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process. Later, during my radiology residency, case-based learning grew to a level where the case-based journal: integrating new findings that aid in the traditional learning process. Years later, the *Journal of Radiology* became an internationally popular and PubMed radiology journal—popular not only because of the case-based approach, but also because of the case-based approach. This led me to the next step: why not tackle something that I especially admired during my residency but that could be improved: creating a new interactive case-based review series. I imagined a book series that would take into account new developments in teaching and technology and changes in the examination process.

As did most other radiology residents, I loved the traditional case review books, especially for preparation for the boards. These books are quick and fun to read and focus in a condensed way on material that will be examined in the final boards. However, nothing is perfect and these traditional case review books had their own intrinsic flaws. The authors and I have tried to learn from our experience by putting the good things into this new book series but omitting the bad parts and exchanging them with innovative features.

What are the features that distinguish this series from traditional series of review books?

To save space, traditional review books provide two cases on one page. This requires the reader to turn the page to read the answer for the first case but could lead to unintentional “cheating” by seeing also the answer of the second case. Doesn't this defeat the purpose of a review book? From my own authoring experience on the *USMLE Help* book series, it was well appreciated that we avoided such accidental cheating by separating one case from the other. Taking the positive experience from that book series, we decided that each case in this series should consist of two pages: page 1 with images and questions and page 2 with the answers and

explanations. This approach avoids unintentional peeking at the answers before deciding on the correct answer yourself. We keep it strict: one case per page! This way it encourages you to use your own knowledge to figure out the right answer.

Another example that residents (including me) did miss in traditional case review books is that these books did not highlight the pertinent findings on the images; sometimes, even looking at the images as a group of residents, we could not find the abnormality. This is not only frustrating but also time-consuming. When you prepare for the boards, you want to use your time as effectively as possible. Why not show annotated images? We tackled this challenge by providing, on the second page of each case, the same images with annotations or additional images that highlight the findings.

When you are preparing for the boards and managing your clinical duties, time is a luxury that becomes even more precious. Does the resident preparing for the boards truly need lengthy discussions in a typical textbook? Or does the resident rather want a “rapid fire” mode in which he or she can “fly” through as many cases as possible in the shortest possible time? This is the reality when you start your work after the boards! Part of our concept with the new series is in providing short “pearls” instead of lengthy discussions. The reader can easily read and memorize these “pearls.”

Another challenge in traditional books is that questions are asked on the first page and no direct answer is provided, only a lengthy block of discussion. Again, this might become time-consuming to find the right spot where the answer is located if you have doubts about one of several answer choices. Remember: time is money—and life! Therefore, we decided to provide explanations to *each* individual question, so that the reader knows exactly where to find the right answer to the right question. Questions are phrased in an intuitive way so that they fit not only the print version but also the multiple-choice questions for that particular case in our online version. This system enables you to move back and forth between the print version and the online version.

In addition, we have provided up to three references for each case. This case review is not intended to replace traditional textbooks. Instead, it is intended to reiterate and strengthen your already existing knowledge (from your training) and to fill potential gaps in your knowledge.

However, in a collaborative effort with the *Journal of Radiology Case Reports* and the international radiology community Radiologyopolis, we have developed an online repository