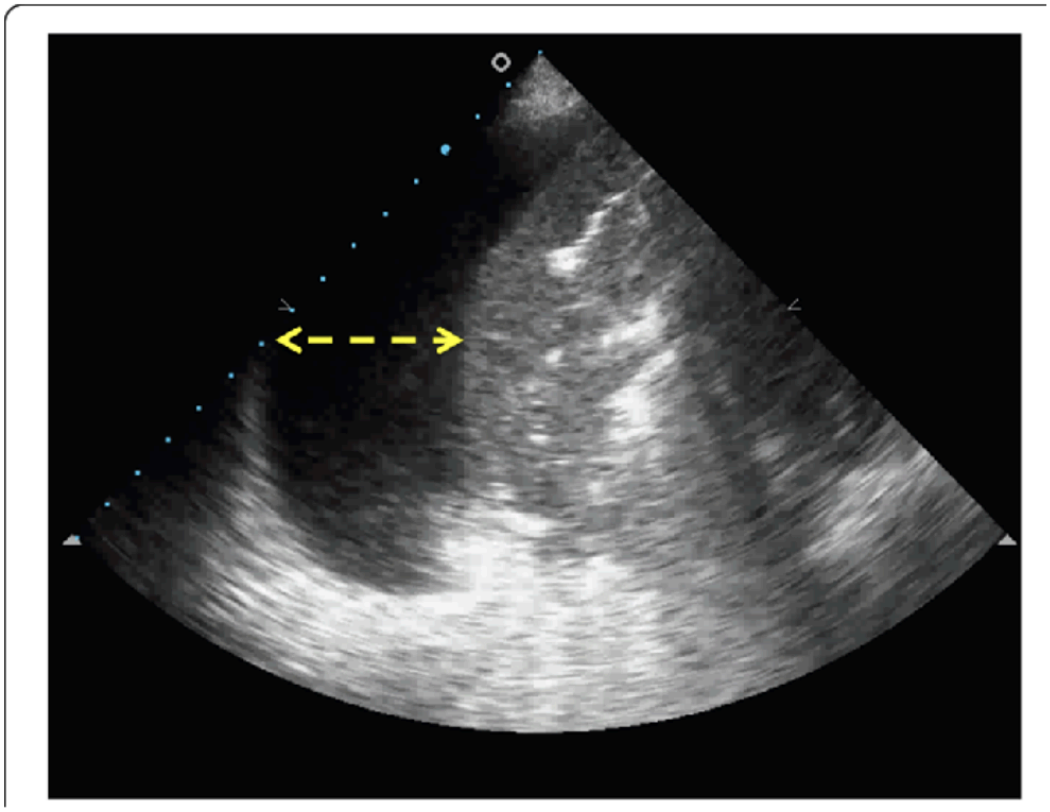
MCQ Guidelines

1. Questions must be your own original content.
2. Ideally use images either from QpathE that you obtained or talk to faculty here. Images from the internet are only accepted with approval and **must be cited**. Ideally you use images you have obtained.
    a. Minimum of 75% of questions MUST have images associated with them.
3. Each question must have the correct answer highlighted.
4. Each question must have an explanation as to why an answer is correct or incorrect.

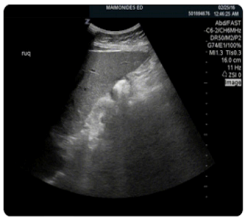
Example of inadequate submission:
-Lacks image citation, correct answer not indicated, no explanation given, simplistic question with no correct answer (that's ascites under the diaphragm, not a pleural effusion).



2. What finding is seen in this ultrasound of the lung?
    a. B lines
    b. A lines
    c. Hepatizaiton
    d. Pleural effusion

Example of adequate submission:
-unusual but important pathology-
-answer highlighted (can just bold it if using Microsoft word)
-own image used
-explanation given

11. Interpret this image.



A Short axis/transverse view of the gallbladder

B Short axis view of the duodenum

C Short axis view of the gallbladder with a large gall stone

D Calcified aorta transverse view

i The duodenum sits in a location very near to the gallbladder. It's tubular structure can often mimic the appearance of the gallbladder. Bowel gas can also have a similar appearance to gallstones, in that it can appear hyperechoic and have posterior shadowing. The gallbladder should however should end in a blind pouch and it's neck will be in the direct vicinity of the portal triad. Always ultrasound in 3 dimensions (short and long axis views) and use adjacent anatomy to clearly define your structure of interest. JAH