

# Elsevier Clinical Solutions



## STATdx Radiology Diagnostic Decision Support Amirsys



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Empowering Knowledge  
Elsevier Clinical Solutions 2022

# Homepage STATdx

STATdx®

Compare

My recently viewed ▾

Bookmarks ▾

Sign in ▾

Topics

Images

Filter by Category ▾

What are you looking for?

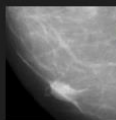


## Browse topics



**Brain**

609 topics



**Breast**

256 topics



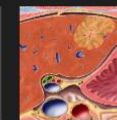
**Cardiac**

161 topics



**Chest**

600 topics



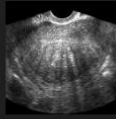
**Gastrointestinal**

443 topics



**Genitourinary**

216 topics



**Gynecology**

152 topics



**Head and Neck**

691 topics



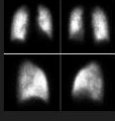
**Interventional Radiology**

162 topics



**Musculoskeletal**

854 topics



**Nuclear Medicine**

139 topics



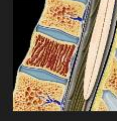
**Obstetrics**

313 topics



**Pediatrics**

860 topics



**Spine**

396 topics



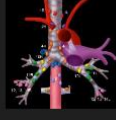
**Ultrasound**

638 topics



**Vasculature**

58 topics



**RADTools**

125 topics

# Search box with autofill:

**STATdx** Compare My recently viewed Bookmarks Sign in ?

Topics Images Filter by Category

**Browse topics**

- Brain** 609 topics
- Genitourinary** 216 topics
- Nuclear Medicine** 139 topics
- Vasculature** 58 topics
- Breast** 256 topics
- Gynecology** 152 topics
- Obstetrics** 313 topics
- RADTools** 125 topics
- 860 topics**
- 396 topics**
- 638 topics**

multiple

- Multiple Bilateral Similar Findings
- Multiple Brain Hyperintensities (T2/FLAIR), Common
- Multiple Brain Hyperintensities (T2/FLAIR), Less Common
- Multiple Brain Hyperintensities (T2/FLAIR), Rare but Important
- Multiple Colonic Filling Defects
- Multiple Embolic Cerebral Infarctions
- Multiple Endocrine Neoplasia (MEN) Syndromes: Features and Prevalence
- Multiple Enhancing Cranial Nerves
- Multiple Enhancing Lesions, General



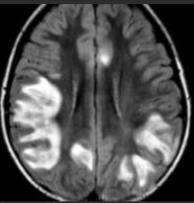
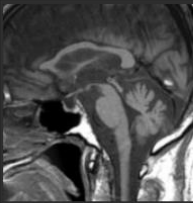


# Search result and filtered by category brain only

**STATdx** Compare My recently viewed Bookmarks Sign in

Topics 
  Images 
 Brain 
 Multiple Sclerosis

165 results for Brain: "Multiple Sclerosis"

[All Topics](#)
[Dx](#)
[DDx](#)
[Anatomy](#)
[Procedure](#)

|  |   |  |  |
|--|---|--|--|
|    | <p><b>Multiple Sclerosis</b><br/>Brain<br/>Miral D. Jhaveri, MD, MBA</p> <p>Reviewed 10/8/20 <span>Dx</span></p> <p><input type="checkbox"/> Compare</p> <p>View images 27 images   22 references</p>                                 |    | <p><b>Neuromyelitis Optica Spectrum Disorders</b><br/>Brain<br/>Miral D. Jhaveri, MD, MBA</p> <p>Reviewed 7/28/20 <span>Dx</span></p> <p><input type="checkbox"/> Compare</p> <p>View images 22 images   25 references</p> |
|   | <p><b>ADEM</b><br/>Brain<br/>Miral D. Jhaveri, MD, MBA; Kevin R. Moore, MD; Surjith Vattoth, MD, FRCR</p> <p>Reviewed 8/7/20 <span>Dx</span></p> <p><input type="checkbox"/> Compare</p> <p>View images 22 images   41 references</p> |   | <p><b>Fragile X-Associated Tremor/Ataxia (FXTAS)</b><br/>Brain<br/>Miral D. Jhaveri, MD, MBA</p> <p>Reviewed 8/5/20 <span>Dx</span></p> <p><input type="checkbox"/> Compare</p> <p>View images 4 images   6 references</p> |
|  | <p><b>Periventricular T2-/FLAIR-Hyperintense Lesions</b></p>  |  | <p><b>Idiopathic Intracranial Hypertension</b></p>   |

# Overview of the DDx (separate preview possible for Dx)

**STATdx** Compare My recently viewed Bookmarks Sign in

Topics Images Filter by Category What are you looking for?

Brain Differential Diagnosis Ventricles, Periventricular Regions Modality-Specific Imaging Findings Print

## Periventricular T2-/FLAIR-Hyperintense Lesions DDx

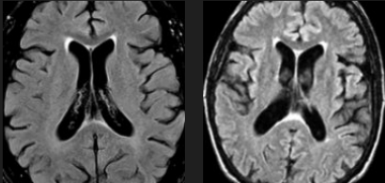
Troy A. Hutchins, MD; Karen L. Salzman, MD, FACR Last updated 02/14/23 [Share your feedback!](#) Is this what you were looking for?  Yes  No

Differential Diagnoses References (8)

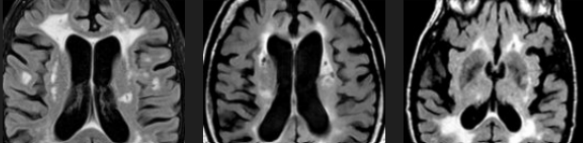
Thumbnail Caption

**Common**

**Aging Brain, Normal**  Compare



**Arteriolosclerosis**  Compare



### ESSENTIAL INFORMATION

#### Key Differential Diagnosis Issues

- Periventricular T2-/FLAIR-hyperintense lesions often nonspecific with significant overlap among etiologies
- Questions helping narrow differential
  - How old is patient?
  - Volume loss vs. mass effect?
  - Are there GRE/SWI "black dots"?
  - Is there enhancement?
  - Is corpus callosum (CC) involved?
  - Are basal ganglia (BG) involved?

#### Helpful Clues for Common Diagnoses

- **Aging Brain, Normal**
  - Smooth, thin rim of periventricular hyperintensity, wide sulci, and prominent ventricles
  - Periventricular caps

# Selection of 3 different Dx's for comparison (orange mark)

**STATdx** Compare My recently viewed Bookmarks Sign in

Topics Images Filter by Category What are you looking for?

Brain Differential Diagnosis Ventricles, Periventricular Regions Modality-Specific Imaging Findings

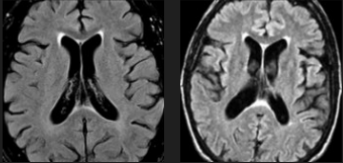
**Periventricular T2-/FLAIR-Hyperintense Lesions** DDx  
 Troy A. Hutchins, MD; Karen L. Salzman, MD, FACR Last updated 02/14/23 [Share your feedback!](#) Is this what you were looking for?  Yes  No

Differential Diagnoses References (8)

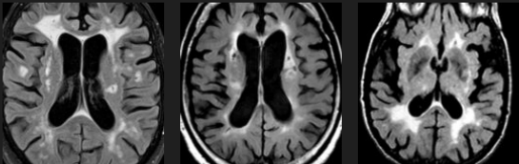
Thumbnail Caption

**Common**

**Agging Brain, Normal**



**Arteriolosclerosis**



**Multiple Sclerosis**

**ESSENTIAL INFORMATION**

**Key Differential Diagnosis Issues**

- Periventricular T2-/FLAIR-hyperintense lesions often nonspecific with significant overlap among etiologies
- Questions helping narrow differential
  - How old is patient?
  - Volume loss vs. mass effect?
  - Are there GRE/SWI "black dots"?
  - Is there enhancement?
  - Is corpus callosum (CC) involved?
  - Are basal ganglia (BG) involved?

**Helpful Clues for Common Diagnoses**

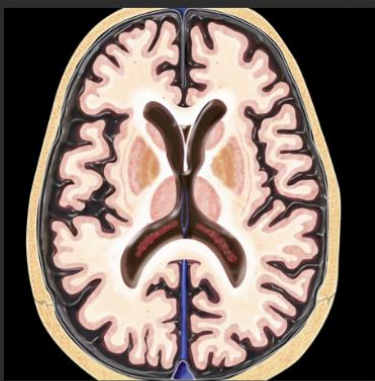
- **Agging Brain, Normal**
  - Smooth, thin rim of periventricular hyperintensity, wide sulci, and prominent ventricles
- **Periventricular caps**
  - Uniform, triangular in shape, base resting on frontal horns & apex pointing to adjacent white matter (WM)
  - Asymptomatic
- **Sparing of cortex, subcortical/deep WM & BG**
- **Arteriolosclerosis**

# Compare mode (images, but click text, see next screen)

## Compare Diagnoses (3)

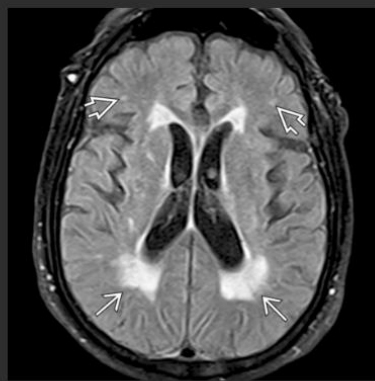
Remove all diagnoses

Normal Aging Brain ✕  
 Images Text



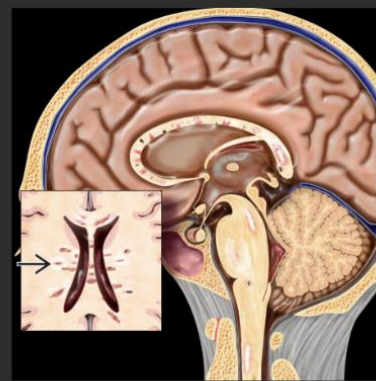
Axial graphic depicts a normally aging brain in an 80-year-old

Arteriolosclerosis ✕  
 Images Text



Axial FLAIR MR shows mild atrophy and confluent

Multiple Sclerosis ✕  
 Images Text



Sagittal graphic illustrates multiple sclerosis (MS) plaques

# Compare by text / facts and dismiss or select Dx

STATdx® Compare <sup>3</sup> My recently viewed <sup>▼</sup> Bookmarks <sup>▼</sup> Sign in <sup>▼</sup> ?

Topics Images Filter by Category <sup>▼</sup> What are you looking for? 🔍

## Compare Diagnoses (3)

Remove all diagnoses

**Normal Aging Brain** ✕

Images Text

**KEY FACTS**

**Terminology**

- ↓ overall brain volume with advancing age
- Reflected in relative ↑ CSF spaces

**Imaging**

- Broad spectrum of "normal" on imaging in elderly
- "Successfully aging brain"
- Smooth, thin, periventricular, high signal rim on FLAIR is normal
- White matter hyperintensities (WMHs) absent/few
- ↓ total brain volume
- Selective atrophy of white matter (not gray matter) predominates

**Arteriolosclerosis** ✕

Images Text

**KEY FACTS**

**Terminology**

- Sclerosis of small-sized arteries (arterioles)
- Common with chronic hypertension (HTN) &/or diabetes
- May lead to vascular dementia

**Imaging**

- Multifocal white matter (WM) hypodensity on CT
- Patchy/confluent ↑ T2/FLAIR hyperintensities
- Broad or confluent base with ventricles
- Periventricular > deep > juxtacortical involvement
- Findings nonspecific
- Large number of causes other than arteriopathy
- Demyelination, infection, inflammatory, drug

**Multiple Sclerosis** ✕

Images Text

**KEY FACTS**

**Terminology**

- Idiopathic chronic inflammatory demyelinating disease of CNS

**Imaging**

- Multiple perpendicular calloseseptal T2 hyperintensities characteristic of multiple sclerosis (MS)
- Periventricular extension: "Dawson fingers"
- Bilateral, asymmetric linear/ovoid FLAIR hyperintensities
- Periventricular/periventricular, calloseseptal interface
- May also commonly involve brachium pontis, brainstem, spinal cord, cortex/juxtacortical



# Dx of MS, with table of content (middle of the screen)

**STATdx** Compare My recently viewed Bookmarks Sign in

Topics Images Filter by Category What are you looking for?

Brain Diagnosis Pathology-Based Diagnoses Infectious, Inflammatory, and Demyelinating Disease Inflammatory and Demyelinating Disease Compare Print

**Multiple Sclerosis** Dx Share your feedback! Last updated 10/08/20 Is this what you were looking for?  Yes  No

Miral D. Jhaveri, MD, MBA

Description

- KEY FACTS
- TERMINOLOGY
- IMAGING
- DIFFERENTIAL DIAGNOSIS
- PATHOLOGY
- CLINICAL ISSUES
- DIAGNOSTIC CHECKLIST

Anatomy (30)  
Cases (17)  
Differentials (13)  
Tables (1)  
References (22)

**KEY FACTS**

**Terminology**

- Idiopathic chronic inflammatory demyelinating disease of CNS

**Imaging**

- Multiple perpendicular callososeptal T2 hyperintensities characteristic of multiple sclerosis (MS)
  - Perivenular extension: "Dawson fingers"
- Bilateral, asymmetric linear/ovoid FLAIR hyperintensities
  - Periventricular/perivenular, callososeptal interface
- May also commonly involve brachium pontis, brainstem, spinal cord, cortex/juxtacortical
- SWI central vein sign
- Transient enhancement during active demyelination
- Rare: Large tumefactive enhancing rings
- Advanced imaging techniques show disease in normal-appearing white matter

**Top Differential Diagnoses**

- Multifocal T2/FLAIR hyperintensities

**Selected Images** Thumbnail Caption

# Selected references which will link out to Pubmed

**STATdx** Compare My recently viewed Bookmarks Sign in

Topics Images Filter by Category What are you looking for?

Brain Diagnosis Pathology-Based Diagnoses Infectious, Inflammatory, and Demyelinating Disease Inflammatory and Demyelinating Disease

**Multiple Sclerosis** Dx Miral D. Jhaveri, MD, MBA Last updated 10/08/20 Compare Print

Is this what you were looking for?  Yes  No

Description **Selected References**

- KEY FACTS
- TERMINOLOGY
- IMAGING
- DIFFERENTIAL DIAGNOSIS
- PATHOLOGY
- CLINICAL ISSUES
- DIAGNOSTIC CHECKLIST

Anatomy (30)  
Cases (17)  
Differentials (13)  
Tables (1)  
References (22)

- Gaitán MI et al: SWAN-Venule: an optimized MRI technique to detect the central vein sign in MS plaques. *AJNR Am J Neuroradiol.* 41(3):456-60, 2020
- Sastre-Garriga J et al: MAGNIMS consensus recommendations on the use of brain and spinal cord atrophy measures in clinical practice. *Nat Rev Neurol.* 16(3):171-82, 2020
- do Amaral LLF et al: Gadolinium-enhanced susceptibility-weighted imaging in multiple sclerosis: optimizing the recognition of active plaques for different mr imaging sequences. *AJNR Am J Neuroradiol.* 40(4):614-9, 2019
- Filippi M et al: Association between pathological and MRI findings in multiple sclerosis. *Lancet Neurol.* 18(2):198-210, 2019
- Hartung HP et al: Diagnosis of multiple sclerosis: revisions of the McDonald criteria 2017 - continuity and change. *Curr Opin Neurol.* 32(3):327-37, 2019
- Maranzano J et al: Comparison of multiple sclerosis cortical lesion types detected by multicontrast 3T and 7T MRI. *AJNR Am J Neuroradiol.* 40(7):1162-9, 2019
- Suthiphosuwana S et al: The central vein sign in radiologically isolated syndrome. *AJNR Am J Neuroradiol.* 40(5):776-83, 2019
- Zipp F et al: Implementing the 2017 McDonald criteria for the diagnosis of multiple sclerosis. *Nat Rev Neurol.* 15(8):441-5, 2019
- Filippi M et al: MRI in multiple sclerosis: what is changing? *Curr Opin Neurol.* 31(4):386-95, 2018
- Inglese M et al: MRI in multiple sclerosis: clinical and research update. *Curr Opin Neurol.* 31(3):249-55, 2018
- Thompson AJ et al: Diagnosis of multiple sclerosis: 2017 revisions of the McDonald criteria. *Lancet Neurol.* 17(2):162-73, 2018
- Castellaro M et al: Heterogeneity of cortical lesion susceptibility mapping in multiple sclerosis. *AJNR Am J Neuroradiol.* 38(6):1087-95, 2017

# PubMed via Linkout of STATdx





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[User Guide](#)

Found 1 result for *32094485[pmid]*





[Review](#) > *Nat Rev Neurol* (IF: [42.94](#); **Q1**). 2020 Mar;16(3):171-182.

doi: 10.1038/s41582-020-0314-x. Epub 2020 Feb 24.

## MAGNIMS consensus recommendations on the use of brain and spinal cord atrophy measures in clinical practice

Jaume Sastre-Garriga <sup>1</sup>, Deborah Pareto <sup>2</sup>, Marco Battaglini <sup>3</sup>, Maria A Rocca <sup>4</sup>, Olga Ciccarelli <sup>5 6</sup>, Christian Enzinger <sup>7</sup>, Jens Wuerfel <sup>8</sup>, Maria P Sormani <sup>9 10</sup>, Frederik Barkhof <sup>6 11 12</sup>, Tarek A Youstry <sup>5 13</sup>, Nicola De Stefano <sup>3</sup>, Mar Tintoré <sup>14</sup>, Massimo Filippi <sup>4 15</sup>, Claudio Gasperini <sup>16</sup>, Ludwig Kannek <sup>17</sup>, Jordi Río <sup>14</sup>, Lette Frederiksen <sup>18</sup>, Jackie Palace <sup>19</sup>, Hugo Vrenken <sup>11</sup>

FULL TEXT LINKS

**nature portfolio**



ACTIONS

# Different Cases with preview on the right

**STATdx** Compare My recently viewed Bookmarks Sign in

Topics Images Filter by Category What are you looking for?

Brain Diagnosis Pathology-Based Diagnoses Infectious, Inflammatory, and Demyelinating Disease Inflammatory and Demyelinating Disease Compare Print

**Multiple Sclerosis** Dx Miral D. Jhaveri, MD, MBA Last updated 10/08/20 Is this what you were looking for?  Yes  No

Description **TYPICAL**

**Devic Disease (neuromyelitis optica)** Details

**3T** Details

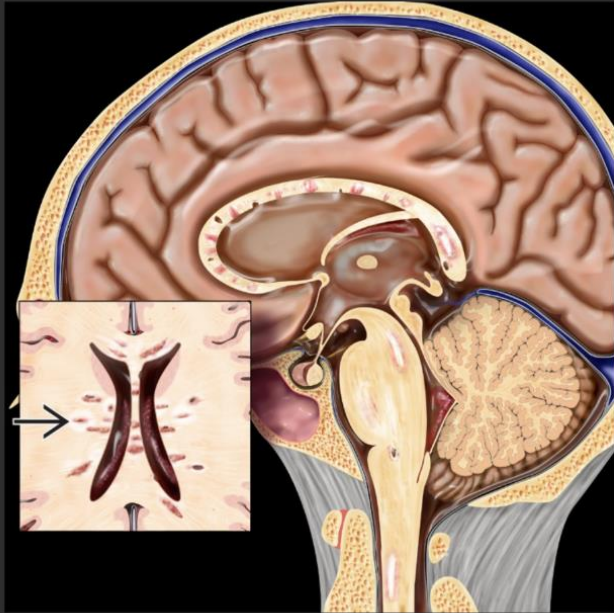
# Enlarging Images with image captions and PPT

**Multiple Sclerosis**

Sagittal graphic illustrates multiple sclerosis (MS) plaques involving the corpus callosum, pons, and spinal cord. Note the characteristic perpendicular orientation of the lesions at the calloseseptal interface along penetrating venules.

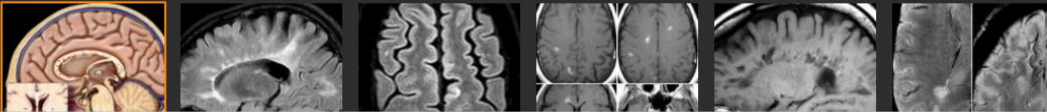
[View image full screen](#)

[Download to presentation](#)



The image displays a sagittal section of the human brain, highlighting multiple sclerosis (MS) plaques. The main illustration shows the corpus callosum, pons, and spinal cord. An inset image provides a detailed view of the calloseseptal interface, showing lesions oriented perpendicular to the interface along penetrating venules. The interface is marked with a white arrow pointing to the characteristic perpendicular orientation of the lesions.

Thumbnail gallery:



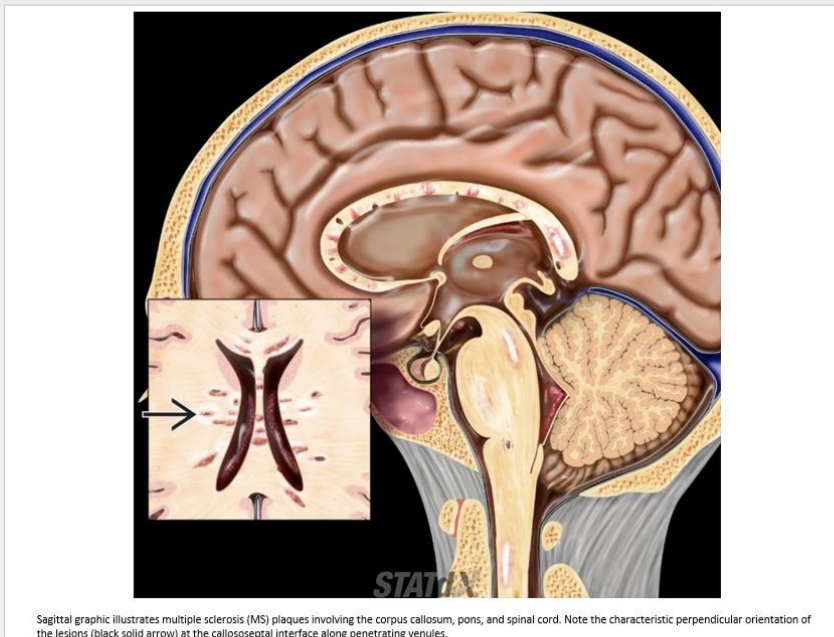
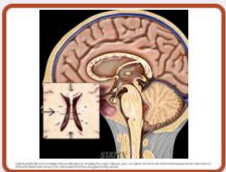
# Exported to PowerPoint within two clicks

自動儲存 關閉 image (1) General Business\* • 已儲存到此電腦 搜尋 Chen, Vivian (ELS-TAI)

檔案 常用 插入 繪圖 設計 轉場 動畫 投影片放映 錄製 校閱 檢視 說明 Acrobat

錄製 在 Teams 中展示 共用

剪貼簿 新投影片 重複使用投影片 字型 段落 繪圖 編輯 Create and Share Adobe PDF 聽寫 敏感度 增益集 設計工具



按一下以新增備忘稿

# Browsing: Diagnosis / DDx / Anatomy and filter by type

STATdx® Compare My recently viewed Bookmarks Sign in

Topics Images Filter by Category

## Brain

Anatomy (91) > **Diagnosis (343) >** Differential Diagnosis (175) >

Brain ▾

## Diagnosis

Anatomy-Based Diagnoses (43) > **Pathology-Based Diagnoses (300) >**

Brain ▾ Diagnosis ▾

## Pathology-Based Diagnoses

|  |                                    |  |   |
|--|------------------------------------|--|---|
| Acquired Toxic/Metabolic/Degenerative Disorders (42) > | Congenital Malformations (36) >    | Infectious, Inflammatory, and Demyelinating Disease (45) > | Inherited Metabolic/Degenerative Disorders (20) > |
| Neoplasms (57) >                                       | Primary Nonneoplastic Cysts (15) > | Stroke (43) >  | Subarachnoid Hemorrhage and Aneurysms (11) >      |
| Trauma (22) >  | Vascular Malformations (9) >       |  |   |

# Bookmarks (The Blue icon)

The screenshot displays the STATdx interface. At the top left is the logo 'STATdx®'. The top navigation bar includes 'Compare', 'My recently viewed', 'Bookmarks' (highlighted with a red box), 'CME', and a user profile 'V Chen'. Below this is a search bar with 'What are you looking for?' and a search icon. The main content area shows a breadcrumb trail: 'Brain > Diagnosis > Pathology-Based Diagnoses > Congenital Malformations > Disorders of Diverticulation/Cleavage'. A dropdown menu is open under 'Bookmarks', listing: 'Chiari 1 Spine', 'Chiari 3 Spine', 'Commissural Abnormalities Brain', and 'Holoprosencephaly Brain'. Below the menu, four search results are shown, each with a 'View images' link and a blue bookmark icon (highlighted with a red box):

- Commissural Abnormalities**: Brain, Reviewed 08/05/20, 22 images | 24 references. Authors: Luke L. Linscott, MD; Charles Raybaud, MD, FRCPC; Surjith Vattoth, MD, FRCR.
- Holoprosencephaly**: Brain, Reviewed 08/04/20, 33 images | 20 references. Authors: Luke L. Linscott, MD; Surjith Vattoth, MD, FRCR.
- Septo-Optic Dysplasia**: Brain, Reviewed 06/23/20, 26 images | 22 references. Authors: Luke L. Linscott, MD; Surjith Vattoth, MD, FRCR.
- Syntelencephaly (Middle Interhemispheric Variant)**: Brain, Reviewed 07/14/20, 19 images | 21 references. Authors: Luke L. Linscott, MD; Charles Raybaud, MD, FRCPC; Surjith Vattoth, MD, FRCR.




# Recently viewed / Updated

**STATdx** Compare My recently viewed Bookmarks CME V Chen ?

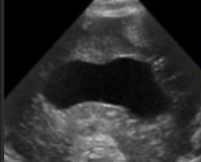
Topics Images Filter by Category

Brain Diagnosis Pathology-Based Diagnoses Congenital Malformations

## Disorders of Diverticulation/Cleavage



**Commissural Abnormalities**  
Brain  
Luke L. Linscott, MD; Charles Raybaud, MD, FRCP; Surjith Vattoth, MD, FRCR  
Reviewed 08/05/20 Dx  
 Compare



**Holoprosencephaly**  
Brain  
Luke L. Linscott, MD; Surjith Vattoth, MD, FRCR Dx

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What's new with STATdx

**STATdx Tips** ➤  
Pro tips for a better experience

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[Using the product](#)

**Content**

## What are the latest content updates?

Last updated on March 14, 2024

As part of our ongoing commitment to offer the best solution in Diagnostic Decision Support, we are pleased to announce continuous and extensive updates to STATdx. For a detailed breakdown of the categories updated, click on the release date below.

[March 2024 +](#)

[View release notes for 2023 +](#)

[View release notes for 2022 +](#)

# Searching only for images

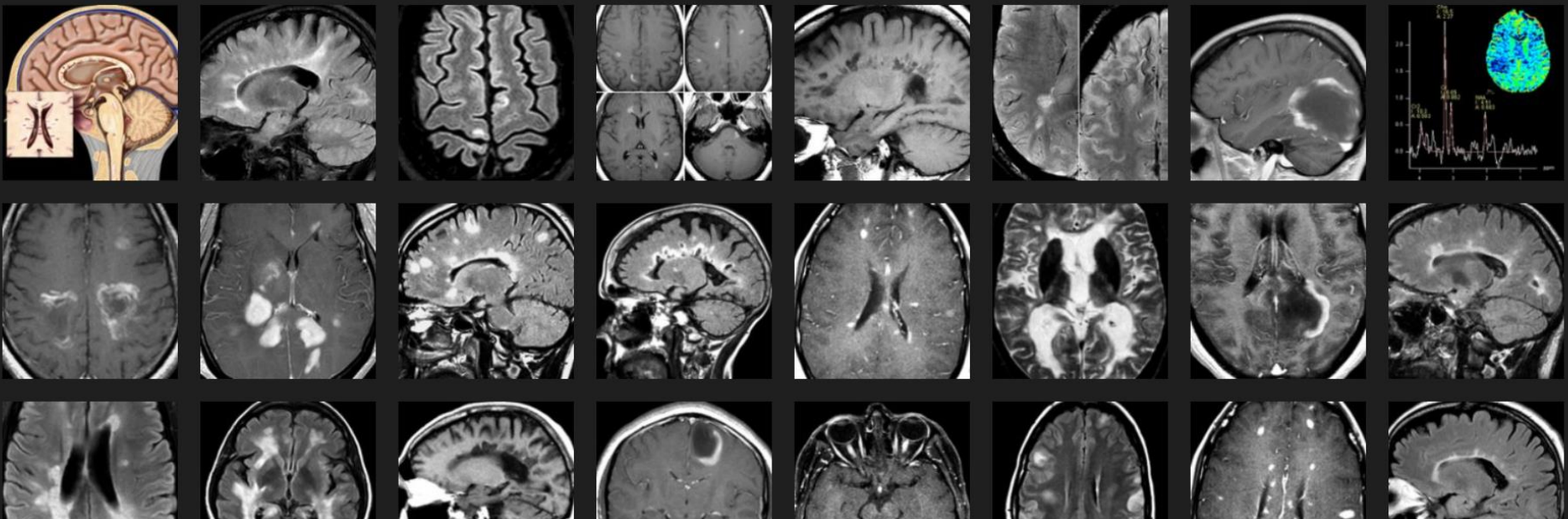
STATdx® Compare My recently viewed Bookmarks CME V Chen ?

Topics **Images** Filter by Category Multiple Sclerosis

STATdx® Compare My recently viewed Bookmarks CME V Chen ?

Topics **Images** Filter by Category Multiple Sclerosis

353 results for All: "Multiple Sclerosis"



# TNM Classification of Malignant Tumors (TNM)

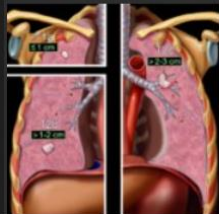
Topics Images

Filter by Category

tnm

125 results for All: "tnm"

All Topics Dx DDx Anatomy Procedure



## Lung Carcinoma

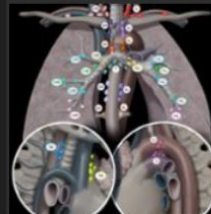
Chest  
Leif Jensen, MD

Reviewed 10/2/19

TSM

[View images](#)

60 images | 16 references



## IASLC Lymph Node Map

Chest  
Brett W. Carter, MD, CPPS

Reviewed 8/25/15

Dx

Compare

[View images](#)

20 images | 6 references



## Prostatic Carcinoma

Ultrasound  
Geoffrey Sonn, MD; Katherine To'o, MD;  
Richard E. Fan, PhD

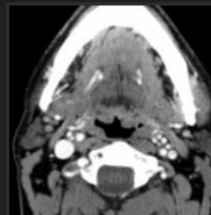
Reviewed 7/1/21

Dx

Compare

[View images](#)

24 images | 18 references



## HPV-Related Oropharyngeal Squamous Cell Carcinoma

Head and Neck  
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FRCR

Reviewed 9/7/21

Dx

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23 images | 47 references



# Overview with same Table of Content / Structure

## Biopsy Procedures

Procedure

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Last updated 05/16/22

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Description



### KEY FACTS



Thumbnail

Caption

- KEY FACTS
- TERMINOLOGY
- PREPROCEDURE
- PROCEDURE
- POST PROCEDURE
- OUTCOMES

References (28)

### Terminology

- Nonfocal (random) biopsy: Biopsy of organ parenchyma to assess diffuse disease
- Focal (targeted) biopsy: Biopsy of discrete lesion

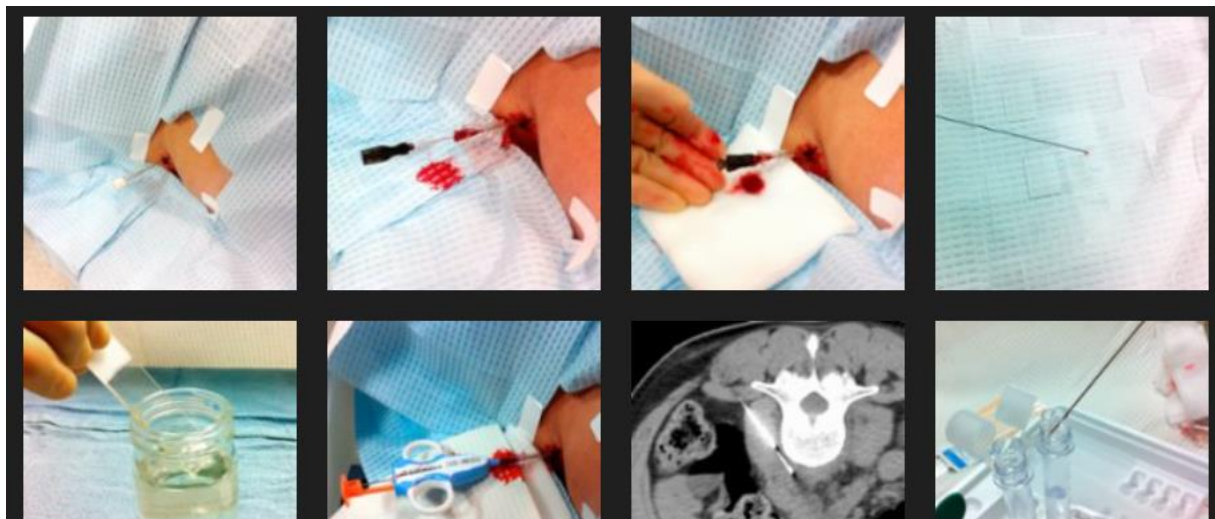
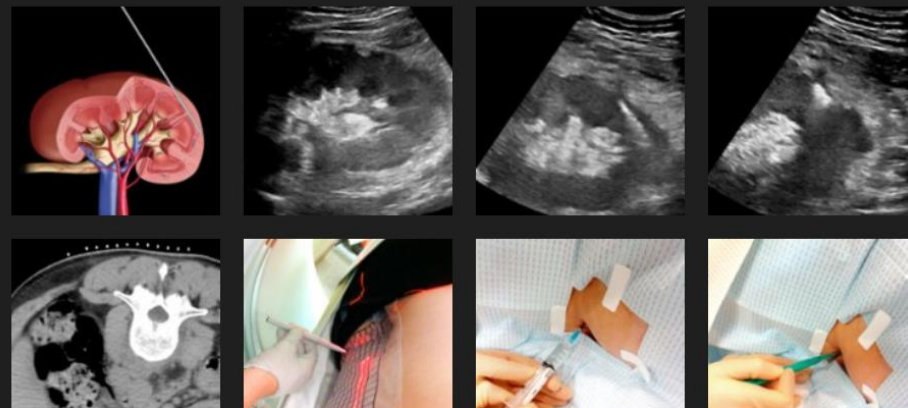
### Preprocedure

- Indications
  - Diagnose, stage, &/or grade diffuse disease
  - Evaluate lesion of unknown or indeterminate etiology
  - Grading &/or staging of malignancy

### Procedure

- Shortest route that avoids intervening structures
- FNA &/or core biopsy
- Coaxial-needle technique minimizes number of passes through overlying tissues
- Liver biopsy: Preprocedure paracentesis if ascites present

### Selected Images



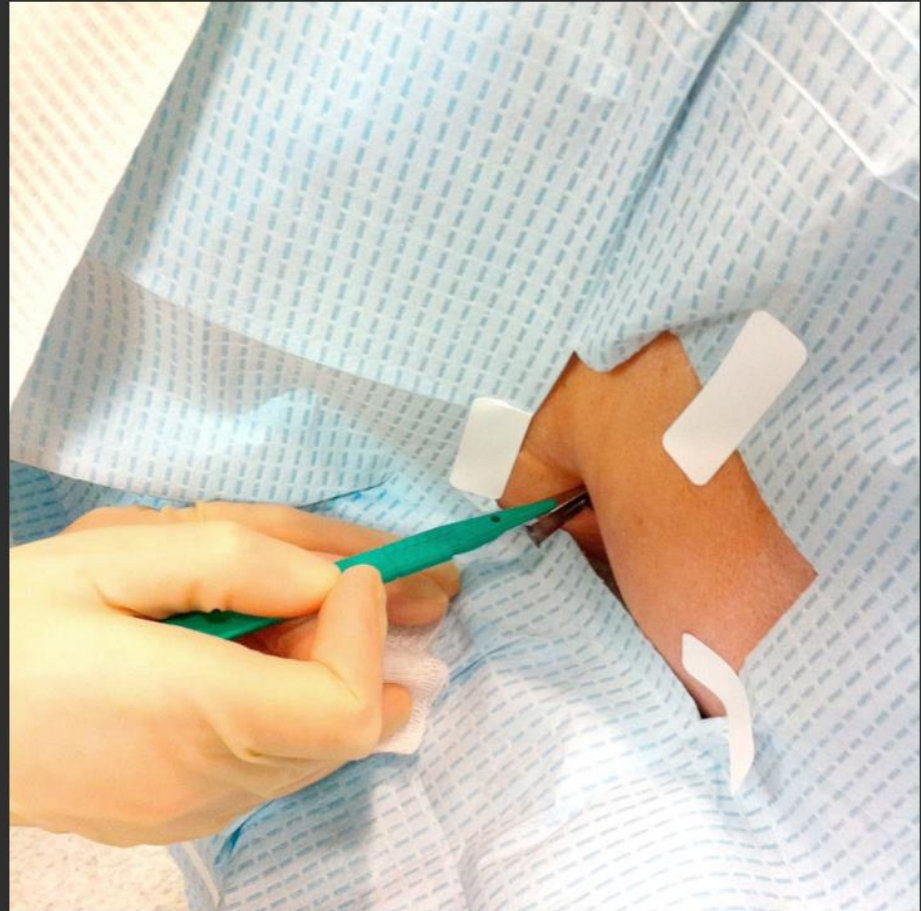
# Images of the procedure itself

## Step-by-Step: Skin Nick

A skin nick is made using a #11 scalpel to facilitate insertion of a 17-gauge introducer needle.

[View image full screen](#)

[Download to presentation](#)



# Bone Age Calculator

## Bone Age Calculator

### Background Information

Assessment of a patient's bone age is frequently performed in children and adolescents in order to evaluate patient growth and to diagnose and manage certain pediatric syndromes or endocrine disorders. Advanced or delayed skeletal maturation can be determined using radiographic imaging of the hand and correlated with clinical course. This calculator provides a means of comparing the chronological age of a child to a standard atlas of skeletal development. Standardized values were compiled from studies compiled by Greulich and Pyle in which they assessed gender-specific skeletal age. These studies compiled mean skeletal ages for successive chronological ages by using between 68 and 201 subjects per age group.

### Clues for assessment of hand-films:

- Infancy or early childhood: presence or absence of certain carpal/epiphyseal ossification centers -Puberty to late adolescence: degree of fusion of epiphyses with their shafts
- Assess bones in a regular sequence: distal ends or radius/ulna, carpals, metacarpals, phalanges
- Carpals should also be studied in regular order: capitate, hamate, triquetral, lunate, scaphoid, trapezium, trapezoid, pisiform

### Calculating bone age:

- Step 1:** Choose the gender of the patient and input the chronological age in months.
- Step 2:** Scroll through a radiographic filmstrip of gender-specific images to find the closest match to your patient's radiograph.
- Step 3:** The bone age and standard deviation of your study will be calculated and graphed on a skeletal age chart using standard deviation.
- Step 4:** A blank standardized chart may be download (pdf) and placed in a patient's file to chronicle the progression during subsequent visits.

[Male Chart](#) [Female Chart](#)

Start by choosing the gender and inputting the chronological age of the patient in months

Male:  Female:

Chronological age:  years  months

[Continue to next step...](#)

### References



Image that is most like your patient's study: 14 years

Patient Age: 168 months (14 years, 0 months)

Gender: Female

Bone age: 168 months

Standard deviation: 0

# STATdx隨堂考-1

1. STATdx影像醫學資料庫之功能，下列何者為**非**？

- A. 同時比較數個搜尋主題相關的疾病專論應點選Compare專著文獻
- B. 比較搜尋主題可利用filter功能
- C. 欲進行搜尋介面語言的切換可點選Settings
- D. Recently Updated可查看系統近期更新內容



## STATdx隨堂考-2

2. 以下針對STATdx資料庫的功能描述，下列何者為**非**？

- A. 匯出圖片成簡報檔應點選 “Download to Presentation”
- B. 點選 “加號放大鏡” 按鍵是為了放大圖片以方便觀看
- C. 輸出搜尋主題內容的網頁檔，應點選網頁右上方的 “Print”
- D. 下載搜尋主題內容的網頁檔，應點選 “加號放大鏡”

## STATdx隨堂考-3

3. STATdx的資料引用論述，下列何者為**非**？

- A. 版權所有者Elsevier
- B. 因為有訂購，任何使用方式皆不須標示
- C. 如引用內容來自特定專論的特定參考文獻，直接引用該reference
- D. 做期刊文章引用，依各期刊參考文獻收錄規定
- E. 做presentation引用，可標示引用來自Elsevier, STATdx、特定專論題名、作者名稱、及置放專論URL於最後