

2018 SSR ONLINE POSTER KNOWLEDGE GAPS

KNOWLEDGE GAP - POSTER #7

The radiologist should be aware of imaging findings of superior capsular reconstruction and findings to suggest failure.

KNOWLEDGE GAP - POSTER #12

The radiologist should be aware of normal anatomy of the sternum and sternoclavicular joint and commonly seen variants in order to distinguish from pathological processes.

Understanding of pathological processes affecting the sternum and sternoclavicular joints is important as these may easily be overlooked.

KNOWLEDGE GAP - POSTER #13

Accurate diagnosis and treatment of osteomyelitis can be challenging for clinicians with numerous non-radiological societies advocating for bone biopsy once imaging has been performed. Radiologists, and the clinicians ordering these procedures, should have knowledge of the diagnostic yield of a bone biopsy and whether the procedure effects management in clinical practice.

KNOWLEDGE GAP - POSTER #15

The use of ultrasound guidance plays a pivotal and an expanding role in musculoskeletal interventions. We wish to describe current practice patterns and preferences in utilization of ultrasound and assess the factors that impact them.

KNOWLEDGE GAP - POSTER #23

MR imaging of the lumbosacral plexus can be a technically challenging examination requiring sequence optimization, and knowledge of the complex nerve anatomy.

A simplified approach to lumbosacral plexus imaging and pathology, including case based review of imaging findings, review of imaging technique, and review of nerve anatomy aims to improve accurate diagnostic interpretation for both the general and subspecialty trained radiologist.

KNOWLEDGE GAP - POSTER #28

The radiologist should be aware of the incidence of OM in lower extremity pathology in the absence of ulcer/open wound.

The radiologist should be aware of medical comorbidities that predispose patients to osteomyelitis.

The radiologist should be aware of independent predictors of osteomyelitis.

KNOWLEDGE GAP - POSTER #29

The radiologist should be aware of muscle edema patterns and distribution and how the findings on MRI along with relevant clinical history can lead to a narrow differential or accurate diagnosis.

KNOWLEDGE GAP - POSTER #35

The radiologist should be aware of the appearance, age related frequency and common locations of crystal deposition in the cervical spine.

KNOWLEDGE GAP - POSTER #37

Although calciphylaxis is an uncommon condition, most commonly found in patients with end-stage renal disease, radiologists should be aware of this disease process because radiologic evaluation now plays an important complimentary role in the diagnosis of calciphylaxis.

KNOWLEDGE GAP - POSTER #38

The radiologist should be aware of the utility of whole-body magnetic resonance for the detection of myxoid liposarcoma metastases.

KNOWLEDGE GAP - POSTER #42

The distribution of metastases along the length of the femur is not well known. This impacts imaging protocols used for initial staging and follow up of cancer patients, especially with regard to FDG PET/CT scanning.

KNOWLEDGE GAP - POSTER #50

The practicing radiologist should be aware of the imaging differential diagnosis of forefoot pain and how to accurately diagnose common pathologies utilizing MR imaging.