

RENAL SCINTIGRAPHY EXAM (12/04) Name _____

Check if the statement is correct:

1. () Tc 99m DTPA renal studies with lasix can reliably exclude obstruction in a dehydrated patient.
2. () An extravasated injection of Tc-99m DTPA can give a false positive result for obstruction.
3. () Visualization of a ureter of a renogram study is abnormal.
4. () Even if a kidney contributes <10% to the total GFR, its function will usually improve if the obstruction is relieved.
5. () On a Tc-99m DTPA study in pre-renal failure, there is impaired renal blood flow, poor uptake, delayed intrarenal transit and little or no excretion.
6. () In patients with renal failure, renal studies are best performed with Tc-99m MAG3.
7. () On a Tc-99m DTPA study, rejection of a renal transplant can be distinguished from cyclosporine toxicity.
8. () Concerning imaging with Tc-99m MAG3, liver and biliary activity can be seen.
9. () The radiation dose from Tc-99m MAG3 study is less than for a Tc-99m DTPA study.
10. () The peak blood flow to a normal kidney occurs 10 seconds after the aorta..
11. () Infants in whom a hydronephrosis has been detected antenatally should have a Tc-99m DTPA scan as soon as is practical after birth.
12. () Patients who are to undergo a captopril renal scan should be kept NPO from midnight the night before the test.
13. () ACE inhibitors act upon the efferent glomerular arteriole.
14. () Concerning ACE inhibition renography: In a Tc-99m MAG-3 study, a continually rising curve suggests hemodynamically significant renal artery stenosis.
15. () Tc-99m DMSA binds to the proximal convoluted tubules in the cortex.
16. () The flow phase (radionuclide angiogram) cannot be performed using the tracer I-131 iodohippurate.
17. () Captopril blocks the conversion of angiotensin I to angiotensin II in the lungs.
18. () The usual captopril dose is 10-20 mg PO.
19. () Tc-99m DMSA is the most sensitive nuclear medicine technique for diagnosing scarring secondary to reflux.
20. () A congenital abnormality which is usually unilateral (bell-clapper testis) is the most common predisposing factor to testicular torsion.

Answer key

1. F
2. T
3. F
4. F
5. F
6. T
7. F
8. T
9. F
10. F
11. F
12. F
13. T
14. T
15. T*
16. T*
17. T*
18. F*
19. T*
20. F*

Questions 1-14 are from MCQs in Clinical Nuclear Medicine
Questions 15-20 are from Nuclear Medicine, the Requisites