

Radiography of Trauma: Upper Extremity 6 Hours

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Simply list your answers (write down letter choice only: a. b. c. d. e. T F) in a NUMBERED vertical column and email to: marcusstrutzdc@gmail.com

1. When taking an x-ray of the hand, the bone structures should include the following (choose one answer):
 - a. Only the carpal bones
 - b. Only the distal tuft, middle phalanx and proximal phalanx
 - c. From the distal tufts to the distal radius
 - d. Metacarpals to the distal radius

2. The lateral x-ray study of the hand should have the fingers:
 - a. Close together (adducted) with the thumb pointing up or away (abducted) from the cassette
 - b. Flexed
 - c. Splayed in extension position and parallel to the cassette
 - d. Extended

3. What is it called with a volar fracture fragment along the ulnar aspect of the base of the first proximal interphalangeal joint?
 - a. Colle's fracture
 - b. Gamekeeper's or Skier's thumb
 - c. Keinbock's
 - d. Barton's fracture

4. Patient exhibits a fracture at the distal tuft of the 2nd finger. What is the possible complication?
 - a. Infection
 - b. Non-union
 - c. Osteonecrosis
 - d. Gout

5. When taking an x-ray of the forearm, the x-ray should include what bony structures? (pick one answer)
 - a. Midportion of the ulna and radius only
 - b. Elbow joint to the midportion of the ulna and radius
 - c. Wrist joint, ulna, radius and elbow joint
 - d. Wrist joint to the midportion of the ulnar and radius

6. The doctor is taking a PA x-ray of the wrist. How should the patient's wrist be positioned to keep the wrist in neutral position?
 - a. Fingers splayed
 - b. Fingers adducted
 - c. Fingers extended
 - d. Loose fist with fingers flexed

7. You are suspecting a scaphoid fracture. What special projection could be performed to optimally evaluate the scaphoid?
 - a. PA view of the wrist
 - b. PA 15 degree cephalad tube tilt with ulnar deviation of the wrist
 - c. AP view of the wrist
 - d. Lateral view of the wrist

8. What is the measurement for normal joint spacing of the intercarpal joints on the AP radiograph of the wrist?
 - a. 1.0 mm
 - b. 3.0 cm
 - c. 2.0 cm
 - d. 2.0 mm

9. A linear radiolucency traverses the scaphoid. What is the most common location for this fracture and what are the possible complications?
 - a. Distal body of the scaphoid; no complications
 - b. Waist of the scaphoid; non-union and/or osteonecrosis of distal pole
 - c. Proximal pole of the scaphoid; non-union and/or osteonecrosis of distal pole
 - d. Tuberosity of the scaphoid; non-union

10. Dorsal triquetral fracture can only be seen on which x-ray projection?
 - a. Lateral x-ray of the wrist
 - b. Oblique x-ray of the wrist
 - c. PA x-ray of the wrist
 - d. PA x-ray with ulnar deviation of the wrist

11. Which carpal bone is the most common to fracture?
 - a. Scaphoid
 - b. Lunate
 - c. Triquetrum
 - d. Hamate

12. The x-ray demonstrate buckling along the posterior and lateral aspect of the metadiaphysis of the distal radius in a 8 year-old boy. What is the likely diagnosis?
 - a. Greenstick fracture
 - b. Torus fracture
 - c. Colle's fracture
 - d. Insufficiency fracture

13. The radiocapitellar line on the AP and lateral projection of the elbow should intersect which bony structures?
 - a. Midportion of the radial head to the superior 1/3 of the capitellum
 - b. Midportion of the radial head to the trochlea
 - c. Midportion of the radial head to midportion of the capitellum
 - d. None of these options are correct

14. When positioning the patient for an AP elbow projection, the patient's hand should be in which position?
 - a. Pronated
 - b. Supinated
 - c. Lateral position with the thumb abducted
 - d. None of the above

15. When positioning the patient for a medial oblique elbow projection, the patient's hand should be in which position?
- Supinated
 - Lateral position with the thumb abducted
 - Medial position with the thumb abducted
 - Pronated
16. Posterior fat pad sign on a lateral projection of the elbow indicates or is suspicious for what pathology?
- Fracture
 - Normal finding
 - Dislocation
 - None of the above
17. What is the most common elbow fracture in children?
- Medical epicondyle fracture
 - Supracondylar fracture
 - Olecranon process fracture
 - Radial head fracture
18. What is the most common elbow fracture in adults?
- Olecranon process fracture
 - Medical epicondyle fracture
 - Supracondylar fracture
 - Radial head fracture
19. What is the preferred advanced imaging for osteochondritis dissecans of the capitellum to determine size, location and stability?
- Bone Scan
 - CT
 - X-Ray
 - MRI
20. When is osteochondritis dissecans unstable?
- Fluid surrounding a fragment and disrupted articular cartilage
 - Intact articular cartilage and bone marrow edema
 - Joint space narrowing, subchondral cyst formation and bone marrow edema
 - Can never be unstable
21. The x-ray studies of the shoulder indicate anteromedial displacement of the proximal humerus with osseous flattening along the posterolateral aspect of the humeral head. What is the diagnosis?
- Posterior dislocation with trough sign
 - Intrathoracic dislocation with Hill Sach deformity
 - None of these answers are correct
 - Anterior shoulder dislocation with Hill Sach deformity
22. What is the normal value for coracoclavicular distance on the AP view?
- Greater than 11-13 cm
 - Greater than 1-3 mm
 - Less than 11-13 mm
 - Less than 1-3 cm

23. What is the Grade of Acromioclavicular Separation found on the AP x-ray study: Widening of the acromioclavicular joint with normal coracoclavicular distance.
- a. Grade II
 - b. Grade IV
 - c. Grade I
 - d. Grade III
24. Which one is a possible complication following clavicle fracture?
- a. Carpal tunnel syndrome
 - b. Ulnar nerve entrapment
 - c. Thoracic outlet syndrome
 - d. Parsonage Turner syndrome
25. AP view of the shoulder demonstrates widening of the acromioclavicular joint of 7.0 mm (normal= less than 5 mm) with indistinct or blurred margins of the distal clavicle. What is your differential diagnosis?
- a. AC separation/strain
 - b. Post traumatic osteolysis of the clavicle, infection, hyperparathyroidism or tumor
 - c. Congenital anomaly
 - d. Normal