

### **Format of Final Fellowship Examination in NM (Reporting Session) Questions**

1. Each question should consist of a brief history and one to four films.
  - a. Maximum 50 words for the brief history.
  - b. Maximum 2 modalities (NM, PET, plain XR, CT, MR, blood test, ECG, etc. SPECT/CT and PET/CT are considered as single modality NM and PET respectively.)
  - c. Maximum 4 films.
2. Each question should be given 5 scores.
3. There should be two to five short questions that require very short answers.
  - a. Maximum 5 questions.
  - b. Maximum 20 words for each short question.
  - c. Maximum 10 words for one answer.
4. Each correct answer would be given half, one or two marks depending on the difficulty and the total number of answers required in that question.
  - a. Maximum 8 answers in one question.
5. The images submitted should conform to the following format:
  - a. The question writer should provide savescreens with the predefined display (grey scale or specific colour scale such as GE colour or rainbow, etc., and the window setting)
  - b. For an image with too much details, you can crop different parts of the image to multiple images, provided the total number of images is not more than 4.

Below is a question from the past examination for reference.

#### **Clinical History:**

Male / 75-year-old. Two brain SPECT scans were performed using two different radiopharmaceuticals under resting conditions without any pharmaceutical intervention 2 days apart.

#### **Questions:**

- a. Describe one positive scan finding that appears on both scans. (1 mark)
- b. What is the cause of the finding described on question a? (0.5 mark)
- c. Describe one positive finding that appears on the second scan only. (1 mark)
- d. What is the cause of the finding described on question c? (0.5 mark x 3)
- e. Name another pathology (other than in this case) that can cause discrepancy in brain SPECT scan findings when the two different radiopharmaceuticals are used for imaging. (1 mark)

#### **Answers:**

- a. Decreased perfusion over left cerebellum. (1 mark)
- b. Crossed cerebellar diaschisis. (0.5 mark)
- c. Decreased perfusion over right parietal lobe. (1 mark)
- d. Cerebral infarction (0.5 mark), subacute phase (0.5 mark) with luxury perfusion (0.5 mark)
- e. Acute herpetic encephalitis. (1 mark)

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