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Preface

In 2002 the Royal College of Radiologists announced changes to the structure of the Examinations for the Fellowship in Clinical Radiology. As part of these changes, Part A of the Final Examination was changed to a modular format with effect from Spring 2004. The following modules are examined:

Module 1: Chest and Cardiovascular (30 questions)

Module 2: Musculoskeletal and Trauma (30 questions)

Module 3: Gastrointestinal and Hepatobiliary (40 questions)

Module 4: Genitourinary, Obstetrics and Gynaecology, and Breast (40 questions)

Module 5: Paediatrics (20 questions)

Module 6: Neuroradiology and Head and Neck (30 questions)

Full details of the structure of the new exam, with a syllabus, are available on the College website (www.rcr.ac.uk).

This book comprises three MCQ papers for each of the six modules examined. As in the exam, 15–20% of the questions in each paper are on radiological anatomy, techniques, and those aspects of physics not examined in the First Examination for Fellowship. Answers score +1 for a correct answer, –1 for an incorrect answer and 0 for no answer. The questions have been written using the textbooks read by UK radiologists in training, supplemented by more up-to-date material from the major radiology journals and specialist textbooks. The answers provide brief explanations, and are comprehensively referenced for further reading.

MODULE THREE

Gastrointestinal and Hepatobiliary

Time Allowed: 2 hours

SAMPLE
PAGES

Module Three: Examination One – Questions

1. Hyoscine N-butylbromide:
 - a. has an immediate onset of action following IV injection.
 - b. has no effect on the lower oesophageal sphincter.
 - c. reduces small bowel transit time.
 - d. is contraindicated in myasthenia gravis.
 - e. has a 15-minute duration of action.

2. Regarding suspensions of barium sulphate used in gastrointestinal radiology:
 - a. the barium particles are 0.1–5 mm in diameter.
 - b. suspensions are non-ionic.
 - c. suspensions are of alkaline pH.
 - d. simethicone acts as an anti-flocculation agent.
 - e. mucosal detail is improved by heterogeneous particle size.

3. Contraindications to double-contrast barium enema include:
 - a. pseudomembranous colitis.
 - b. rectal biopsy at flexible sigmoidoscopy 48 hours previously.
 - c. toxic megacolon.
 - d. rectovaginal fistula.
 - e. suspected perforation.

4. Regarding the peritoneal spaces:
 - a. the left paracolic gutter communicates with the left subphrenic space.
 - b. the right infracolic space is larger than the left.
 - c. the superior recess of the lesser sac surrounds the quadrate lobe of the liver.
 - d. up to 100 ml of peritoneal fluid is normal.
 - e. the right and left subphrenic spaces do not communicate directly.

5. The duodenum:
 - a. takes its blood supply from a branch of the superior mesenteric artery.
 - b. is shortest in its third part.
 - c. is posterior to the common bile duct in its second part.
 - d. is crossed anteriorly by the superior mesenteric vein.
 - e. has the ampulla of Vater at the anteromedial wall of the second part.

Module Three: Examination One – Answers

1. Answers

- a. **True**
- b. **False** – it relaxes the lower oesophageal sphincter, pylorus and duodenum.
- c. **False** – small bowel transit time is increased.
- d. **True**
- e. **True**

(Chapman & Nakielny 2001 p53)

2. Answers

- a. **False** – 0.5–5 μm .
- b. **True** – to prevent particle clumping.
- c. **False** – acidic pH (5.3).
- d. **False** – it is an anti-foaming agent.
- e. **True** – flocculation is reduced by homogeneous particle size.

(Chapman & Nakielny 2001 pp49–50; Francis et al. p162)

3. Answers

- a. **True**
- b. **False**
- c. **True**
- d. **False**
- e. **True**

(Chapman & Nakielny 2001 p68)

4. Answers

- a. **False** – the phrenicocolic ligament intervenes.
- b. **False** – the left space is the larger.
- c. **False** – it surrounds the caudate lobe.
- d. **True**
- e. **True** – the falciform ligament divides the spaces.

(Grainger & Allison pp1142–1144)

5. Answers

- a. **True** – the inferior pancreaticoduodenal artery.
- b. **False** – D1 = 5 cm, D2 = 7.5 cm, D3 = 10 cm, D4 = 2.5 cm.
- c. **False** – anterior to the common bile duct.
- d. **True** – in its third part.
- e. **False** – posteromedial wall.

(Francis et al. pp56–57)