

4) What is OCT class recommendation in current ESC guidelines on myocardial revascularization for stent implantation optimization?

- a) I b) IIa c) IIb d) III

5) What is the borderline thickness of thin-cap fibroatheroma to identify high-risk plaques.

- a) $\leq 65\mu\text{m}$ b) $< 90\mu\text{m}$ c) $\leq 110\mu\text{m}$ e) $< 145\mu\text{m}$

6) IVUS allows more precise detection of intravascular thrombus when compared to OCT.

- a) True b) False

7) Which kind of plaque is associated with highest attenuation of OCT signal?

- a) Lipid b) Fibrotic c) Calcified d) Mixed

8) OCT allows more precise detection of vessel wall dissection when compared to IVUS.

- a) True b) False

9) Which IVUS parameter is used to assess the significance of left main stenosis:

- a) Plaque volume
c) Minimal vessel area (EEM to EEM)
d) Minimal lumen area
e) PAV (percent atheroma volume)
f) Minimal lumen diameter

10) IVUS overestimates the lumen area measurements when compared to OCT

- a) True b) False

11) IVUS optimization of stent implantation using reduces MACE rate in long term observation.

- a) True b) False

12) IVUS provides less accurate detection of intraluminal thrombus when compared to OCT

- a) True b) False

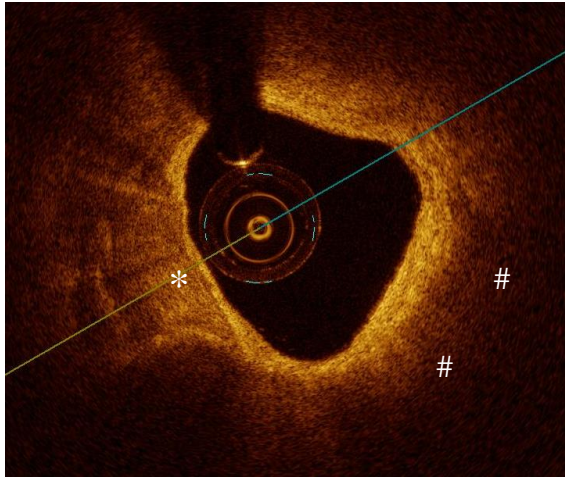
13) IVUS is able to evaluate intraluminal thrombus volume.

- a) True b) False

Practical part:

Please indicate structures marked on the images:

1)



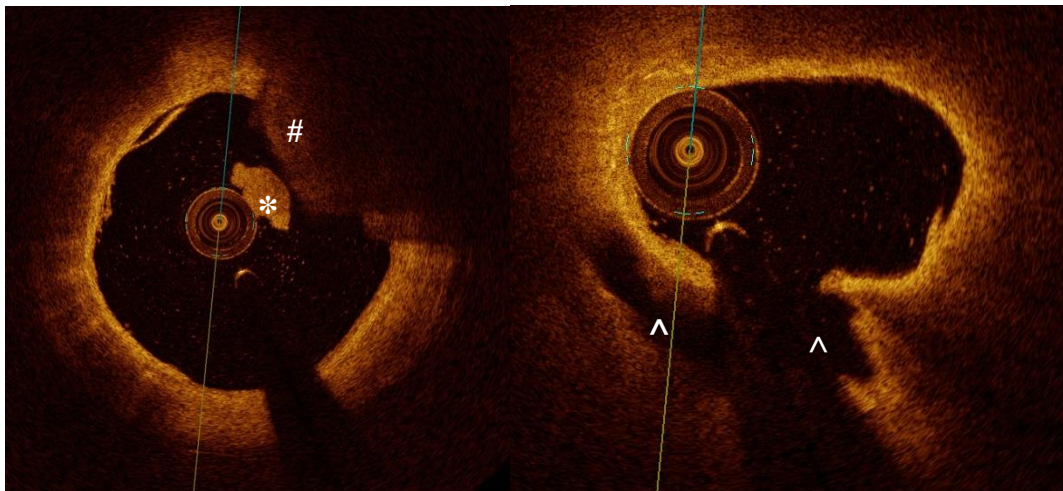
a) *Fibroatheroma, #Calcifications

b) *TICFA, #Calcifications

c) *Calcifications, #Lipid pool

d) None of the above

2) both pullbacks were performed in the same vessel



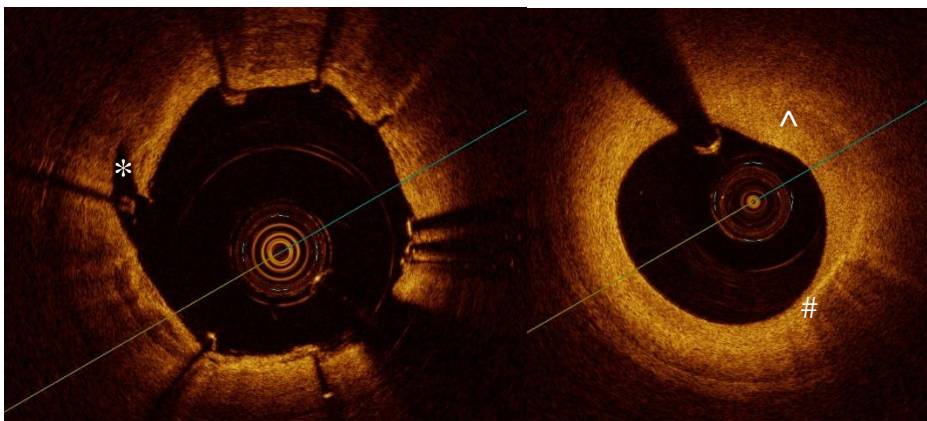
a) *Red thrombus , #White thrombus, ^Dissection

b) *White thrombus, #Red thrombus, ^Ruptured plaque

c) *White thrombus, #Ruptured plaque, ^Dissection

d) None of the above

3)



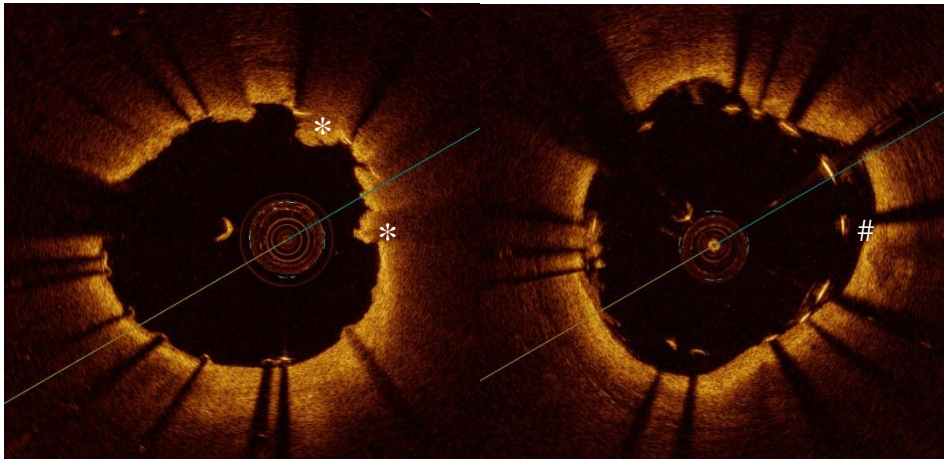
a) *Tissue protrusion, #Fibrotic plaque, ^Macrophages

b) *Dissection, #Macrophages, ^Fibrotic plaque

c) *Dissection, #Calcifications, ^Fibrotic plaque

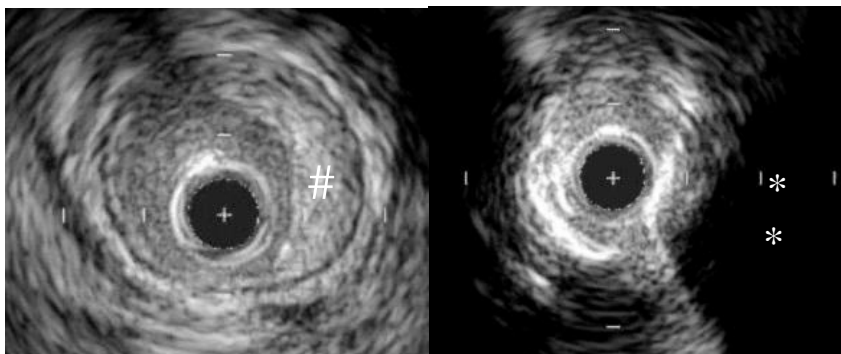
d) None of the above

4)



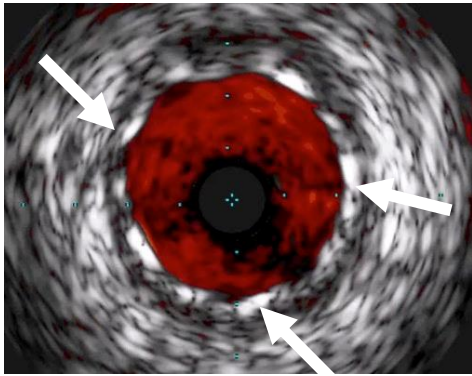
- a) *Tissue protrusion, #Stent strut apposition
- b) *Tissue protrusion, #Stent strut malapposition
- c) *Dissection, # Stent strut malapposition
- d) None of the above

5)



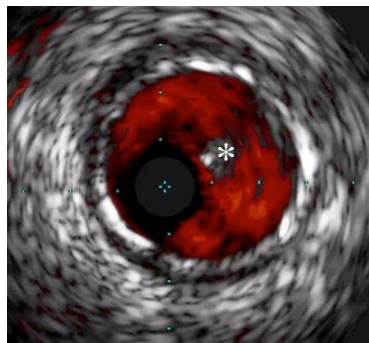
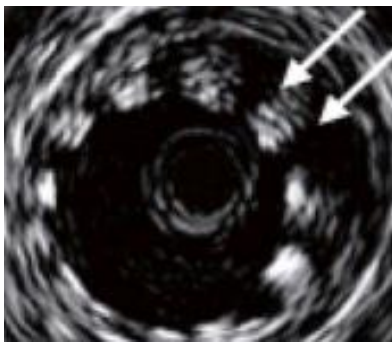
- a) *Fibrotic plaque , #Calcification
- b) *Calcification , #Lipid pool
- c) *Fibrotic plaque, #Lipid pool
- d) None of the above

6) Arrows indicates



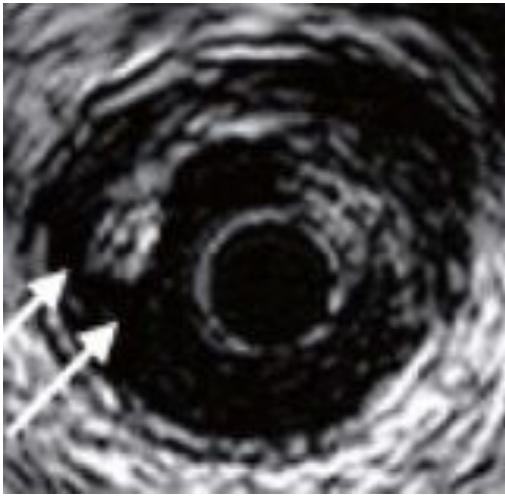
- a) Stent struts
- b) Calcifications
- c) Thrombus
- d) None of the above

7) Arrows indicates



- a) *Wire, → Stent strut malapposition
- b) *Thrombus, → Proper stent strut apposition
- c) *Stent strut malapposition, → Proper stent strut apposition

8) Arrows indicates



a) Dissection

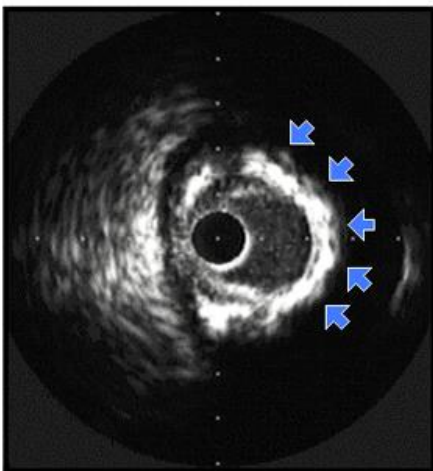
b) Intramural hematoma

c) Stent struts

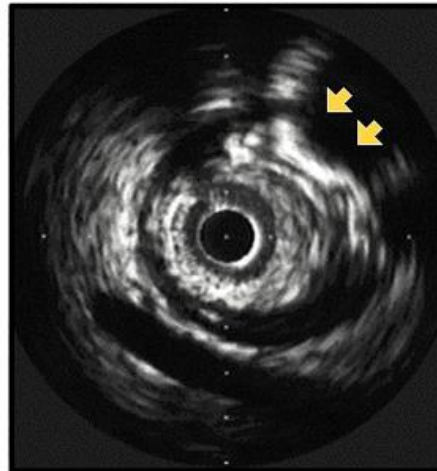
d) None of the above

9) Which severely calcified lesion is more suitable for atherectomy

1a)



2a)



a) 1a

b) 2a

c) 1a and 2a

d) none of the above