

Give one correct answer for each question.

- 1. Identify one false statement.**
 - A. Brown-Sequard syndrome, first reported in 1849, is characterised by hemisection of the cord.
 - B. Brown-Sequard syndrome is characterised by disruption of the descending lateral corticospinal tracts resulting in ipsilateral hemiplegia.
 - C. Brown-Sequard syndrome is characterised by damage of the ascending lateral spinothalamic tracts (which cross within one or two levels of the dorsal root entrance) resulting in contralateral loss of pain and temperature.
 - D. Damage to the dorsal columns results in contralateral loss of proprioception and fine touch below the level of the lesion.
- 2. Which of the following statements is false?**
 - A. Image post-processing gives computed radiography (CR) a considerable advantage over film-screen systems.
 - B. MUSICA has slightly improved image quality over MUSICA².
 - C. Image quality is usually evaluated on the basis of three measures of imaging performance, namely: spatial resolution, contrast and noise.
 - D. Making accurate and efficient diagnoses from radiological images requires good image contrast and sufficient spatial resolution at acceptable noise levels.
- 3. Which of the following statements is false?**
 - A. The role of MRI in screening for breast cancer and its use after the diagnosis of breast cancer is an enormous topic, with over 5 000 papers published in the last 10 years.
 - B. Findings have consistently shown that high-risk young women (whose disease tends to be missed with mammography) do not benefit from the addition of an MRI.
 - C. Within the context of high-risk breast screening, MRI should be used as an adjunct to, and not as a replacement for, mammography.
 - D. The low PPV of MRI (20 - 40%), leads to a high rate of biopsies and further investigations – acceptable in women with a high risk of breast cancer, but potentially harmful to women in lower-risk categories.
- 4. Which of the following statements is false?**
 - A. The Hazardous Substances Act has been undermined by poor administration and uncertainty about regulations and licensing conditions.
 - B. Effective and legal radiation control is possible by activating the National Advisory Committee on Electronic Products.
 - C. The training and accreditation of the technicians, responsible for a single quality assurance test per year, should be emphasised.
 - D. Constructive engagement with the professional bodies involved in the medical use of X-rays through a National Advisory Committee on Electronic Products may be a cost-effective solution for lowering radiation dosage to the population.
- 5. Which of the following is true?**
 - A. The comparative effectiveness of MRI in breast cancer (COMICE) trial was a multicentre trial based in Sweden.
 - B. Twenty-five breast centres took part in a prospective randomised study.
 - C. Over 1 600 women who had been diagnosed with breast cancer and selected for breast conservation therapy (BCT) were enrolled.
 - D. They were randomised into 2 groups: half received an MRI preoperatively, and half received breast elastography.
- 6. Identify the false statement among the following statements:**
 - A. Cubital tunnel syndrome is the second most common peripheral neuropathy of the upper limb.
 - B. Cubital tunnel syndrome occurs as a result of compression of the ulnar nerve between the medial epicondyle, the olecranon and the roof of the tunnel that is formed by the retinaculum which is also known as Osborne's band or the arcuate ligament.
 - C. Physiological compression occurs during elbow flexion.
 - D. Most commonly compression has been attributed to the presence of an accessory muscle – the anconeus epitrochlearis.
- 7. The following are true, except:**
 - A. Retrograde jejuno gastric intussusception is a well-recognised, rare, but potentially fatal long-term complication of gastrojejunostomy or Billroth II reconstruction.
 - B. Diagnosis of this condition is difficult in most cases.
 - C. Early diagnosis and prompt surgical intervention is not critical as most cases reduce spontaneously over 12 hours.
 - D. Since gastrojejunostomies with vagotomy are on a declining trend, it is extremely rare to come across such a complication.
- 8. Identify the false statement among the following.**
 - A. Protocols for chest CT surveys for mediastinal pathology, lung masses and 'rule out pathology' chest scans traditionally dictate a post-contrast scan beginning 60 s after initiating an intravenous contrast injection.
 - B. In numerous practices, 100 - 120 cc of contrast is traditionally used. This process usually results in adequate contrast throughout the vascular structures in the mediastinum and lungs and enhancement of pathologic masses or lymph nodes.
 - C. When there are clinical indications of vascular pathology (i.e. aortic or pulmonary arteries and their respective branch vessels), it is imperative to add a dedicated arterial phase scan before the 60 s scan series.
 - D. Even if there are no clinical indications to include an arterial study, an arterial phase should always be performed
- 9. Identify the true statement.**
 - A. Patients with dislocation of the ulnar nerve never present clinically with a snapping sensation at the elbow upon flexion.
 - B. Dislocation of the ulnar nerve with snapping triceps syndrome has been implicated as a cause of cubital tunnel syndrome.
 - C. Dislocation of the ulnar nerve can only be demonstrated by MRI.
 - D. Once diagnosed, conservative management is the only option.
- 10. Identify one true statement.**
 - A. The Stormers rugby team now play in shocking pink outfits.
 - B. The RSSA will scale down its contribution to CME in radiology over the next two years.
 - C. The CPD quiz in *SAJR* is the least read section of the journal.
 - D. Razaan Davis is the newly appointed deputy editor of the *South African Journal of Radiology*.

CPD Instructions:

1. CPD questionnaires must be completed online by going directly (not via Google) to www.cpdjournals.co.za, and registering. You will then receive an email notifying you of your username and password for subsequent logging on.
2. Read the articles in the journal to find the answers to the questions.
3. After completing the questionnaire, you can check the answers and print your own CPD certificate.
4. Please contact Gertude Fani on 021 681 7200 or gertrude@hmpg.co.za in the event of queries.

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