

AB-Abdomen Test King & Certification AB-Abdomen Exam Infor



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ARDMS AB-Abdomen Exam Syllabus Topics:

Topic	Details
Topic 1	• Abdominal Physics: This section of the exam measures the knowledge of ultrasound technicians in applying imaging physics principles to abdominal sonography. It includes understanding how to optimize ultrasound equipment settings for the best image quality and how to identify and correct imaging artifacts that can distort interpretation. Candidates should demonstrate technical proficiency in handling transducers, adjusting frequency, and managing depth and gain to obtain clear, diagnostic-quality images while minimizing errors caused by acoustic artifacts.
Topic 2	• Pathology, Vascular Abnormalities, Trauma, and Postoperative Anatomy: This section of the exam evaluates the abilities of diagnostic medical sonographers and covers the detection and analysis of diseases, vascular issues, trauma-related damage, and surgical alterations in abdominal anatomy. Candidates are expected to identify abnormal growths, inflammations, obstructions, or vascular irregularities that may affect abdominal organs. They must also recognize post-surgical changes and assess healing or complications through imaging. The emphasis is on correlating pathological findings with clinical data to produce precise diagnostic reports that guide further medical management.
Topic 3	• Anatomy, Perfusion, and Function: This section of the exam measures the skills of abdominal sonographers and focuses on evaluating the physical characteristics, blood flow, and overall function of abdominal structures. Candidates must understand how to assess organs such as the liver, kidneys, pancreas, and spleen for size, shape, and movement. It also involves analyzing perfusion to determine how effectively blood circulates through these organs. The goal is to ensure accurate interpretation of both normal and abnormal functions within the abdominal cavity using sonographic imaging.
Topic 4	• Clinical Care, Practice, and Quality Assurance: This section of the exam tests the competencies of clinical ultrasound specialists and focuses on integrating patient care standards, clinical data, and procedural accuracy in abdominal imaging. It assesses the candidate ability to follow established medical guidelines, ensure correct measurements, and provide assistance during interventional or diagnostic procedures. Additionally, this domain emphasizes maintaining high-quality imaging practices and ensuring patient safety. Effective communication, adherence to protocols, and continuous quality improvement are key aspects of this section.

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ARDMS Abdomen Sonography Examination Sample Questions (Q163-Q168):

NEW QUESTION # 163

Which adjustment would most likely improve visualization of a small superficial tubular structure such as a peripheral artery?

- A. Decreasing transducer wavelength
- B. Decreasing frame rate
- C. Decreasing power output
- D. Decreasing slice width

Answer: D

Explanation:

Reducing slice (section) width improves spatial resolution, particularly elevational resolution, which enhances visualization of small, superficial structures. Lower slice width reduces off-axis beam artifacts and blurring.

Wavelength depends on transducer frequency, not adjustable directly during scanning.

According to Zwiebel's Introduction to Vascular Ultrasound:

"Reduction in slice thickness improves imaging of small superficial structures by minimizing volume averaging and improving elevational resolution." Reference:

Zwiebel WJ, Pellerito JS. Introduction to Vascular Ultrasound. 6th ed. Elsevier, 2019.

AIUM Practice Parameter for Vascular Ultrasound, 2021.

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NEW QUESTION # 164

Hepatitis is classified into groups. Which of these four types are transmitted by fecal-oral route?

- A. Hepatitis D
- B. Hepatitis C
- C. Hepatitis A
- D. Hepatitis B

Answer: C

Explanation:

Hepatitis A is primarily transmitted via the fecal-oral route, often through contaminated food or water.

Hepatitis B, C, and D are transmitted through blood and body fluids.

According to CDC and WHO guidelines:

"Hepatitis A virus (HAV) is transmitted primarily by the fecal-oral route via ingestion of contaminated food or water." Reference:

NEW QUESTION # 165

Which syndrome is characterized by right upper quadrant pain, ascites, and hepatocellular dysfunction?

- A. Calciphylaxis
- B. Ehlers-Danlos
- C. Klippel-Trenaunay
- **D. Budd-Chiari**

Answer: D

Explanation:

Budd-Chiari syndrome is caused by hepatic venous outflow obstruction, resulting in hepatomegaly, ascites, right upper quadrant pain, and liver dysfunction. It may be due to thrombosis or compression of the hepatic veins or IVC.

According to Rumack's Diagnostic Ultrasound:

"Budd-Chiari syndrome results from hepatic venous outflow obstruction and presents with hepatomegaly, ascites, and right upper quadrant pain." Reference:

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

AIUM Practice Parameter for Liver Ultrasound, 2020.

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NEW QUESTION # 166

Which retroperitoneal finding is most likely associated with trauma?

- A. Neuroblastoma
- B. Fibrosis
- **C. Urinoma**
- D. Adenoma

Answer: C

Explanation:

Urinomas are collections of urine in the retroperitoneum that result from trauma, surgery, or obstruction causing urine leakage.

Trauma is a frequent cause of urinoma formation due to disruption of the urinary tract.

According to Rumack's Diagnostic Ultrasound:

"Urinomas may develop as a complication of trauma, surgery, or obstructive uropathy with urinary extravasation into the retroperitoneum." Reference:

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

AIUM Practice Parameter for Renal Ultrasound, 2020.

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NEW QUESTION # 167

Which condition is characterized by abnormal dilatation of veins of the pampiniform plexus and most commonly affects the left testicle?

- A. Hydrocele
- B. Spermatocele
- **C. Varicocele**
- D. Hematocele

Answer: C

Explanation:

A varicocele is an abnormal dilatation of the pampiniform plexus veins, usually seen on the left side due to the perpendicular insertion of the left testicular vein into the left renal vein, making it more susceptible to elevated venous pressure. Sonographically, varicoceles appear as multiple serpiginous anechoic tubular structures that show venous flow on color Doppler, often accentuated with Valsalva

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