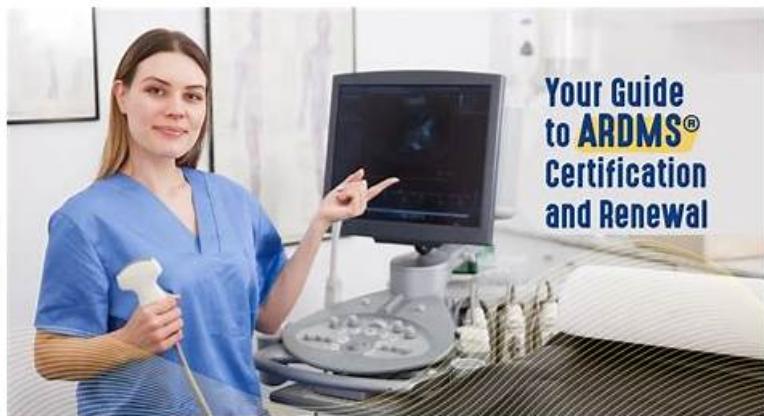


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ARDMS Abdomen Sonography Examination Sample Questions (Q50-Q55):

NEW QUESTION # 50

Which of the following would optimize visualization of a bladder mass?

- A. Have patient empty bladder
- B. Compression technique to move bowel gas
- C. Utilize a high-frequency linear transducer
- D. Have patient **fill** bladder

Answer: D

Explanation:

A full bladder provides an acoustic window that displaces bowel gas and distends the bladder walls, allowing optimal visualization of

any bladder masses or lesions. An empty bladder may collapse, obscuring masses.

According to Rumack's Diagnostic Ultrasound:

"Bladder evaluation should be performed with the bladder optimally distended to visualize its walls and any intraluminal masses."

Reference:

Rumack CM, Wilson SR, Charboneau JW, Levine D. Diagnostic Ultrasound. 5th ed. Elsevier, 2017.

AIUM Practice Parameter for Bladder Ultrasound, 2020.

NEW QUESTION # 51

Which organ is drained via the vessel indicated by the arrow in this image?

- A. Left kidney
- B. Duodenum
- C. Stomach
- D. Spleen

Answer: D

Explanation:

The ultrasound image shows a transverse section through the upper abdomen. The arrow is pointing to a vascular structure running posterior to the pancreas and anterior to the left kidney. This vessel is the splenic vein.

Anatomically:

* The splenic vein runs along the posterior border of the pancreas.

* It courses medially to join the superior mesenteric vein (SMV) and form the portal vein.

* It receives tributaries from the spleen, short gastric veins (draining the stomach), and the inferior mesenteric vein.

In this case, the question asks which organ is primarily drained via the vessel marked by the arrow. The splenic vein's main tributary is from the spleen.

Comparison of answer choices:

* A. Spleen - Correct. The splenic vein is the primary drainage vessel for the spleen.

* B. Stomach - Some gastric veins drain into the splenic vein, but the primary drainage is via left and right gastric veins into the portal system.

* C. Left kidney - Drains into the left renal vein, not the splenic vein.

* D. Duodenum - Drains mainly into the superior mesenteric vein (SMV).

References:

Rumack CM, Wilson SR, Charboneau JW, Levine D. Diagnostic Ultrasound, 5th ed. Elsevier, 2017.

Hagen-Ansert SL. Textbook of Diagnostic Sonography, 8th ed. Elsevier, 2017.

Netter FH. Atlas of Human Anatomy, 7th ed. Elsevier, 2018.

NEW QUESTION # 52

Which type of hernia is located medial to the inferior epigastric artery?

- A. Indirect inguinal
- B. Femoral
- C. Direct inguinal
- D. Spigelian

Answer: C

Explanation:

Direct inguinal hernias protrude through Hesselbach's triangle, which lies medial to the inferior epigastric artery. In contrast, indirect inguinal hernias pass lateral to the inferior epigastric artery via the deep inguinal ring.

According to Moore's Clinically Oriented Anatomy:

"Direct inguinal hernias occur medial to the inferior epigastric vessels, within Hesselbach's triangle." Reference:

Moore KL, Dalley AF, Agur AMR. Clinically Oriented Anatomy. 8th ed. Wolters Kluwer, 2018.

Gray's Anatomy for Students, 4th ed., Elsevier, 2019.

NEW QUESTION # 53

Which structure is located between the fundus of the stomach and the diaphragm?

- A. Left lobe of the liver
- B. Caudate lobe of the liver
- C. Right kidney
- D. Spleen

Answer: D

Explanation:

The spleen lies in the left hypochondrium, superior and lateral to the fundus of the stomach, and directly contacts the diaphragm. It occupies the space between the stomach and diaphragm. The liver and kidneys are located more medially or inferiorly.

According to Gray's Anatomy for Students:

"The spleen lies posterolateral to the fundus of the stomach, separated from the diaphragm by its fibrous capsule." Reference: Gray's Anatomy for Students, 4th ed., Elsevier, 2019.

Moore KL, Clinically Oriented Anatomy, 8th ed.

NEW QUESTION # 54

Which structure is most likely shown in this image of the right lower quadrant?

□

- A. Appendix
- B. Fallopian tube
- C. Ureter
- D. Jejunum

Answer: A

Explanation:

The ultrasound image shows a blind-ending, non-compressible, tubular structure in the right lower quadrant with a target or bullseye appearance in transverse section - highly suggestive of the appendix.

Sonographic features of the appendix (especially in suspected appendicitis):

- * Blind-ending tubular structure arising from the cecum
- * Non-compressible on graded compression
- * Diameter >6 mm is suggestive of appendicitis
- * May demonstrate a "target sign" in transverse view (concentric ring-like appearance)
- * Increased echogenicity of surrounding fat in cases of inflammation
- * May contain an appendicolith or show hyperemia on color Doppler if inflamed. The location (right lower quadrant) and appearance in this case are classic for the normal or potentially inflamed appendix.

Differentiation from other options:

- * A. Fallopian tube: Located more in the adnexal regions and usually not visible unless distended (e.g., hydrosalpinx).
- * B. Ureter: Usually not visualized on ultrasound unless dilated due to obstruction.
- * D. Jejunum: Has valvulae conniventes ("keyboard sign") and peristalsis; does not present with a blind- ending tubular appearance from the cecum.

References:

Rumack CM, Wilson SR, Charboneau JW, Levine D. Diagnostic Ultrasound. 5th Edition. Elsevier, 2018. Chapter: Gastrointestinal Tract, pp. 460-468.

American College of Radiology (ACR). ACR Appropriateness Criteria - Right Lower Quadrant Pain - Suspected Appendicitis. AIUM Practice Parameter for the Performance of a Pediatric Abdominal and/or Retroperitoneal Ultrasound Examination, 2020.

NEW QUESTION # 55

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