IAEA/ESNM Webinar Series on Paediatric NM
Cortical (static) renal scintigraphy and radionuclide cystographies

Self-assessment questions

Q1: In which condition is it mandatory to acquire the anterior projection when performing a cortical renal scan?
   1. Finding of normal kidneys
   2. Presence of an uptake defect
   3. Abnormality of number, shape or position
   4. Hydro-ureteronephrosis at US

Answer: 3

Q2: Which are the disadvantages of DRC in respect to VCUG?
   1. Poorer anatomical detail
   2. Higher radiation burden
   3. Poorer sensitivity
   4. Higher invasiveness

Answer: 1

Q3: Is it useful to perform two filling/voiding cycles during DRC when the first one shows no reflux?
   1. Not at all
   2. Yes, because the scan must last at least 10 min.
   3. Yes, because Reflux can be intermittent and showing itself only in the second cycle.
   4. No difference

Answer: 3

Q4: Is there a way to assess the presence of a vesicouretral reflux without using a bladder catheter?
   1. No
   2. Yes, performing an IRC
   3. Yes, performing an US
   4. Yes, performing a Cortical renal scan

Answer: 2
Q5: Which is the shortest time interval after a febrile UTI for performing a cortical renal scan to evaluate the presence of irreversible renal damage?
   1. 1 week
   2. 1 month
   3. 3 months
   4. 6 months

Answer: 4

Q6: Which is the largest time interval during a febrile UTI for performing a cortical renal scan to evaluate the presence of potentially reversible renal damage due to infection?
   1. 1 week
   2. 1 month
   3. 3 months
   4. 6 months

Answer: 1

Q7: What is the most accurate method to identify parenchymal renal involvement during febrile UTI?
   1. PCR blood levels
   2. US
   3. WBC count
   4. Cortical renal scan

Answer: 4

Q8: Do the clinical guidelines recommend to perform a cortical scan either during the acute phase or later after the first episode of febrile UTI?
   1. Not at all
   2. Yes, always
   3. Yes, only if US is abnormal, showing dilated ureter(s)
   4. Yes, only if VCUG shows reflux

Answer: 1

Q9: According to recent literature, is it useful to perform a VCUG in children with a normal “acute-DMSA”?
   1. Not at all
   2. Yes, always
   3. Yes, only if PCR was above 100
   4. Yes, if the culprit bacterial agent is not E. Coli

Answer: 1

Q10: Which imaging protocol shows the greater accuracy in demonstrating renal damage?
   1. The AAP guideline one
2. The NICE guideline one
3. The SINP guideline one
4. The TOP-DOWN one

Answer: 4