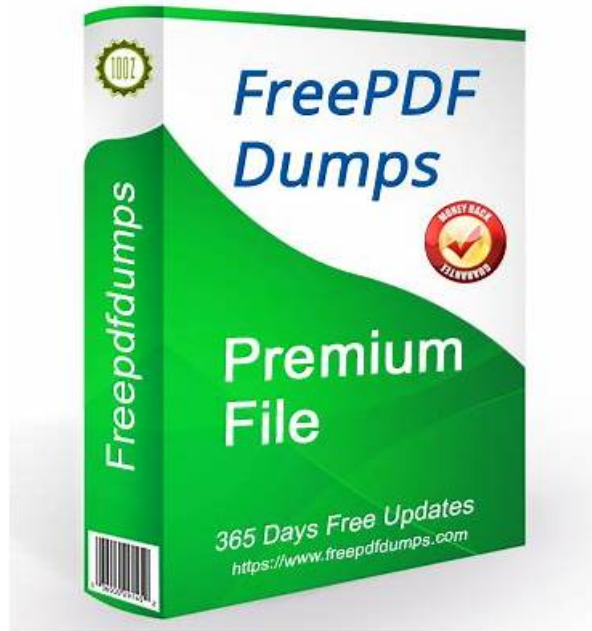


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ARDMS Abdomen Sonography Examination Sample Questions (Q141-Q146):

NEW QUESTION # 141

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

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

Answer: A

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.

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NEW QUESTION # 142

Which finding is helpful to differentiate postsurgical breast scarring from a recurrent tumor?

- A. Architectural distortion
- B. Associated skin thickening
- C. Irregular hypoechoic area
- D. Absent Doppler signal

Answer: D

Explanation:

Postsurgical breast scarring may appear hypoechoic and irregular but typically shows no internal vascularity on Doppler imaging. In contrast, recurrent tumors generally exhibit increased internal vascular flow due to neovascularization. Therefore, absent Doppler signal helps suggest scar tissue rather than malignancy.

According to Stavros' Breast Ultrasound:

"The absence of internal Doppler flow favors scar tissue, whereas recurrent malignancy typically demonstrates internal vascularity."

Reference:

Stavros AT. Breast Ultrasound. Lippincott Williams & Wilkins, 2004.

AIUM Practice Parameter for Breast Ultrasound, 2020.

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NEW QUESTION # 143

Which laboratory value stays elevated longest and is considered the most reliable in diagnosing pancreatitis?

- A. Lipase
- B. Trypsin
- C. Amylase
- D. Somatostatin

Answer: A

Explanation:

Lipase is the most sensitive and specific laboratory marker for diagnosing acute pancreatitis. It rises earlier, remains elevated longer (up to 14 days), and is more pancreas-specific than amylase. Amylase may normalize within 48-72 hours and may also be elevated in non-pancreatic conditions.

According to ACG (American College of Gastroenterology) Guidelines:

"Serum lipase is preferred over amylase due to its higher sensitivity, specificity, and prolonged elevation in pancreatitis." Reference:

American College of Gastroenterology (ACG) Clinical Guideline: Management of Acute Pancreatitis, 2013.

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

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NEW QUESTION # 144

Which scanning technique would best reduce reverberation artifact when assessing the gallbladder?

- A. Turn on penetration
- B. Decrease the overall gain
- C. Decrease the sector width
- **D. Turn on harmonics**

Answer: D

Explanation:

Tissue harmonic imaging significantly reduces reverberation and side-lobe artifacts by utilizing nonlinear propagation of ultrasound waves. This produces clearer images of fluid-filled structures like the gallbladder, improving visualization of wall thickness and intraluminal contents.

According to Zwiebel's Introduction to Vascular Ultrasound:

"Harmonic imaging effectively reduces reverberation artifact, improving image quality in gallbladder and cystic structure evaluation."

Reference:

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

AIUM Practice Parameter for Abdominal Ultrasound, 2020.

NEW QUESTION # 145

Which sonographic finding indicates the need for immediate surgical intervention following testicular trauma?

- A. Heterogeneity of the testicular parenchyma
- **B. Discontinuity of the tunica albuginea**
- C. Intratesticular hematoma
- D. Increased testicular vascularity

Answer: B

Explanation:

The tunica albuginea is a dense fibrous capsule surrounding the testis. Discontinuity of the tunica albuginea on ultrasound is diagnostic of testicular rupture - a urologic emergency that requires immediate surgical repair to preserve testicular function and viability. Early surgical intervention within 72 hours has a high success rate for testicular salvage (up to 90%).

* Intratesticular hematoma (A) may be managed conservatively if the tunica albuginea is intact.

* Heterogeneity of the parenchyma (C) indicates injury but not necessarily rupture.

* Increased vascularity (D) may be seen with inflammation or reperfusion but does not mandate surgery unless rupture is present.

Reference Extracts:

* Dogra VS, Bhatt S. "Acute painful scrotum: ultrasound evaluation." Radiologic Clinics of North America. 2004; 42(2):349-363.

* Middleton WD, Kurtz AB, Hertzberg BS. Ultrasound: The Requisites. 3rd ed. Elsevier, 2015.

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NEW QUESTION # 146

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