



## Summary Feedback

### ST1 – ST4 Teaching Programme 2023

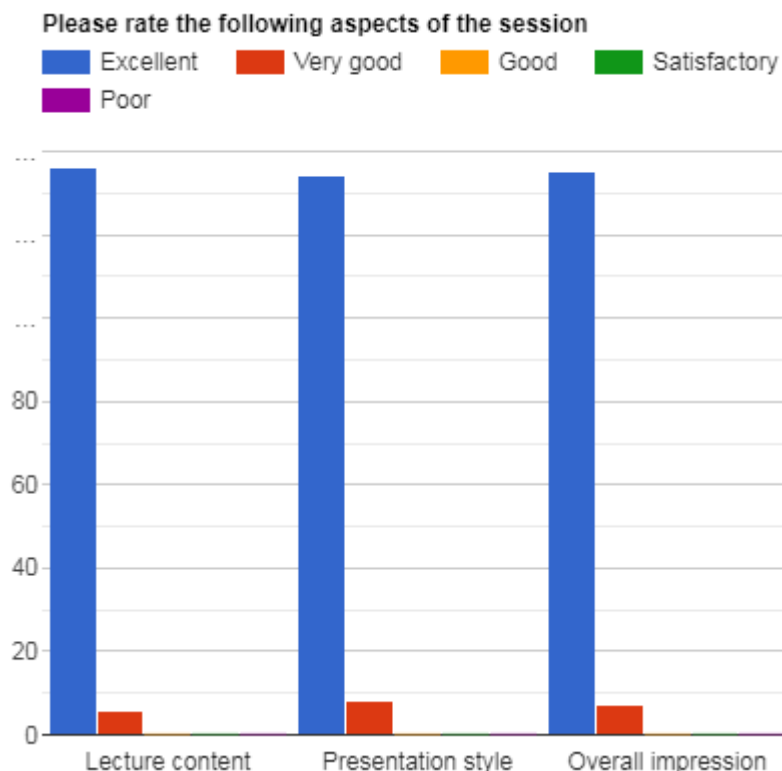
#### DKT FRCR 2B Viva (Session 13)

#### (i) MRI Rectum for FRCR Exam (ii) Viva Cases (13<sup>th</sup> April 2023)

Delivered By:  
(Sami Khan)

#### Summary Points:

- ST1-ST4 teaching programme 2023 – Viva Session 13: 2 hours teaching time
- Total Attendees: 359 from 32 Countries (Australia, Bahrain, Bangladesh, China, Dominica, Egypt, Hong Kong, India, Indonesia, Iraq, Ireland, Jordan, Kenya, Kuwait, Malaysia, Myanmar, Nepal, Nigeria, Oman, Pakistan, Qatar, Saudi Arabia, South Africa, Sri Lanka, Sudan, Swaziland, Türkiye, UAE, UK, Yemen, Zambia, Zimbabwe).
- Total feedback received from 142 participants



Did you find it useful  
142 responses

● Yes  
● No



## Testimonials

- Highly obliged to Dr. Khan for dedicating so much time and effort to teaching radiologists from all over the world. These sessions make us better radiologists and better able to serve our patients.
- As always it's most informative even if you think that you know it all!! (UK).
- Valuable revision confidence building for daily reporting. Thank you for sharing case of Gossypiboma. I would have never guessed as in my mind CT diagnostic and MRI would not be needed but after hearing the context to MRI I appreciate why knowing MRI appearance is essential also (UK).
- Way of identification of peritoneal reflection according to the level of rectum, measurement of superior and inferior margin of tumor by scrolling parasagittal images and knowledge of coronal imaging in low rectal tumor - most useful points to learn for me (Myanmar).
- We learnt everything about rectal carcinoma, form anatomy till final reporting (Pakistan).
- I love to hear your voice and watch you, Sir Khan. You are beyond excellence. I try never to miss your lecture (Pakistan).
- Great anatomical illustrations in addition to the cases. These made concepts very clear about pathologies (Pakistan).
- Very thankful for Dr Khan's generosity (Sudan).
- Excellent were all the aspects (Egypt).
- Explanation was the most useful (Pakistan).
- Everything was useful (UK)
- Teaching style was the most valuable (UK).
- Very useful (Oman).
- Content and delivery was the most valuable (Pakistan).
- Perfect (Pakistan).
- "Dr Khan's way of teaching, especially the approach was the most valuable " (Sudan).
- Great teaching session (Iraq).
- Very nice teaching of rectal ca (Saudi Arabia).

## DKT FRCR 2B Viva (Session 13) - (i) MRI Rectum for FRCR exam (ii) Viva Cases






- Best teaching ever (Pakistan).
- Great teaching (UAE).
- Overall it was good (Pakistan).
- Entire lecture was valuable (Oman).
- All cases especially low rectal tumors and the report topics were valuable (Egypt).
- Cases and teaching were the most valuable (UK).
- Very detailed and well explained (UK).
- "DICOM, simplified lecture of classification was the most valuable" (Algeria).
- Cases and in depth discussion on how to report pelvic pathology cases were the most valuable (UK).
- Dr Khan's teaching was very good (UK).
- Detailed explanation including basics (UK).
- Excellent and lucid lecture (India).
- The explanation and cases were very satisfying (Egypt).
- Engaging (Kenya).
- Lecture explanation followed by interactive was the most valuable (Pakistan).
- Great as always (Pakistan).
- Excellent revision of anatomy (Saudi Arabia).
- Detail explanation of each case was the most valuable (UAE).
- Dr Khan's explanations of cases and images was the most valuable (Pakistan).
- Rectal cancer staging was the most valuable (UAE).
- Another brilliant session from Dr Khan (UK).
- Excellent cases and detailed explanation of all (Pakistan).
- Very interesting cases, great teaching (Kenya).
- Overview of anatomy followed by practice session was the most valuable (Pakistan).
- Interactive session and friendly environment.. the way of teaching was the most valuable (Pakistan).
- Interactive sessions were the most valuable (Pakistan).
- Superb session (India).
- Ant Minnie cases are most welcome (Zimbabwe).
- Whole session was useful (Pakistan).
- Easy to understand and remember. MRI Rectum teaching points were shared (Saudi Arabia).
- Perfect coverage (Egypt).
- It's the best (Pakistan).
- "Everything is excellent. Thank you so much sir for all this" (Pakistan).
- That was great (Pakistan).
- It was an excellent teaching (Nigeria).
- Great! (Nigeria).
- Very nice, superb (Pakistan).
- Very educative (Kenya).
- Thank you so much (Saudi Arabia).
- Excellent session for Surgical trainee as well (UK).
- Well-done (Pakistan).
- Awesome. Thank you Dr. Khan (Indonesia).
- Excellent impression (Pakistan).
- Very Informative (Kenya).
- Excellent demonstration and teaching skills (Pakistan).

## DKT FRCR 2B Viva (Session 13) - (i) MRI Rectum for FRCR exam (ii) Viva Cases

- Very helpful Lecture for those preparing for 2b (UK).
- Great lecture (Egypt).
- Excellent work (Kenya).
- Very informative lecture. Many thanks (UK).
- Very good (UK).
- A very, very nice class (Pakistan).
- Nice. Thanks for your great effort with respect (Yemen).
- Very useful presentation with very good points (UK).
- Excellent teaching session (Algeria).
- As always, excellent summary of essential anatomy and reporting points with viva cases (UK).
- Excellent session (Pakistan).
- Thank you for help (Oman).
- Excellent so far!! (UAE).
- Awesome (UK).
- Outstanding (Saudi Arabia).

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DR. KHAN'S  
DKT  
TEACHING  
The A to Z of FRCR 2B Exam

MRI-EMVI score	Predicted EMVI	Typical imaging features	Schematic illustration
0	Negative	The pattern of tumour extension through the muscle coat is not nodular, and there are no vessels adjacent to areas of tumour penetration.	
1		Minimal extramural stranding / nodular extension seen, but not in the vicinity of any vascular structures.	
2		Stranding demonstrated in the vicinity of extramural vessels, but these vessels are of normal calibre, and there is no definite tumour signal seen within the vessel.	
3	Positive	Intermediate signal intensity apparent within vessels, although the contour and calibre of these vessels is only slightly expanded	
4		Obvious irregular vessel contour or nodular expansion of vessel by definite tumour signal.	

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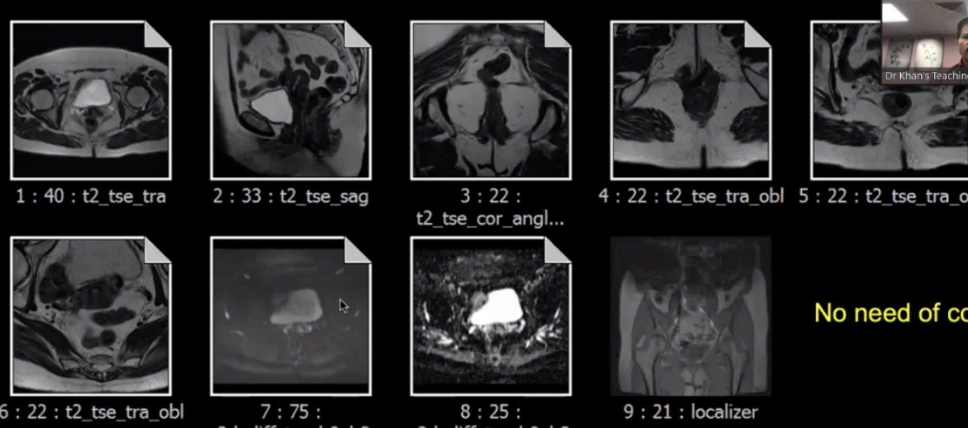
Professor Gina Brown  
The Royal Marsden Hospital

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**DR. KHAN'S TEACHING**  
The A to Z of FRCR 2B Exam

### Protocol : MRI Rectum



1 : 40 : t2\_tse\_tra    2 : 33 : t2\_tse\_sag    3 : 22 : t2\_tse\_cor\_angl...    4 : 22 : t2\_tse\_tra\_obl    5 : 22 : t2\_tse\_tra\_obl

6 : 22 : t2\_tse\_tra\_obl    7 : 75 : ep2d\_diff\_tra\_b0\_b8...    8 : 25 : ep2d\_diff\_tra\_b0\_b8...    9 : 21 : localizer

No need of cor


DWI : useful to see residual tumour after CRT

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**DR. KHAN'S TEACHING**  
The A to Z of FRCR 2B Exam

### Poor outcome at baseline MRI



- CRM involvement on MRI
- Depth of extramural spread >5mm
- Presence of MRI detected venous invasion (EMVI)
- MRI detected mucinous tumours
- For low rectal tumour :spread into or beyond the intersphincteric plane of anal canal

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