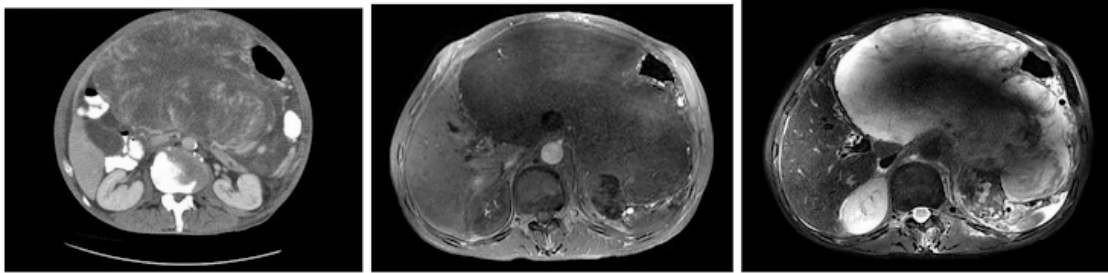


Gastroenterology Evaluation 1

1. Which of the following best describes the primary finding in the abdominal imaging studies?

Answer: A large, heterogeneous mass causing compression of adjacent abdominal structures

This is the question for you to evaluate. You don't need to answer this question. It is for you to judge its quality based on the question, options, answer and image(s).



Mark only one oval.

- ☐ A small, well-circumscribed cystic lesion in the liver
- ☐ Diffuse fatty infiltration of the liver with no mass effect
- ☐ Multiple small hepatic metastases with uniform enhancement
- ☐ A focal area of pancreatic necrosis with peripancreatic fluid
- ☐ A large, heterogeneous mass causing compression of adjacent abdominal structures

2. Does the item reflect accurate medical knowledge, and is the keyed answer clearly the best choice?

Consider:

Are stem, options, and solution consistent with current medical practice and evidence?

Is there exactly one clearly superior answer?

Do imaging findings, clinical details, and diagnosis/management logic align?

Mark only one oval.

- ☐ 4 = Excellent: No meaningful changes needed.
- ☐ 3 = Good: Minor edits could improve clarity or precision, but item is acceptable.
- ☐ 2 = Fair: Usable only after substantial revision.
- ☐ 1 = Poor: Not acceptable in its current form; should be rewritten or discarded.
- ☐ Other: _____

3. Is the wording clear, concise, and professionally written?

Consider:

Is it clear what the question is asking?

Are medical terms used correctly and consistently?

Is the language free of ambiguity, slang, or confusing grammar?

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4. Do the images support the question, and is visual information truly used?

Consider:

Do the images actually show the described key findings?

To answer correctly, does a learner need to look at the image, or could they answer purely from text?

Mark only one oval.

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- ☐ 3 = Good: Minor edits could improve clarity or precision, but item is acceptable.
- ☐ 2 = Fair: Usable only after substantial revision.
- ☐ 1 = Poor: Not acceptable in its current form; should be rewritten or discarded.
- ☐ Other: _____

5. Are the options well designed?

Consider:

Is there only one correct or clearly best option?

Are distractors plausible but ultimately incorrect for good reasons?

Are there no redundant, overlapping, or clearly irrelevant options?

Is the difficulty reasonable (not trivial, not impossible)?

Mark only one oval.

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- ☐ Other: _____

Gastroenterology Evaluation 2

6. Which endoscopic finding is most consistent with the patient's history of prior gastrectomy and current presentation with hematemesis?

Answer: Active bleeding from an anastomotic ulcer



Mark only one oval.

- ☐ Active bleeding from an anastomotic ulcer
- ☐ Gastrolith in the remnant stomach
- ☐ Esophageal varices
- ☐ Gastric adenocarcinoma
- ☐ Duodenal ulcer

7. Does the item reflect accurate medical knowledge, and is the keyed answer clearly the best choice?

Consider:

Are stem, options, and solution consistent with current medical practice and evidence?

Is there exactly one clearly superior answer?

Do imaging findings, clinical details, and diagnosis/management logic align?

Mark only one oval.

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8. Do the images support the question, and is visual information truly used?

Consider:

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9. Is the wording clear, concise, and professionally written?

Consider:

Is it clear what the question is asking?

Are medical terms used correctly and consistently?

Is the language free of ambiguity, slang, or confusing grammar?

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10. Are the options well designed?

Consider:

Is there only one correct or clearly best option?

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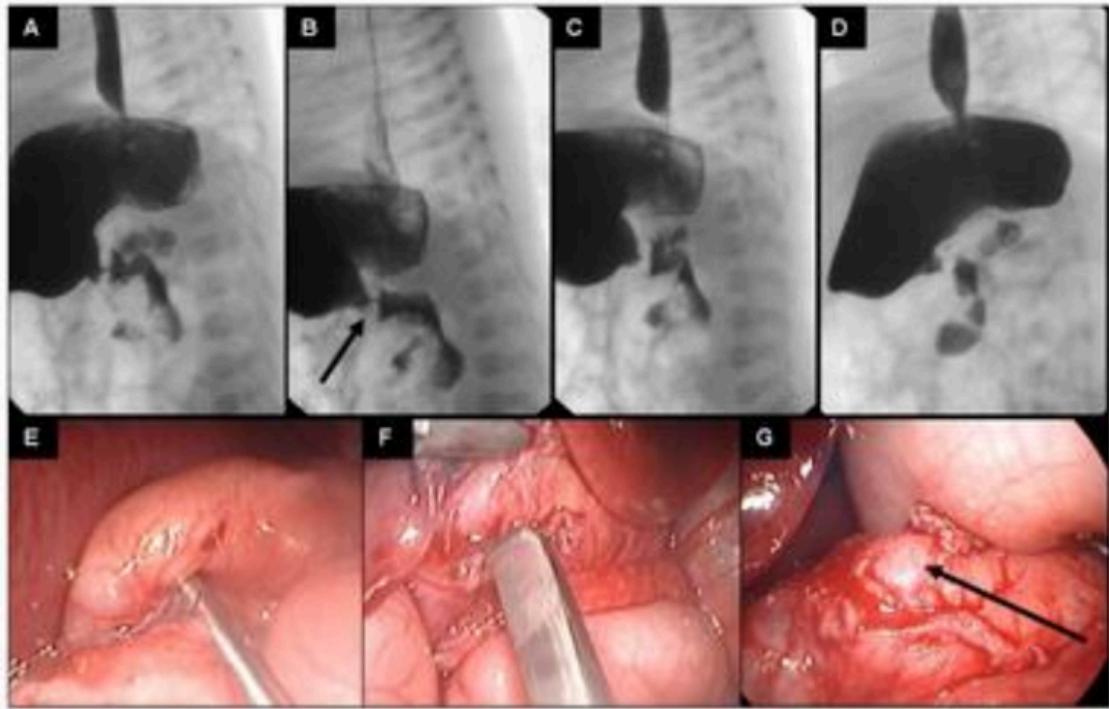
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- ☐ Other: _____

11. Which finding is characteristic of the condition depicted in the upper gastrointestinal contrast study (A–D) and confirmed intraoperatively (E–G)?

Answer: Narrowed pyloric canal with minimal contrast passage



Mark only one oval.

- ☐ Dilated duodenum with delayed gastric emptying
- ☐ Narrowed pyloric canal with minimal contrast passage
- ☐ Gastric ulceration with contrast extravasation
- ☐ Intestinal malrotation with abnormal rotation
- ☐ Esophageal atresia with proximal pouching

12. Does the item reflect accurate medical knowledge, and is the keyed answer clearly the best choice?

Consider:

Are stem, options, and solution consistent with current medical practice and evidence?

Is there exactly one clearly superior answer?

Do imaging findings, clinical details, and diagnosis/management logic align?

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13. Do the images support the question, and is visual information truly used?

Consider:

Do the images actually show the described key findings?

To answer correctly, does a learner need to look at the image, or could they answer purely from text?

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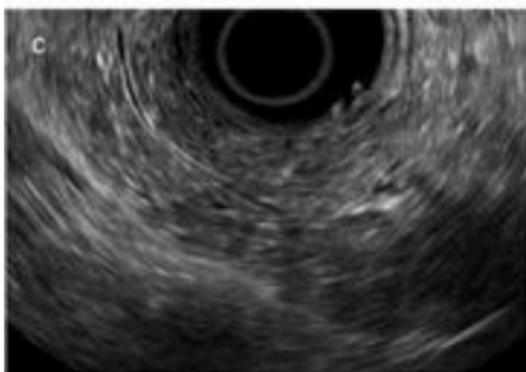
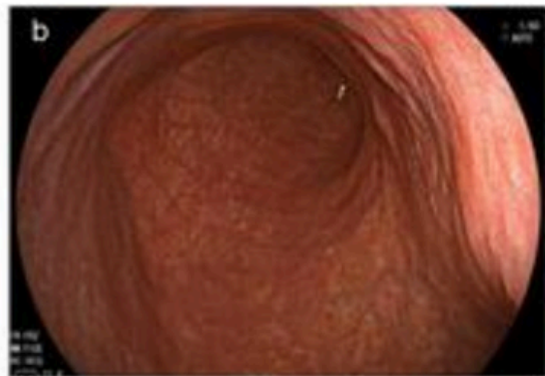
Is the difficulty reasonable (not trivial, not impossible)?

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- ☐ Other: _____

16. Which endoscopic ultrasound (EUS) finding is most consistent with early chronic pancreatitis (CP) based on the provided images?

Answer: Echogenic foci and echogenic strands



Mark only one oval.

- ☐ Lobularity
- ☐ Echogenic ductal walls
- ☐ Dilated side branches
- ☐ Echogenic foci and echogenic strands
- ☐ Cysts

17. Does the item reflect accurate medical knowledge, and is the keyed answer clearly the best choice?

Consider:

Are stem, options, and solution consistent with current medical practice and evidence?

Is there exactly one clearly superior answer?

Do imaging findings, clinical details, and diagnosis/management logic align?

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18. Do the images support the question, and is visual information truly used?

Consider:

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19. Is the wording clear, concise, and professionally written?

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21. Which finding is visualized during the antegrade double balloon enteroscopy in this patient with ongoing gastrointestinal bleeding?

Answer: Hemobilia emerging from the choledochojejunostomy



Mark only one oval.

- ☐ Active bleeding from a duodenal ulcer
- ☐ Diverticular hemorrhage in the colon
- ☐ Angiodysplasia in the small bowel
- ☐ Variceal bleeding in the esophagus
- ☐ Hemobilia emerging from the choledochojejunostomy

22. Does the item reflect accurate medical knowledge, and is the keyed answer clearly the best choice?

Consider:

Are stem, options, and solution consistent with current medical practice and evidence?

Is there exactly one clearly superior answer?

Do imaging findings, clinical details, and diagnosis/management logic align?

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24. Do the images support the question, and is visual information truly used?

Consider:

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