

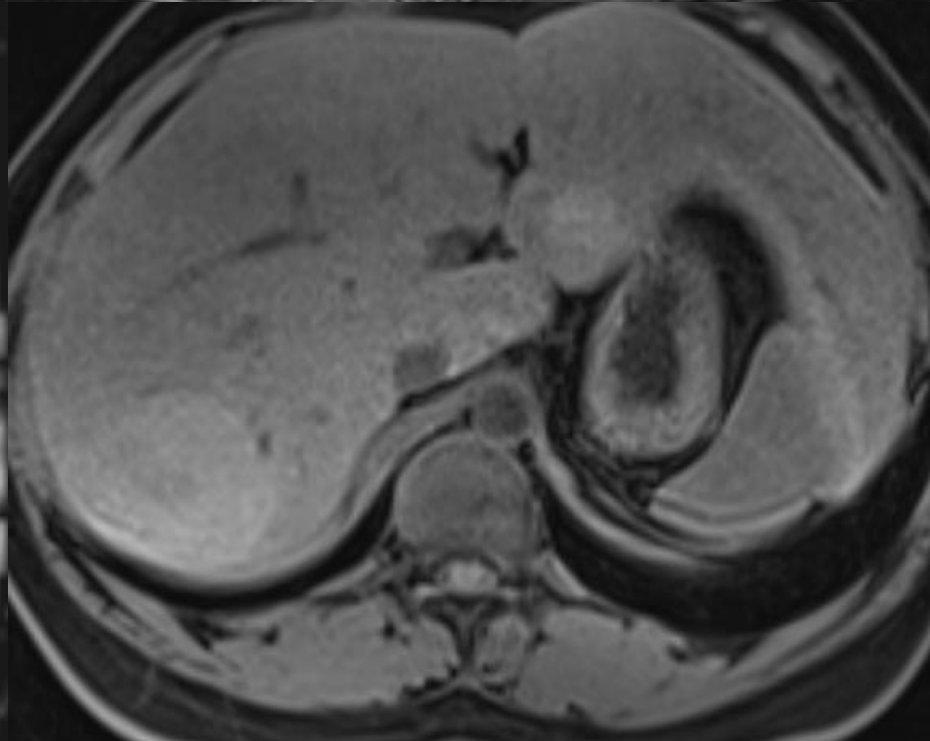
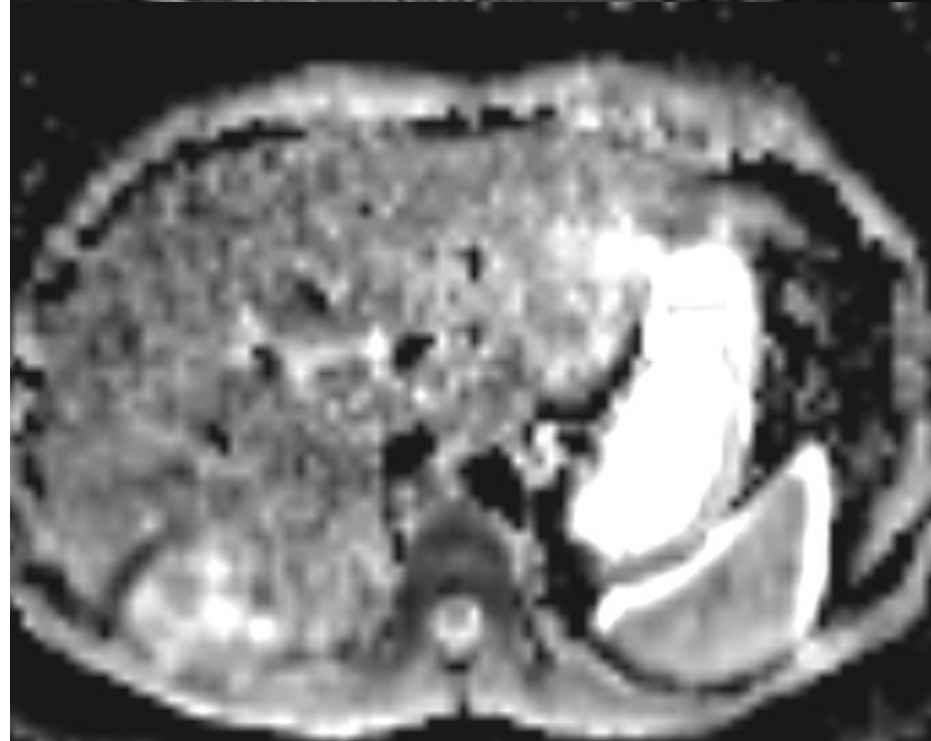
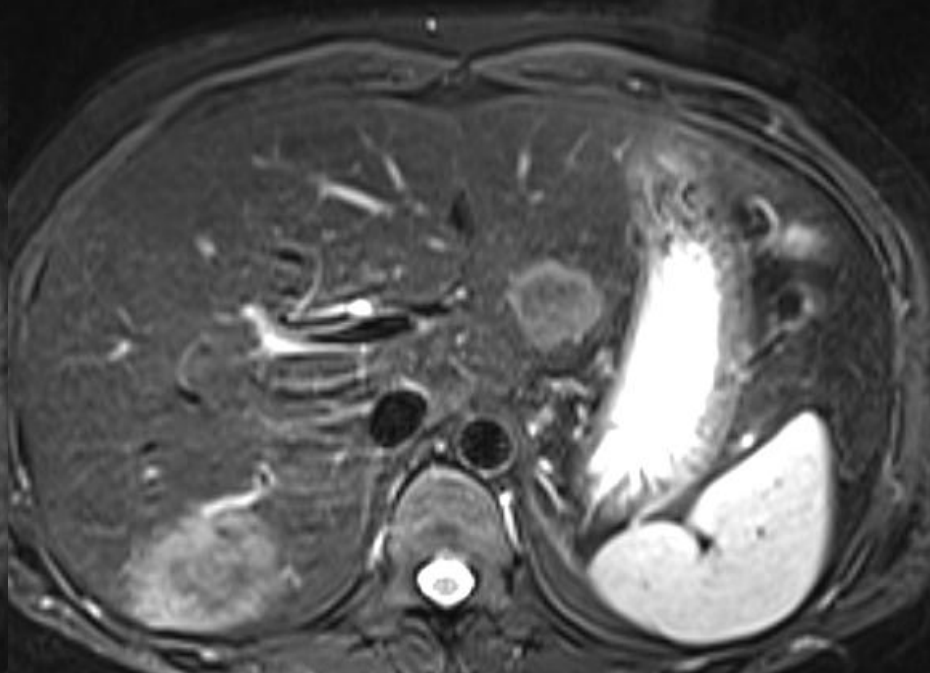
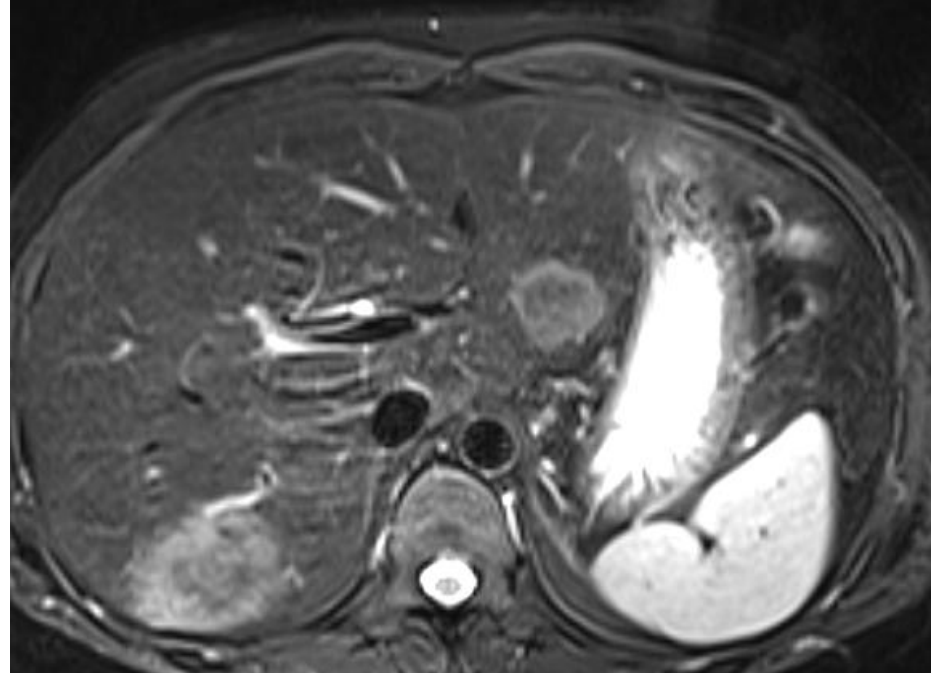
2017年福建省放射专业住院医师 规范化培训技能考核腹部试题解析

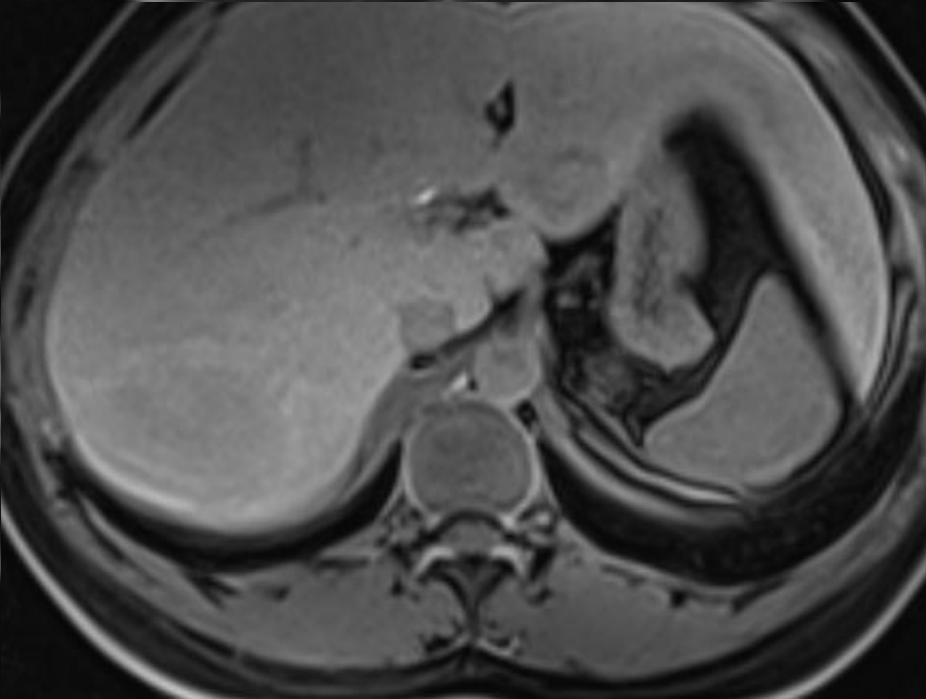
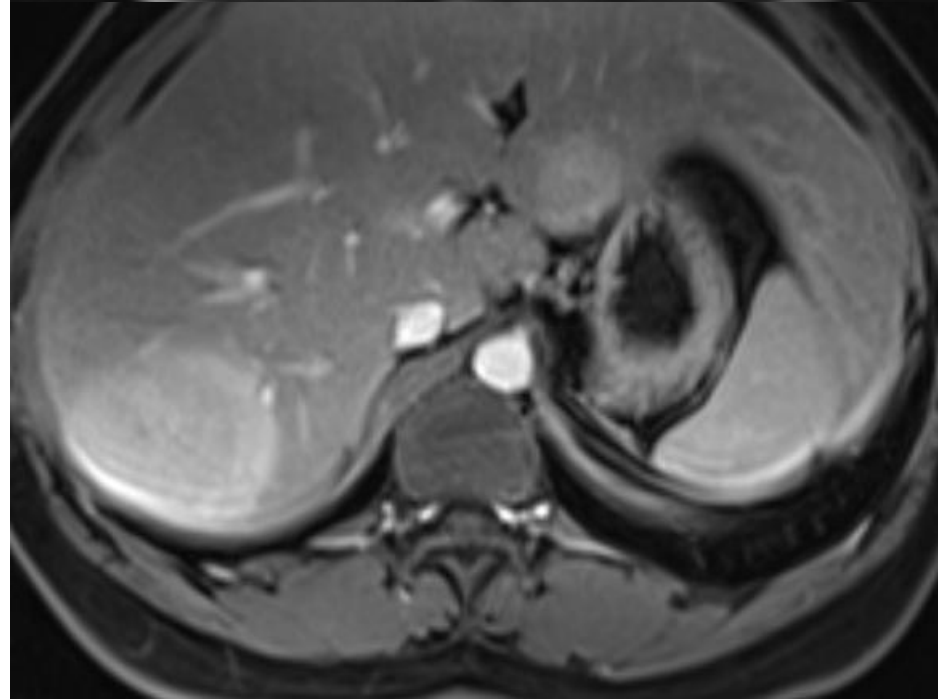
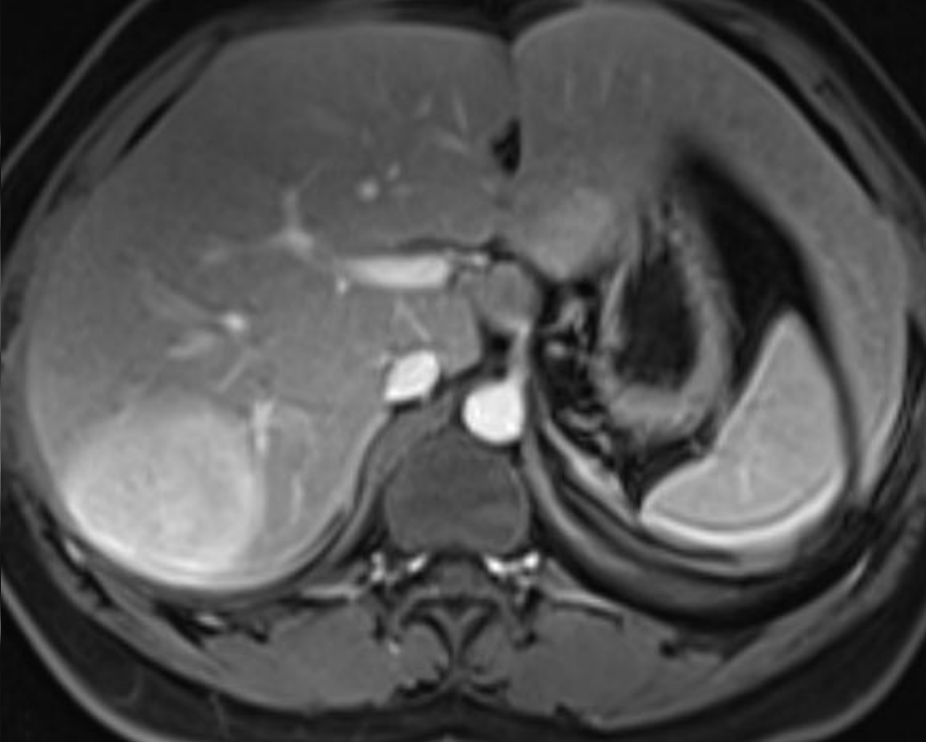
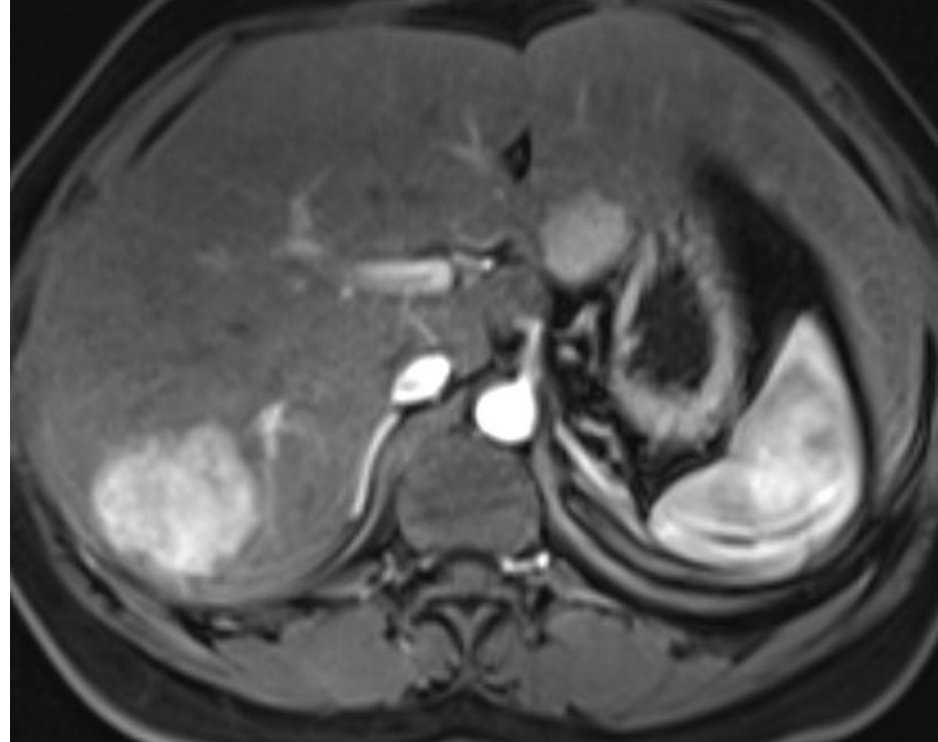
福建医科大学附属第一医院影像科

曹代荣，郑贤应

74

女,24,上腹不适2个月



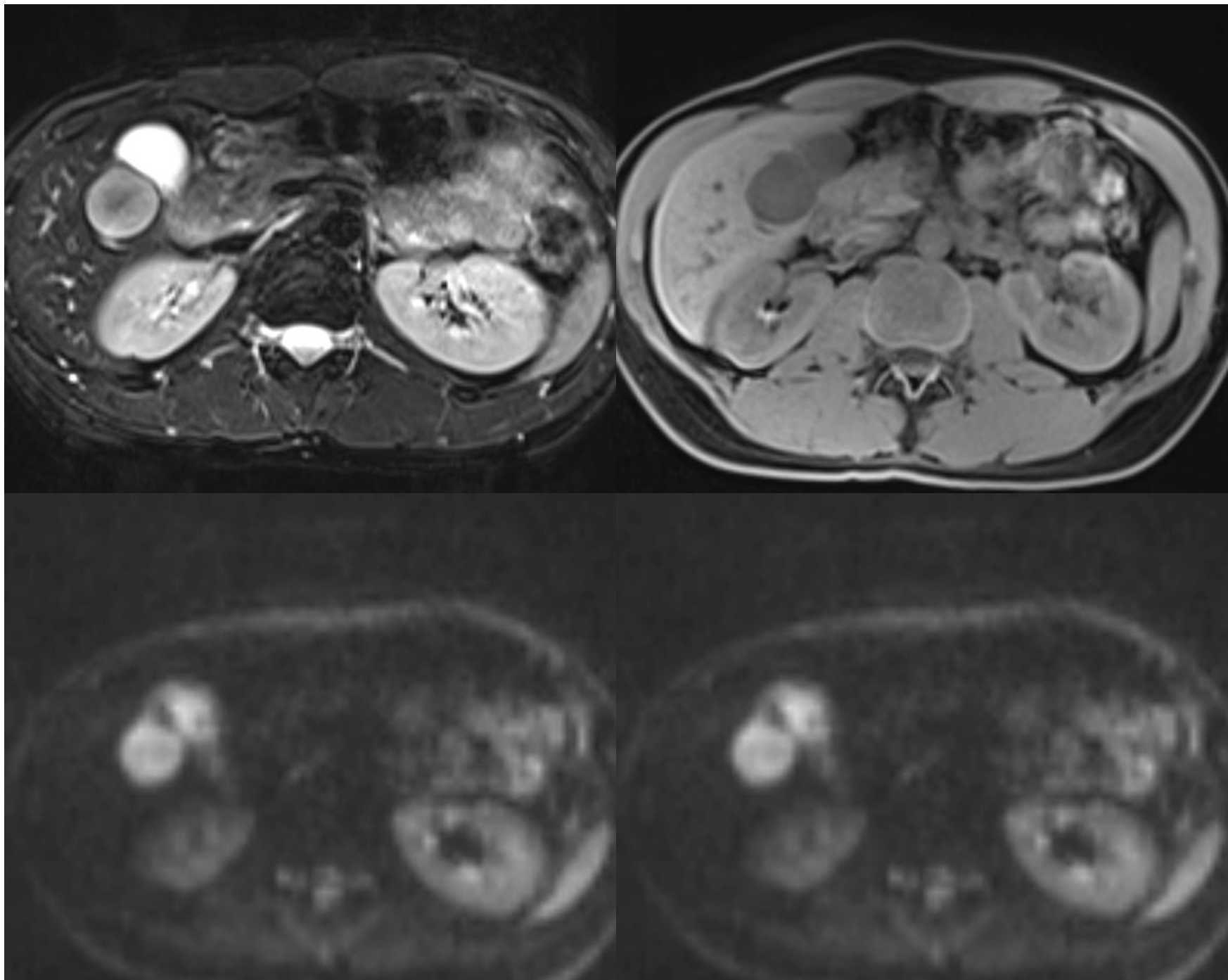


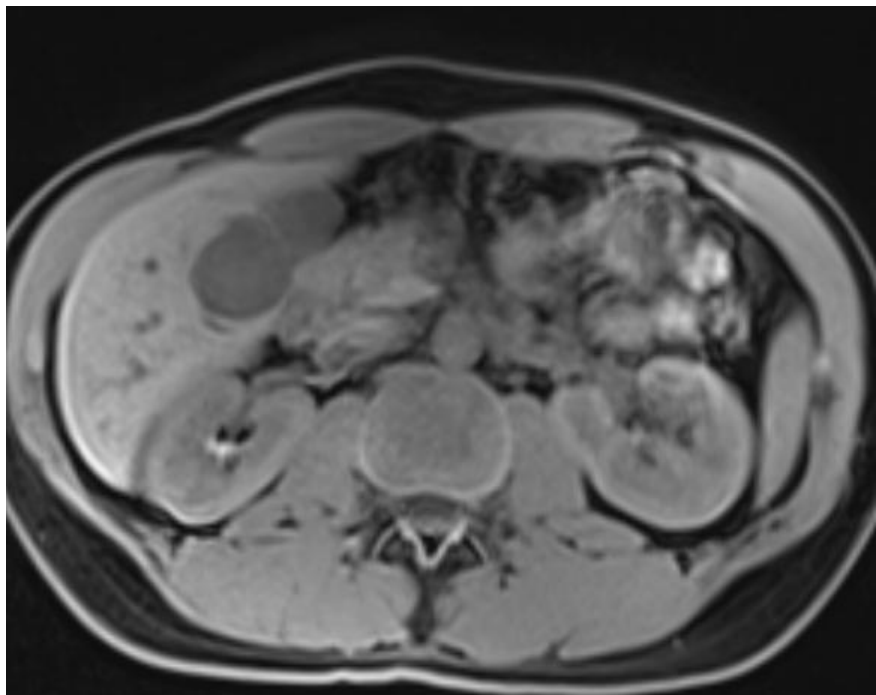
征象？诊断？鉴别？

本病的病理改变？

FNH

**男，20岁，发现“HBsAg阳性”10余年，发现肝占位1天。
外院诊断“FNH”可能性大。**





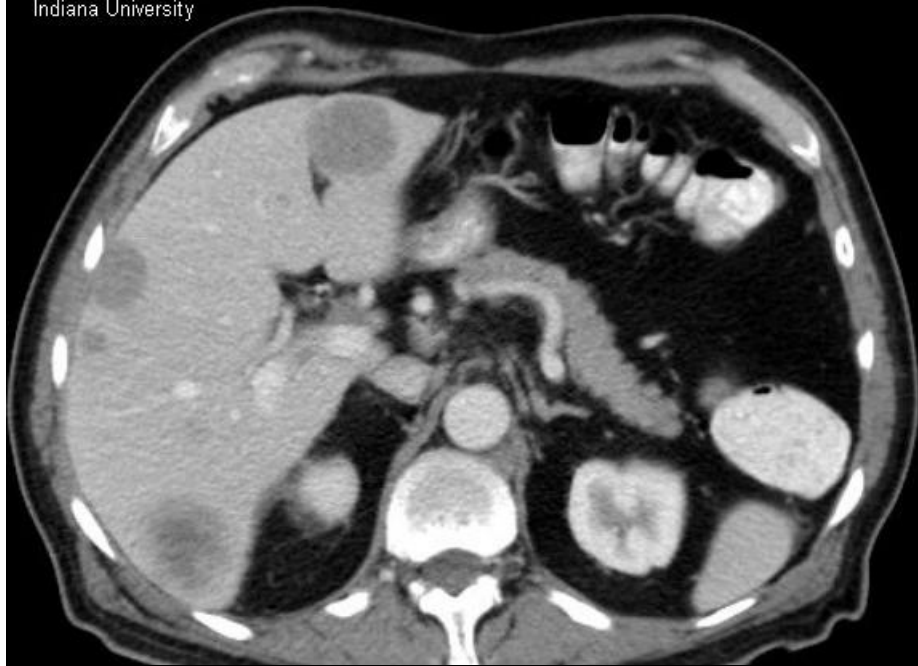
请回答

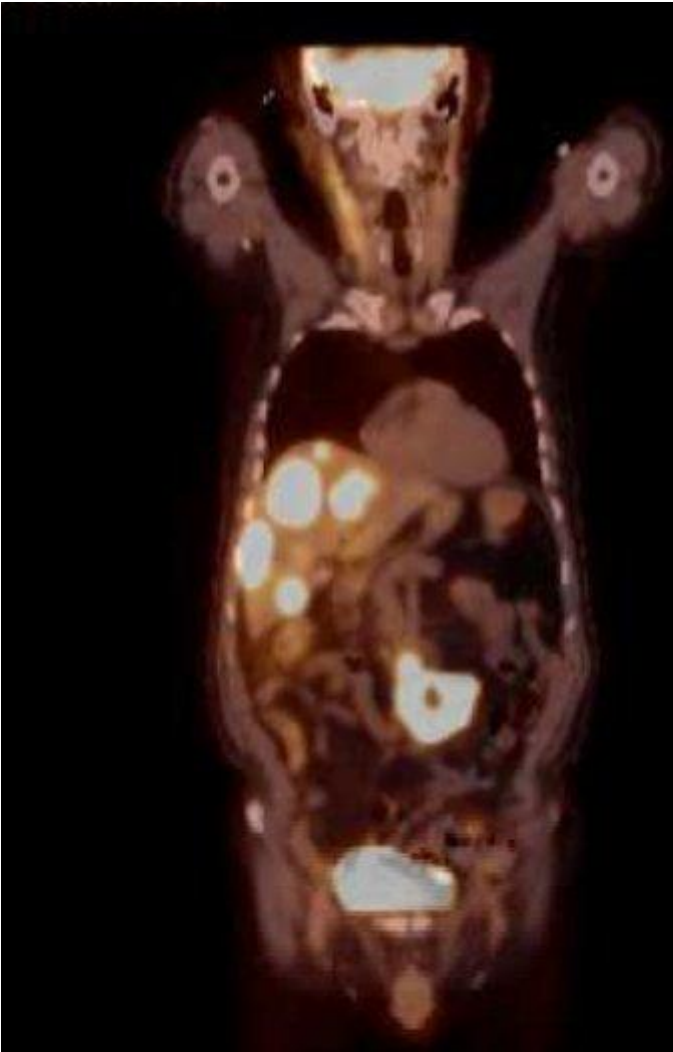
- **请描述主要的影像征象**
- **你认为外院的诊断是否符合FNH的影像表现**
- **你的诊断、鉴别诊断及鉴别的要点**
- **肝脏结节的鉴别诊断有何体会**

（右肝）结节型低分化肝细胞性肝癌

78

**Elderly man presents
with abdominal pain**





30 cm



Complete

征象？诊断？鉴别？

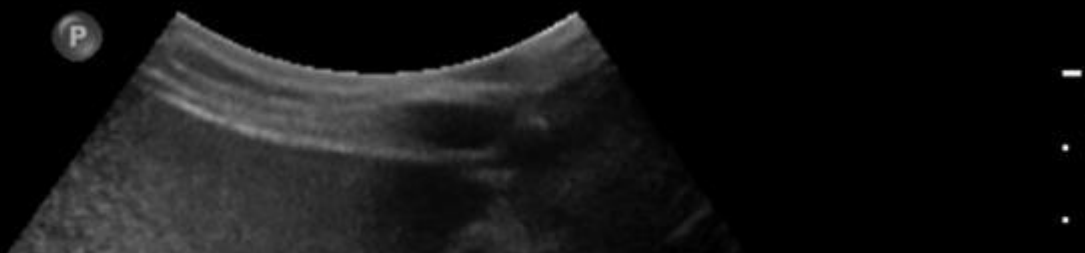
Lymphoma

Differential diagnosis

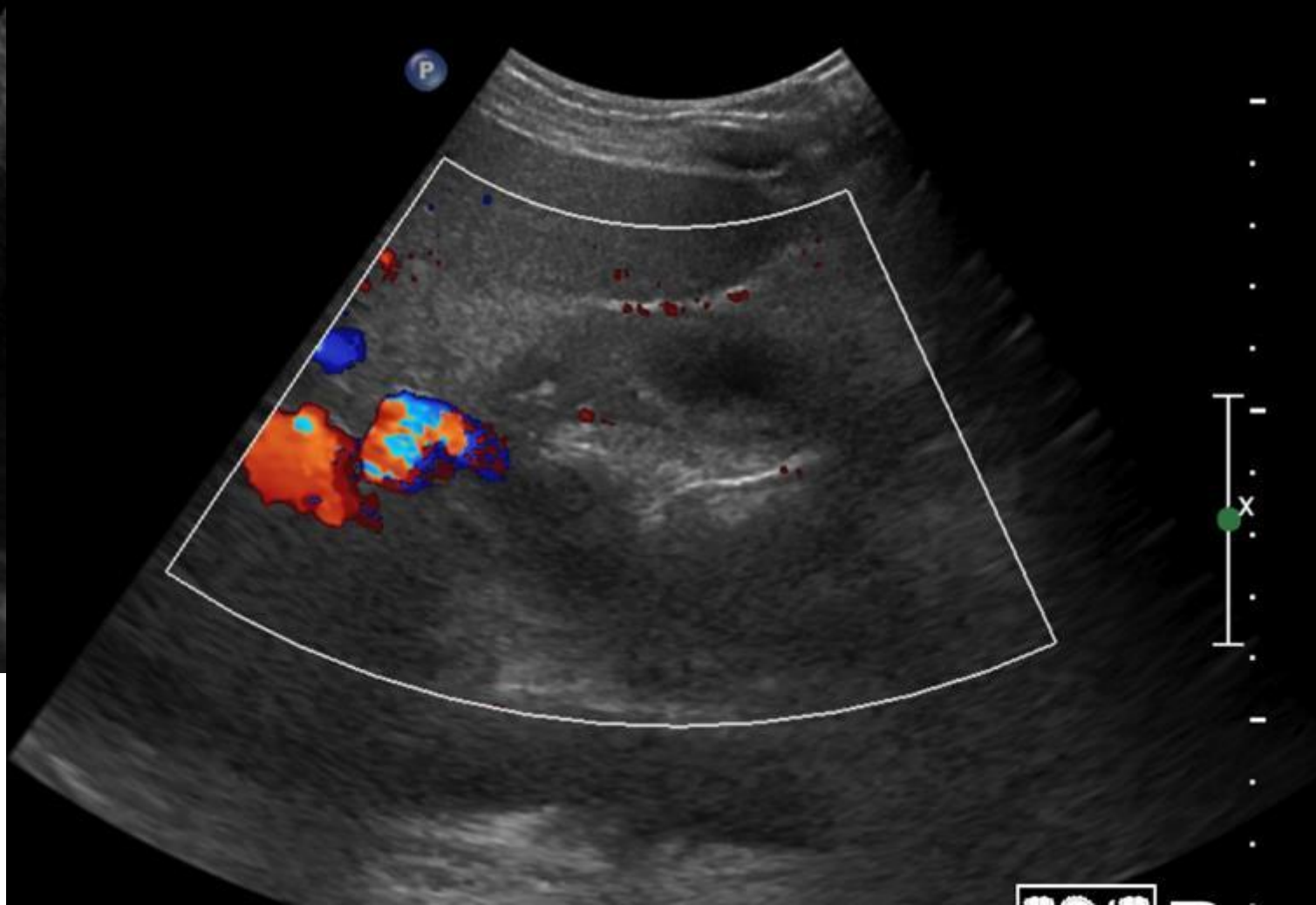
- **Primary mesenteric gastrointestinal stromal tumor**
- **Lymphoma**
- **Sarcoma**
- **Carcinoid**

A 55-year-old man presents with abdominal pain and symptoms of gastroesophageal reflux.

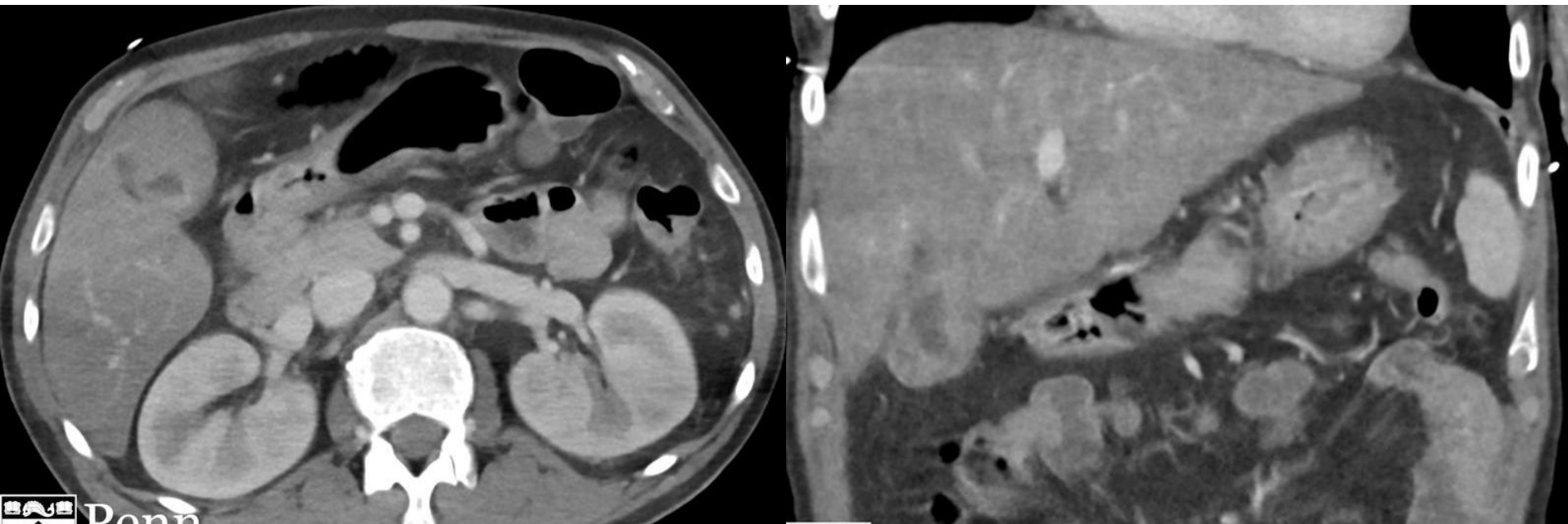
P



P

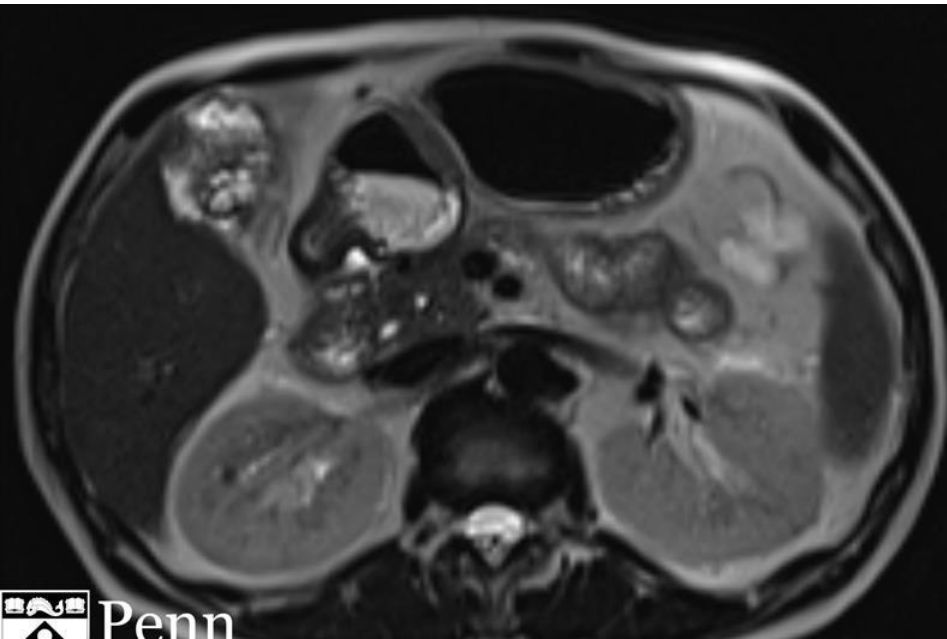


100

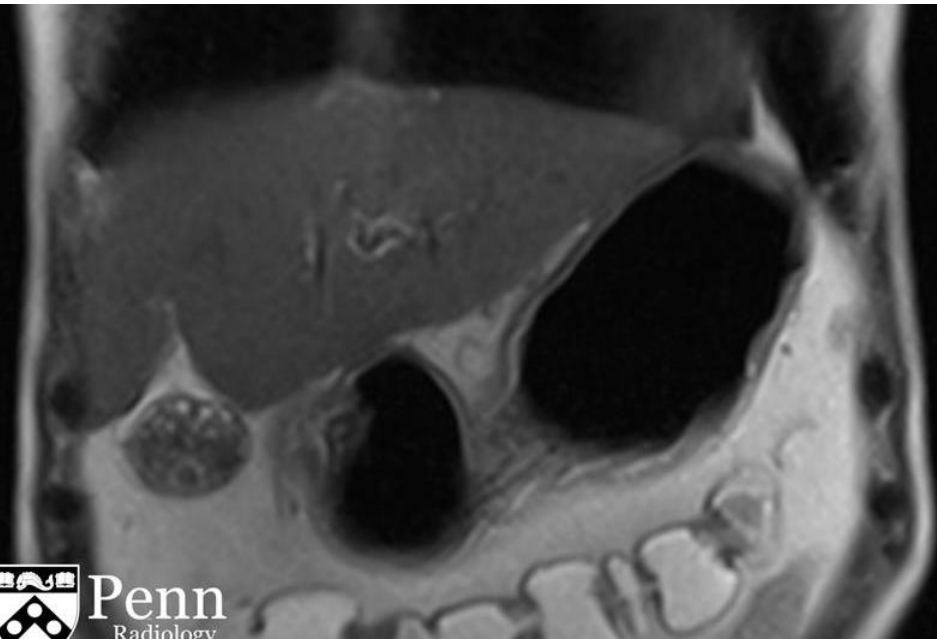


CT表现（请选择）：

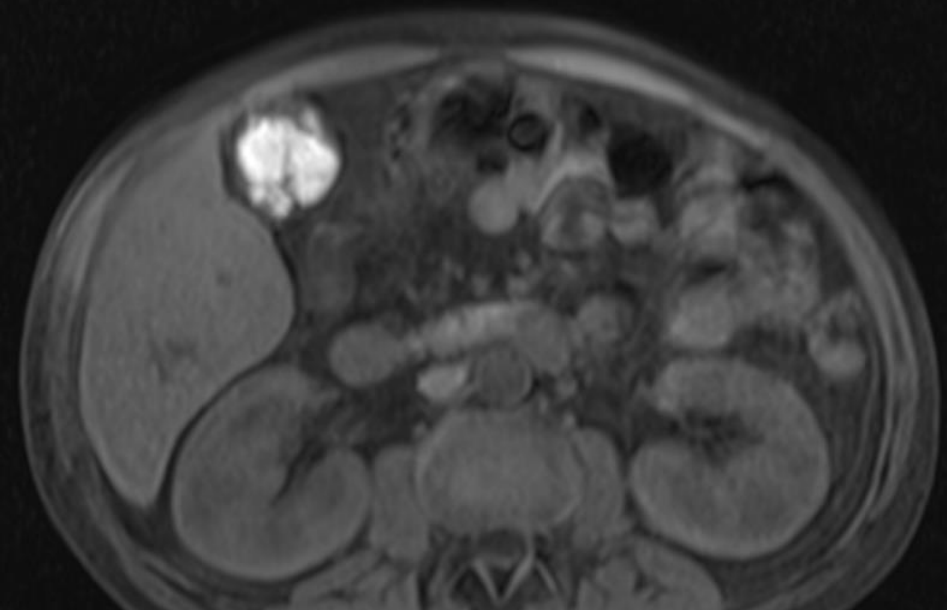
- | | |
|------------|-------------|
| (1) 慢性胆囊炎 | (2) 胆囊肿块样增厚 |
| (3) 胆囊窝处肝癌 | (4) 有无补充诊断？ |



 Penn



 Penn
Radiology



 Penn



你的诊断与鉴别诊断？

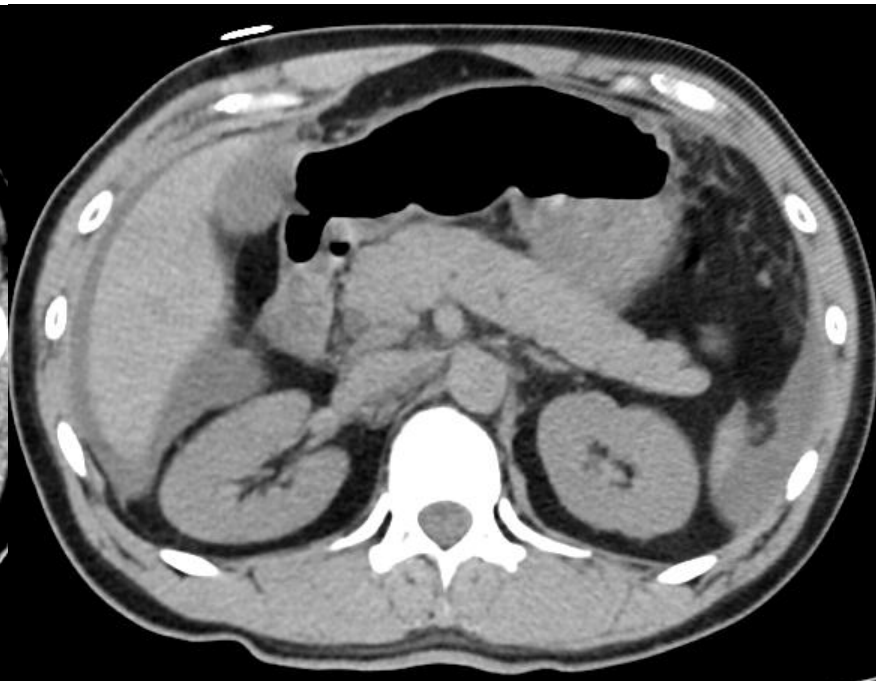
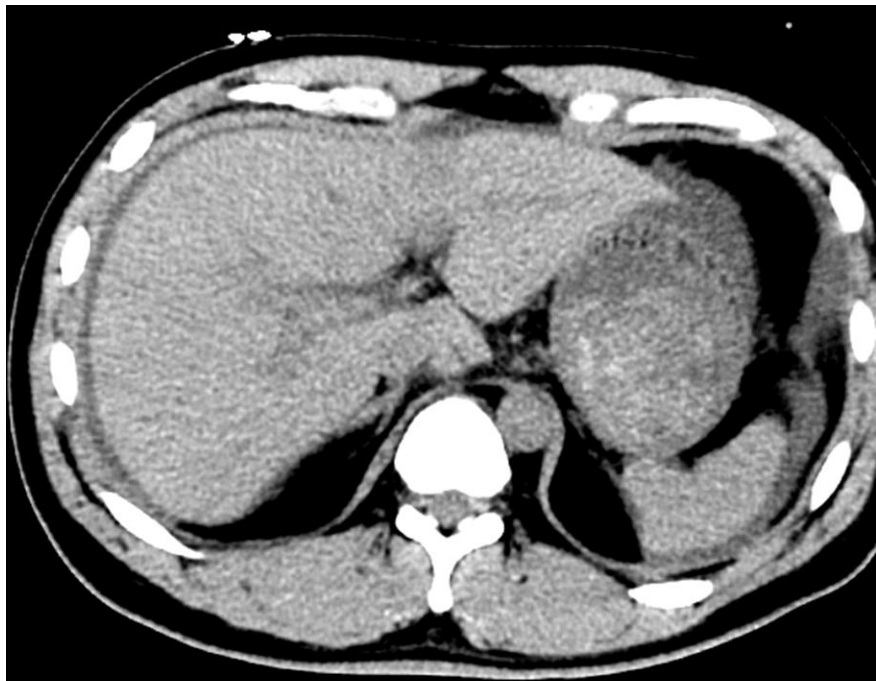
Diffuse adenomyomatosis

Differential diagnosis

- **Gallbladder carcinoma**
- **Chronic cholecystitis**
- **Diffuse adenomyomatosis**
- **Emphysematous cholecystitis**

81

男，31岁，外伤后腹痛2小时



你的诊断（请选择）

(1) 肝挫裂伤

(2) 脾挫裂伤

(3) 肾上腺损伤

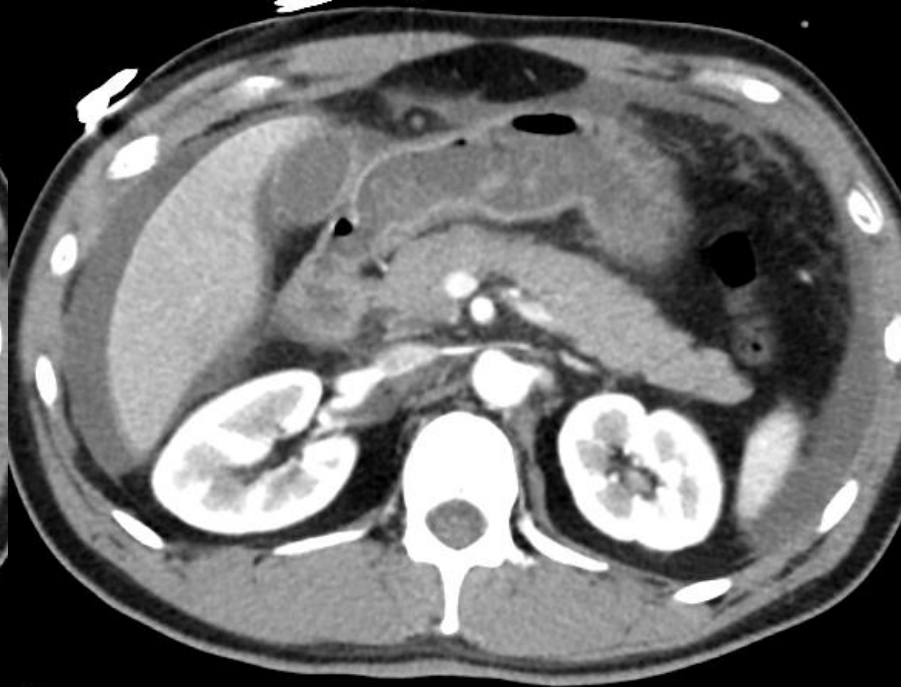
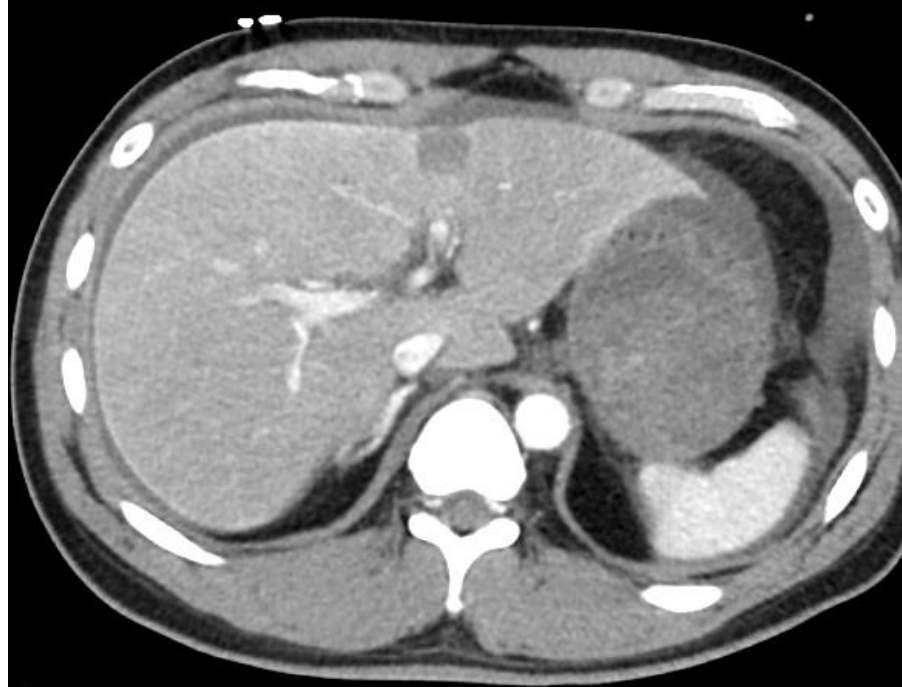
(4) 胰腺损伤

(5) 小肠损伤

(6) 肠系膜损伤

请解释你的诊断

建议进一步做什么检查？

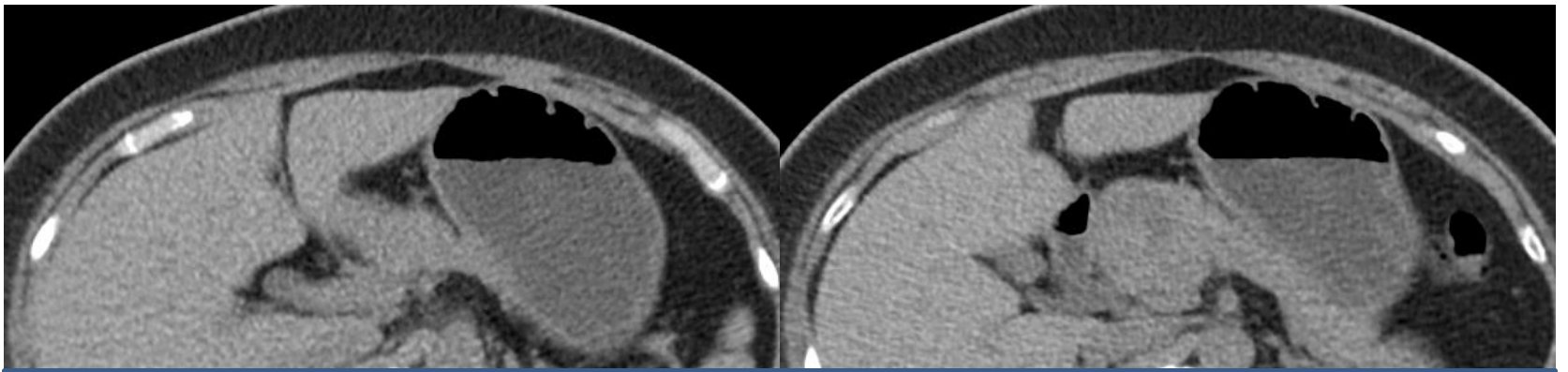


你的诊断及依据？

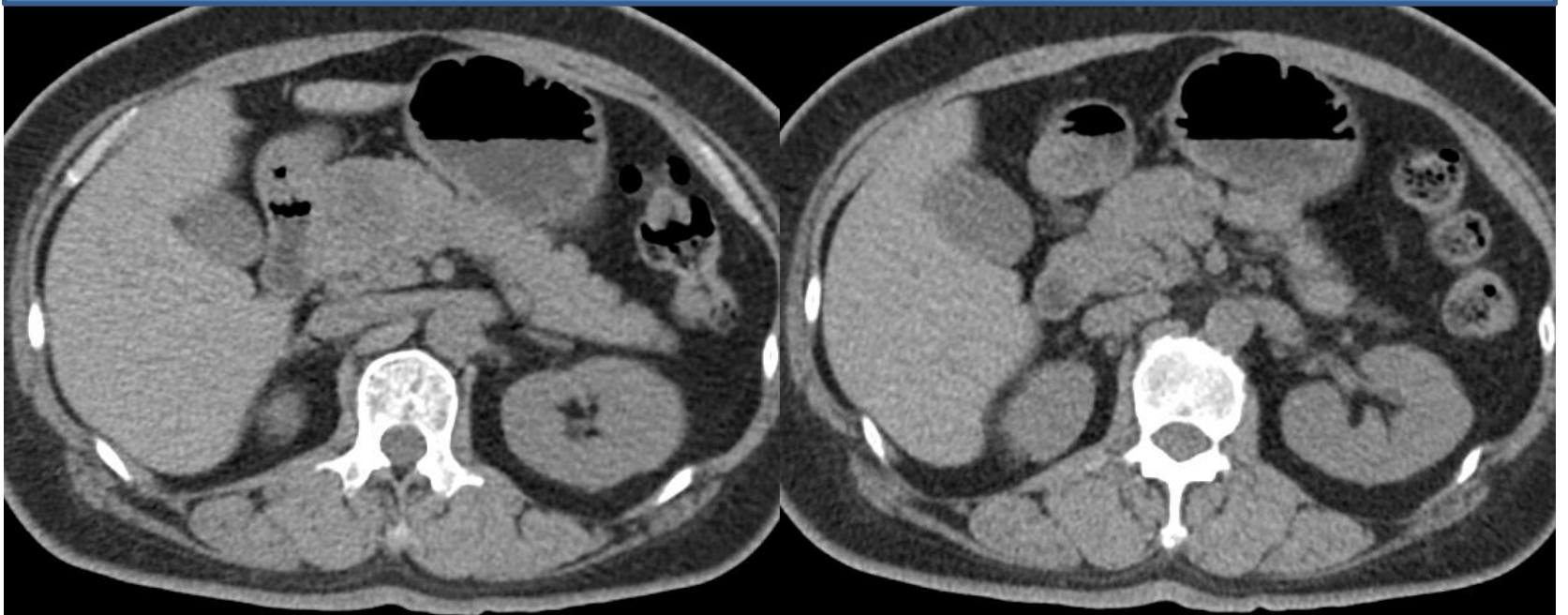
肝挫裂伤

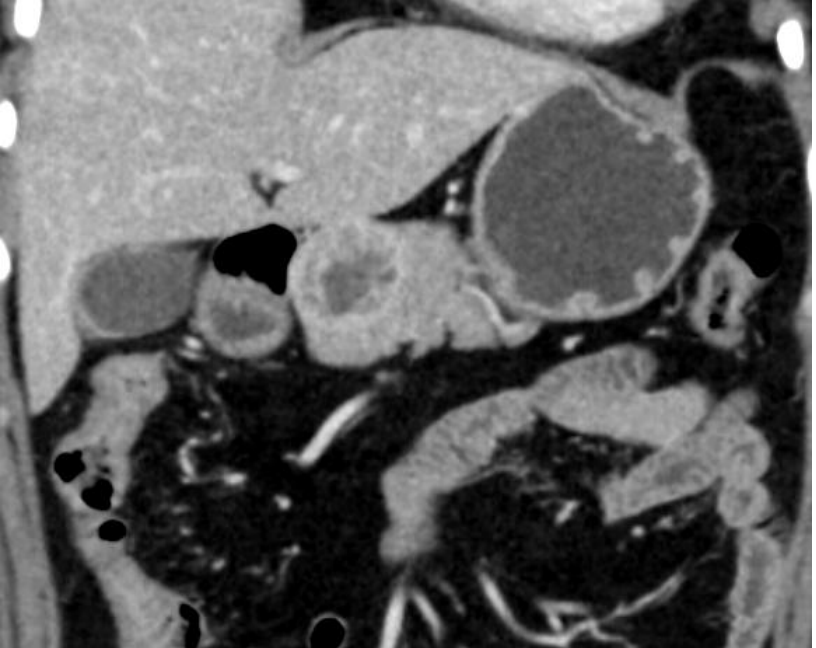
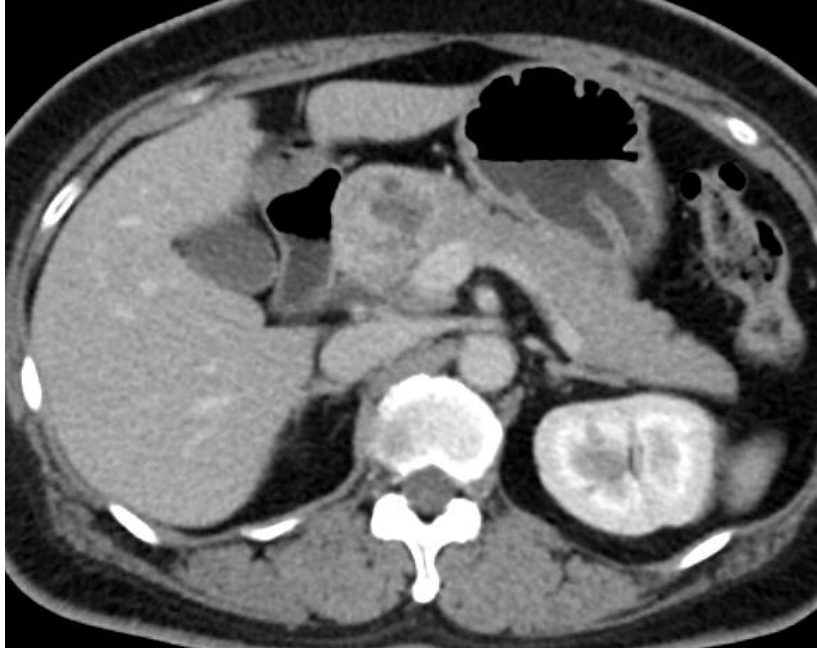
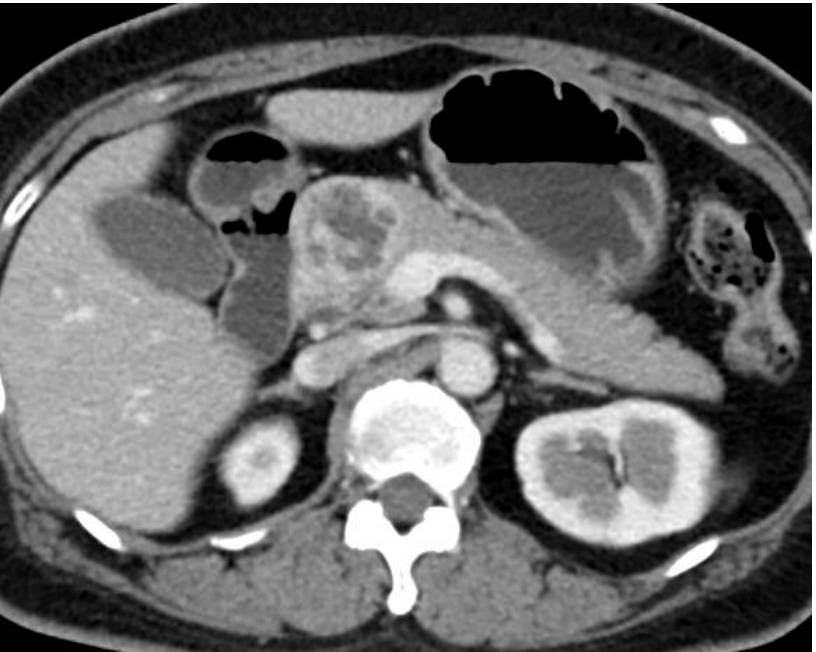
小肠损伤

肠系膜损伤



问题1：请指出最明显的病变部位？





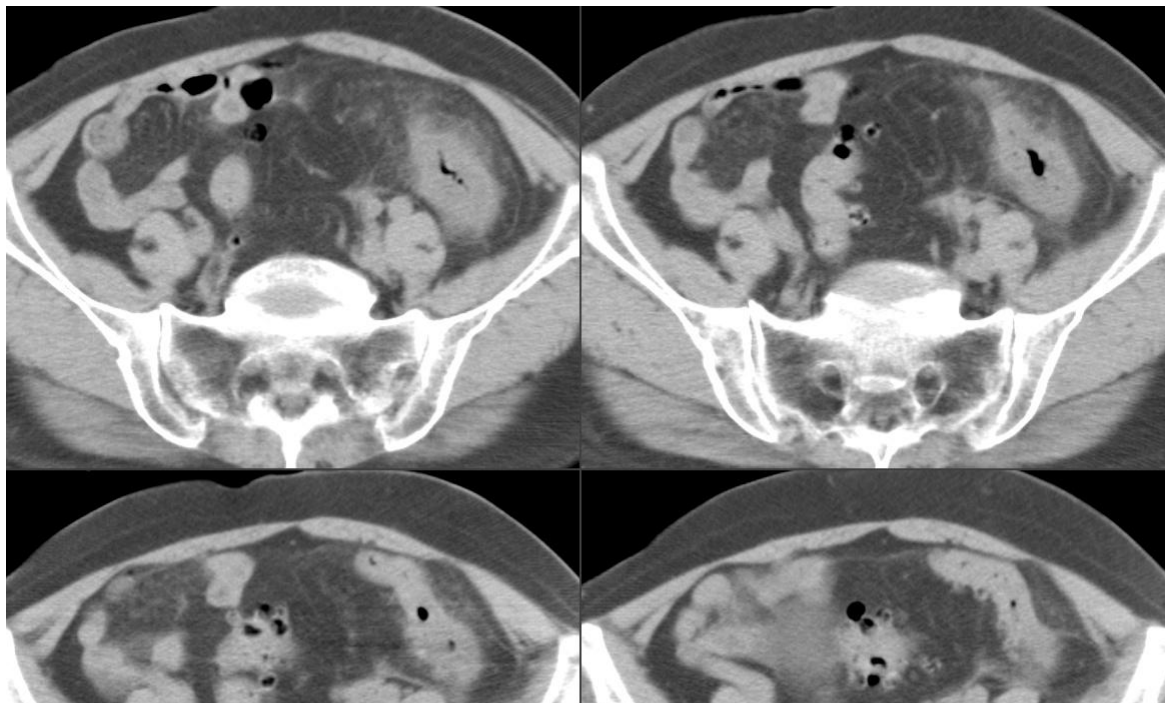
问题2：你的最后诊断？请解释

问题3：鉴别诊断？

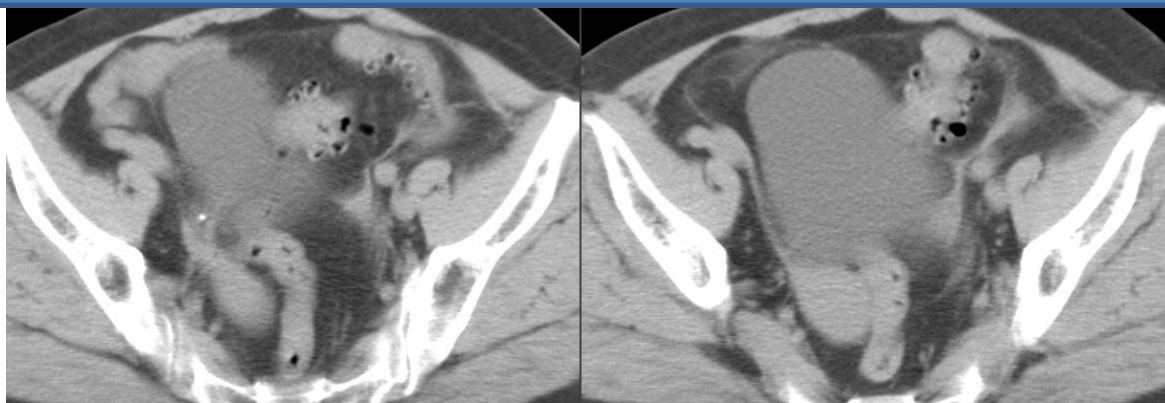
胰腺 神经内分泌瘤

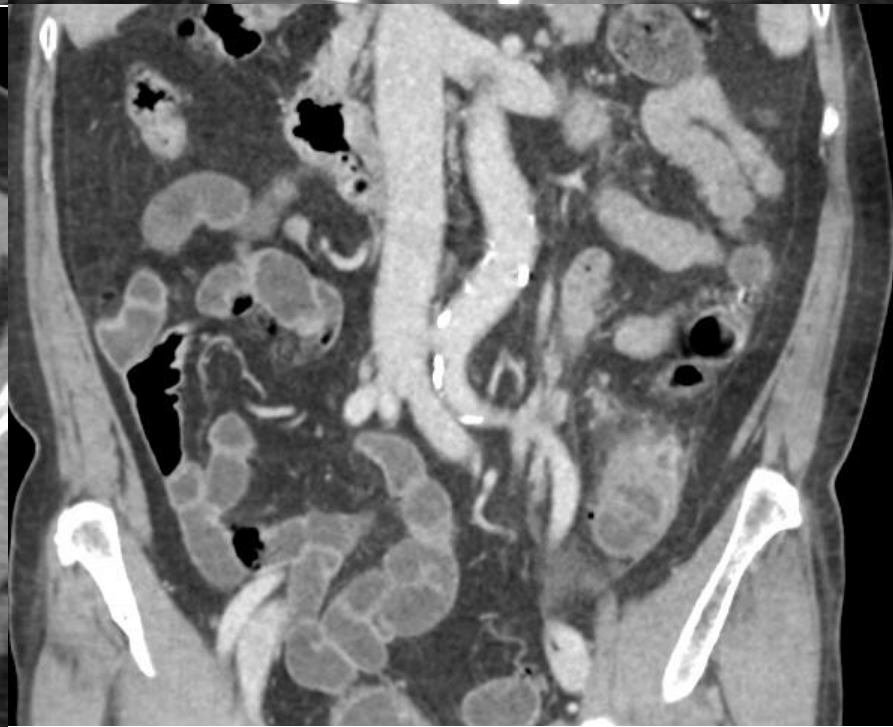
62

女，62岁，左下腹痛2天



问题1：较明显的病变在哪个脏器？
待 续！





问题2：你的最后诊断？

请解释！鉴别诊断？

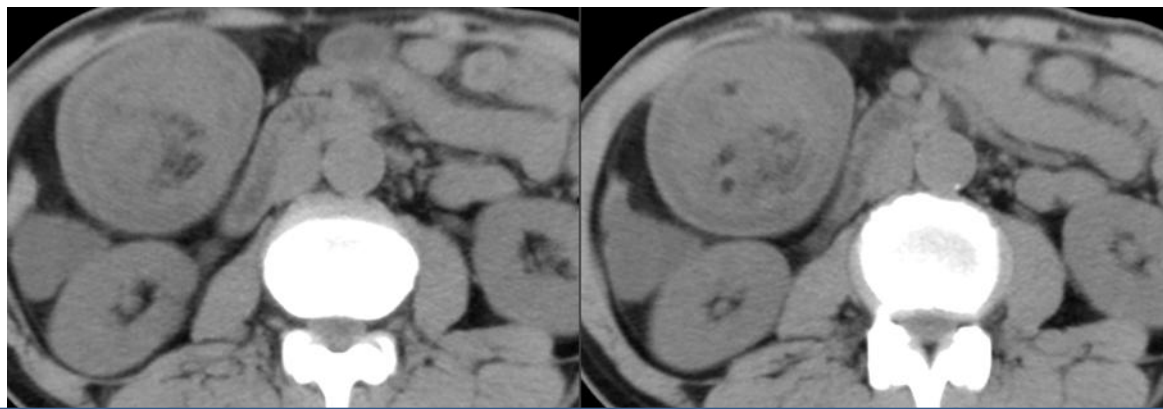
降结肠-乙状结肠憩室并感染

66

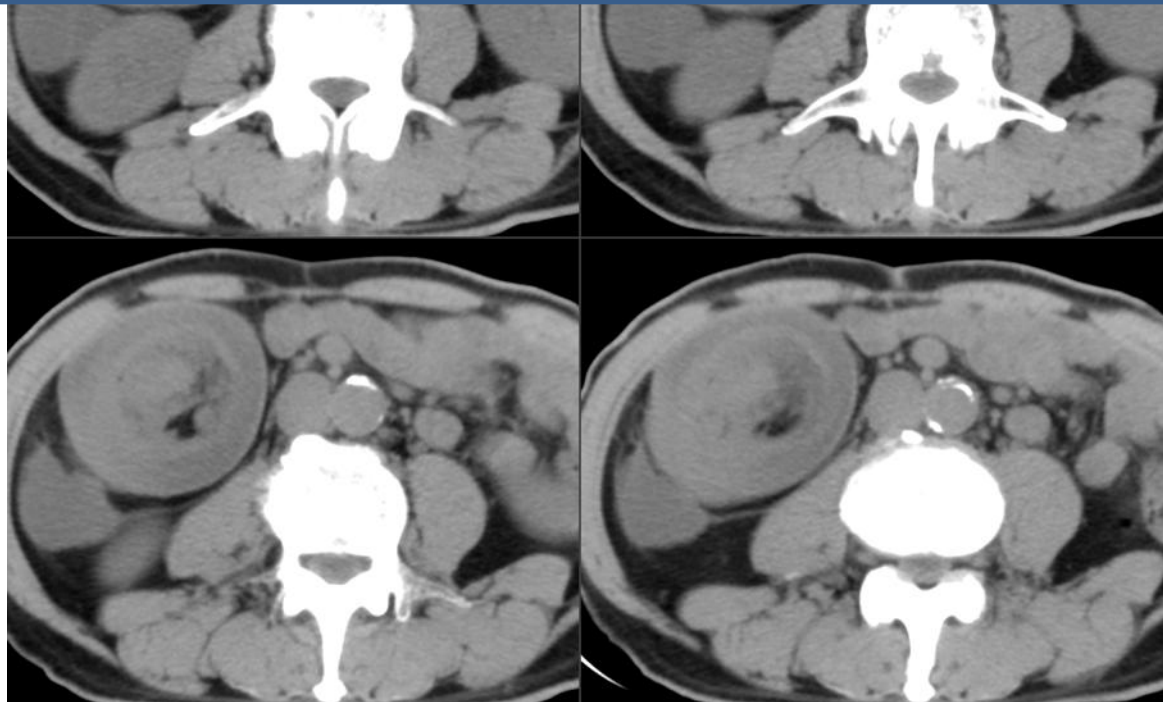
女，53，上腹痛半个月

67

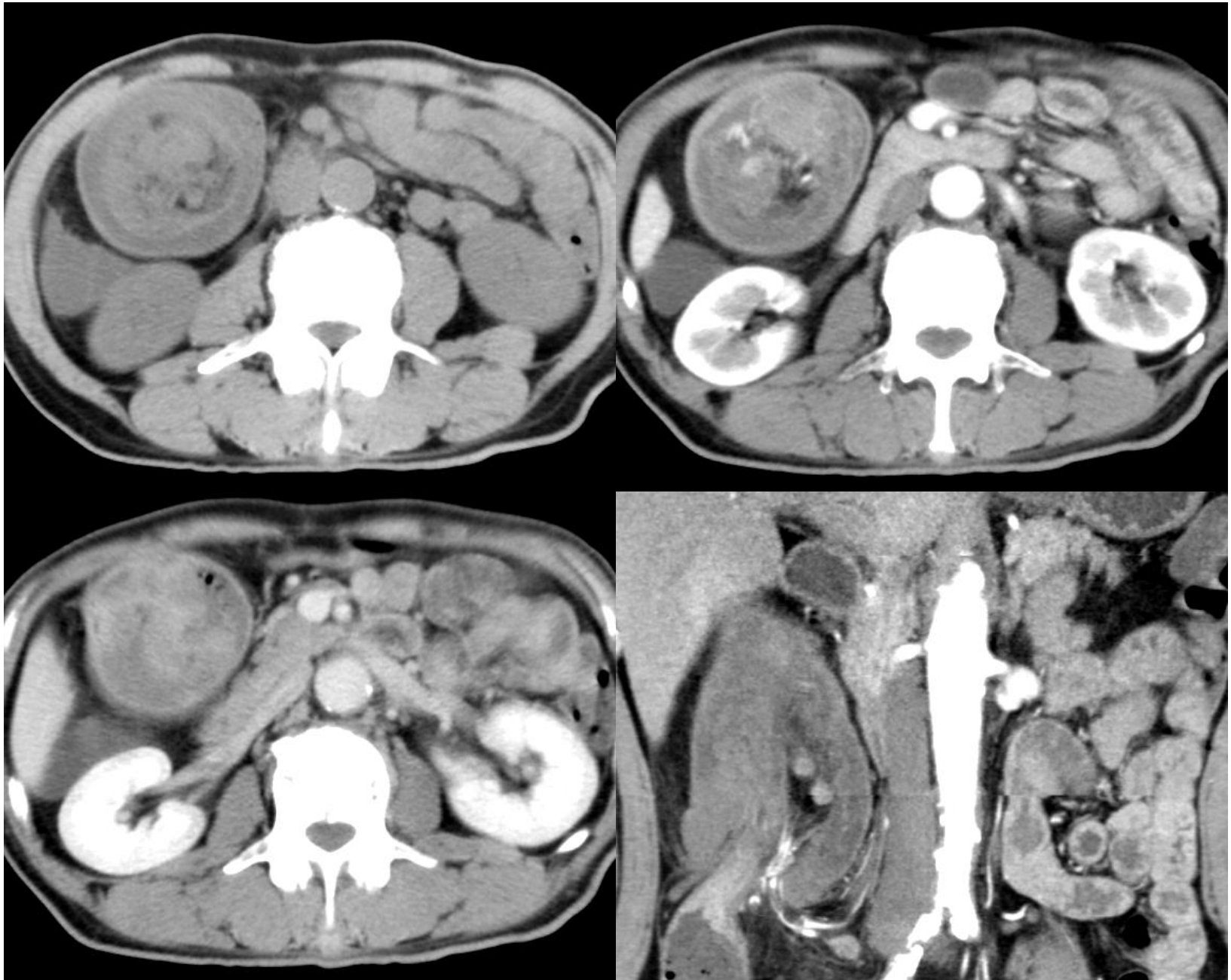
男，61岁，排便习惯改变1个月



问题1：请指出最明显征象？



待续！



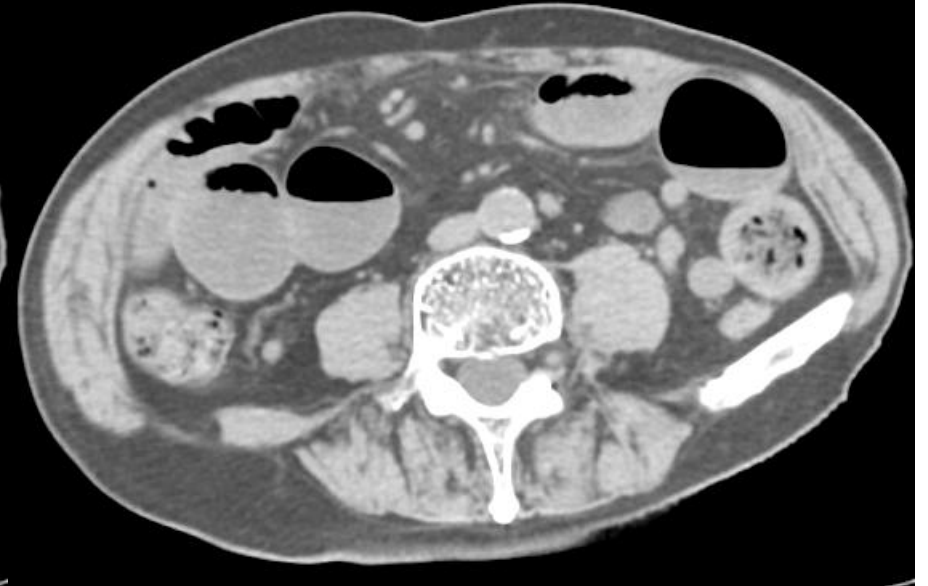
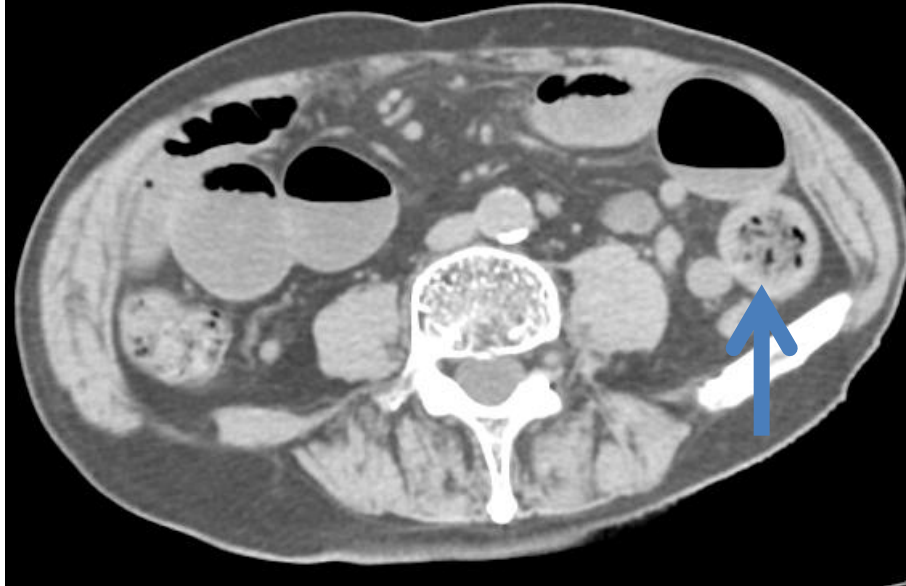
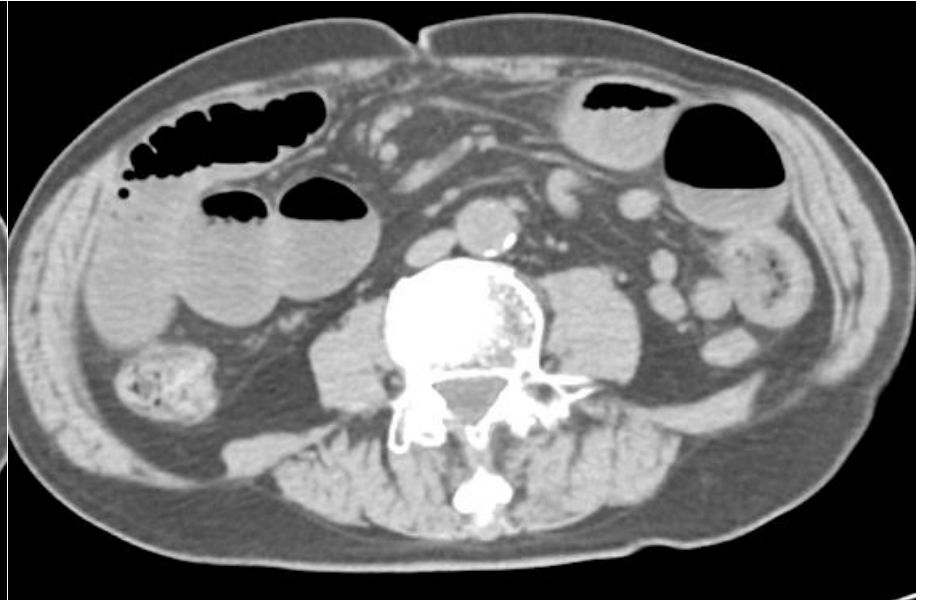
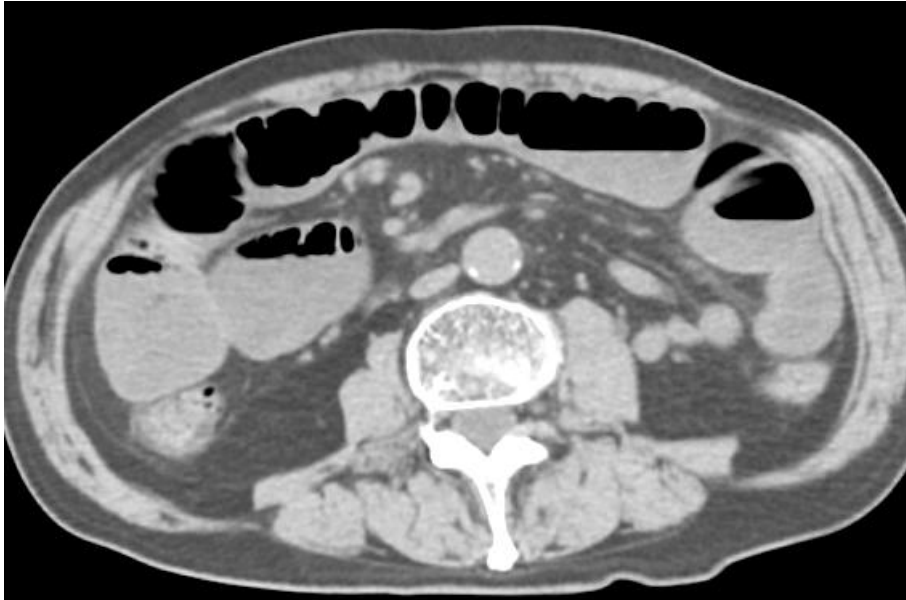
问题2：你的最后诊断？请解释

问题3：鉴别诊断？

升结肠癌并回-结肠套叠

73

男，75岁，呕吐2天





主要的异常征象？你的诊断？

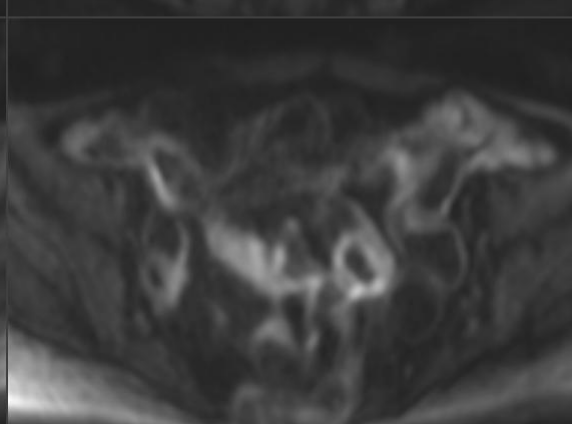
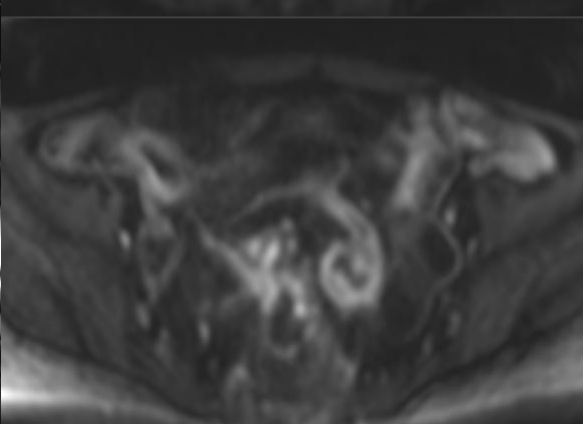
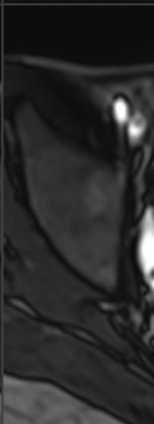
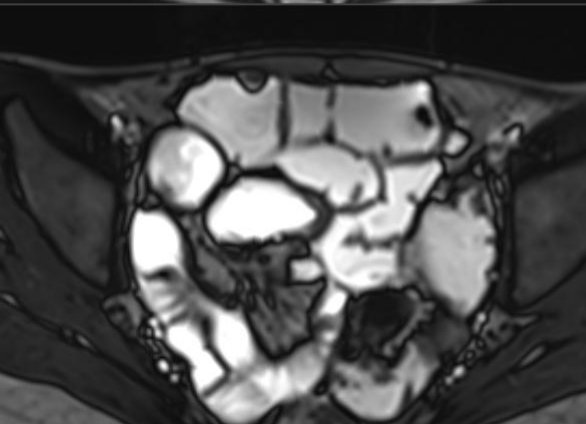
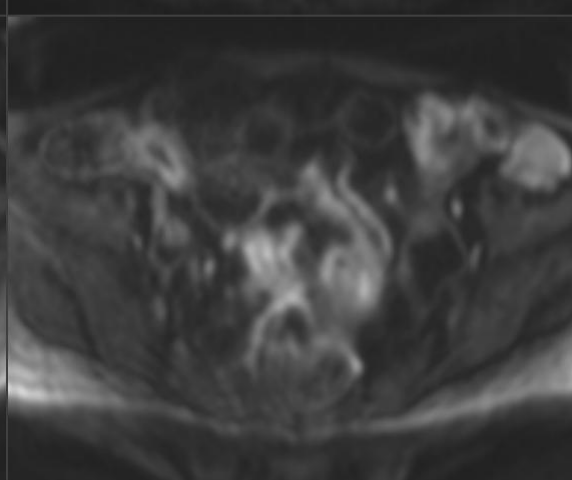
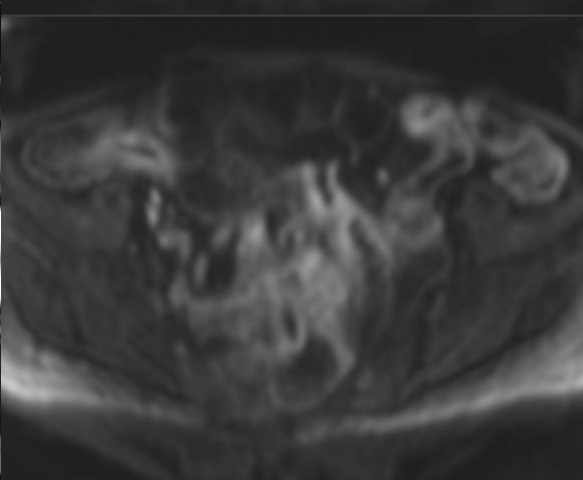
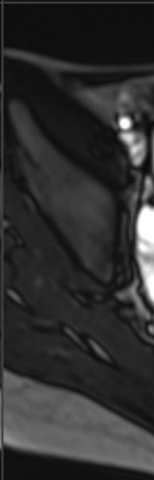
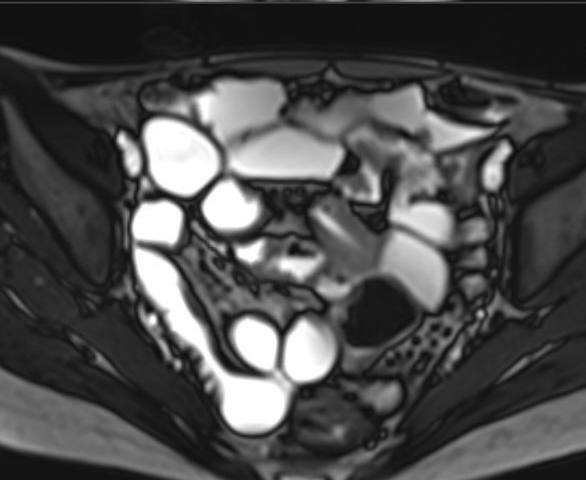
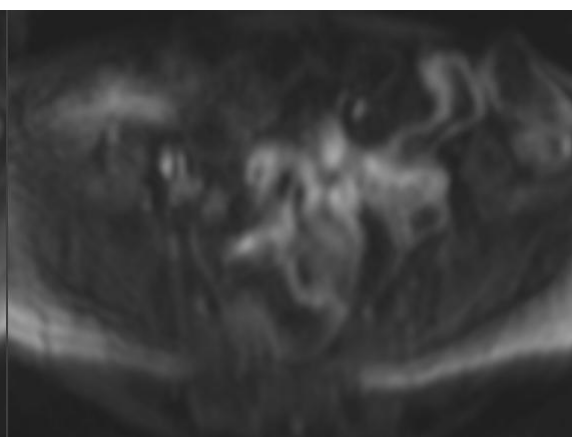
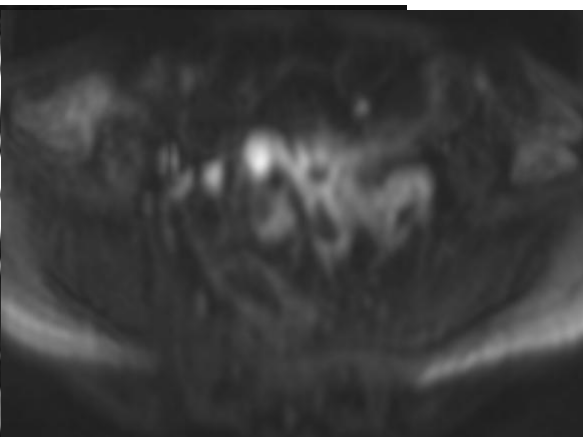
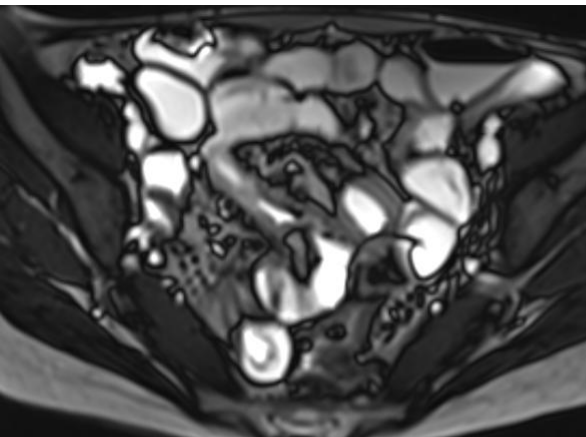
何为绞榨性肠梗阻？如何判断？

单纯性机械性肠梗阻

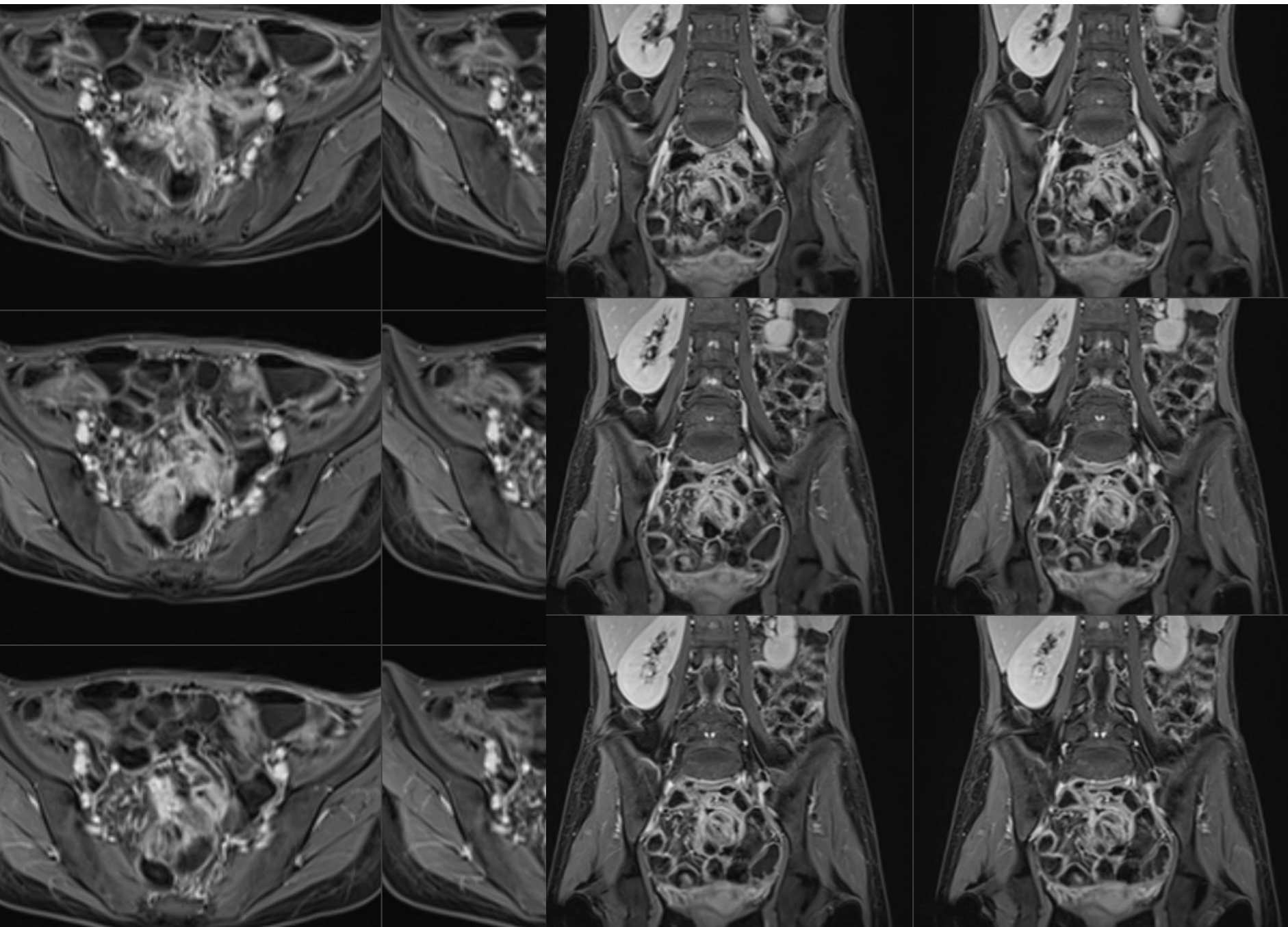
（空肠粪石）

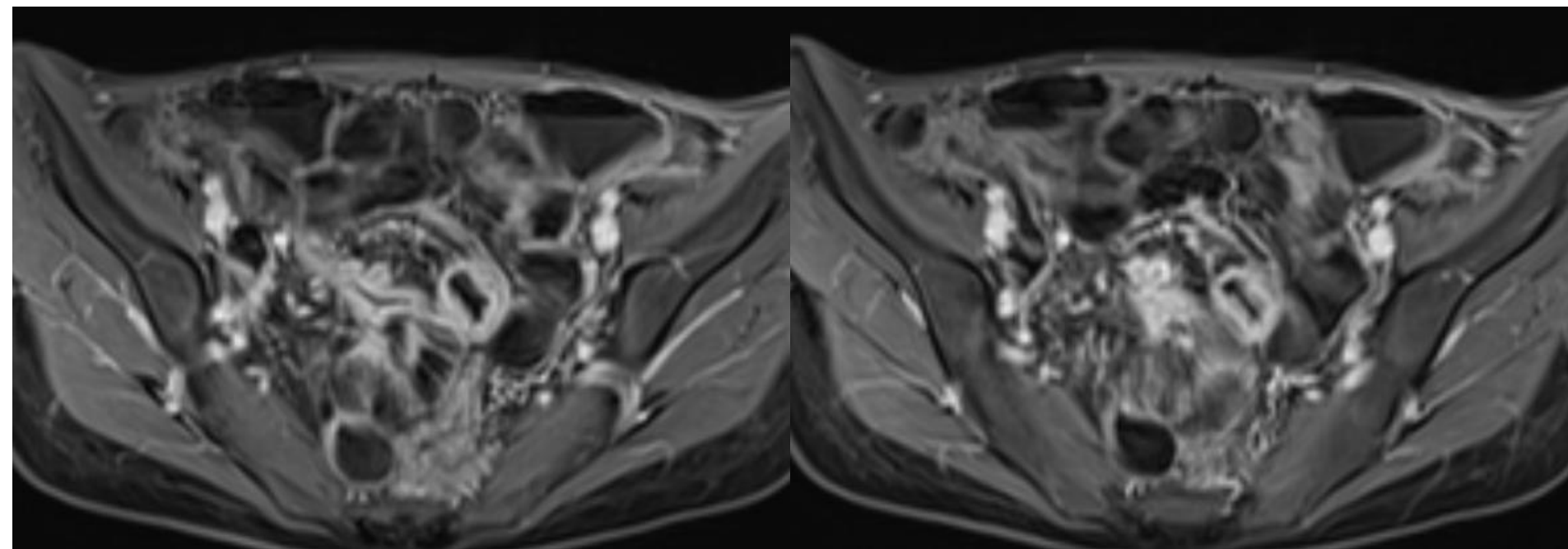
82

女，23岁，反复腹痛4年余



是否有明显异常？请指出！





你的诊断？依据？

如何判断肠壁是否异常？

小肠Crohn病并回肠-回肠瘘

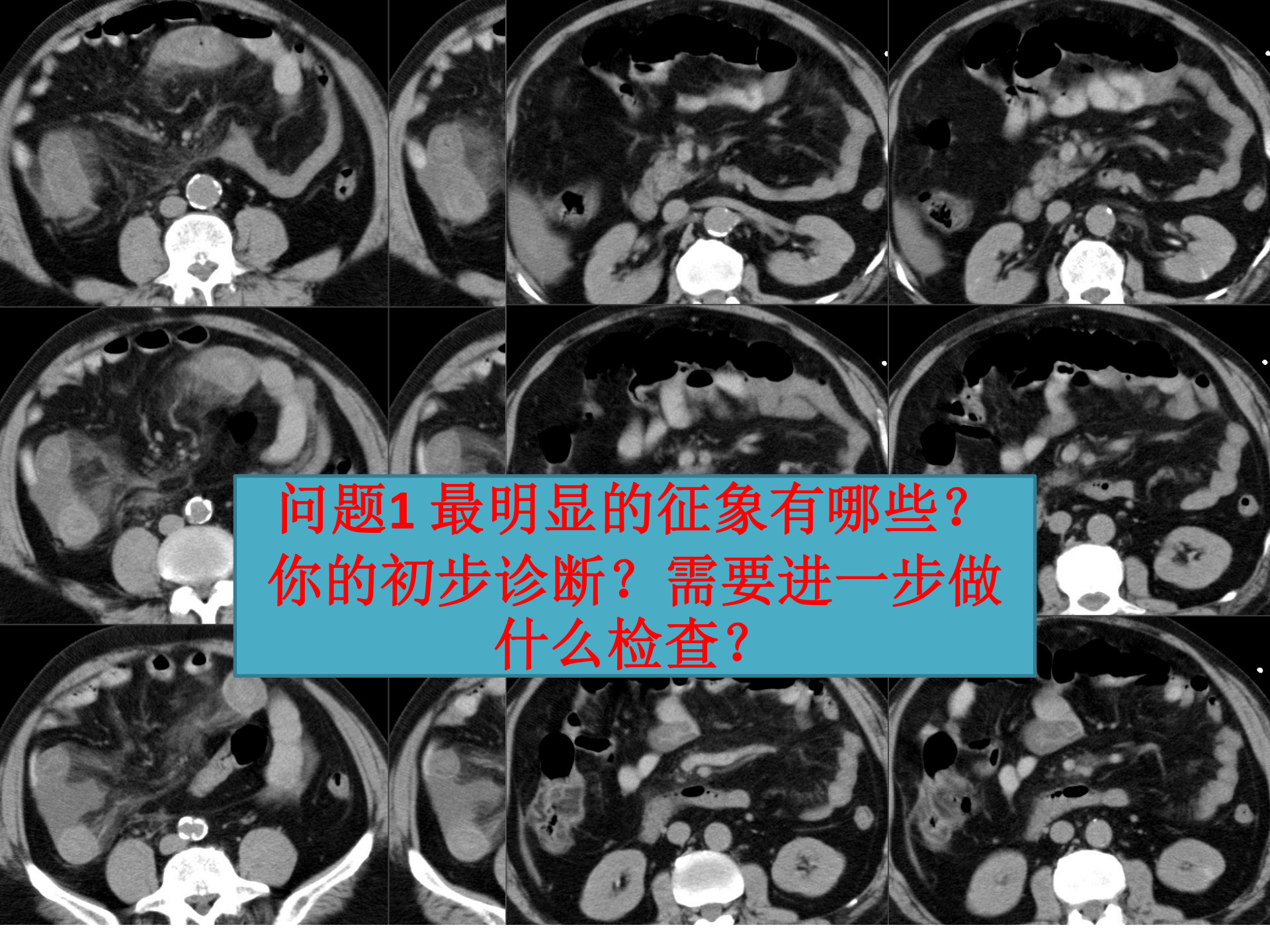
小肠肠壁强化异常

小肠肠壁 $\geq 3\text{mm}$

肠腔扩张 $\geq 2.5\text{cm}$

46

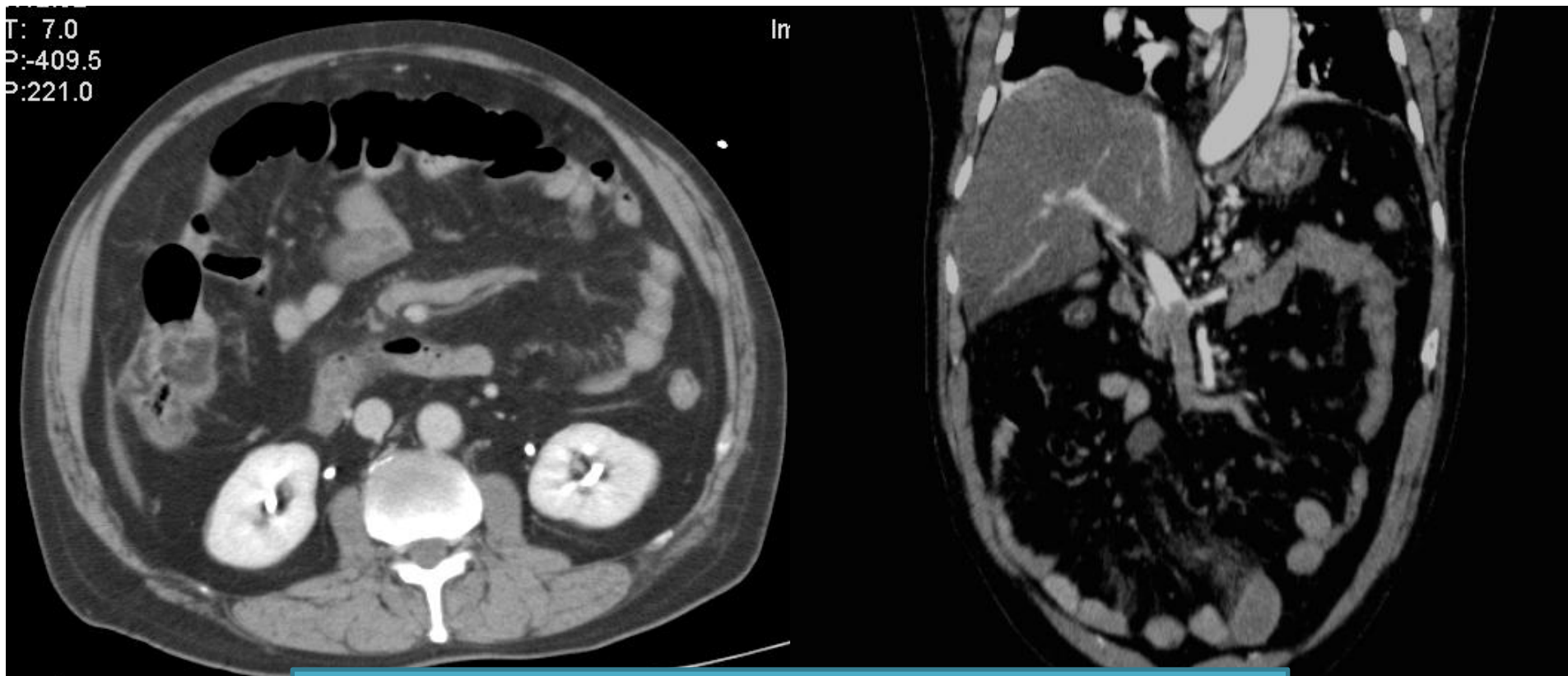
**男，62岁，上腹痛1个月，
加剧伴肛门停止排气3天**



**问题1 最明显的征象有哪些？
你的初步诊断？ 需要进一步做
什么检查？**

T: 7.0
P: -409.5
P: 221.0

ln



**问题2 最明显的征象有哪些？
你的最后诊断？**

急性肠缺血有哪些原因？

CT上有哪些征象？

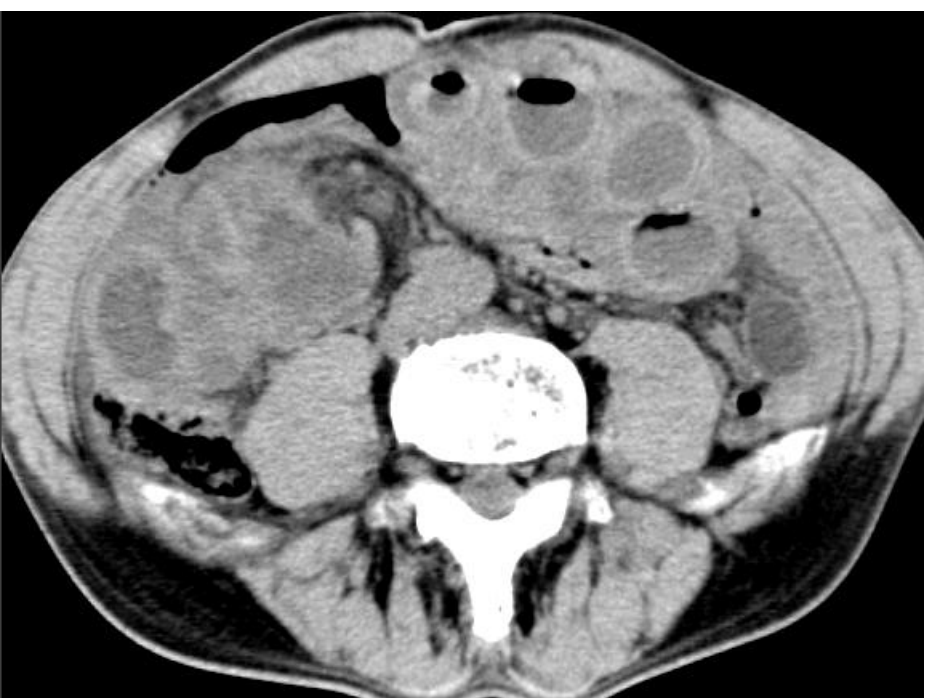
SMV血栓形成

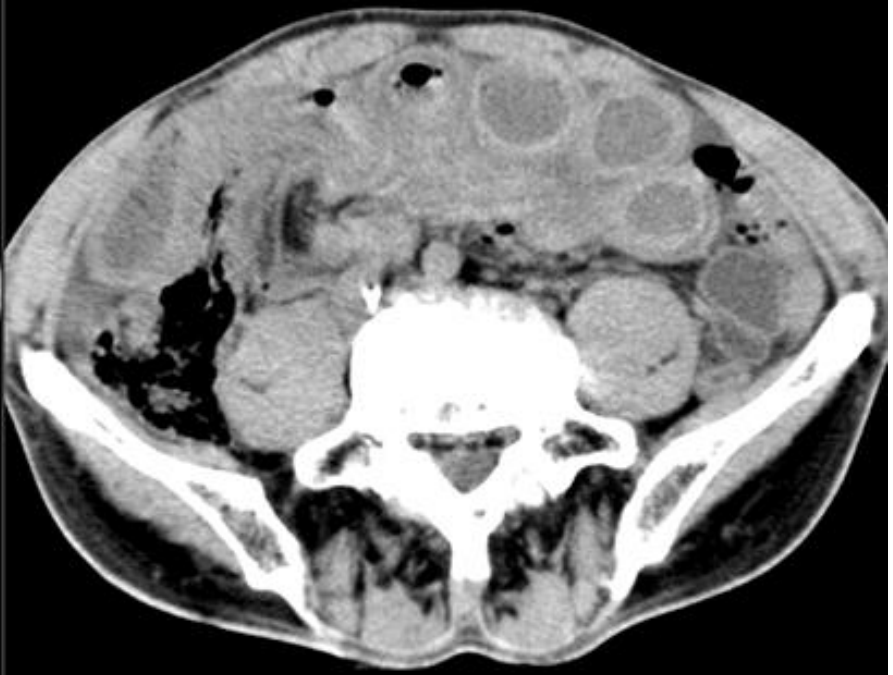
小肠充血、坏死

- ① 肠壁环形增厚，或肠腔明显扩张，肠壁变薄；密度增高（渗血）
- ② 强化减弱或不强化
- ③ 肠系膜血管充血
- ④ 肠系膜积液
- ⑤ 腹腔游离液体
- ⑥ 气体：肠壁间、肠外、门脉系统

48

女，45岁，腹痛半天







有哪些主要征象？你的诊断？

还需要进一步检查吗？什么

检查？

急性肠缺血有哪些原因？

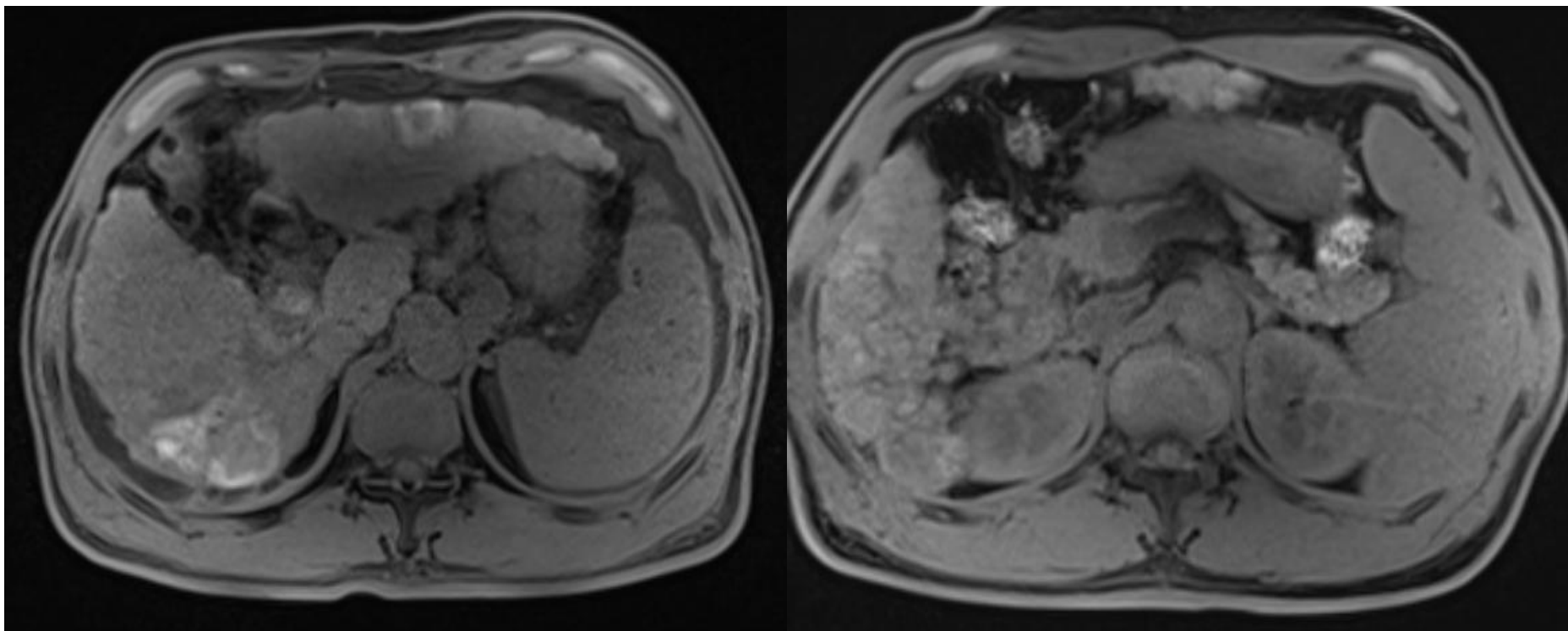
CT上有哪些征象？

肠扭转并坏死

- ① 肠壁环形增厚，或肠腔明显扩张，肠壁变薄；密度增高（渗血）
- ② 强化减弱或不强化
- ③ 肠系膜血管充血
- ④ 肠系膜积液
- ⑤ 腹腔游离液体
- ⑥ 气体：肠壁间、肠外、门脉系统

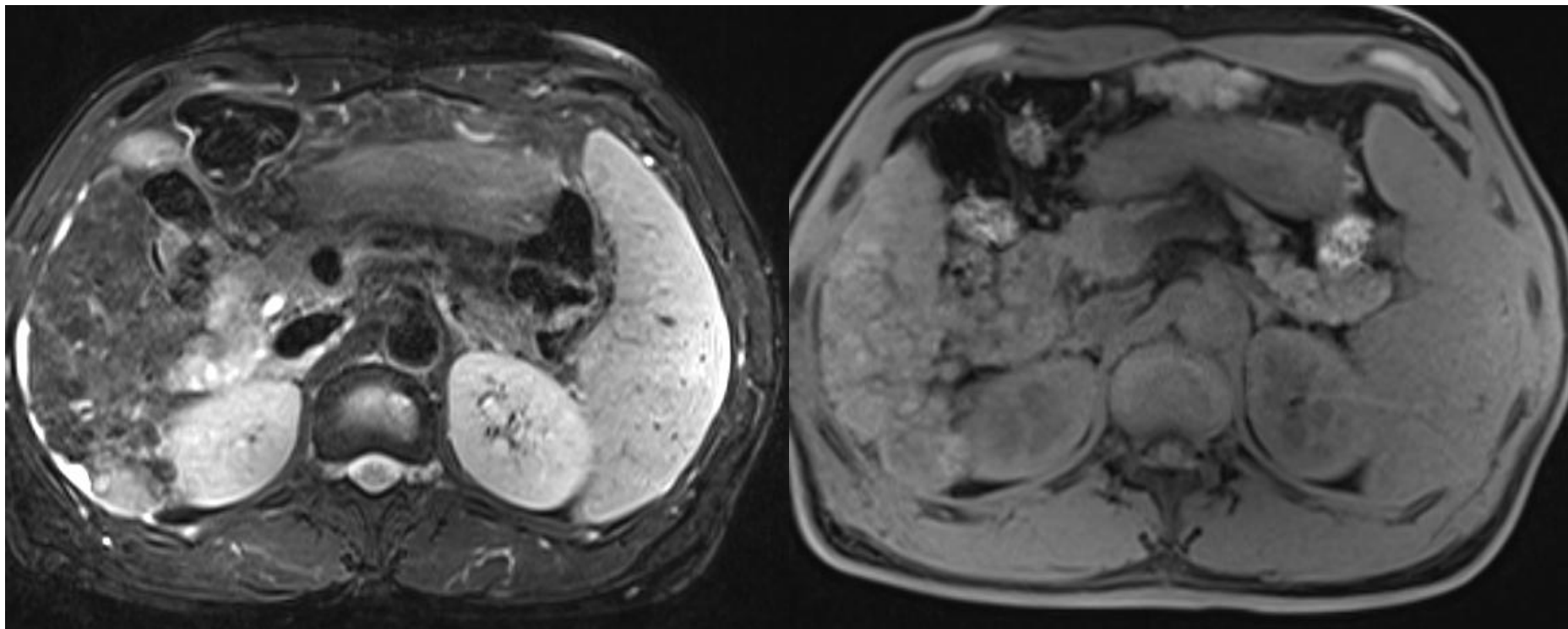
24

**男，75岁，乙肝、肝硬化、
肝癌介入治疗史**



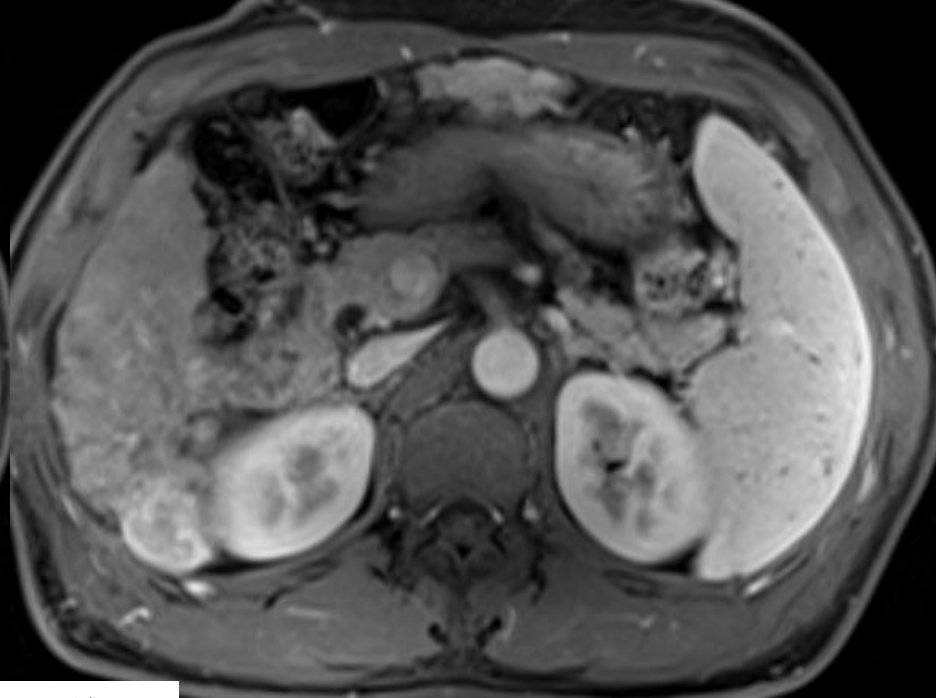
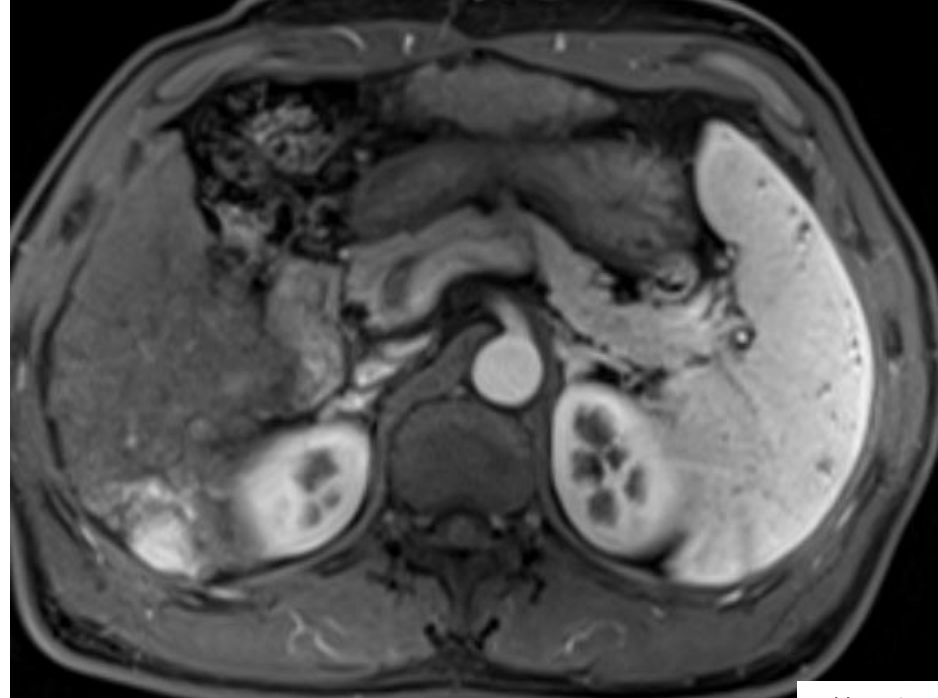
请描述主要的病变征象

待续!

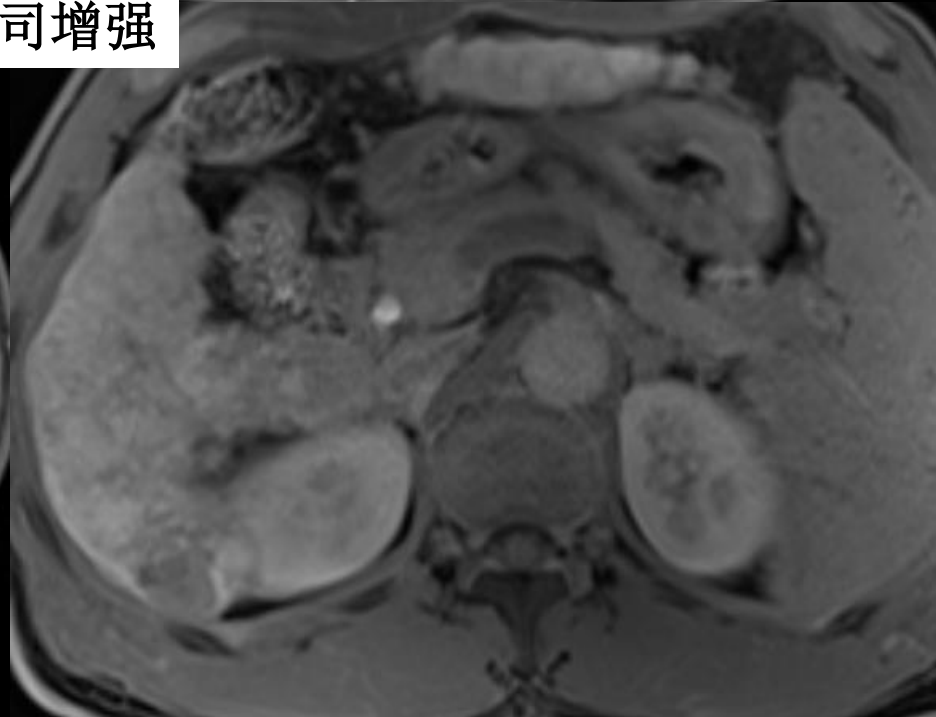
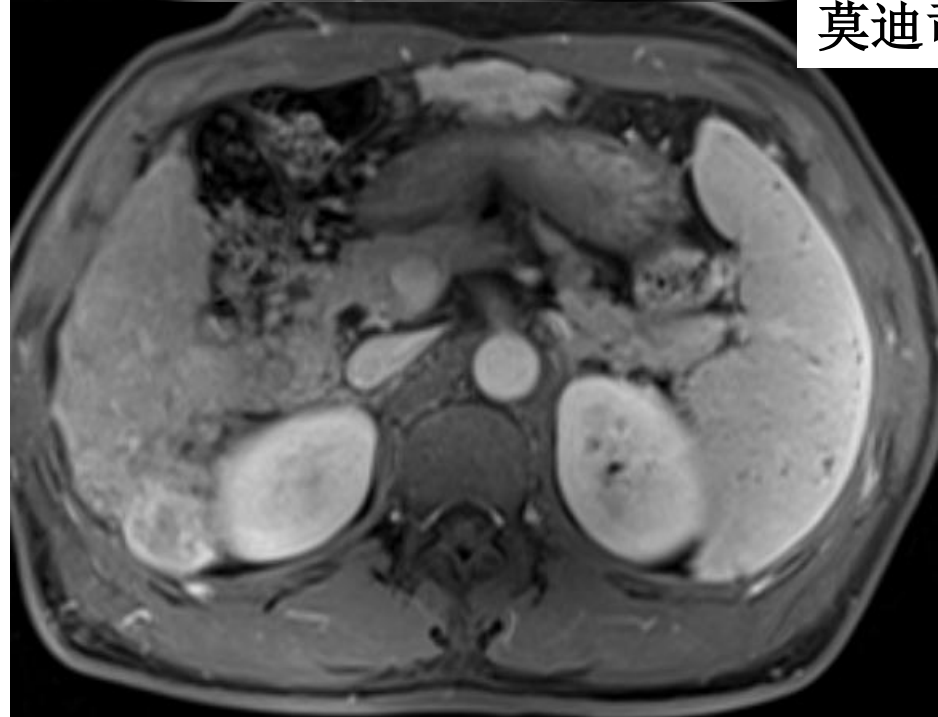


请描述主要的病变征象

待续!



莫迪司增强



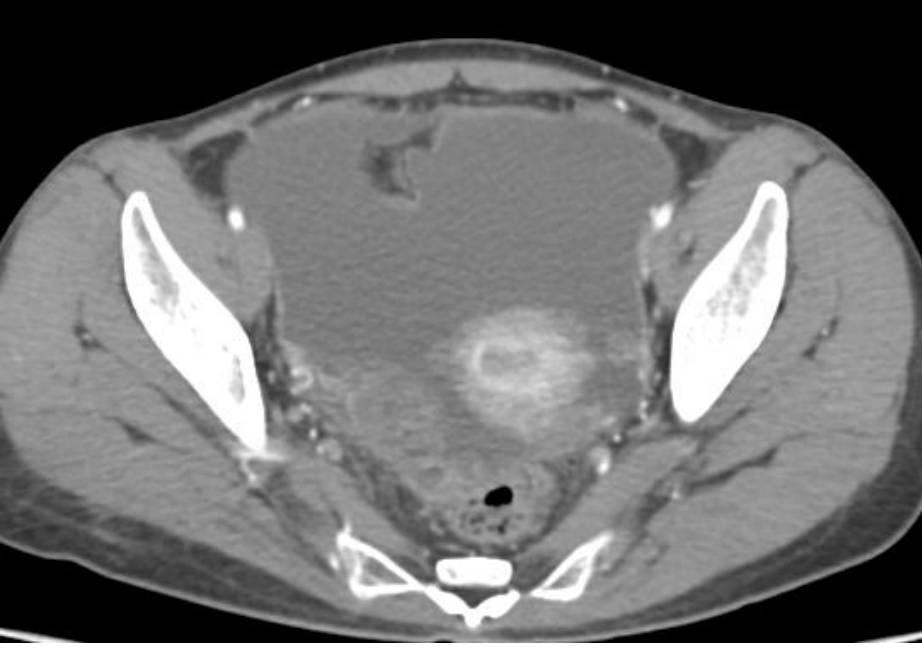
你的最后诊断？

请解释！

肝硬化，肝癌介入复发（肝VI段）

38

女，45岁，腹胀1个月



1. 请指出明显的病变

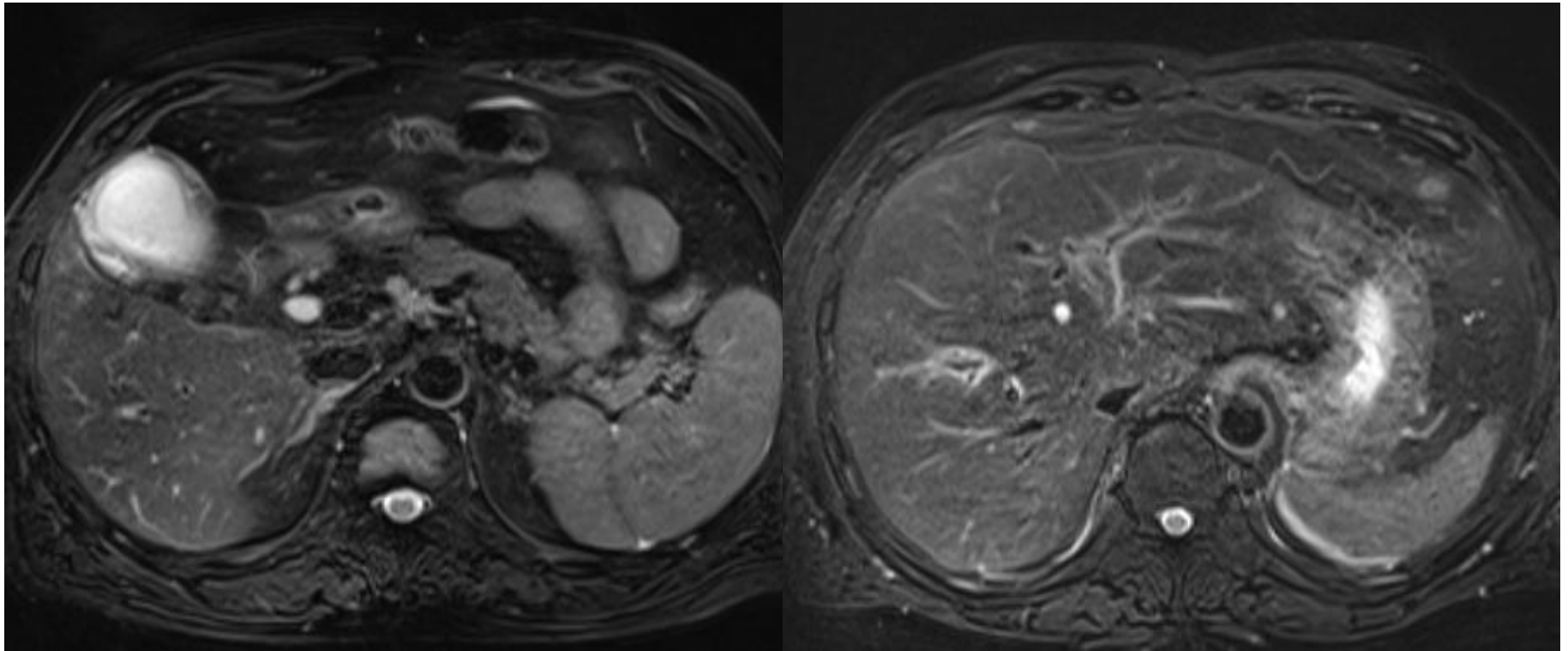
2. 结核？ 肿瘤？

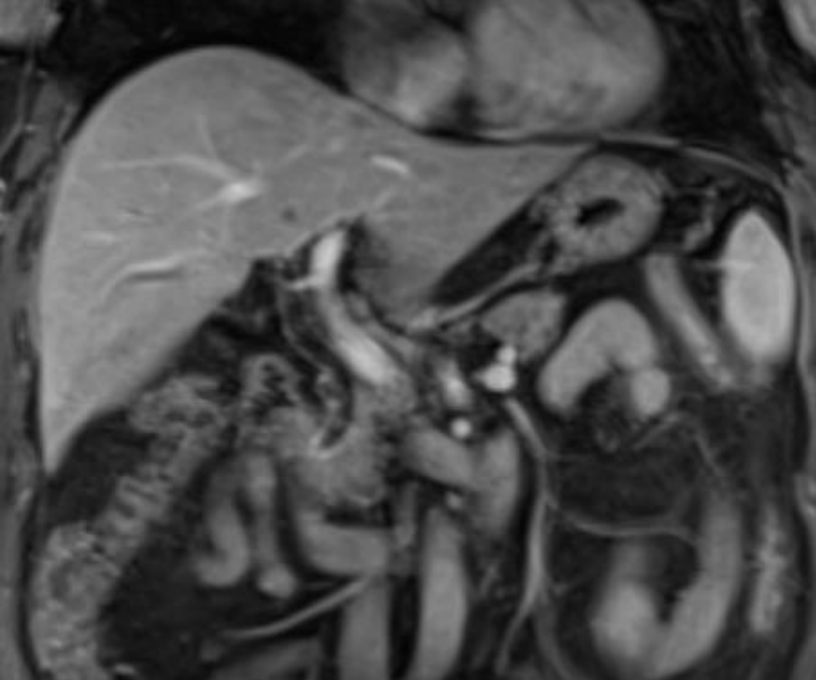
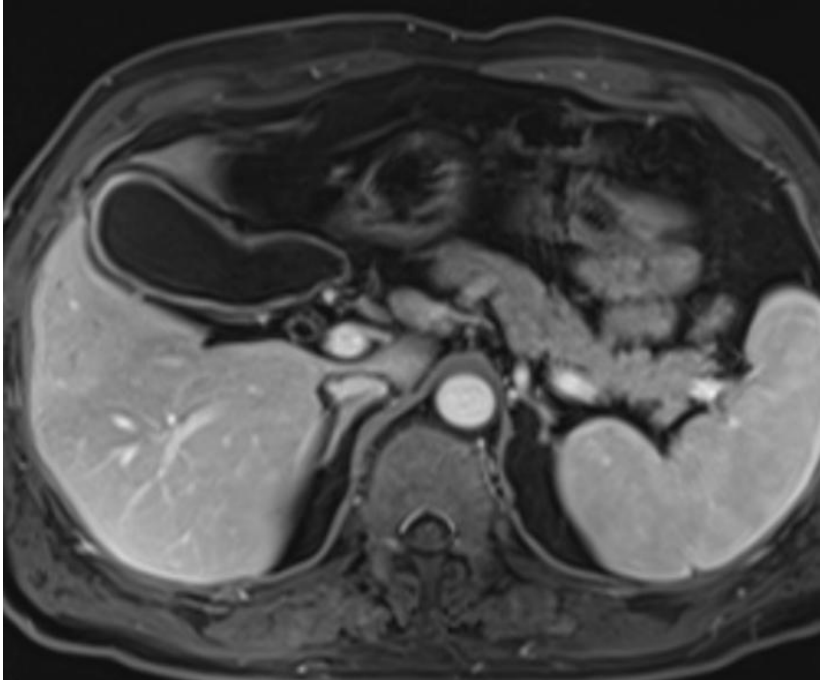
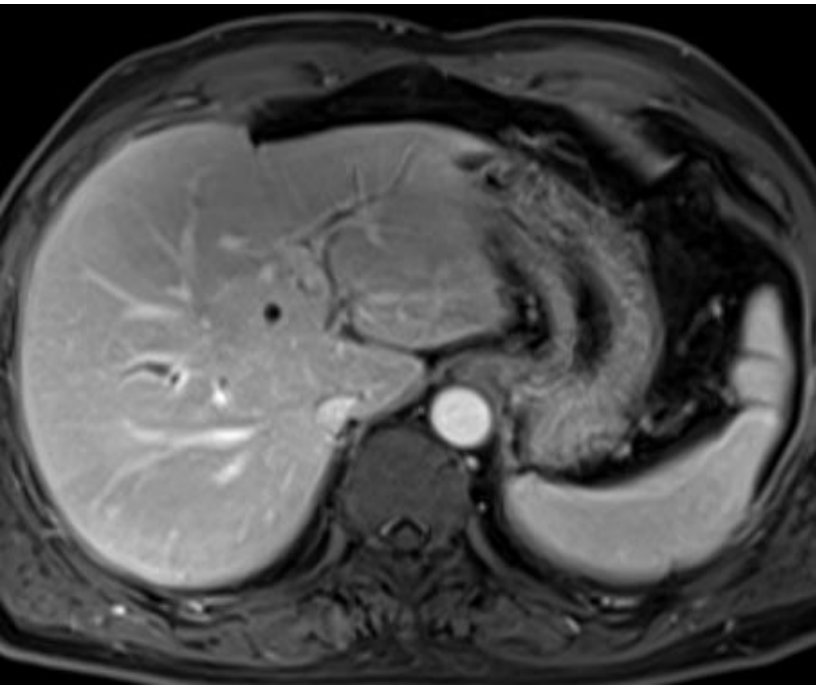
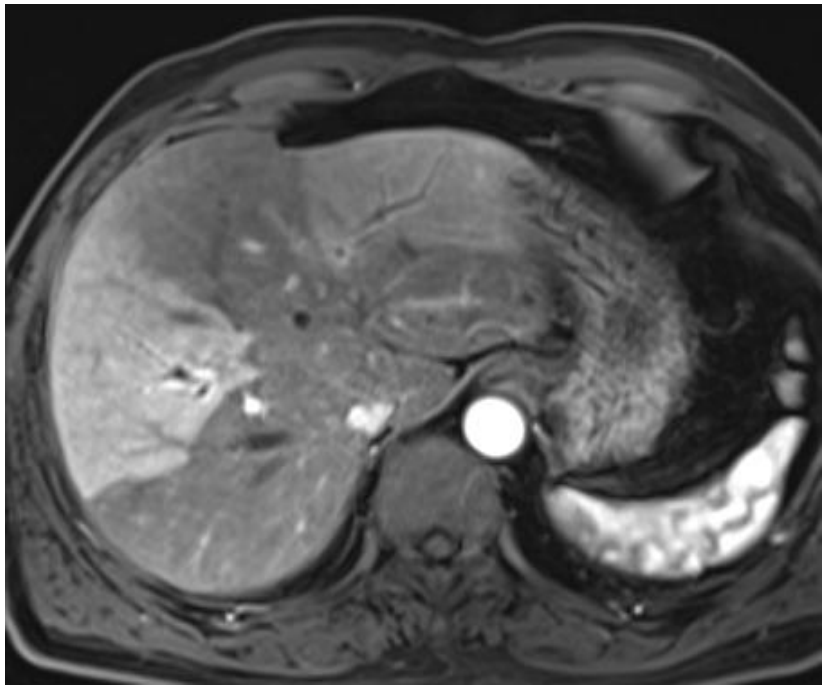
请说明的你诊断思路

胃底Ca并腹膜、附件转移

**男性，61岁，右上腹痛伴畏
冷、发热15小时**

问题1：请指出较明显的异常征象？





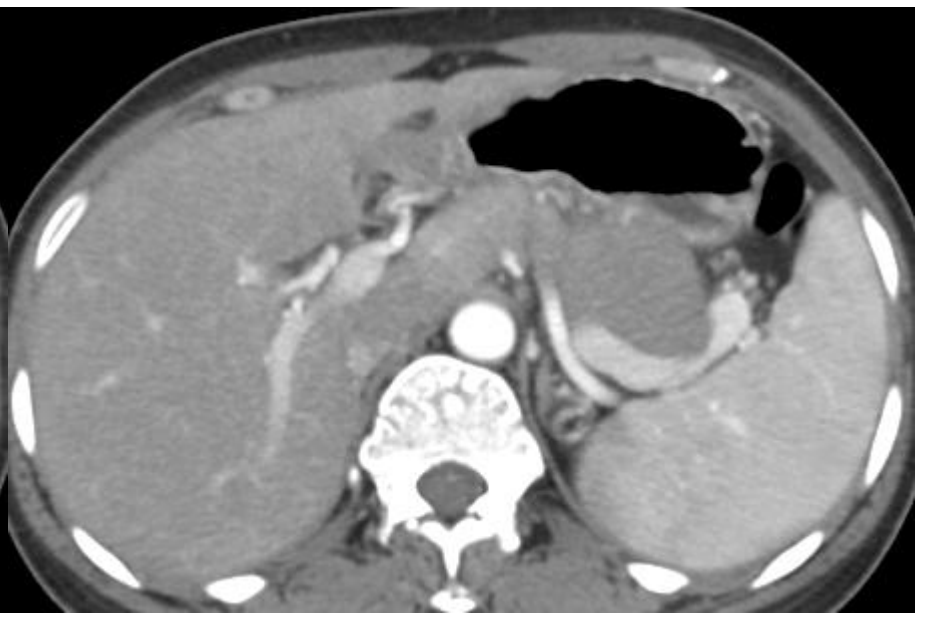
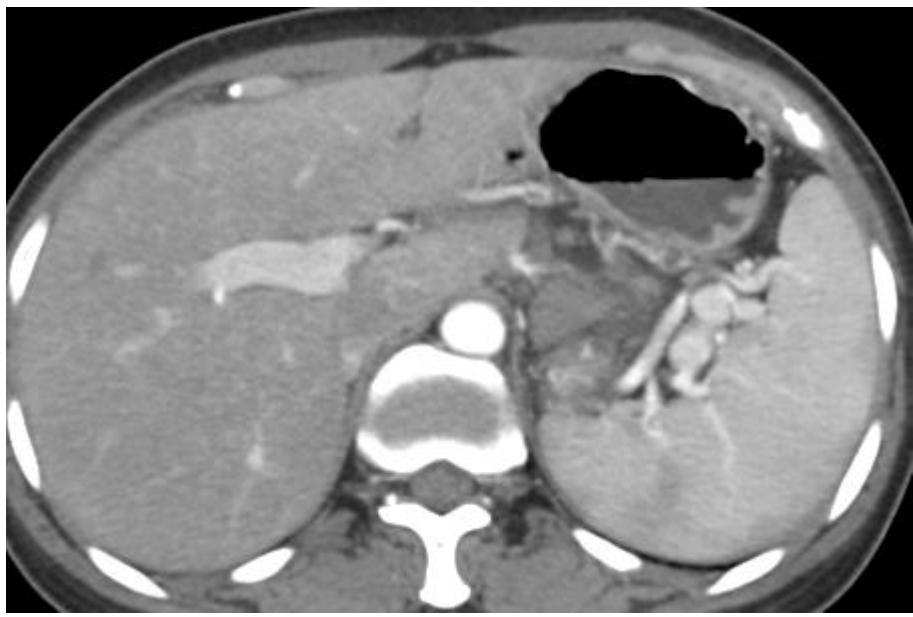
**问题2：你的诊断是什么？
请解释！**

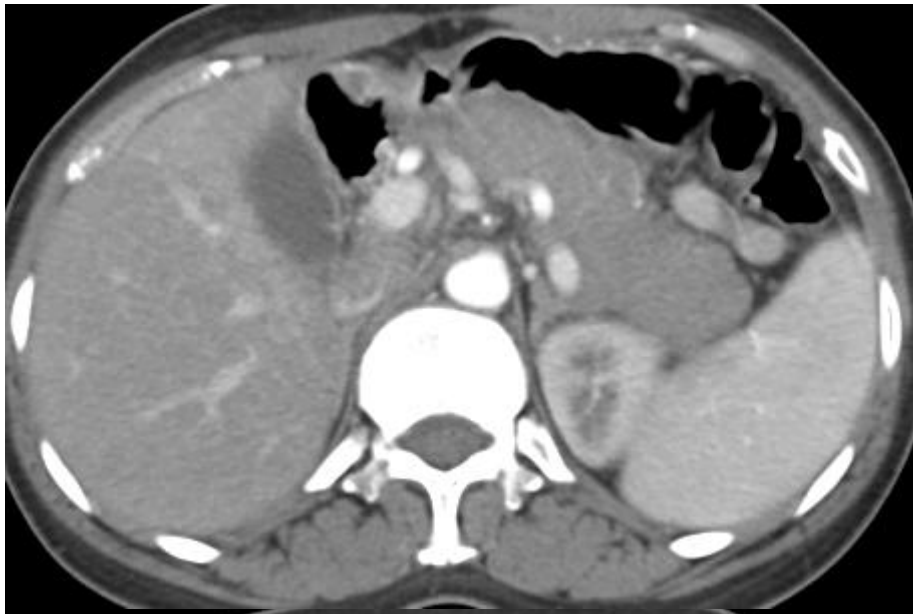
急性胆囊炎，胆管炎

19

女，38岁，上腹胀痛2月余

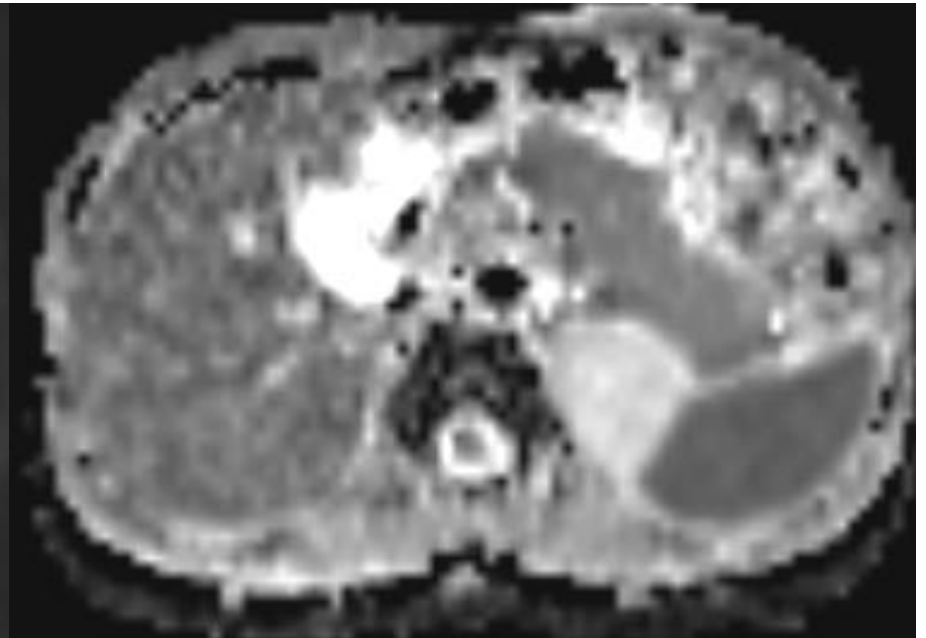
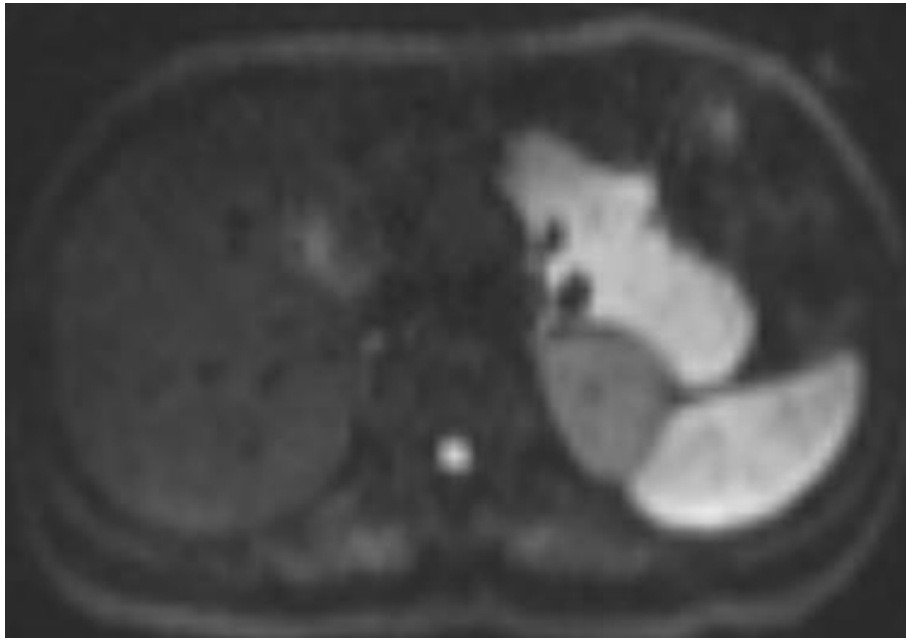
淀粉酶(AMYL) <30 (30-110U/L)





征象与诊断？

您建议MRI检查吗？请解释

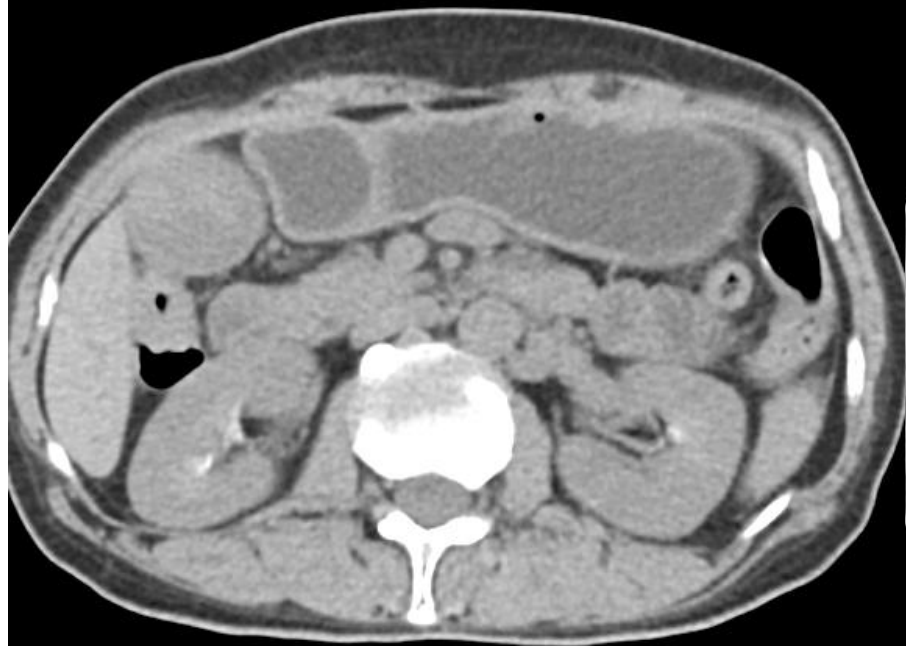


请回答

- **请描述主要征象并做出诊断**
- **本病有哪些影像特点？**
- **需要鉴别的疾病有哪些？**

自身免疫性胰腺炎

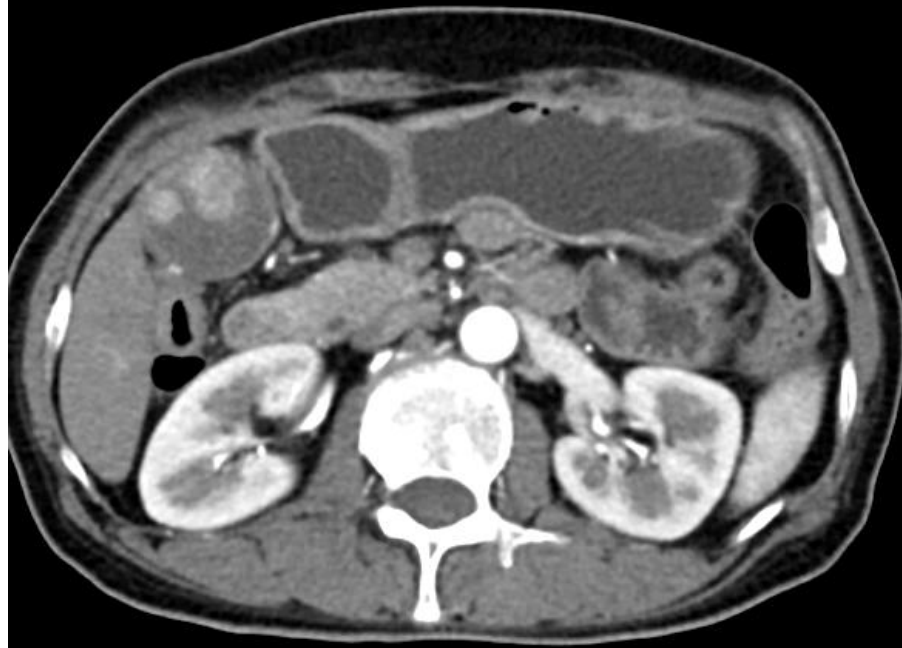
**女，68岁，反复中上腹部
疼痛2年余，加重1天
血淀粉酶2277IU/L，
门诊考虑“急性胰腺炎”**



请回答

最明显的病变在哪？

(1) 右肝 (2) 胃窦 (3) 胆囊 (4) 胰腺 (5) 降结肠



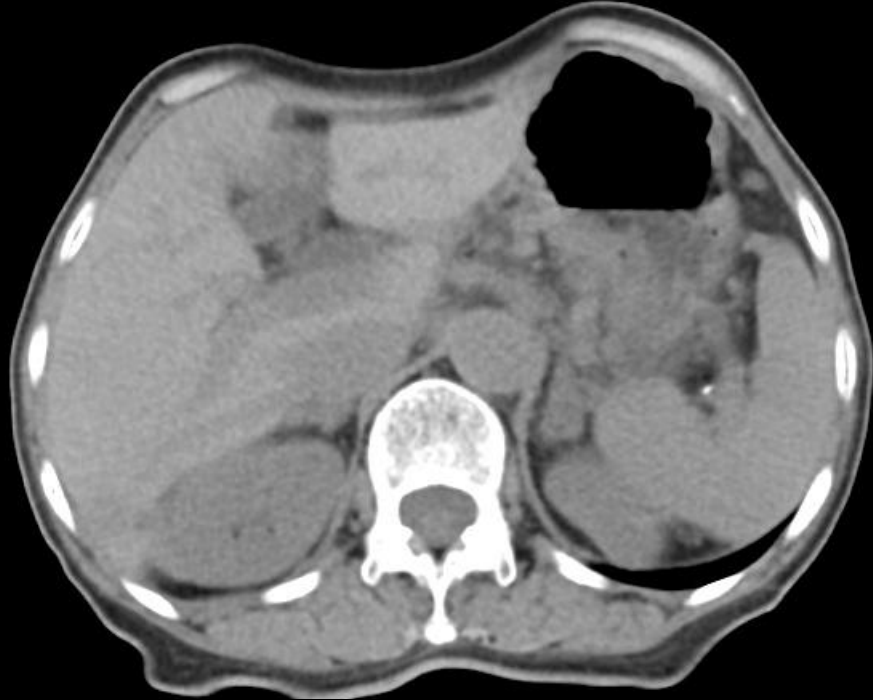
你的最后诊断？

鉴别诊断？

（胆囊）中-低分化腺癌，肿瘤最大径5.2cm,伴坏死，侵及胆囊壁浆膜下层。

89

女，65岁，上腹痛2个月



最明显的异常位于

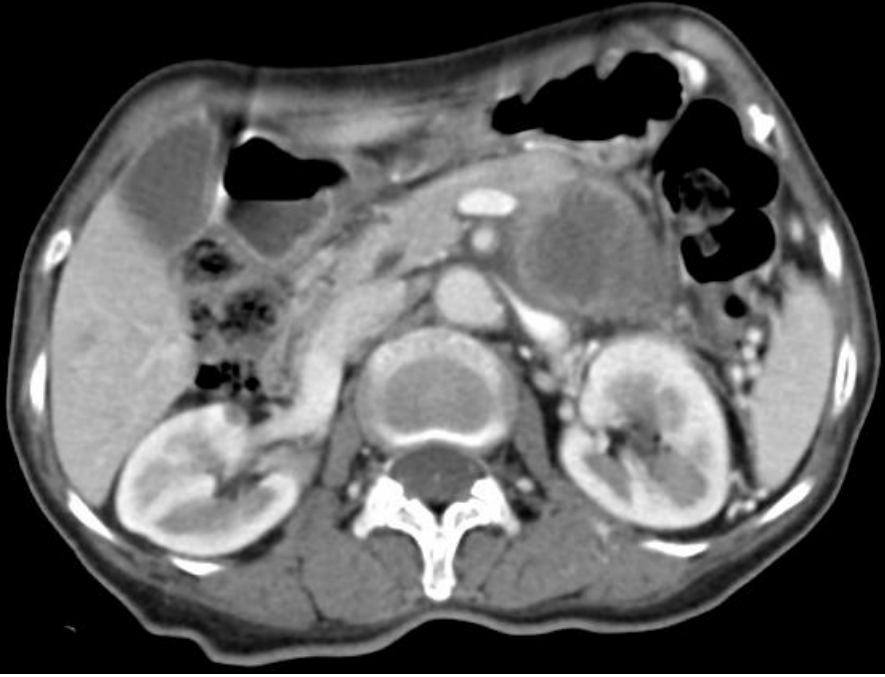
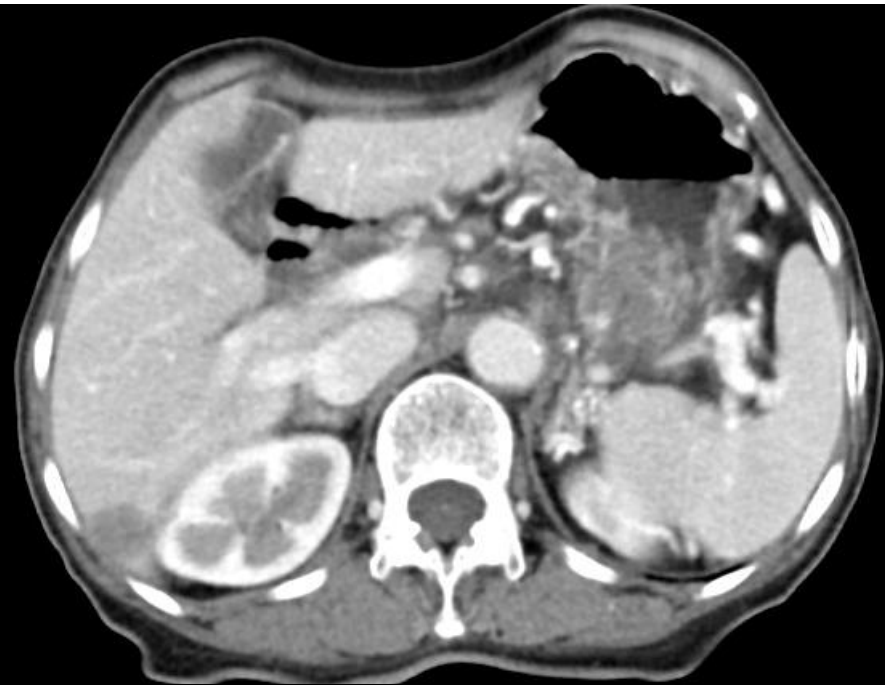
(1) 左膈下间隙

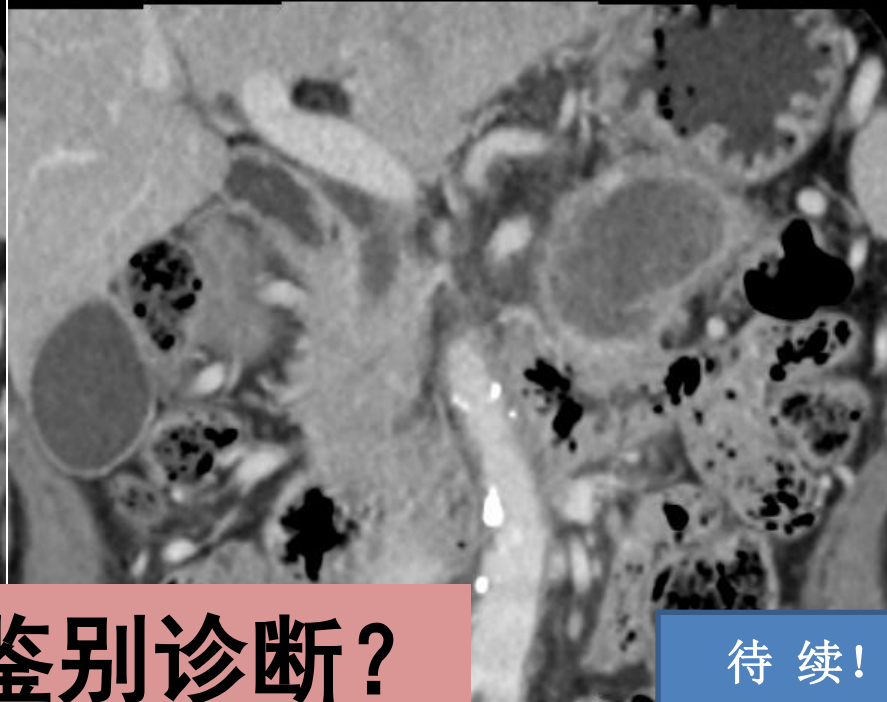
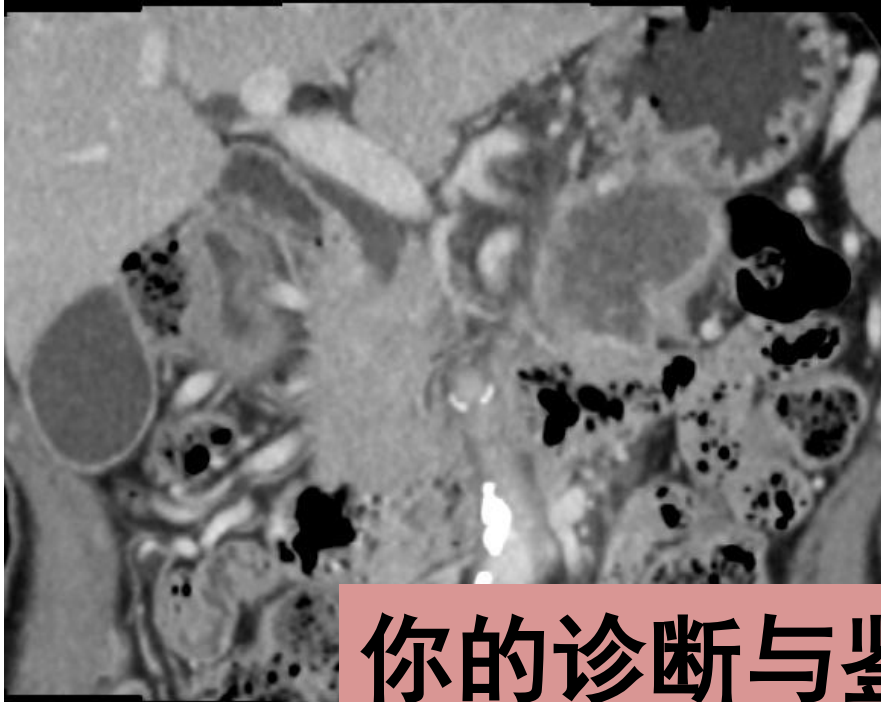
(2) 右肝

(3) 胃底

(4) 胰腺

(5) 左肾周间隙





你的诊断与鉴别诊断？

待续！

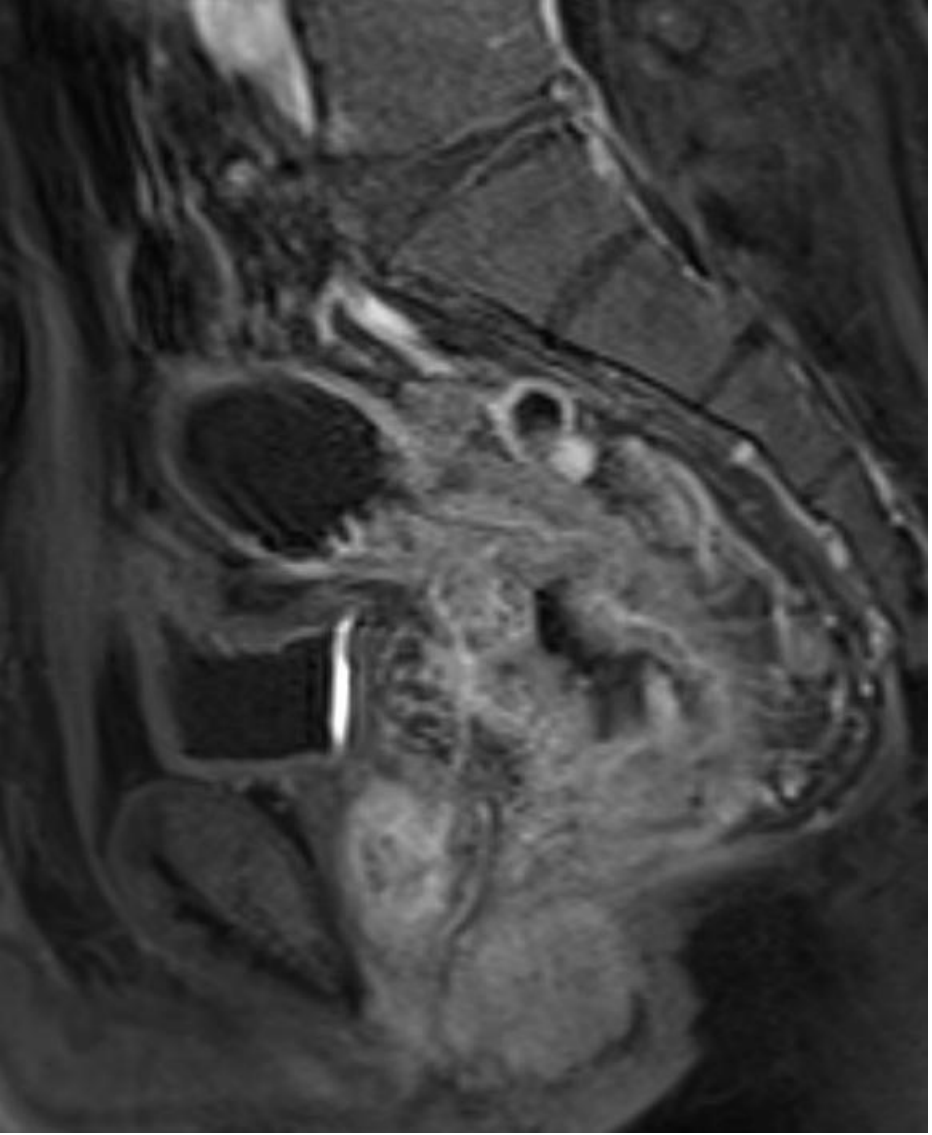
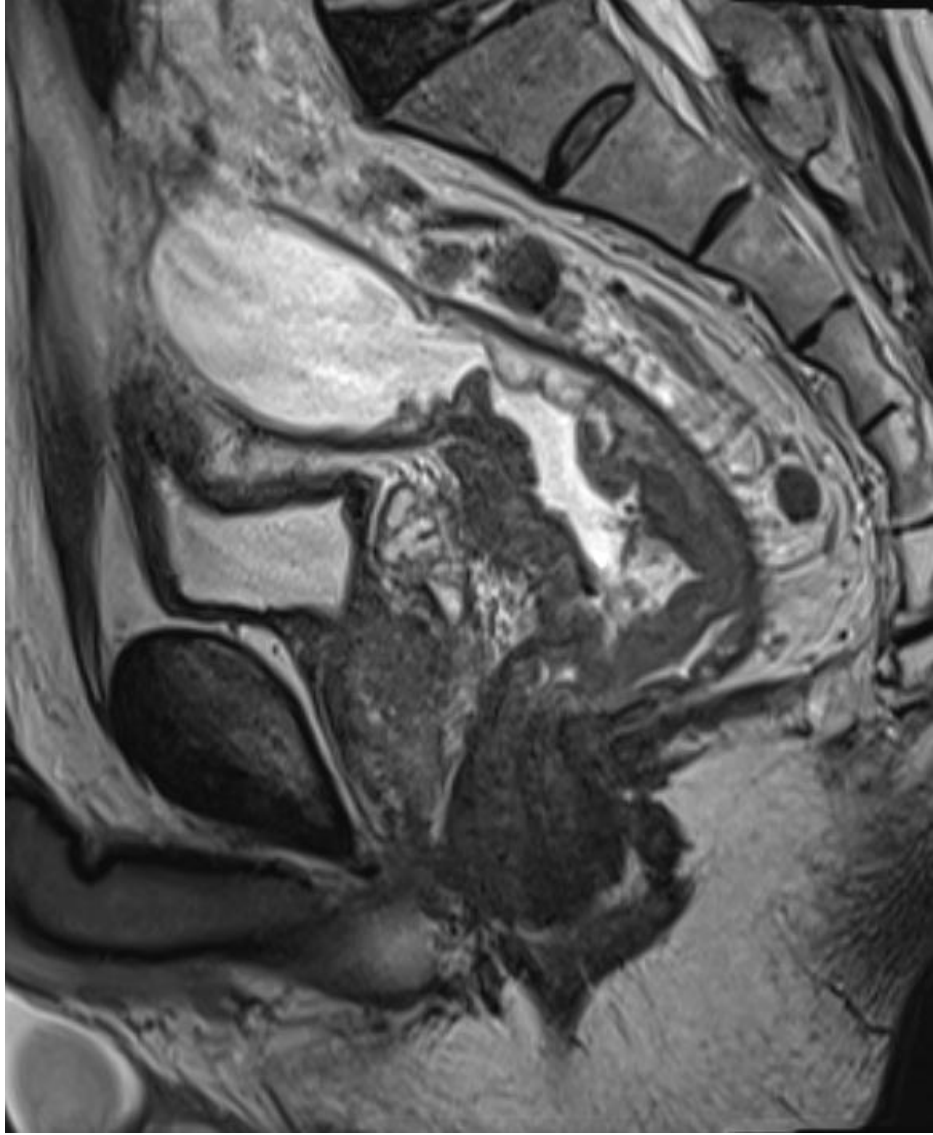
请回答

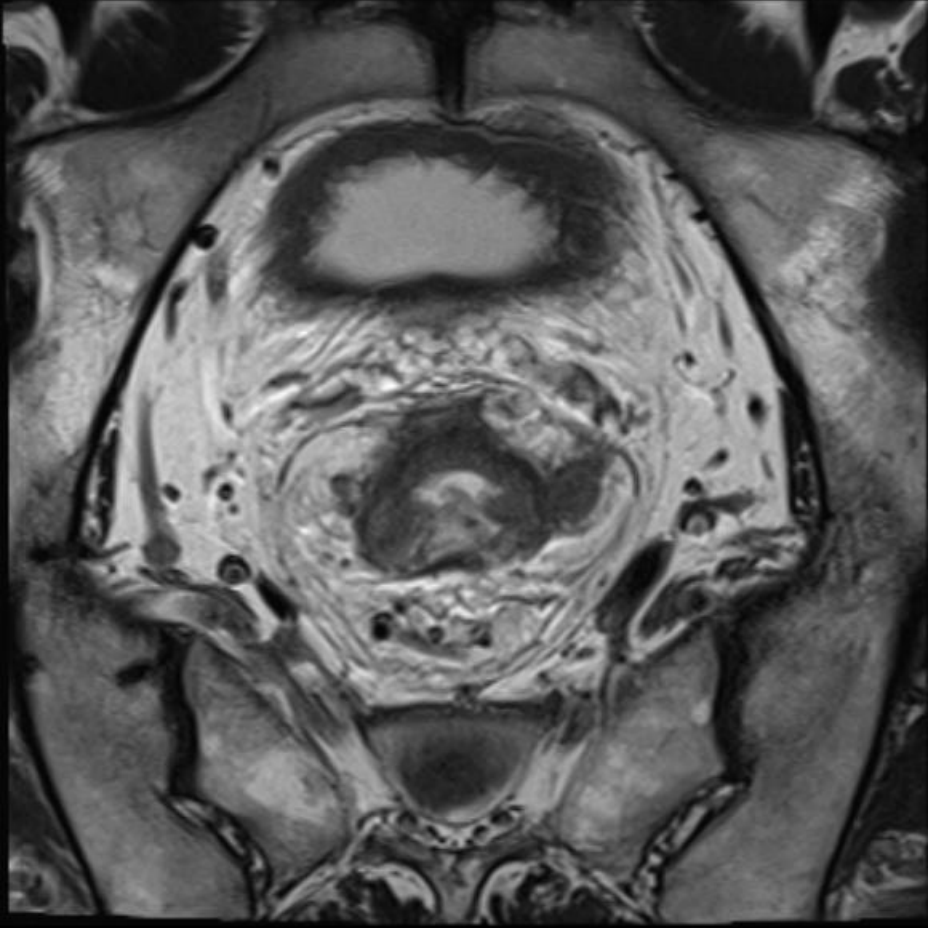
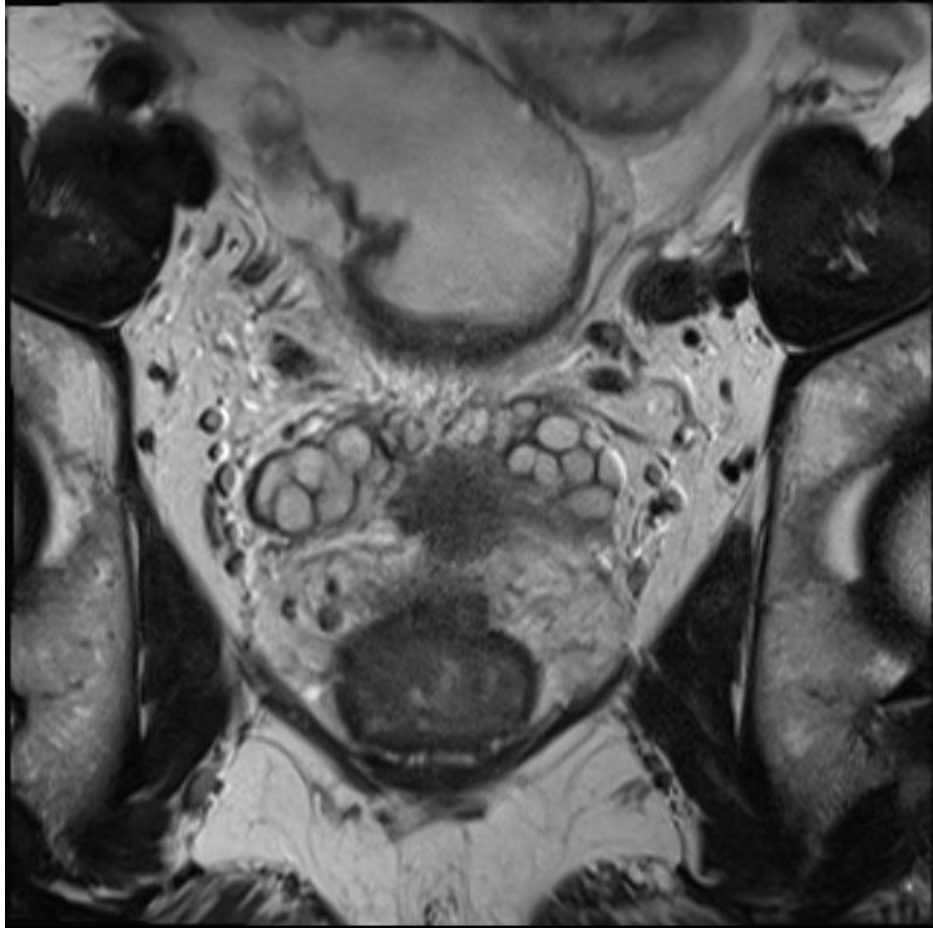
- **如何判断血管受累？**
- **你建议临床医生如何处理？手术可否？**

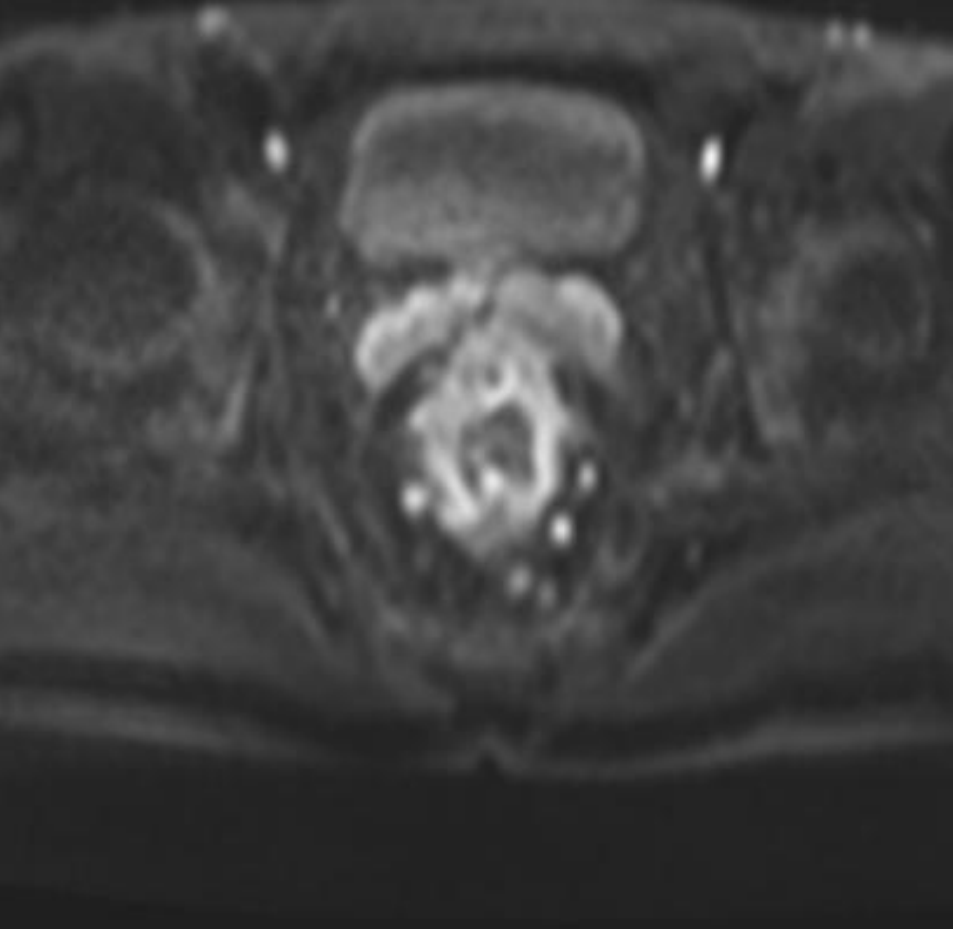
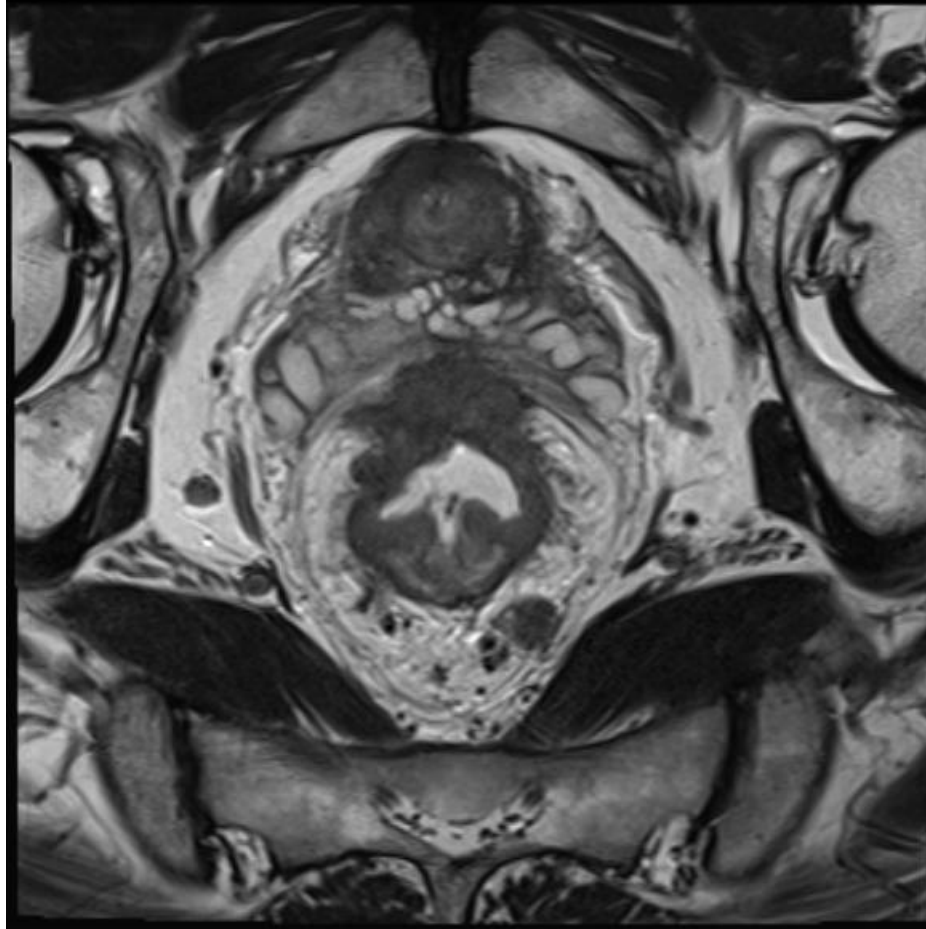
胰体尾Ca累及周围血管

16

男，53岁，反复间歇性便血半年







请回答

- **腹膜、直肠系膜筋膜、精囊腺是否受累？**
- **如何判断直肠系膜筋膜是否受侵犯？**
- **直肠癌如何分期诊断？**
- **本例的T分期？N分期？**

直肠系膜筋膜下1mm

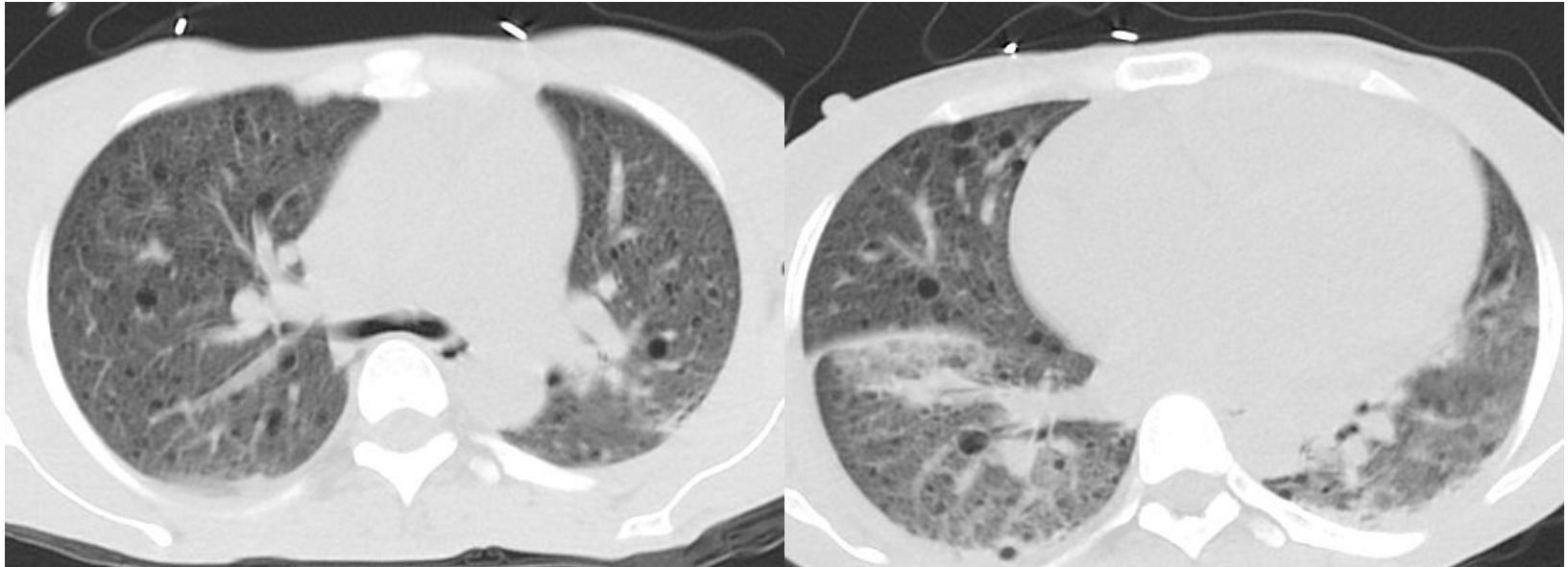
T4b , N2

**女，38岁，体检发现
双肾占位2年**

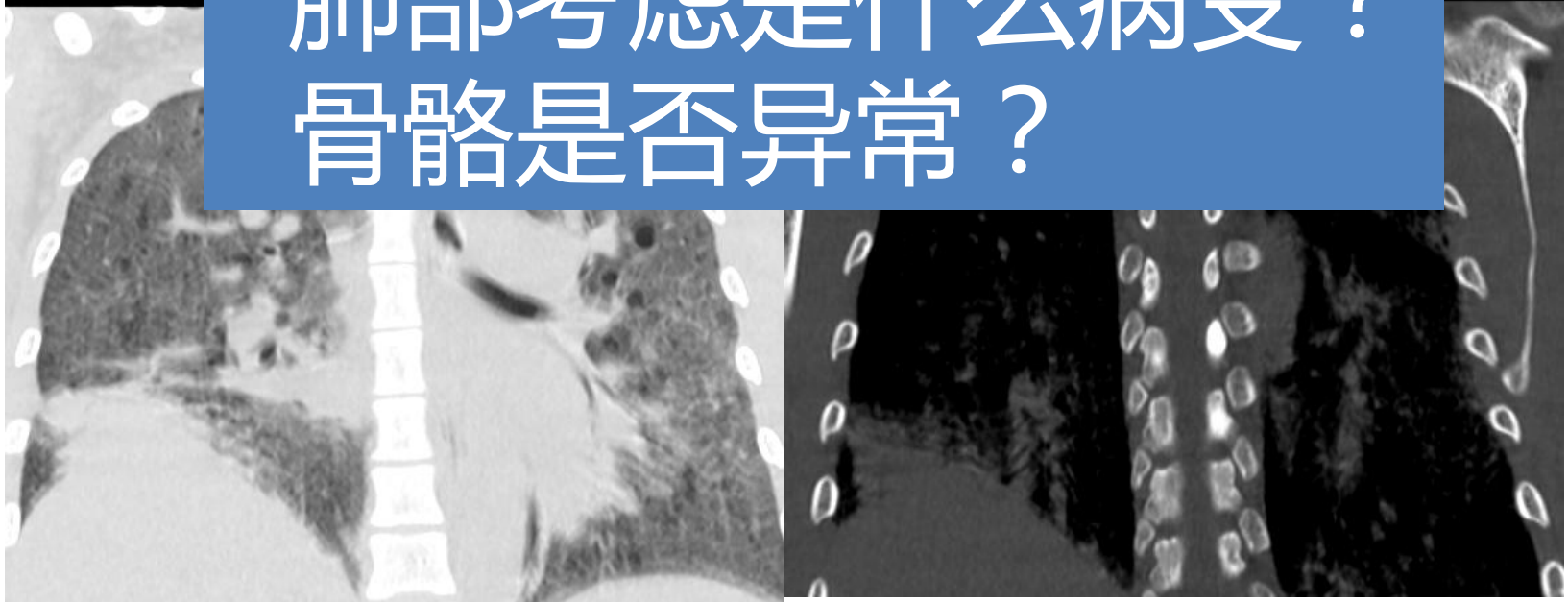
The image displays four CT scan slices. The top-left is an axial view of the chest showing the lungs and mediastinum. The top-right is a coronal view of the chest and upper abdomen. The bottom-left is an axial view of the abdomen showing the kidneys and spine. The bottom-right is a coronal view of the lower abdomen and pelvis. A central blue box contains the text.

你的诊断？你建议进一步做何检查？

待续！



肺部考虑是什么病变？
骨骼是否异常？



Two axial CT scans of the brain are shown side-by-side. The left scan shows a normal brain with a clear midline. The right scan shows a hyperdense (bright white) area in the right hemisphere, which is causing a shift of the midline towards the left. This is a classic sign of an acute intracerebral hemorrhage.

颅脑是什么病变？

最后诊断？

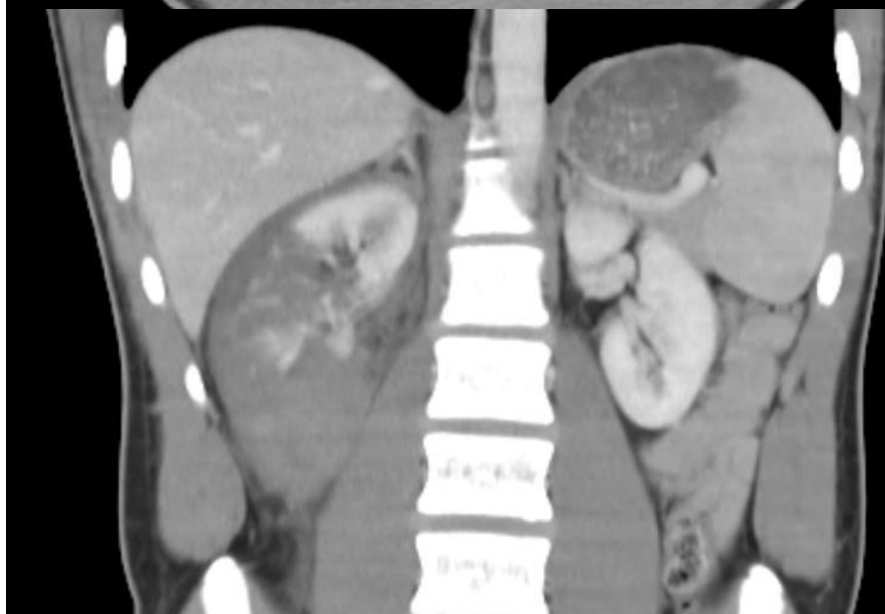
结节性硬化：

双肾AML

肺血管平滑肌瘤病

23

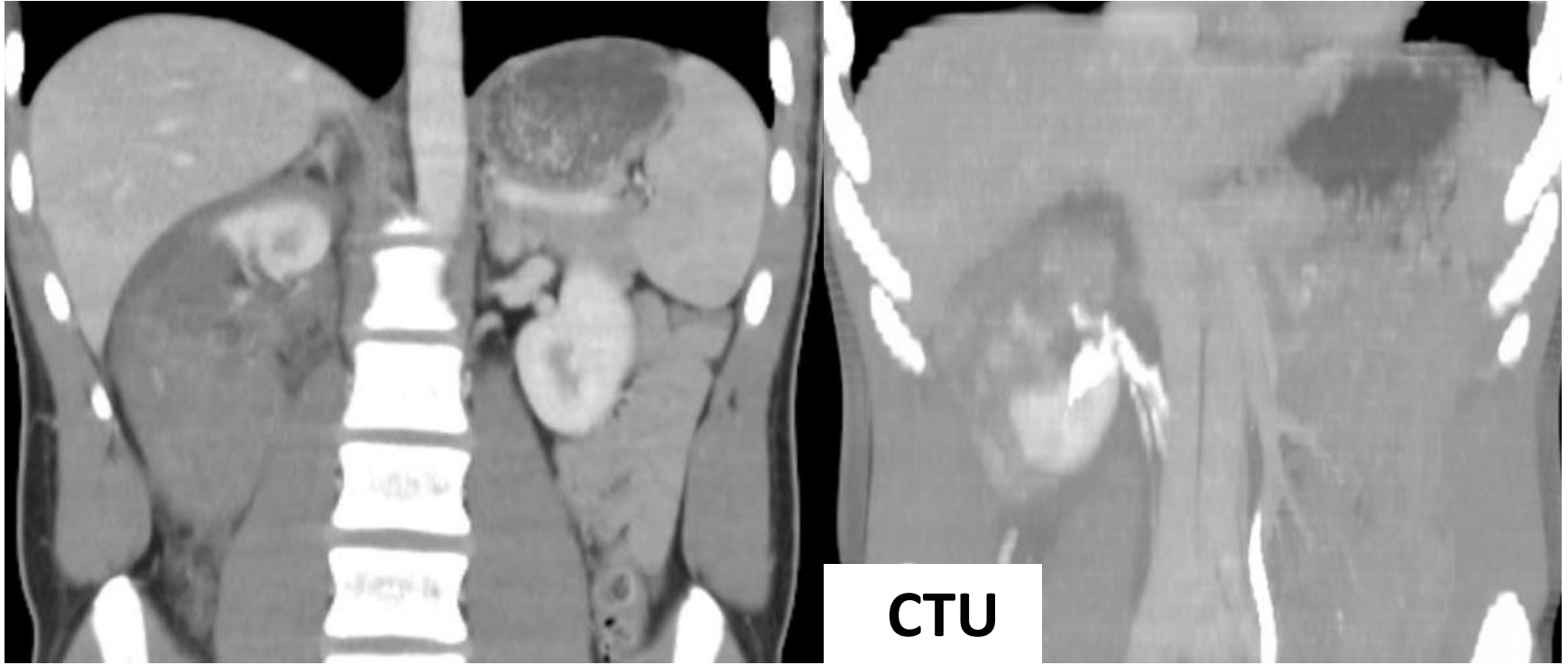
女，16岁，腹部外伤



问题1 请描述主要异常征象

问题2 你的诊断？

待 续！



请回答

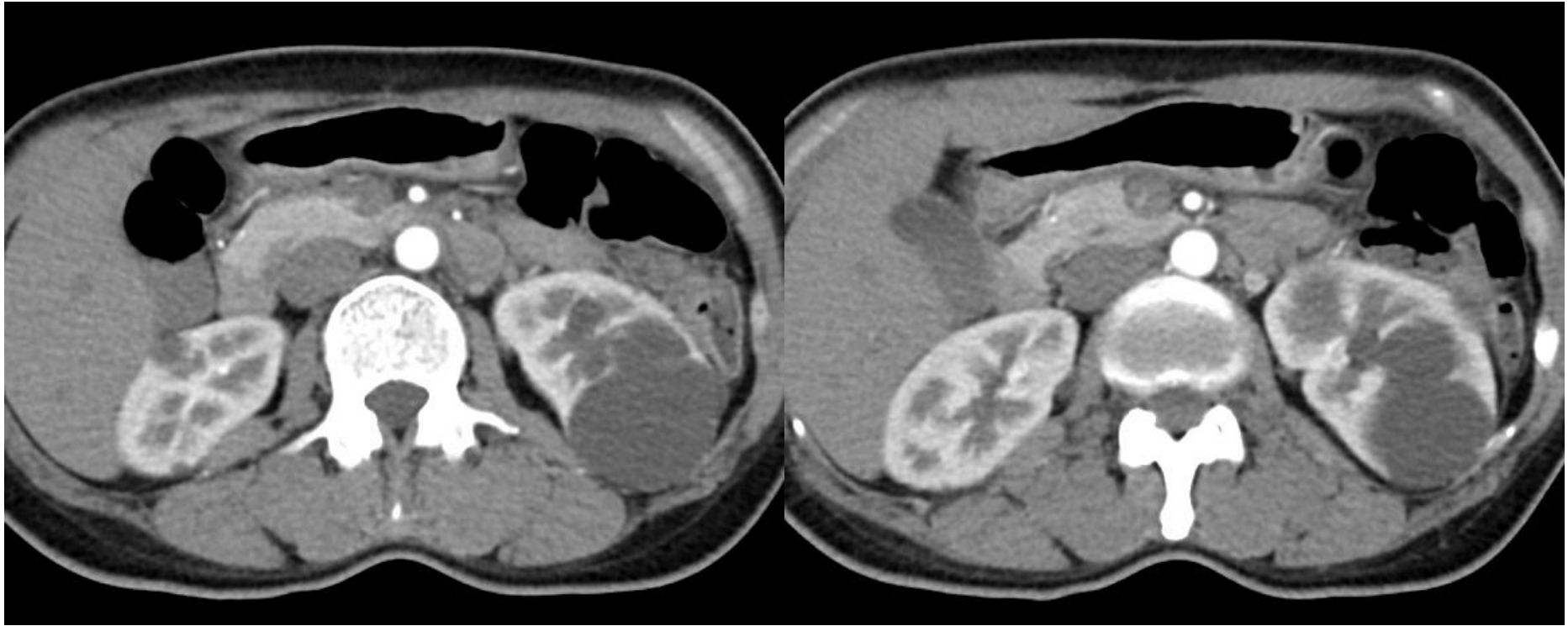
- **本患者的输尿管是否损伤？请解释**
- **本患者肾脏损伤属于哪一级？**

**Shattered right kidney with
proximal ureteral injury,
grade V**

86

**女，54岁，发现肾囊肿
半年**





征象？诊断与鉴别？

**(左肾肿瘤) 嫌色性肾细胞癌，
侵及周围肾组织。**

(左肾囊肿)符合单纯性囊肿改变。

Bosniak classification of renal cysts

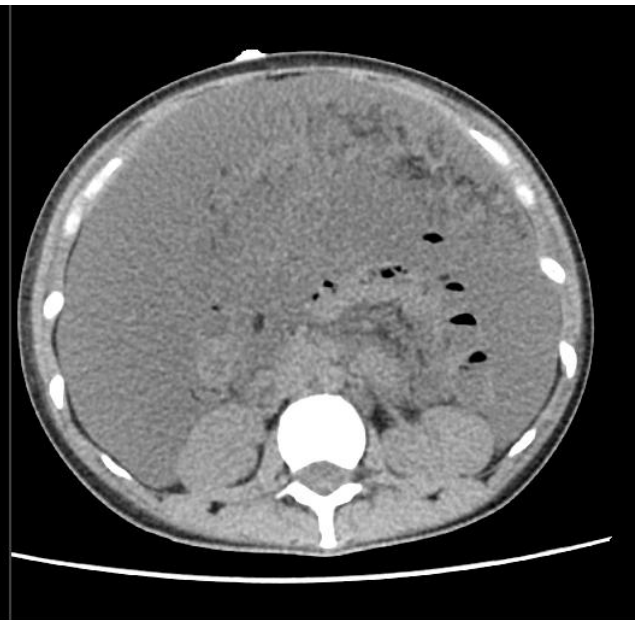
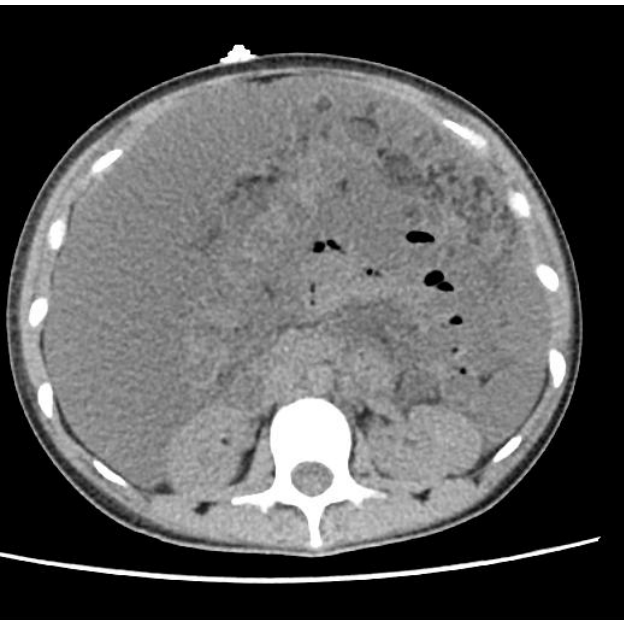
Category	CT features	Significance
Class I	Water density homogenous Noncalcified, smooth margin No enhancing component	Benign
Class II	Thin septae (<1 mm) Thin calcification (<1 mm) Hemorrhagic cyst	Benign
Class IIF		Likely benign Follow-up imaging indicated
Class III	Thick septa Thick calcification Thick wall Multilocular +/- enhancement	≈ 50% malignant
Class IV	Criteria of category III Enhancing solid mass of wall or septa	Definitely malignant

Table 1—Imaging findings and Bosniak classification (adapted from references 1, 5, 6 and 9).

Type	Imaging features without contrast	Contrast enhancement features
I	Water density (0–20 HU), thin margins, sharp delineation with the renal parenchyma, thin and smooth walls, homogeneous	No contrast enhancement
II	Presence of one or few thin septations, small and fine calcifications; hyperdense cysts measuring up to 3.0 cm (60–70 HU)	No contrast enhancement, or no measurable or perceptible enhancement of septa
IIF	More complex lesions which cannot be included in category II or III. Multiple septa. Walls or septa with nodular or irregular calcifications Hyperdense cysts > 3.0 cm or with only 25% of their walls visible (exophytic)	Absent, dubious or hair-like enhancement
III	Thick-walled cystic lesion, septum irregularity and heterogeneous septum and wall and/or contents. Gross and irregular calcifications with measurable enhancement	Wall or septum enhancement
IV	Lesions with all the findings of category III, and solid component, soft parts, independent of finding of wall or septa	Enhancement of wall and/or solid component(s)

生殖系统

女性39岁，下腹胀2周

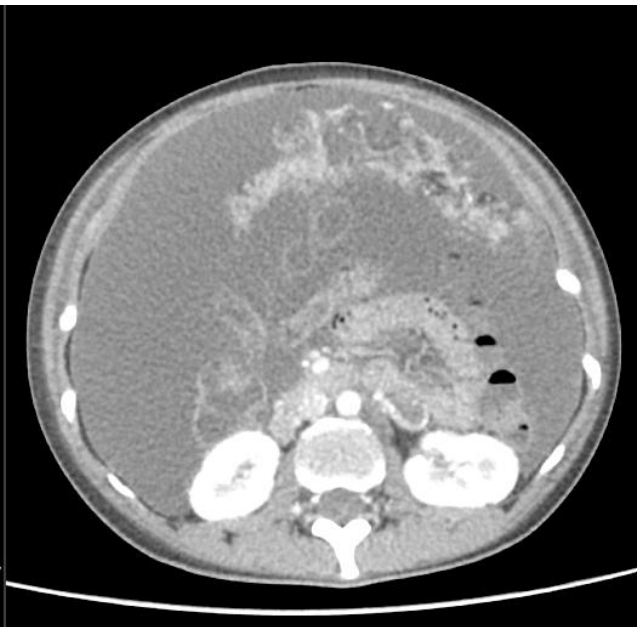
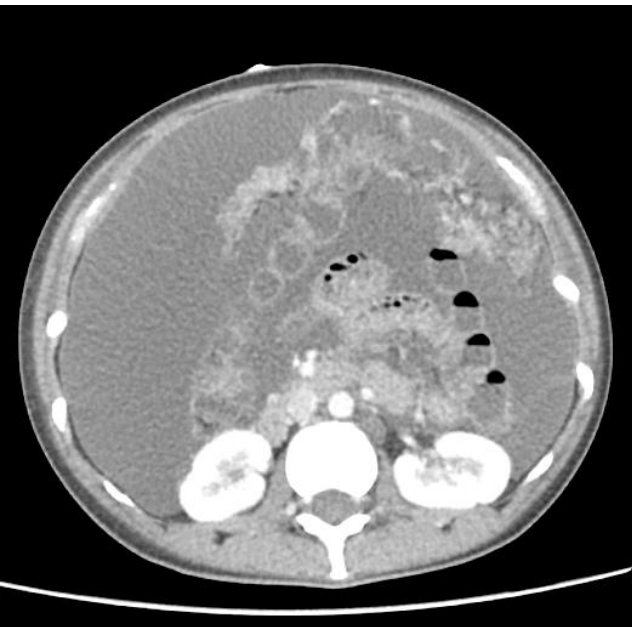


序列4 (128): Body 5.0 默认窗宽窗位

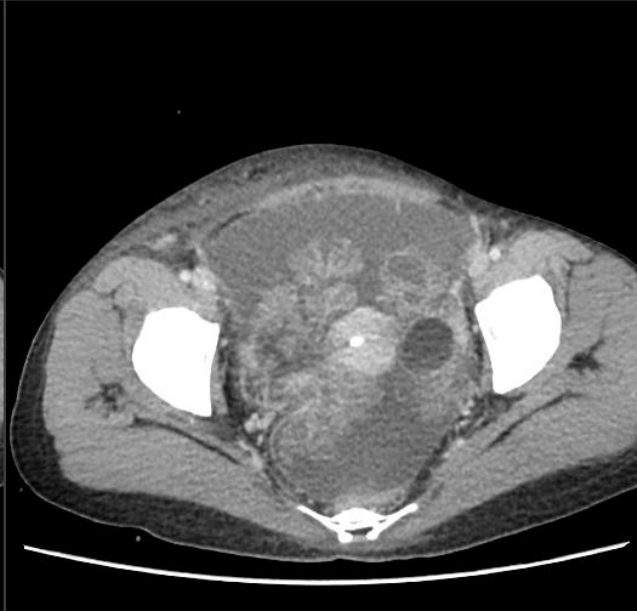
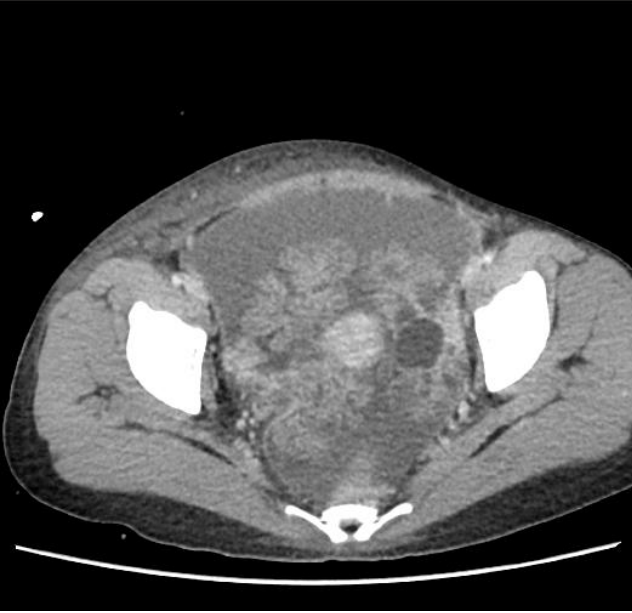


主要的异常征象？

待 续 ！

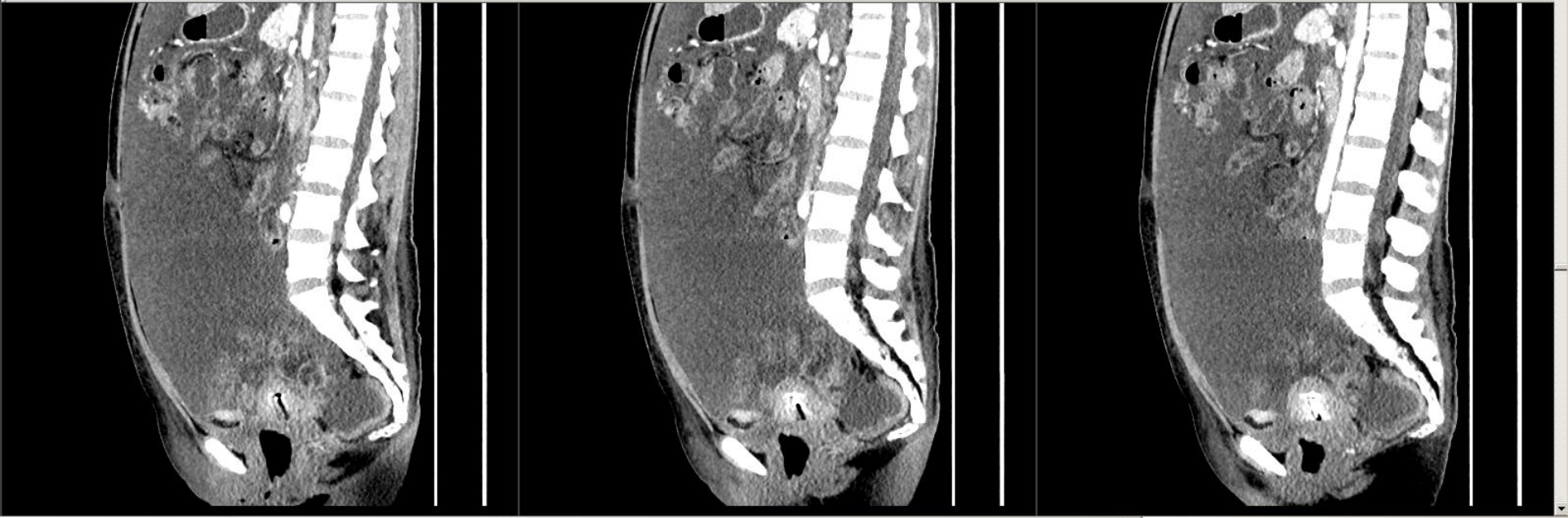


序列16(106): Body 5.0 C 默认窗宽窗位





序列20(81): Body 3.0 CE 默认窗宽窗位



请回答

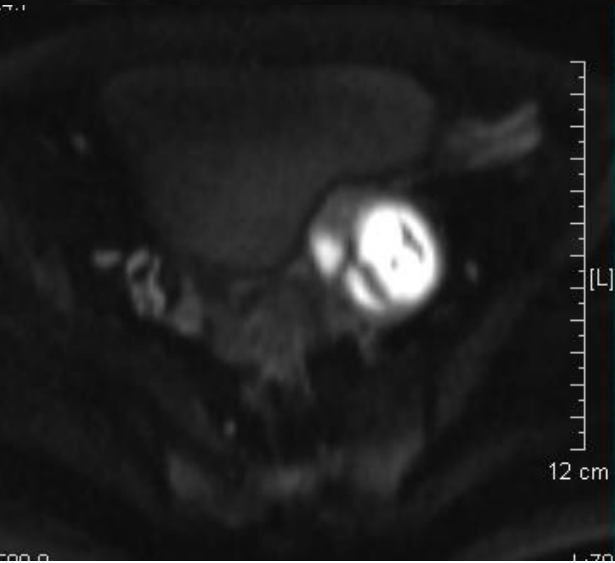
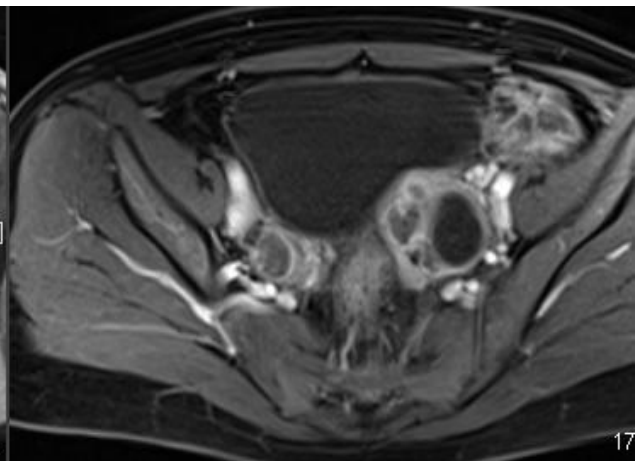
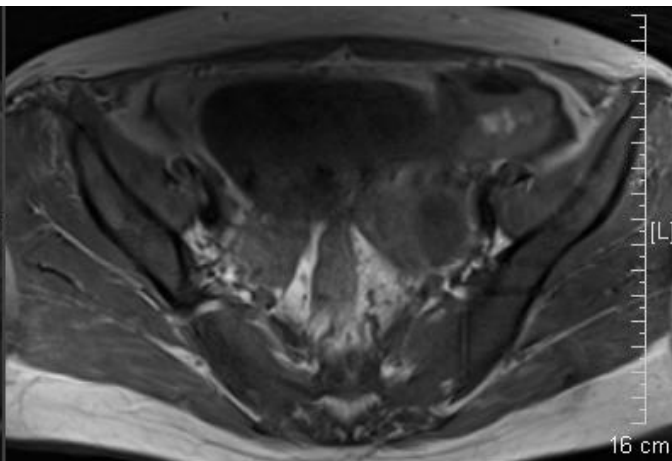
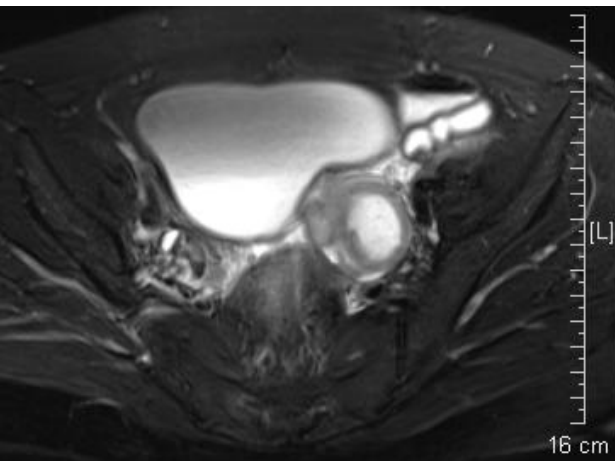
- **主要的病变有哪些？**
- **你的诊断？鉴别？**
- **女性大量腹水主要的原因是什么？**

参考答案

- **（双卵巢肿物）粘液性交界性囊腺瘤，伴癌变（左卵巢肿物大小7.5*5*2cm，右卵巢肿物大小10*9*2cm）。（右盆壁腹膜、肠管表面结节、网膜及阑尾系膜区）查见肿瘤浸润性种植**
- **胃癌、卵巢癌转移，宫外孕破裂、结核**

13

女，40岁，下腹闷痛10多天
超声发现盆腔占位



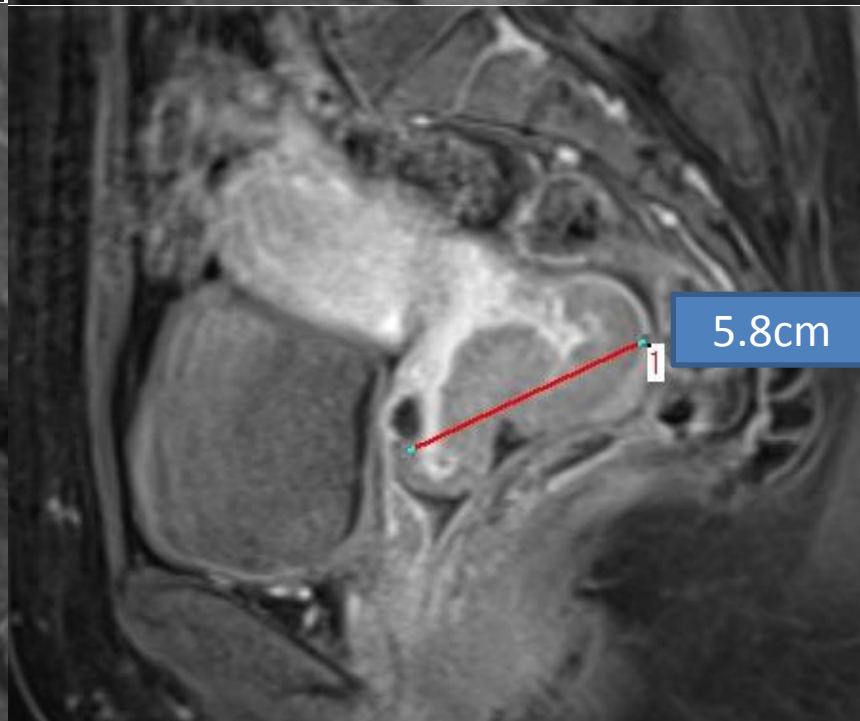
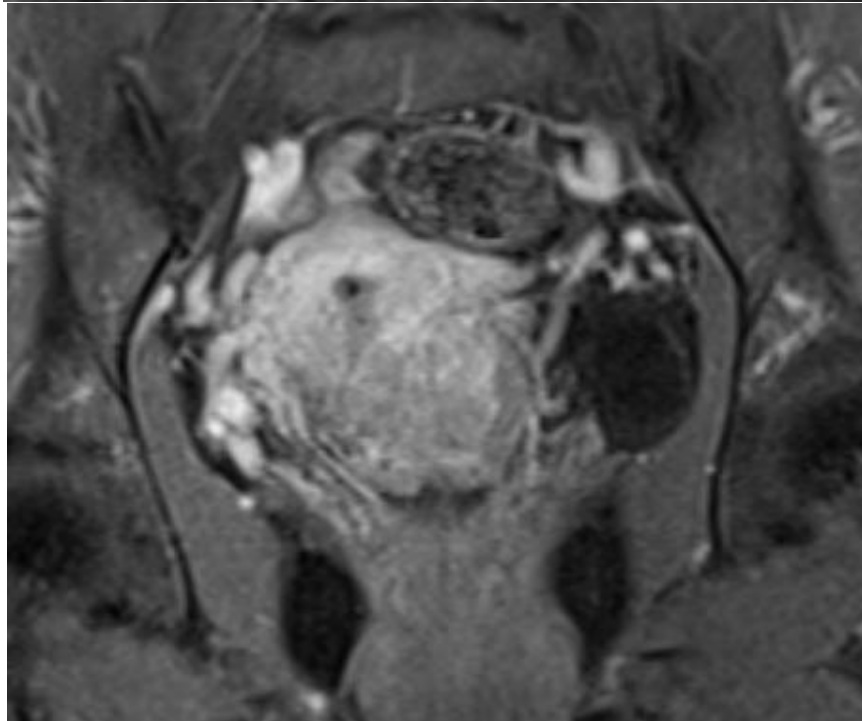
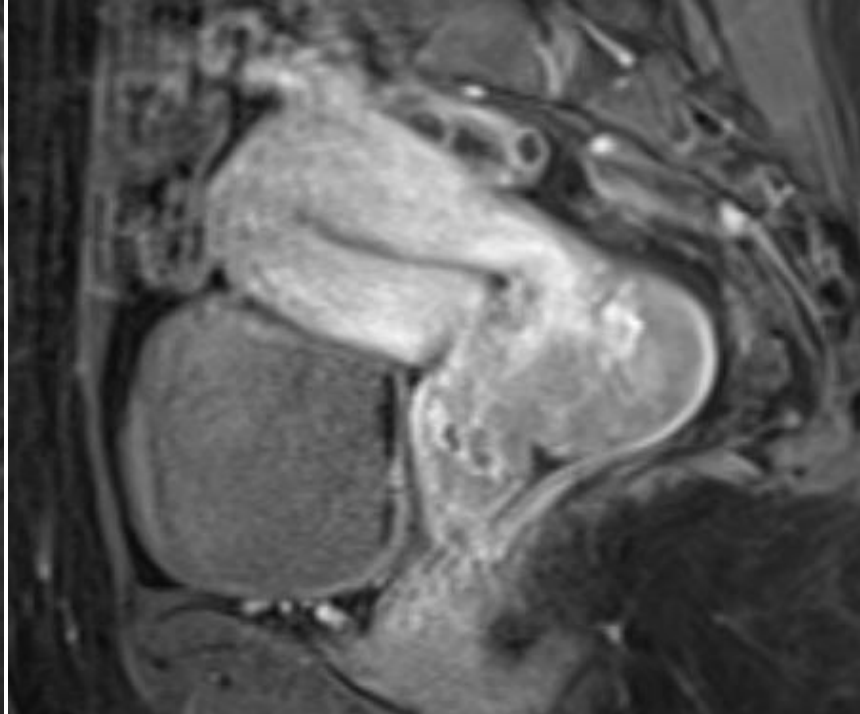
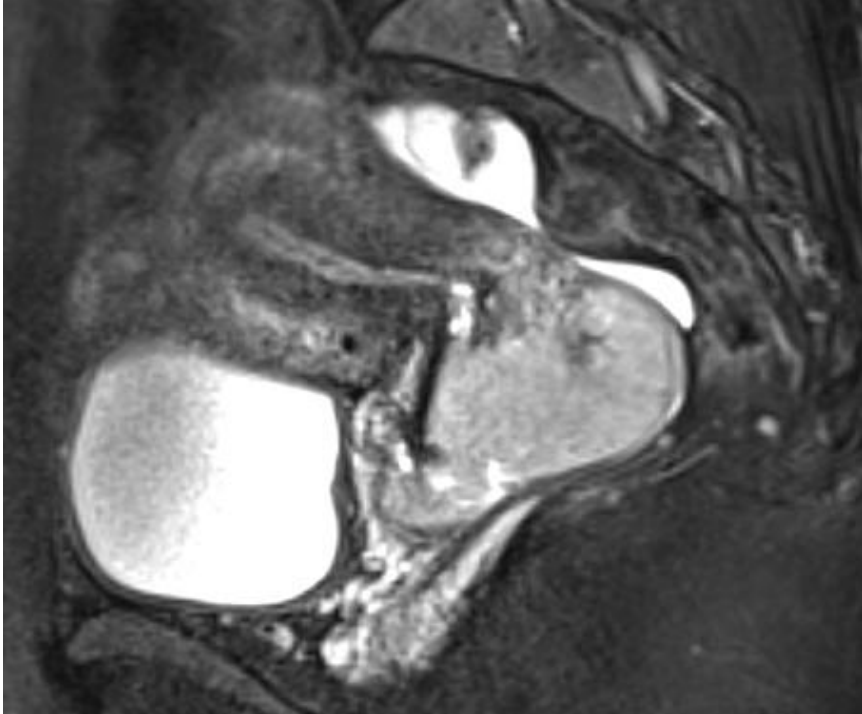
请回答

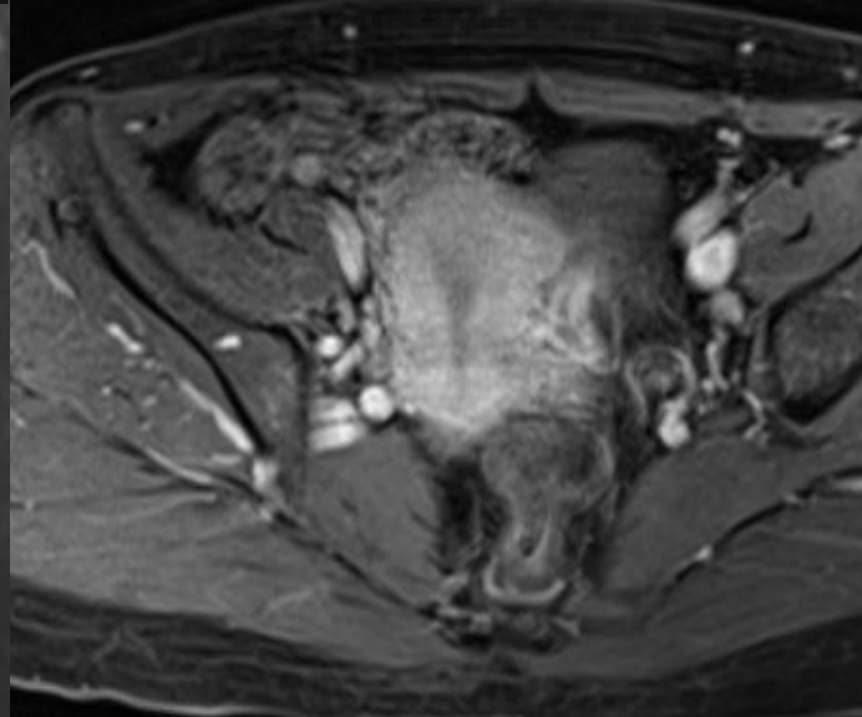
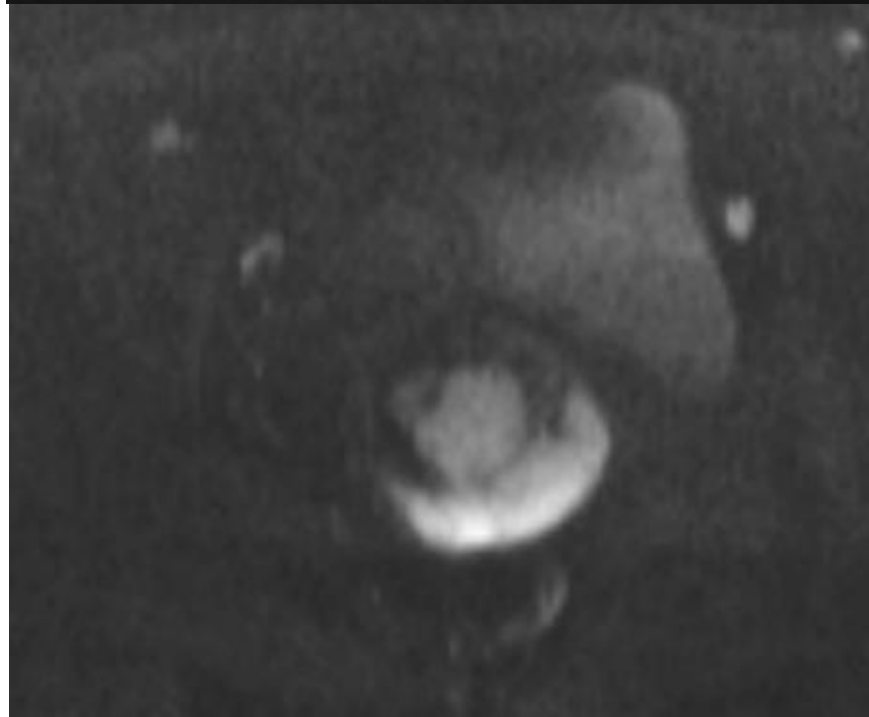
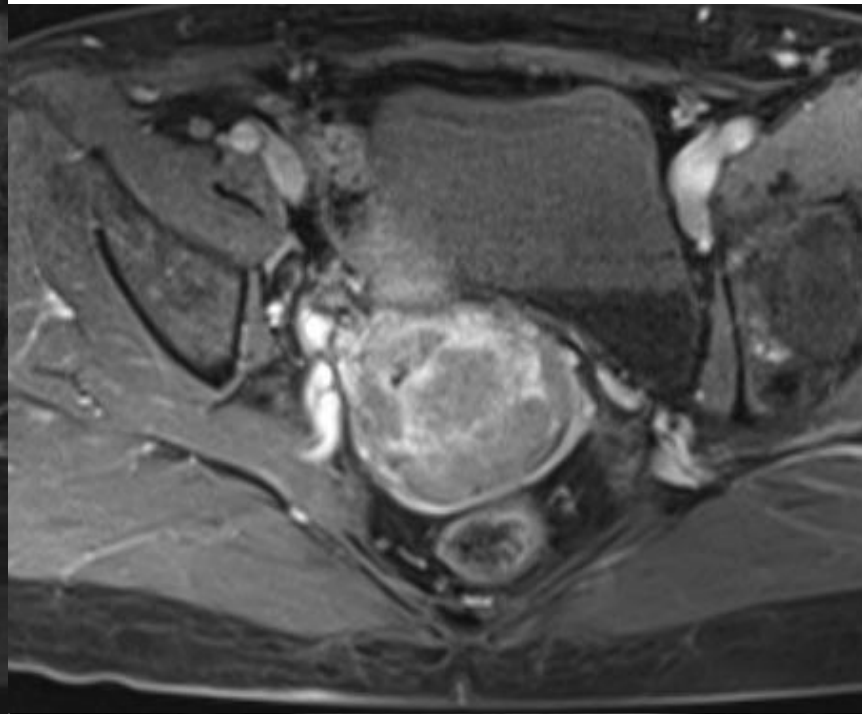
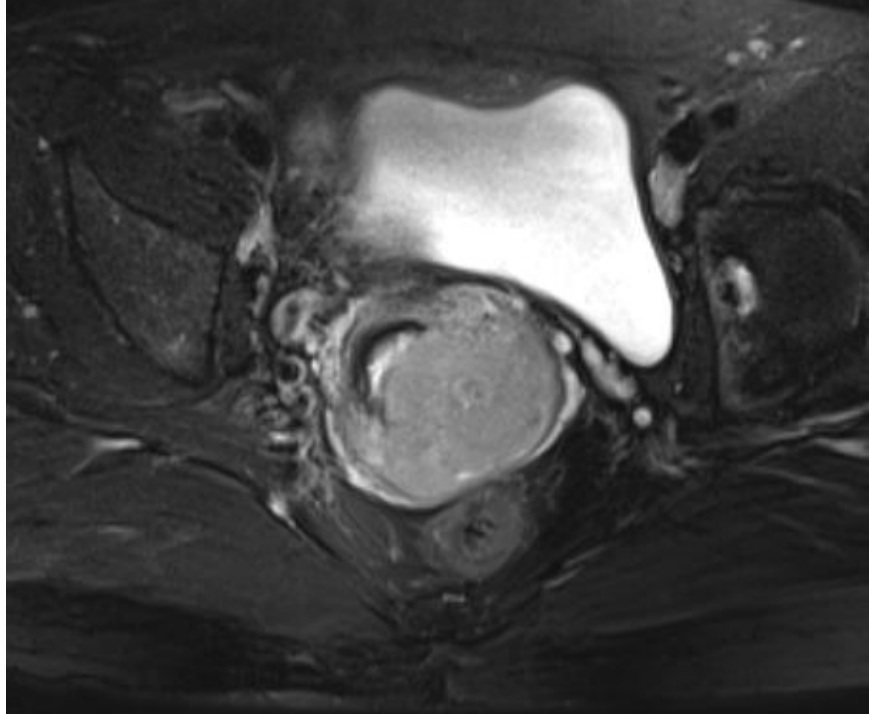
- **请描述主要的异常征象**
- **请讲述你的诊断思路（推理与鉴别过程）**
- **你最后的诊断是什么？**

**(左附件) 卵巢慢性化脓性
炎症 ; 慢性输卵管炎**

44

女，45岁，阴道接触性出血3个月





请描述病变的主要征象

宫旁是否受累？

阴道是否受累？

分期诊断？依据？

宫颈恶性肿瘤（IIA期）

TNM分期	FIGO临床分期	临床表现	MRI征像
T1	I	肿瘤局限于宫体	
T1a	IA	肿瘤局限于内膜	子宫内膜增厚呈条状，并有局灶性或弥漫性的信号异常，内膜与肌层间连接带（暗带）完整
T1b	IB	浸润子宫肌层<1/2	肿瘤的正常信号扩展到子宫肌层<50%，内膜与肌层间连接带不完整或完全消失
T1C	IC	浸润子宫肌层>1/2	肿瘤的正常信号扩展到子宫肌层>50%，连接带完全破坏消失，但子宫外肌层和外形轮廓正常
T2	II	累及子宫颈但未超出子宫	
	IIA	侵及宫颈管	宫颈内口和宫颈管增宽，但低信号的宫颈基质完整
	IIB	侵及宫颈间质	宫颈基质的低信号部分和全部消失
T3	III	肿瘤侵及子宫外，但未及真骨盆外，局部和（或）区域淋巴结转移	
T3a	IIIA	累及浆膜和（或）附件，腹水或腹腔细胞学阳性	子宫外肌层的完整性和连续性中断或消失，子宫外形轮廓不规则
T3b	IIIB	阴道转移（直接蔓延或转移）	阴道壁的低信号消失为高信号的肿瘤替代
T4	IV	肿瘤扩展到真骨盆外，侵及膀胱（或）直肠黏膜	
	IVA	侵及膀胱和（或）直肠黏膜	膀胱和直肠壁的低信号带中断或消失
N1	IIIC	盆腔（IIIC1）和（或）主动脉旁淋巴结（IIIC2）转移（区域淋巴结>1.0cm）	
M1	IVB	远处转移，包括腹部，或累及腹股沟淋巴结	

**Thank you for your
attention!**