

# Abstract Book

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افقی نود رادیولوژی با هوش مصنوعی Radiology & AI: The Horizon on Approach

مسئولیت محتوای خلاصه مقالات بر عهده نویسنده مسئول مقاله می‌باشد.

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## INVITED SPEAKER ABSTRACTS

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3. Radial location (Anterior, middle, posterior)
4. Central to popliteus hiatus? (Yes or no)
5. Tear pattern (Horizontal, radial, longitudinal, flap, complex)
6. Quality of meniscus tissue (Degenerative, nondegenerative, undetermined)
7. Tear length (In millimeters)

According to a pilot study, this classification has a good interobserver reliability for pooling data from international clinical trials to evaluate the treatment outcomes of meniscal tears.

MRI is the method of choice for non-invasive meniscal imaging and diagnosis of meniscal tears. MRI reporting according to ISAKOS standards can significantly help standardize reports and increase multi-disciplinary communication in this respect. However, this classification is not well known and practical among radiologists.

In this conference, we will discuss the MR imaging appearances of meniscal tears based on ISAKOS classification, and the importance of each category will be assessed clinically.

### Keywords:

Meniscal Tear, ISAKOS, MRI

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## UPDATES ON UTERINE ANOMALIES: 3D ULTRASOUND AND MRI

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### Abstract:

Congenital uterine malformations are a various group of uterine anatomical abnormalities originated from development defects during fetal growth. These anomalies are found in about %1-3 of women, particularly those with infertility.

American Fertility Society classified uterine malformations into seven categories based on anatomic findings and embryologic etiologies behind that. In this division, Class I includes hypoplasia and agenesis of the uterus, Class II contains unicornuate uterus, Class III covering uterus didelphys, class IV consists of bicornuate uteri, Class V is septate uterus, Class VI is composed of arcuate uterus and Class VII are diethylstilbestrol-related anomalies.

Manifestations and severity of the obstetric/gynecologic complications vary depending on each class. Moreover, treatment procedures are associated to the type of anomaly. Therefore, accurate diagnosis of uterine malformations and differentiation between various classes of them play a significant role in management of patients with congenital uterine anomalies.

Recently, three-dimensional extended imaging (3DXI), which is a powerful computed processing technique similar to CT and MRI, has provided the ability to obtain a simultaneous display of multiple sequential acquired volume scans in A, B and C planes. The benefits and even the superiority of 3DUS over commonly used 2DUS and HSG are its ability to obtain a reconstructed coronal view of the uterus, thus delineation of both the internal and the external uterine contour. The morphology of the outer fundal contour enables the differentiation of fusion (bicornuate) and resorption (arcuate and septate) anomalies, a key for preoperative surgical planning. In the bicornuate uterus, a central cleft is present in the serosa of the fundus.

Magnetic resonance imaging is a proven imaging modality used to study the anatomy of the female pelvis. However, it also entails costs, inconvenience and it is time consuming. The advantage of a MRI is the detailed elaboration of uterovaginal anatomy, as well as clear delineation of both the internal and the external contours, as a result it is currently considered the imaging standard of reference for MDAs.

Current lecture provides useful knowledge on diagnosis and classification of uterine malformations and related complications by means of various imaging tools, particularly 3D ultrasonography and MRI.

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## EVALUATION OF BONE TUMORS (BENIGN & MALIGNANT TYPES) IN THE AXIAL AND EXTREMITIES BY MRI

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*Professor of Radiology*

Plain Film X-ray is a primary approach for evaluation and characterization of osseous lesions.

Bone isotope scan ,CT scan and MR images as imaging