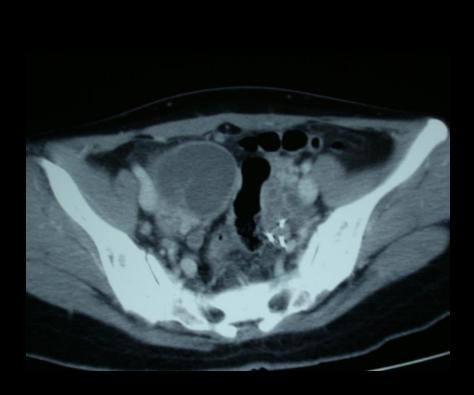


• Diagnosis:

(Chronic) Pyomyositis of rectus femoris muscle

Case 31. Female, 30 years old, with gross hematuria





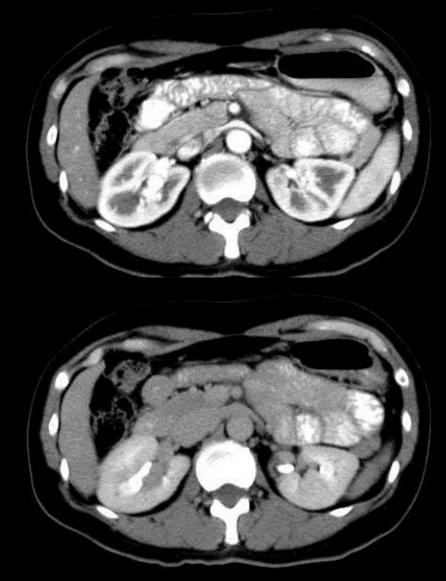
• Diagnosis:

Endometriosis of both ureters

Case 32.

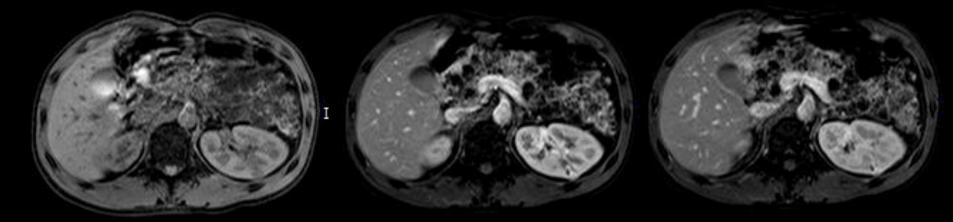
Female, 40 years old, with gross hematuria





Diagnosis:
Right kidney AVM

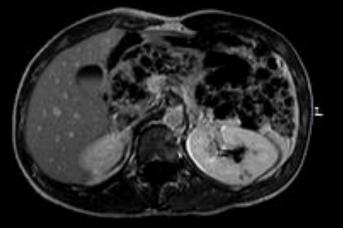
Case 33. Male, 21 y/o, Abdominal pain for a while

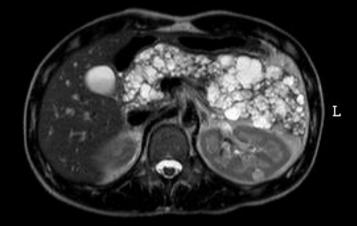


non-contrast

arterial

venous





T2WI

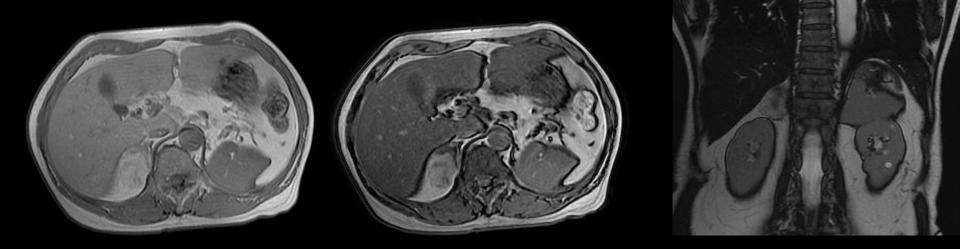
delayed

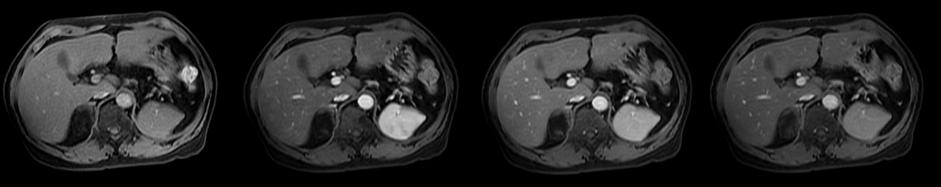
• Diagnosis:

von Hippel-Lindau disease



Female, 67 y/o, RUQ adominal pain and chest pain for 1 day





non-contrast

arterial

venous

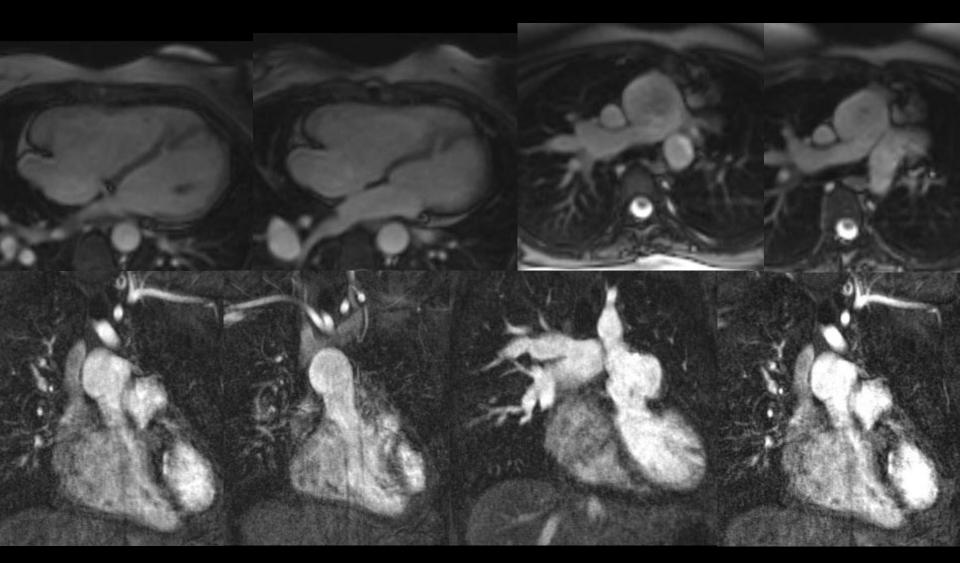
delayed

Diagnosis:

Adrenal myelolipoma

• 36 y/o young male had history of congenital heart disease and post surgical repair .

• What is the Diagnosis ?

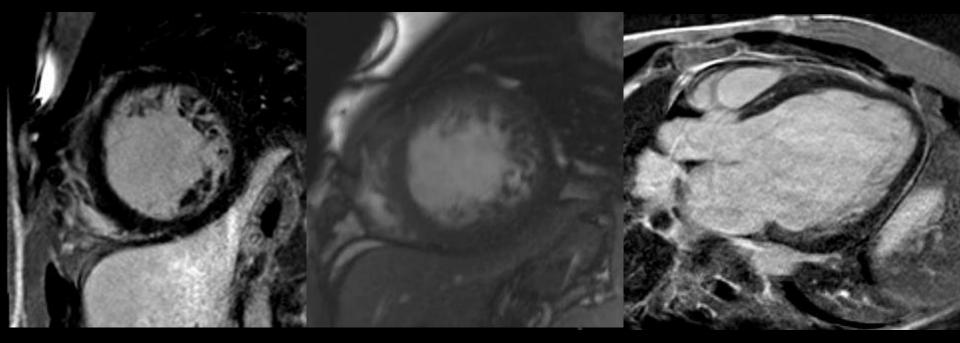


• Diagnosis:

d-TGA, S/p arterial switch procedure



50 y/o male had chest pain history and dyspnea on exercise. What is the Diagnosis ?



PSIR Viability

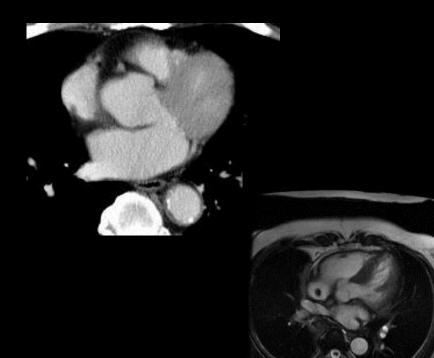
TrueFISP Cine

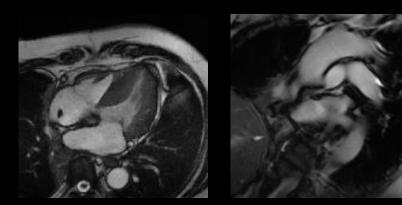
PSIR Viability

Diagnosis:

Noncompaction of LV

Case 37. ³⁶ y/o young male showed a suspicious cardiac tumor on CT scan. What is the Diagnosis ?





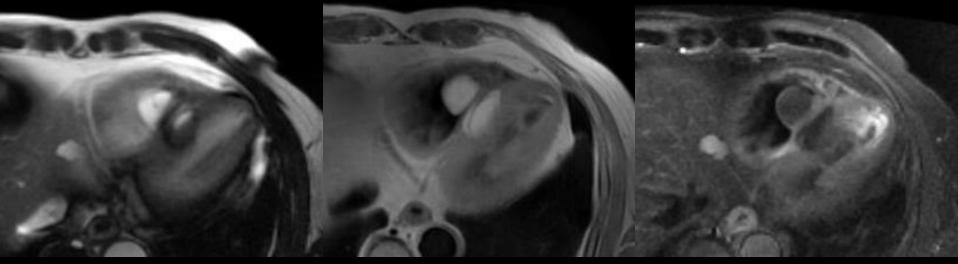


• Diagnosis:

Prominent Crista Terminalis



30 y/o young male, no CV symptoms. Note a suspicious cardiac tumor on echocardiography incidentally. What is the Diagnosis ?



Fiesta

Double IR

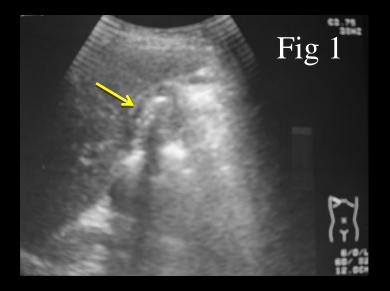
Triple IR

• Diagnosis:

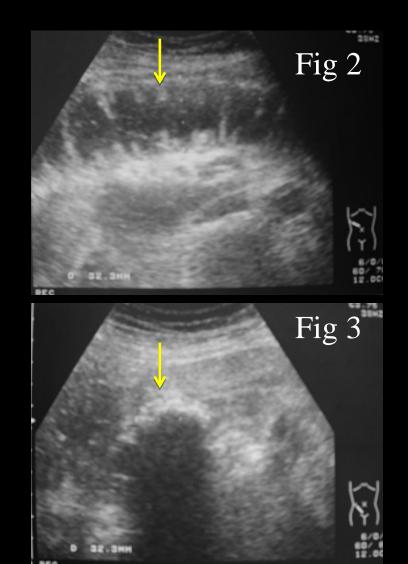
Interventricular Lipoma

Case 39.

M/54 CC: Sudden onset severe RUQ pain was noted. Then, fullness of whole abdomen developed few hours later.



- Fig 1: Arrow: Gallbladder
- Fig 2: Arrow: small intestine at right middle abdomen
- Fig 3: Arrow: RLQ small intestine



Diagnosis:
Gallstone ileus

Case 40.

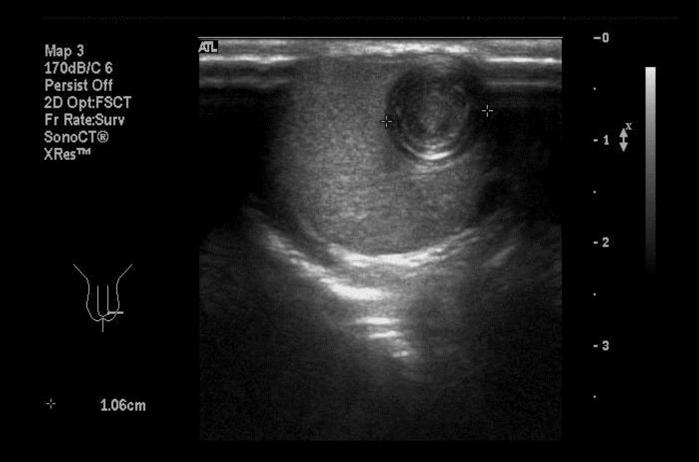
M/72, Intermittent RLQ pain for few months. Stool occult blood: negative. Sonography of right kidney appears normal. However, sonography of right lower abdomen reveals a lesion. What is your diagnosis?



• Diagnosis:

Lymphoma of proximal ascending colon.

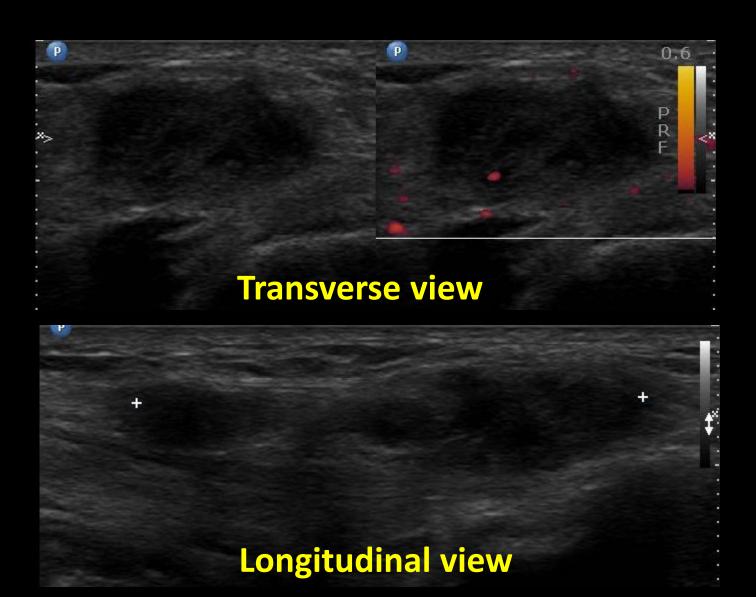
Case 41. Male, 17 years old, with scrotum pain



• Diagnosis:

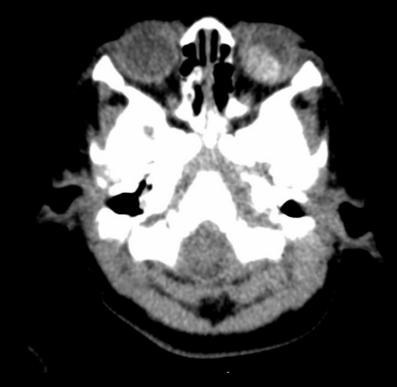
Left testis epidermoid cyst

Case 42. F/38 with a history of cyclic focal pain in the right groin for 2 years



Diagnosis:
Endometriosis

Case 43. 3-month-old boy with abnormal eye reflex.





Diagnosis:
Retinoblastoma

Case 44. M/4 y/o. Sore throat and husky voice





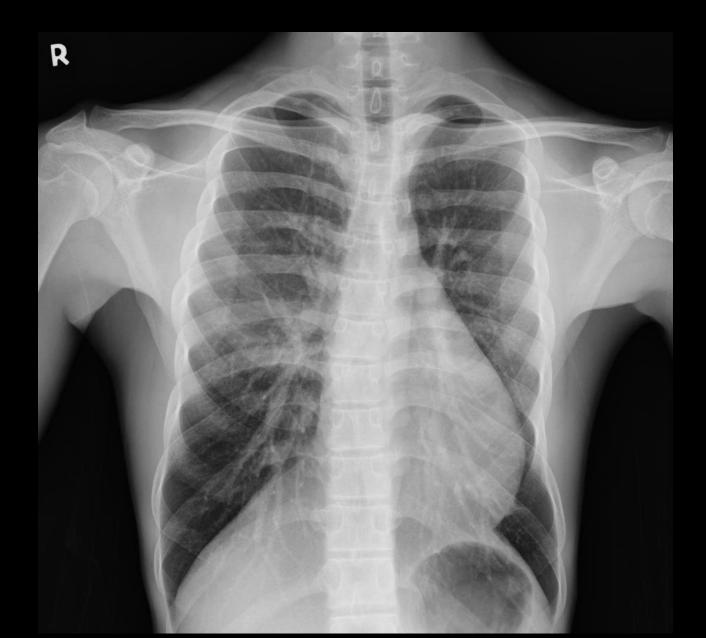


• Diagnosis:

Epiglottic cyst 答Acute epiglottitis 得一分



Case 45. M/10 y/o. Chest tightness



Diagnosis:
Funnel chest



Case 46. F/11 y/o. Lower abdomen pain. High β -HCG

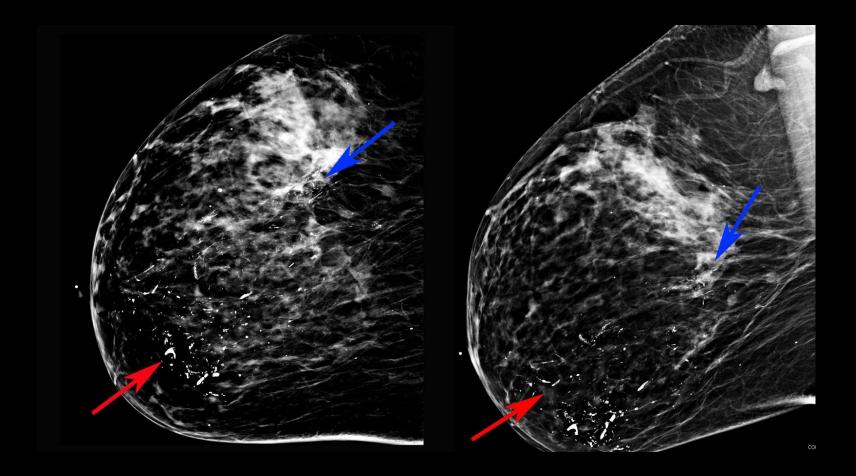


• Diagnosis:

Germ cell tumor of ovary 答Mucinous ovary tumor得一分

Case 47. • 50 y/o female had a screening mammography.

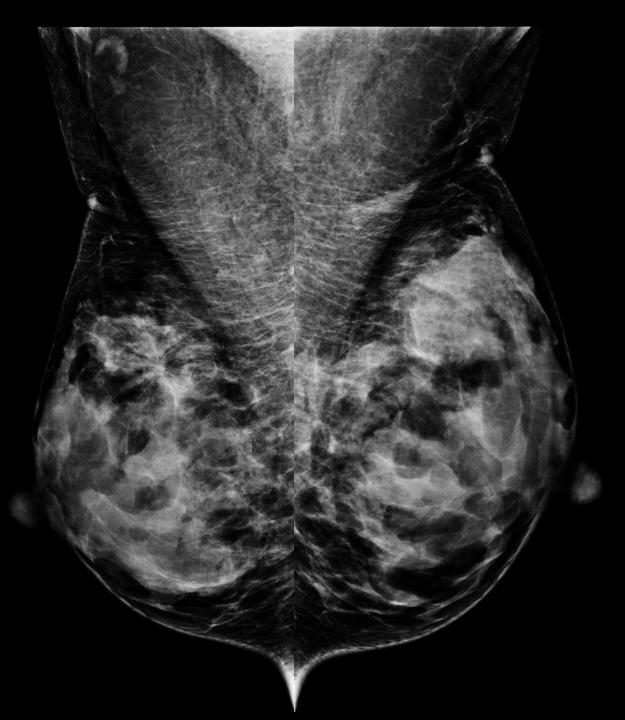
• What is the BIRADS category ? Diagnosis ?

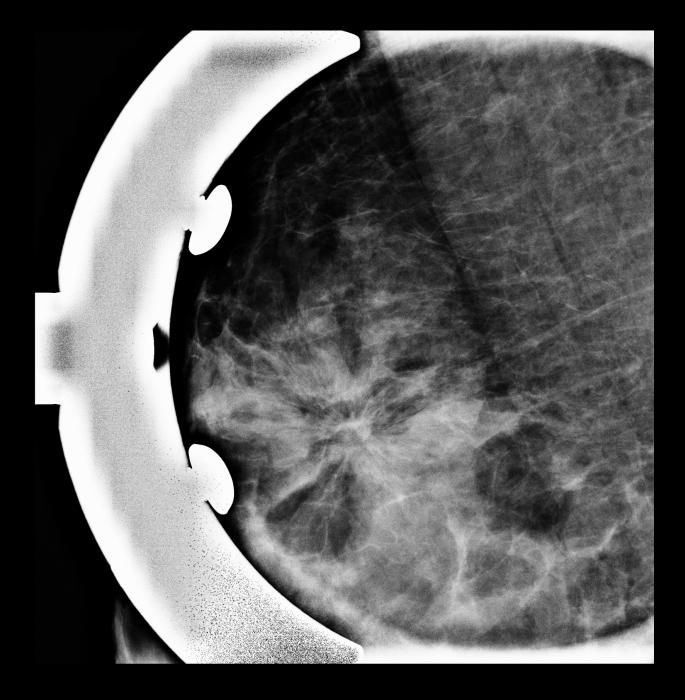


- Diagnosis:
 - (1) BIRADS category 2
 - (2) Secretory calcifications

Case 48.

- 23 y/o young female had a palpalble lesion at her right breast.
- What is the BIRADS category Diagnosis ?

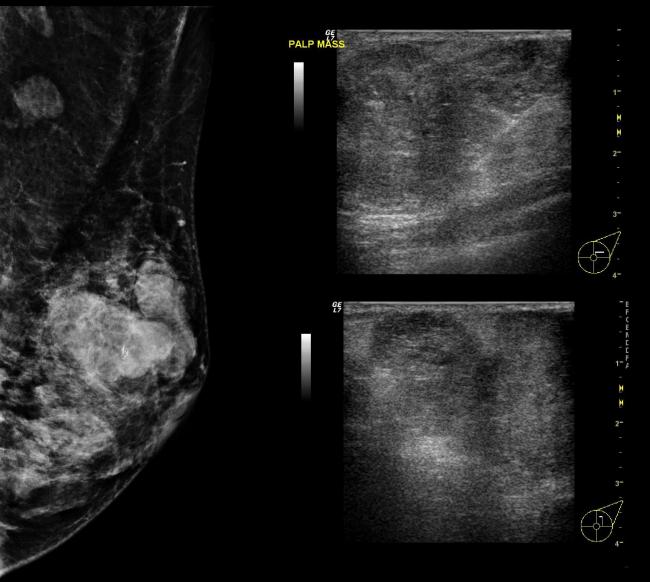




- Diagnosis:
 - (1) BIRADS category 4 (a,b,or c)
 - (2) Radial scar

Case 49.

- 48 y/o young female had a palpable lesion at her left breast region.
- What is the BIRADS category ? Diagnosis ?





T1WI + c axial view

- Diagnosis:
 - (1) BIRADS category 4b or 4c or 5
 - (2) Mucinous carcinoma of breast

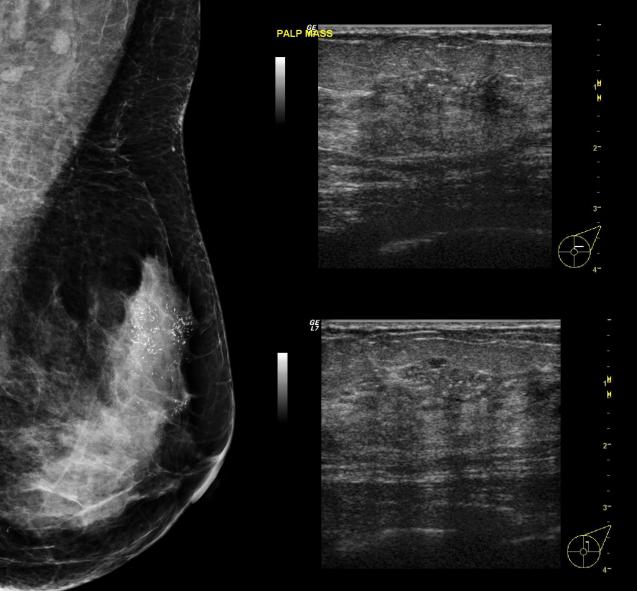
Case 50.

 \bullet

•

52 y/o female had a screening mammography.

What is the BIRADS category ? Diagnosis ?



- Diagnosis:
 - (1) BIRADS category 4b or 4c or 5
 - (2) DCIS