



Summary Feedback

ST1 – ST4 Teaching Programme 2024

DKT FRCR 2B Practice Viva (Session 45)

Chest Radiograph Masterclass for FRCR (This or That?) - Part 1 (11th January 2024)

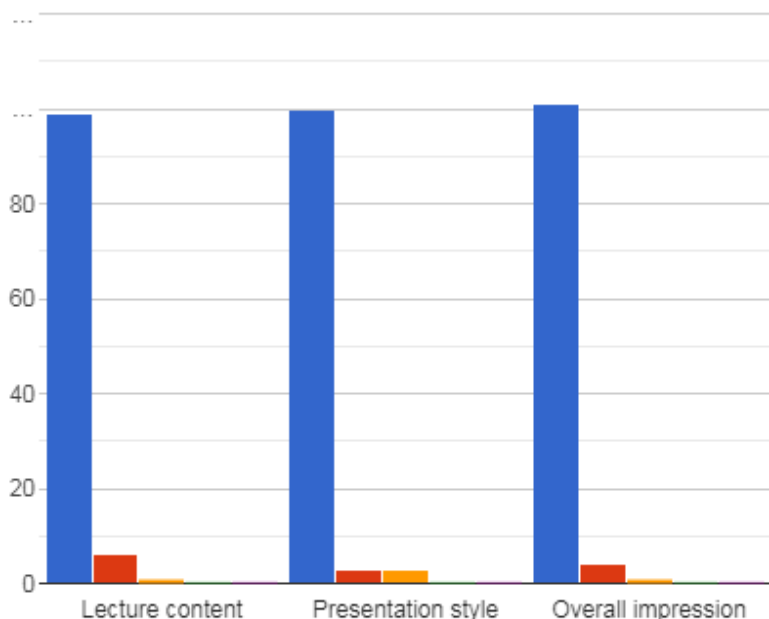
Delivered By:
(Samuel Reefath)

Summary Points:

- ST1-ST4 teaching programme 2023 – FRCR 2B Practice Viva Session 45: 2 hours teaching time
- Total Attendees: 388 from 38 Countries (Australia, Bahrain, Canada, Czech Republic, Dominica, Egypt, Ghana, Hong Kong, India, Indonesia, Iran, Iraq, Ireland, Jordan, Kenya, Kuwait, Lebanon, Malaysia, Malta, Mauritius, Myanmar, Nepal, Nigeria, Oman, Pakistan, Poland, Qatar, Saudi Arabia, South Africa, Sri Lanka, Sudan, Swaziland, Türkiye, UAE, UK, Yemen, Zambia, Zimbabwe).
- Total feedback received from 106 participants

Please rate the following aspects of the session

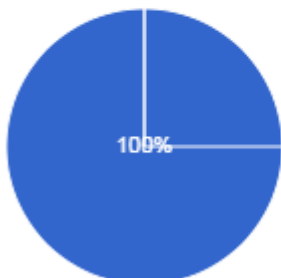
Excellent Very good Good Satisfactory
Poor



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Did you find it useful
106 responses

● Yes
● No



Testimonials

- Excellent selection of cases which were very useful for my learning (UK).
- Entire lecture was useful with side by side comparison of similar cases (India).
- Loved the this vs that approach with examples of comparison cases (UK).
- Abnormal presentation of the common diseases and the way all the basic chest findings were explained, all presentation of given abnormality were useful (India).
- Showing similar radiological signs and how to pick up differentiating points was great. Really helpful session to deal with chest Xray in a systematic pattern based on accurate description for a safe practice that would definitely be reflected on safe patient management (Egypt).
- Excellent cases and session about teaching chest pathologies in best fashion possible. Learnt a lot (Pakistan).
- Presentation style was interesting. Comparison between pathologies in a single slide (UAE).
- Cases were variable and covered the most important topics and the discussion was amazing summarized and informative (Sudan).
- Perfect session. We want more lectures from Dr. Samuel Reefath (UAE).
- Extra-ordinary session (Pakistan).
- Incredible information. I wish I could attend every time and thank you for your time and effort (Sudan).
- Brilliant session (UK).
- Excellent (Pakistan).
- Excellent forum for radiology learning (Pakistan).
- Brilliant session (Egypt).
- Excellent lecture, great collection of cases (India).
- Brilliant session showing different topics on chest radiograph and hpw to accurately address the differential signs to reach the diagnosis (Egypt).
- Wonderful learning experience (Pakistan).
- Very useful and excellent (UK).

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- Five stars always (Myanmar).
- Excellent job (Yemen).
- Woow (Egypt).
- Very good content (UK).
- Excellent cases (UAE).
- Good selection of cases, explained images very well. Good pace of lecture (UK).
- Excellent cases and brilliant illustrations (Egypt).
- Excellent compilation of cases (Pakistan).
- The detailed information about how to differentiate, differentials and the new way of doing similar cases simultaneously was useful (UK).
- I liked the case discussion and variety of cases in short time (UK).
- Differentiating different similar looking pathologies on chest x ray was useful (Saudi Arabia).
- Excellent presentation for cases (Egypt).
- Every aspect was useful (India).
- I liked the confusing similar looking cases like middle lobe collapse and middle lobe consolidation (Pakistan).
- Excellent teaching session (Iraq).
- All excellent cases and explanation as usual by Dr. Sam Reefath (India).
- Format and content was valuable (Sri Lanka).
- Cases were excellent and the approach to them as well (UK).
- Very instructive (UK).
- I liked the characteristics of cystic lung diseases. Relationship of pectus excavatum and ehlers danlos syndrome (Zimbabwe).
- I liked multiple cases, good powerpoint with clear explanations (UK).
- Collection of cases was useful (UAE).
- Very very impressive lecture indeed (Pakistan).
- Nice pics (South Africa).
- Cases selection and discussion was valuable (UAE).
- Chest films widely covered all relevant tooics nicely (UAE).
- Great xrays (Kenya).
- I liked intensive chest x ray, variety of cases (Lebanon).
- Valuable (Egypt).
- I liked comparison of similar cases. This vs that..love it (Pakistan).
- Chest radiographs and interpretation was useful (UK).
- Cases selection followed by crisp description were useful (Pakistan).
- Excellent set of cases (Sri Lanka).
- The variety of images shown (UK).
- Comparison cases in single slide was useful (Kuwait).
- Excellent class. well done for the efforts (Pakistan).
- I liked the cases and flow charts (Egypt).
- Comparing cases was useful (Algeria).
- I liked the comparable xrays cases (Egypt).
- Great session and cases (Egypt).
- Comparisons of cases as differential was useful (Saudi Arabia).

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- All cases were good revision (Oman).
- Great cases with side by side differentials (Pakistan).
- Descriptions of the radiological signs was useful (UK).
- I liked the teaching points and differentials of every pathology (Pakistan).
- Very good teaching session and cases (Pakistan).
- Comparison technique was valuable (Pakistan).
- Covering from basics (UK).
- Good cases (UK).
- Cases were very helpful (UK).
- Useful tip for exam scenario - for eg; pericardial effusion vs empyema vs hydropneumothorax (UK).
- Perfect (Pakistan).
- Excellent session (Bahrain).
- Everything is OK (Pakistan).
- It was wonderful (Pakistan).
- It was excellent (Saudi Arabia).
- Keep it up (India).
- Good revision (UAE).
- Excellent work (Pakistan).
- Excellent because of writing the finding & final diagnosis beside each case (Egypt).
- Great lecture (Kenya).
- Great teaching (Pakistan).
- Nice collection of cases (UK).
- Excellent session with most important principals and approach in chest x-ray (Jordan).
- Great comparison cases, Thank you (Egypt).
- Quite educative sessions. Thank you (UK).
- Very useful (Pakistan).
- Excellent presentation (Sri Lanka).
- Very nice lecture (Pakistan).
- Very useful (Saudi Arabia).
- Very useful session and keen to attend more (UK).
- Very informative and helpful (UAE).
- A to Z (Pakistan).
- Very knowledgeable (Saudi Arabia).

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Recording... You are viewing SAMUEL REEFATH's screen View Options

48 year old with post operative partial gastrectomy

16 year old with sudden onset of breathing difficulty

Participants 388

Unmute Start Video Security Chat Share Screen Summary AI Companion Pause/Stop Recording Show Captions Reactions Apps Whiteboards Notes More End

Recording Paused You are viewing SAMUEL REEFATH's screen View Options

DR. KHAN'S TEACHING Think to Die at FRCR 2B Exam

DO NOT MISS IT

DKT FRCR 2B PRACTICE VIVA SESSION 45
CHEST RADIOGRAPH MASTERCLASS FOR FRCR
(THIS OR THAT ?)
PART 1

THURSDAY 11th January 2024 1830-2030 hrs GMT 2 RCR CPD

LOOK at this radiology report

CLINICIAN

Possibly Consideration Complete VS Affection Correlate clinically

Dr. Samuel Reefath
Researcher in Oncoimaging
Institute du Cancer, Montpellier
University, France

for registration:
www.drkhansteaching.com

Participants 247

Mute Stop Video Security Chat Share Screen Summary AI Companion Resume/Stop Recording Show Captions Reactions Apps Whiteboards Notes More End

DKT FRCR 2B Practice Viva (Session 45) - Chest Radiograph Masterclass for FRCR (This or That) - Part 1

The screenshot shows a Zoom meeting interface with two chest radiographs side-by-side. The left radiograph is labeled 'CARDIOGENIC PULMONARY EDEMA' and the right is 'ACUTE NON CARDIOGENIC (NEUROGENIC) PULMONARY EDEMA'. The Zoom control bar at the bottom includes icons for Unmute, Start Video, Security, Participants (369), Chat, Share Screen, Summary, AI Companion, Pause/Stop Recording, Show Captions, Reactions, Apps, Whiteboards, Notes, and More. A red 'End' button is visible in the bottom right corner.

CARDIOGENIC PULMONARY EDEMA
Cardiomegaly
Prominent pulmonary vasculature
Central pulmonary venous congestion with thickened interstitial markings
No consolidation, mild right pleural effusion

ACUTE NON CARDIOGENIC (NEUROGENIC) PULMONARY EDEMA
Diffuse air space opacification with apical sparing
ET tube is seen reaching upto carina

Differential: ARDS, Pulmonary hemorrhage and aspiration pneumonitis

Cardiogenic pulmonary edema is secondary to LVF, Non cardiogenic -pulmonary edema is not due to LVF

Participants: Dr Khan's Teaching, SAMUEL REEFATH, Tony CUDE, candidate 1, SHAISTA RIAZ

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