



Summary Feedback

(Combined feedback broadcasted multiple time this week)

PRE-RECORDED: Basildon FRCR 2B 'A to Zee' Course 2020

Session 16/36

MSK for FRCR

(1) How to Report MRI Shoulder? (Sajid Butt)

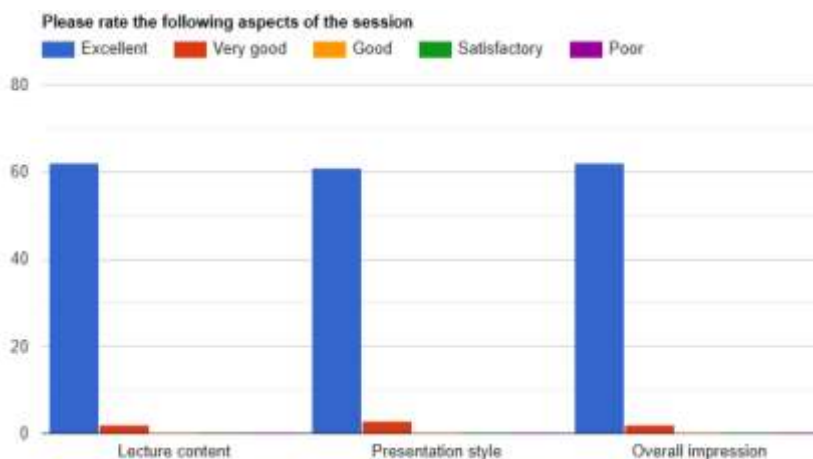
(2) Exam Viva Cases (Sami Khan)

(16th & 17th May 2026)

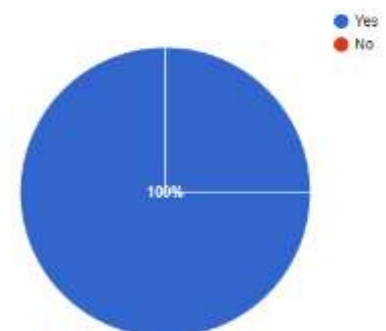
Lecturers: Sajid Butt & Sami Khan

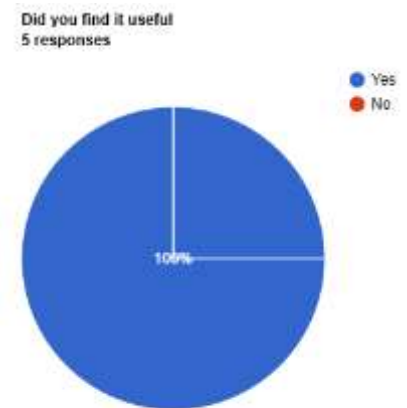
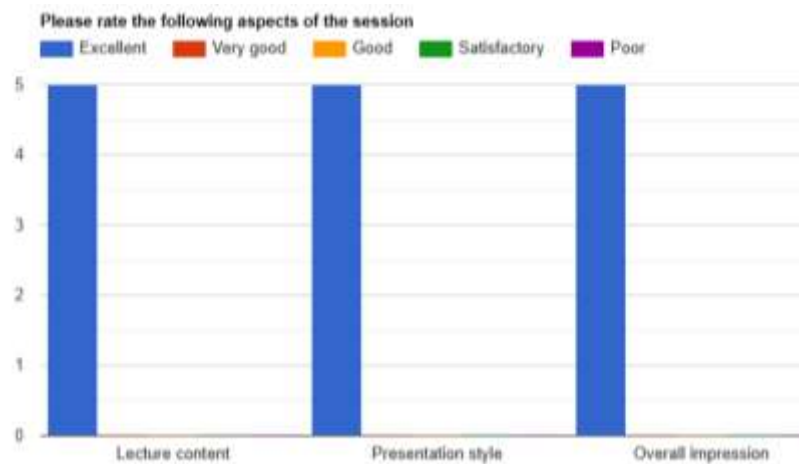
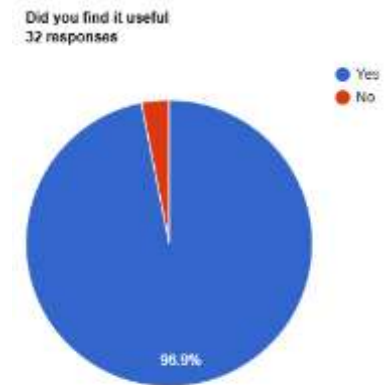
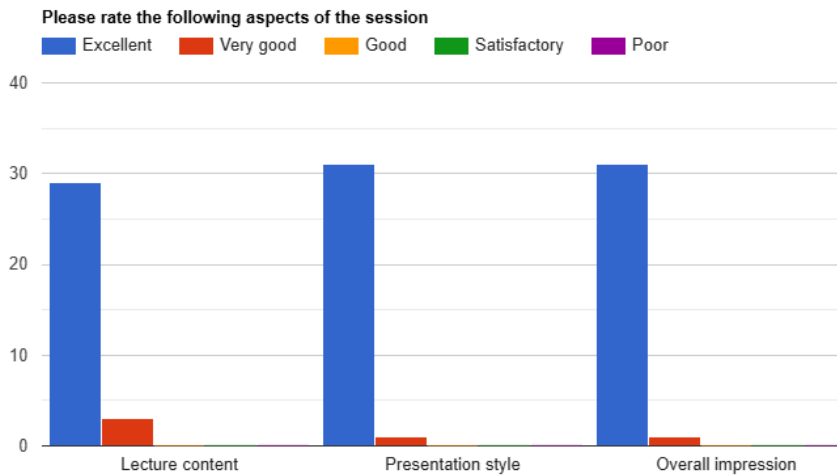
Summary Points:

- Total Attendees: 307 from 37 Countries (Austria, Australia, Bahrain, Bangladesh, Bolivia, Botswana, Brunei, Canada, Egypt, Ethiopia, Ghana, Hong Kong, India, Indonesia, Iran, Jordan, Korea, Republic of, Malaysia, Malta, Myanmar, Nepal, Nigeria, Oman, Pakistan, Qatar, Saudi Arabia, South Africa, Sri Lanka, Sudan, Thailand, Trinidad and Tobago, UAE, UK, Ukraine, Yemen, Zambia, Zimbabwe).
- Total duration: 3 hours (each session broadcasted thrice during the week)
- Total feedback received from 101 participants, from three different broadcasts



Did you find it useful
64 responses





Testimonials

- The lecture was extremely helpful for me. The first part of the lecture which was presented by Dr. Sajid was extremely helpful as the important points in imaging of the shoulder joint were easily and nicely explained despite the difficulty of interpreting the shoulder MRI, and I think this kind of MSK lectures are important and essential for every general radiologist around the world to ensure accurate reporting in the MSK field. Regarding the second part of the lecture which was presented by great teacher Dr. Sami Khan was also very important as Dr. Khan explained a very important topic in MSK radiology including infections and tumours for the exam with nice differential diagnosis in multiple imaging modalities. Overall a very helpful lecture. Thank you Dr. Khan and for your guest (Jordan).
- Seeing imaging examples of pathology at local MSK radiology teaching is nonexistent, and difficult to delineate subtler pathology with self-study alone, also the opportunity to see how other candidates present the MSK viva cases was also very valuable (UK).
- The correlation of anatomy and pathology was great. Also, the info about what surgeons want to know was very helpful (Pakistan).
- Well-structured teaching! (Austria).
- All aspects are very good, best global platform to learn (India).

MSK for FRCR: (1) How to Report MRI Shoulder? (2) Exam Viva Cases

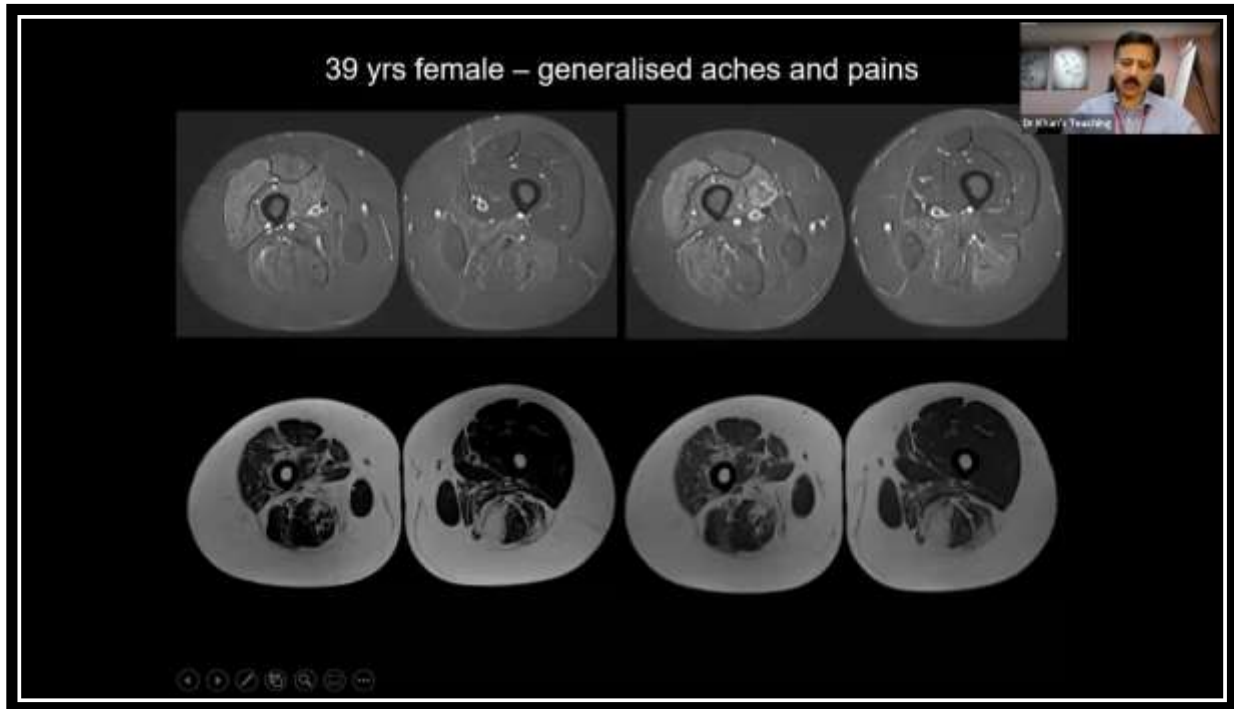
- Great session, very comprehensive 2B level and beyond MRI shoulder reporting session and brilliant viva session by Dr. Khan, many thanks to the great teachers and to the team (Egypt).
- MSK shoulder joint and viva cases were the most useful (UK).
- Excellent MRI shoulder reporting and pathologies along with a wide variety of cases (Pakistan).
- The systemic review on how to report MRI shoulder was very useful (Hong Kong).
- The diagram side by side with the MRI image helped adjust the eyes to the pathological finding in the MRI (Pakistan).
- The teaching and cases were useful (Saudi Arabia).
- The review of shoulder MRI was useful (Thailand).
- Everything was useful (Canada).
- The feedback from Dr. Khan was the most helpful (Hong Kong).
- Explanations for osteomyelitis features and tarsal coalition were very informative (Myanmar).
- Excellent case presentation (Pakistan).
- All the teaching aspects are excellent with the differentials (India).
- Great learning. Thank you very much (Pakistan).
- The cases were useful (Botswana).
- Explanations were useful (Myanmar).
- Important points for day to day MR MSK in shoulder joints were useful (Pakistan).
- All aspects were useful (UK).
- Nicely covered the extensive topic (Saudi Arabia).
- Content, presentation and explanation all were awesome (Pakistan).
- Shoulder joint and all its aspects were well elaborated (UK).
- Excellent images. Thank you (Pakistan).
- Good, useful discussion (India).
- Shoulder pathologies were well taught (Pakistan).
- The detailed explanations were amazing (India).
- Good! concise with a good of variety cases (UK).
- All of it was useful (Sudan).
- The case discussion was useful (India).
- Excellent explanation by the moderator (UK).
- The cases and discussions were useful (India).
- Interesting cases (India).
- Detailed explanations and the classical images used were useful (Saudi Arabia).
- Differentiation between OM and tumor was very useful (UAE).
- The viva portion is really helpful! (Australia).
- Every aspect of the lecture was useful (Nigeria).
- The approach to shoulder was great (Zimbabwe).
- Everything including the cases, teaching and explanation was useful (UK).
- The coalition explanations were useful (Nigeria).
- Another great teaching session (Pakistan).
- All is going well! (Australia).
- I loved it (Iraq).
- The feedback after each case was very useful (Pakistan).
- Excellent session by Dr. Sajid (Pakistan).
- Glenoid labrum pathologies were well taught (Egypt).

- The instructor's explanation was very useful (Qatar).
- The teaching was amazing (Sudan).
- It's all valuable (UAE).
- Excellent cases and lectures (UK).
- Very informative (UAE).
- Brilliant sessions (UAE).
- Awesome as usual (UAE).
- Very informative (UAE).
- Excellent global platform, thank-you! (India).
- Awesome (UAE).
- Thank you! (UK).
- Excellent session as always (Pakistan).
- Excellent cases and lecture (UK).
- Informative and helpful teaching (Austria).
- Excellent session (UK).
- Excellent (Nigeria).
- Useful teaching (UK).
- Great teaching (Pakistan).
- Nice and informative presentation (Pakistan).
- Greatly appreciate (Thailand).
- Very educative (UK).
- Excellent teaching session (Nigeria).
- Fantastic (Zimbabwe).
- Very informative (UK).
- Exciting (Nigeria).
- Very helpful lecture (Jordan).
- Very informative (Saudi Arabia).

BONY BANKART

- Avulsion fracture of anteroinferior glenoid rim
 - 22% of 1st time dislocations
 - 90% of recurrent anterior dislocations
- Size of defect determines risk of recurrent dislocation

The slide features four MRI images of a shoulder joint, showing the glenoid rim and the labrum. The top-left image is an axial view, the top-right is a coronal view, and the bottom two are sagittal views. A small video inset in the top right corner shows a person speaking. Navigation icons are visible at the bottom left of the slide.



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