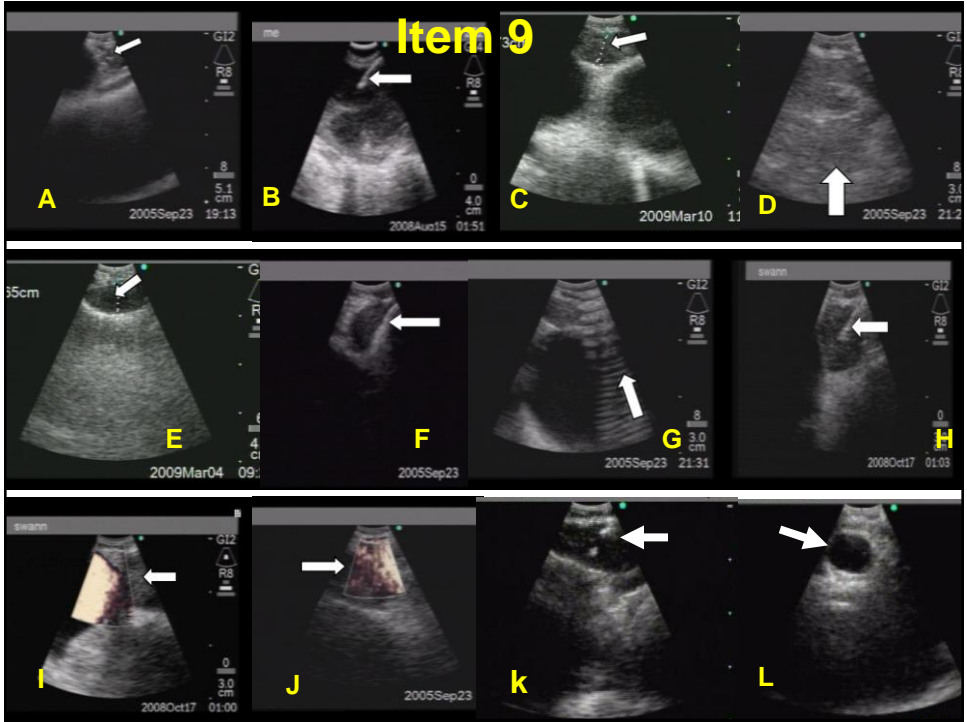


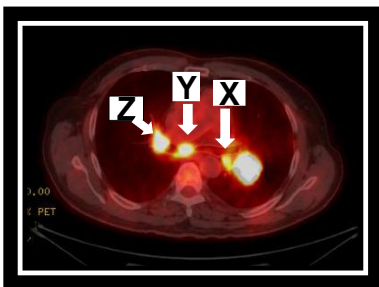
ITEM 8: Match the photo (A-L) to the corresponding 10 CT scan descriptions (Only one response per description)			
_____ Superior vena cava adjacent to 4R	_____ Inominate vein adjacent to 2R	_____ Pulmonary artery adjacent to 4L	_____ Aortic arch adjacent to 4L
_____ Azygos vein adjacent to 4R	_____ Station 7 adjacent to left atrium	_____ Station 11L with adjacent lung	_____ Station 10R
_____ Station 4L in axial view	_____ Pulmonary artery adjacent to 10L	NO RESPONSE	



ITEM 9: Match the photo (A-L) to the corresponding 10 EBUS views (Only one response per description)			
_____	_____	_____	_____
Station 4R adjacent to pulmonary artery superior vena cava and ascending aorta	Needle penetrating through and through	Needle missing target node	Station 4L adjacent to aorta and pulmonary artery
_____	_____	_____	_____
Station 4L adjacent to pulmonary artery	Needle within lymph node	Normal lung	Reverberation artifact
_____	_____	NO RESPONSE	
Station 7 adjacent to left atrium	Hilar node adjacent to normal lung		

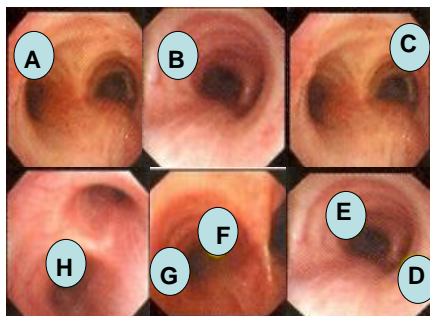
ITEM 10: Choose **One** best answer for each question

1. Three FDG avid nodes are noted on Fusion PET-CT in a patient with a Left Upper Lobe PET positive mass. Which node (x, y or z) should be sampled first ?



Answer _____

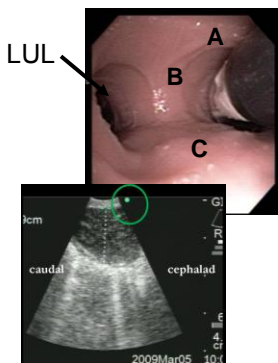
2. Where is the node located (needle insertion site A, B, C, D, E, F,G, or H) using white light bronchoscopy ?



Answer _____

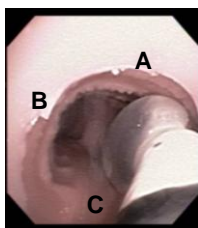
ITEM 10: Choose **One** best answer for each question

3. To sample level 11L, point the scope towards (A), (B), (C).



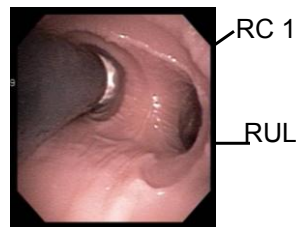
Answer _____

4. When sampling level 4R, consider pointing the scope towards A, B or C.



Answer _____

5. The Interlobar Pulmonary Artery is most likely seen when sampling level (A) 10R, (B) 11R, or (C) 12R



Answer _____