ACRIN6666 trial 70 Breast US training cases

ACRIN-American College of Radiology
Imaging Network
Courtesy of Dr Wendie Berg
Magee Women's Hospital of UPMC,
University of Pittsburgh School of Medicine

 The following are 'screen shots' of the summary page for each case of the 70 case breast ultrasound interactive training quiz that all ACRIN sonographers & physicians had to perform prior to participating in the multicenter ACR trial of 2662 pts evaluating screening ultrasound

 The following is intended only for CME / training purposes If you would like to perform the interactive 70-question training quiz on your own (i.e. you can choose each lesion feature from a drop-down menu on your own for each case), please call TNI head office, and we can send you a CD copy of the quiz

U/S Qualification

it is a self-installing .exe file/program

Program is only Windows-compatible

Instructions for taking interactive quiz
 Included at end of this document

- Keep in mind when answering quiz questions, that in general, in the U.S.A., breast lesions often are managed more aggressively than in Canada
 - Eg. some of the lesions that have a final category assessment of BI-RADS4a (low suspicion) in this training quiz may receive a slightly less aggressive assessment score of BI-RADS3 (probably benign) in Canada, etc
 - (in the U.S.A., pts are screened on a more frequent interval and beginning at an earlier age)
 - USA: ACR & ACS recommend mammography screening starts at age 40 annually
 - OBSP in Canada: mammo screening starts at age 50 q2 years

- For "Special Cases" and "No Mass" cases:
 - you can simply choose "special case" or
 "no mass" for the Shape, Margin, Orientation,
 Echogenicity, Posterior features sections



O Not a one

9 - Not a special case

Shape

2 - Oval or Gently Lobulated

Margins

2 - Circumscribed

Orientation

2 - Parallel

Echogenicity

5 - Hypoechoic

Posterior Features

2 - None

Calcifications

1 - None

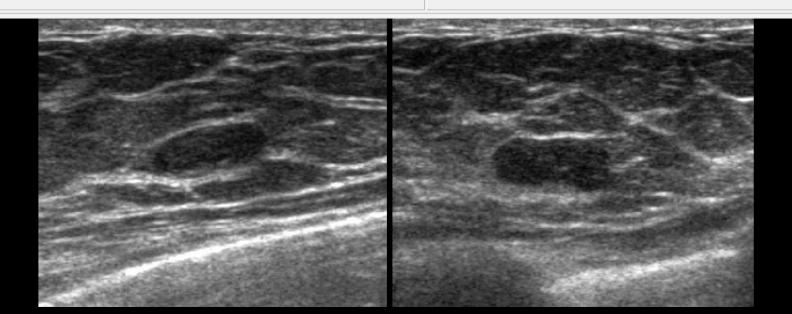
Final Assessment

3 - Probably benign

Continue, Next Case

fibroadenoma (FA).

This 45 year-old woman had an 8mm nonpalpable oval, circumscribed, hypoechoic mass with no posterior features. BIRADS 3, probably benign. Core biopsy (bx) was performed because of interval growth, showing



2 - Cyst

Shape

2 - Oval or Gently Lobulated

Margins

2 - Circumscribed

Orientation

2 - Parallel

Continue. Next Case

Echogenicity

4 - Complex (cystic and solid)

Posterior Features

3 - Enhancement

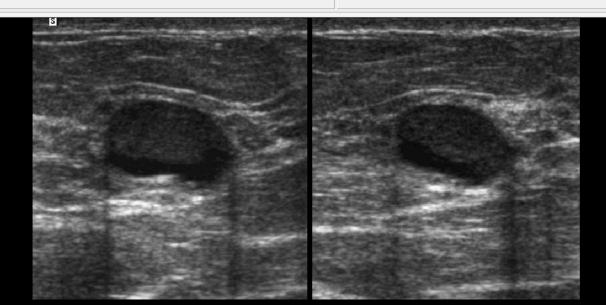
Calcifications

1 - None

Final Assessment

3 - Probably benign

This 36 year-old woman had an 8mm nonpalpable complicated cyst with fluid-debris level, BIRADS 3, probably benign. This woman had recently finished breastfeeding. Ultrasound-guided aspiration confirmed galactocele.



Special Case 9 - Not a special case Shape 4 - Irregular

Margins

3 - Not circumscribed

Orientation

2 - Parallel

Echogenicity

7 - Mixed hyper- and hypoechoic

Posterior Features

4 - Shadowing

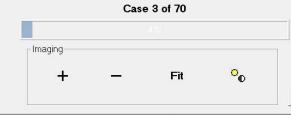
Calcifications

1 - None

Final Assessment

7 - Highly suggestive of malignancy

Continue, Next Case



This 31 year-old woman had a 9mm palpable spiculated mixed hyper- and hypoechoic mass with associated architectural distortion and posterior shadowing, highly suggestive of malignancy, BIRADS 5. Core biopsy showed invasive ductal carcinoma (IDC) grade I.





9 - Not a special case

Shape

2 - Oval or Gently Lobulated

Margins

2 - Circumscribed

Orientation

2 - Parallel

Echogenicity

4 - Complex (cystic and solid)

Posterior Features

3 - Enhancement

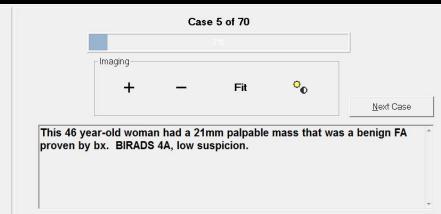
Calcifications

1 - None

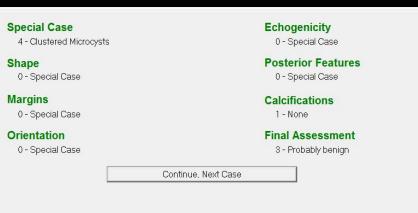
Final Assessment

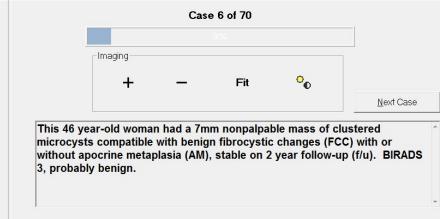
4 - 4A Low suspicion, biopsy

Continue, Next Case









9 - Not a special case

Shape

2 - Oval or Gently Lobulated

Margins

2 - Circumscribed

Orientation

2 - Parallel

Echogenicity

4 - Complex (cystic and solid)

Posterior Features

3 - Enhancement

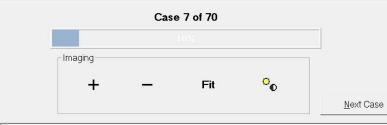
Calcifications

1 - None

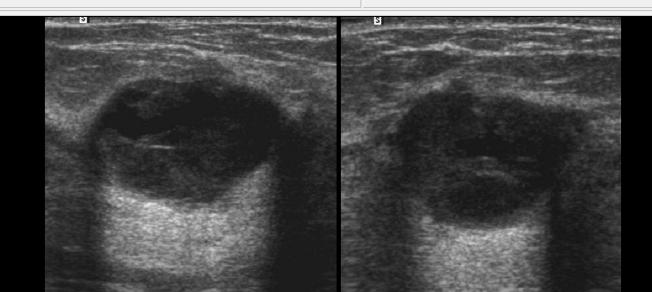
Final Assessment

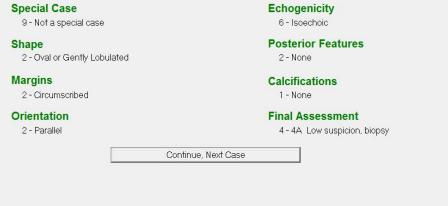
5 - 4B Intermediate Suspicion, biopsy

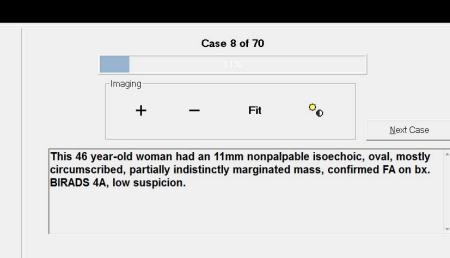
Continue, Next Case

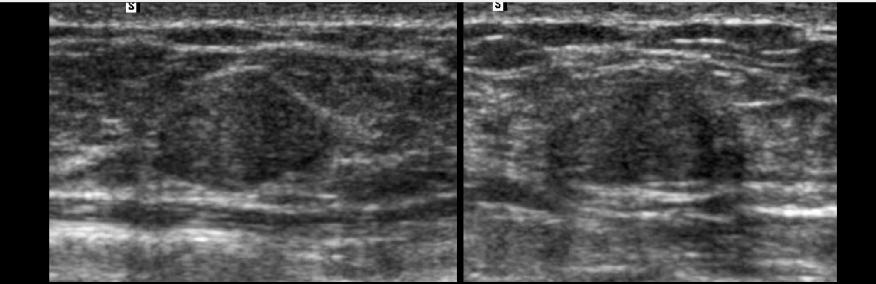


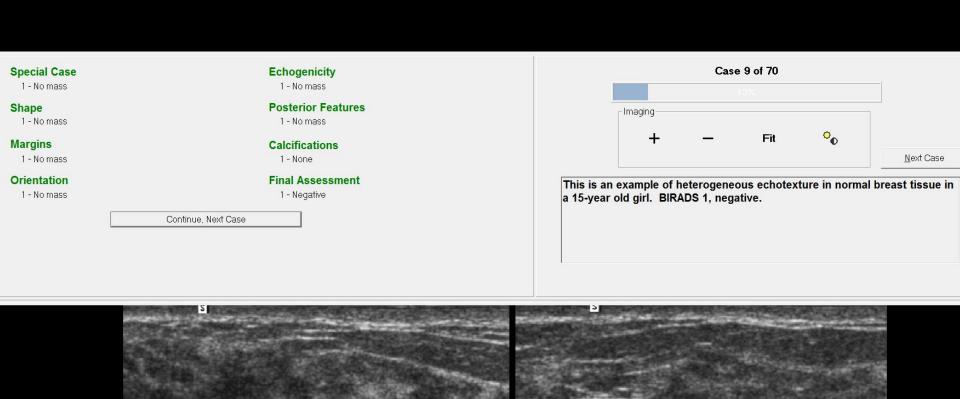
This 63 year-old woman had a 15mm palpable complex cystic and solid mass that was malignant papillary intracystic ductal carcinoma in situ (DCIS). BIRADS 4B, intermediate suspicion.



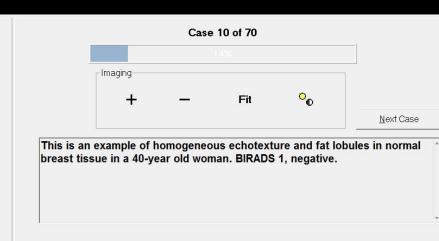


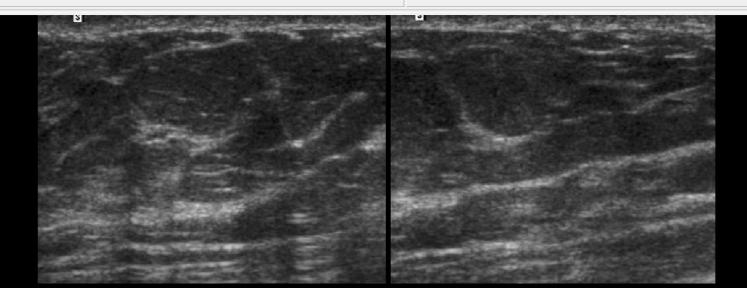












1 - No mass

Shape

1 - No mass

Margins

3 - Not circumscribed

Orientation

1 - No mass

Echogenicity

1 - No mass

Posterior Features

4 - Shadowing

Calcifications

4 - Microcalcifications outside a mass

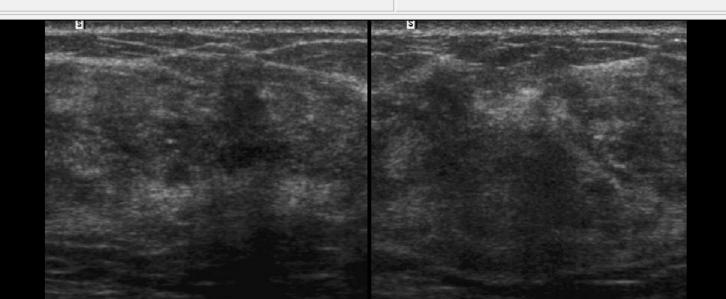
Final Assessment

5 - 4B Intermediate Suspicion, biopsy

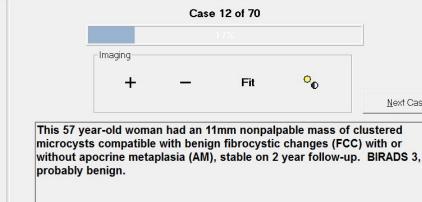
Continue, Next Case

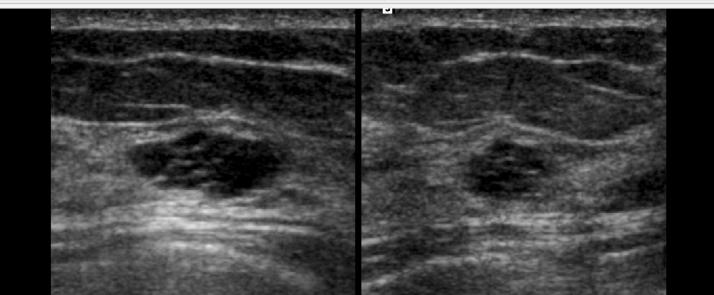


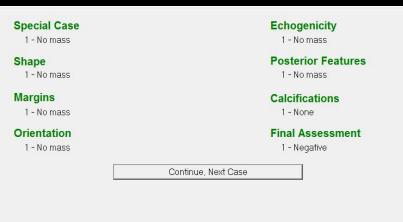
This 52-year old woman had diffusely heterogeneous echotexture with areas of shadowing and diffuse calcifications. This area was more prominent and vaguely palpable and was biopsied showing fibrocystic changes with calcifications. BIRADS 4B, intermediate suspicion.

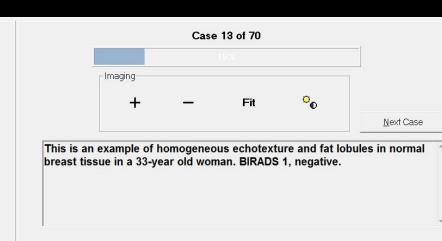


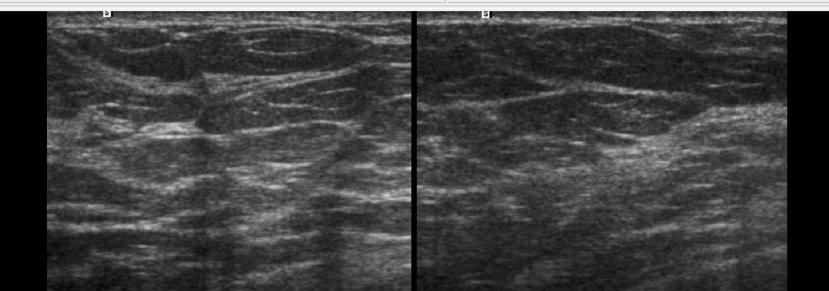






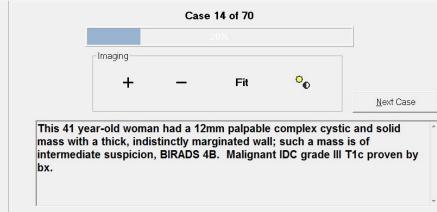


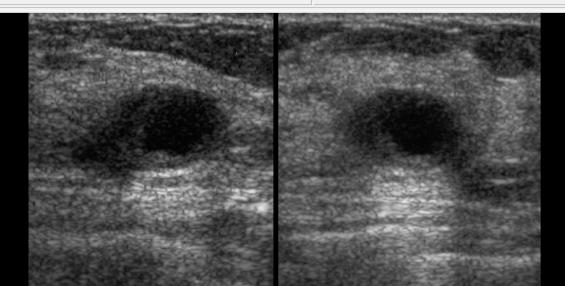




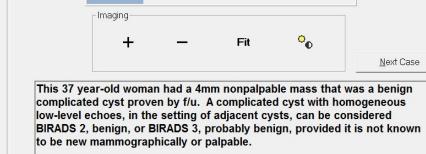


Continue, Next Case

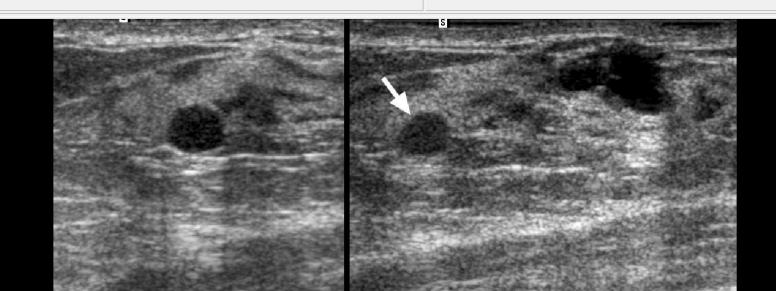


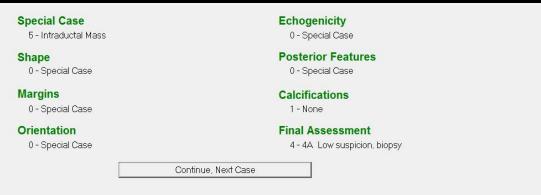


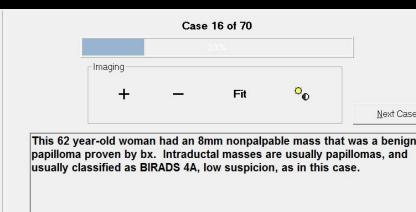


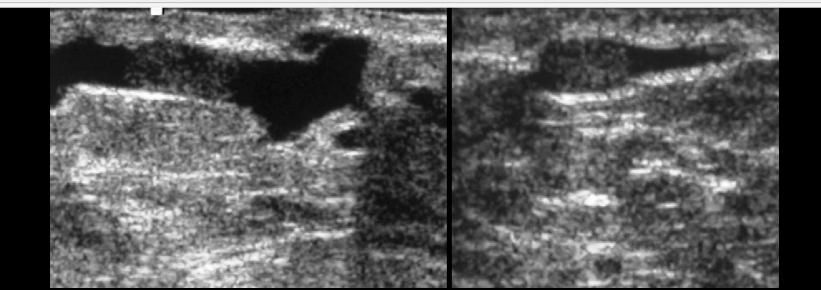


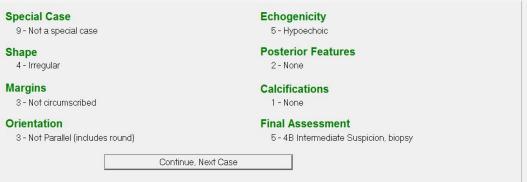
Case 15 of 70

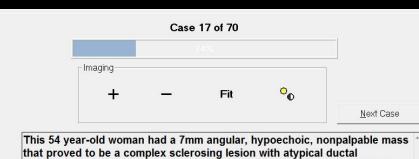












hyperplasia (ADH) and a papilloma on core and excisional bx. BIRADS 4B,

intermediate suspicion.



9 - Not a special case

Shape

2 - Oval or Gently Lobulated

Margins

2 - Circumscribed

Orientation

2 - Parallel

Posterior Features 2 - None

Echogenicity

5 - Hypoechoic

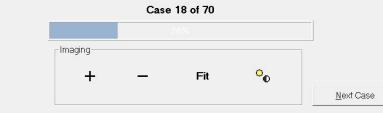
Calcifications

1 - None

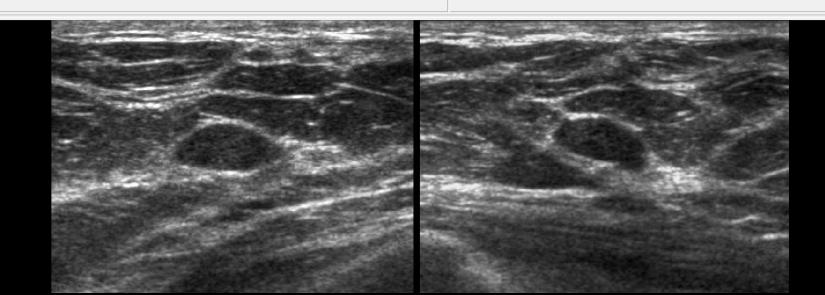
Final Assessment

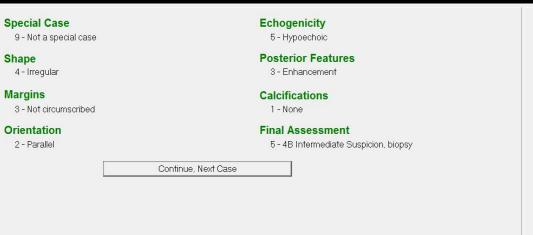
3 - Probably benign

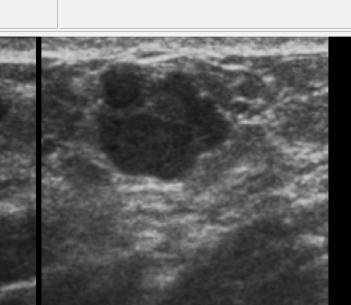
Continue, Next Case



This 40 year-old woman had a 7mm oval, circumscribed, iso- to slightly hypoechoic nonpalpable mass with no posterior features that was a benign FA proven by bx. BIRADS 3, probably benign.







-Imaging-

4B, intermediate suspicion.

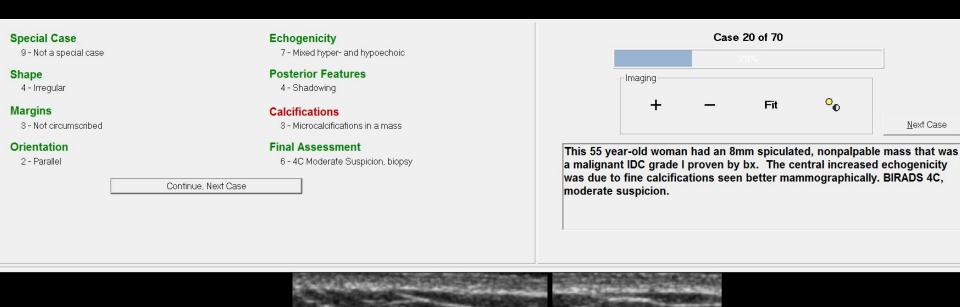
Case 19 of 70

Fit

This 30 year-old woman had an 18mm palpable mass with more than two or

three lobulations (therefore irregular), hypoechoic with minimal posterior enhancement that proved to be benign lactational changes on bx. BIRADS

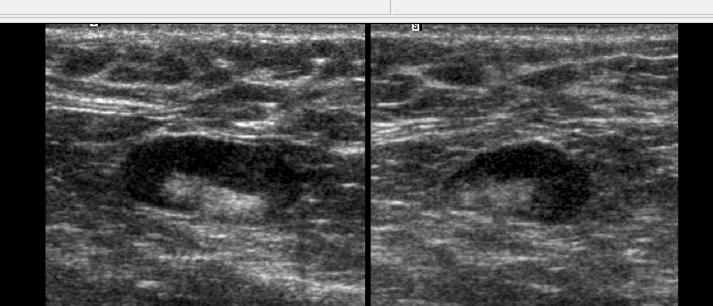
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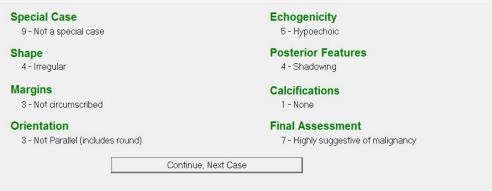


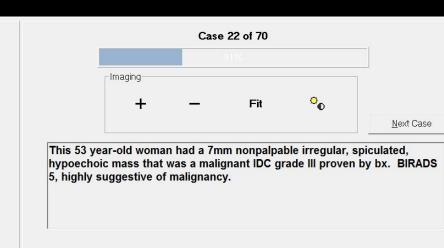
Special Case Echogenicity 7 - Lymph Node 0 - Special Case **Posterior Features** Shape 0 - Special Case 0 - Special Case Margins **Calcifications** 0 - Special Case 1 - None Orientation **Final Assessment** 4 - 4A Low suspicion, biopsy 2 - Parallel Continue, Next Case

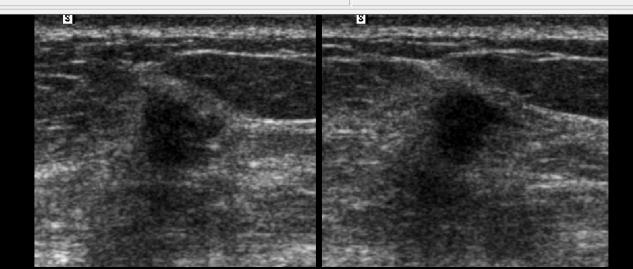


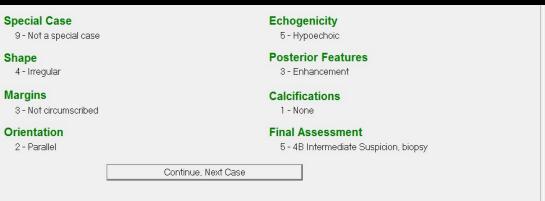
This 47 year-old woman had a 12mm nonpalpable mass that was a benign lymph node proven by fine needle aspiration (FNA). With a diffusely thickened cortex, depending on the clinical setting, this could be a reactive, inflammatory node, or a node involved by tumor. BIRADS 3, probably benign in a patient with HIV or inflammatory condition; BIRADS 4A in a patient with no known medical history; or BIRADS 4B, intermediate

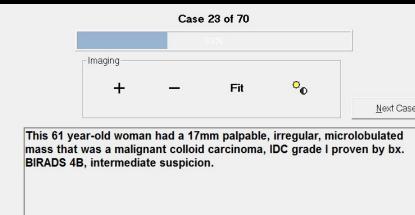


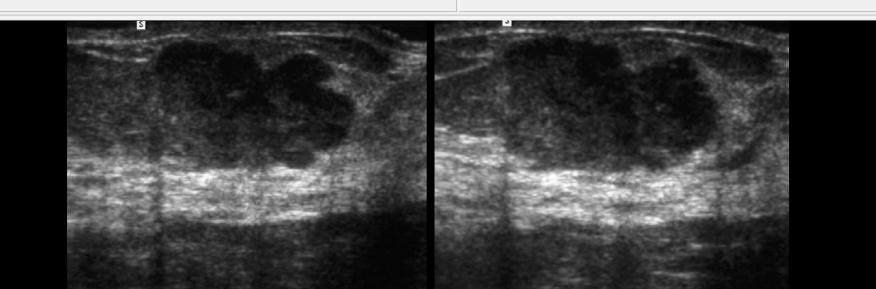


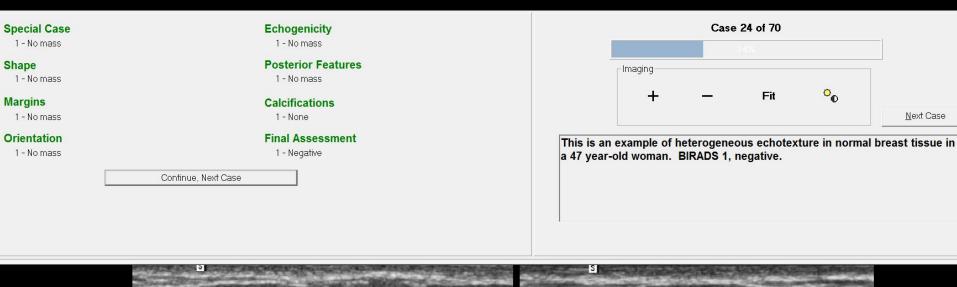


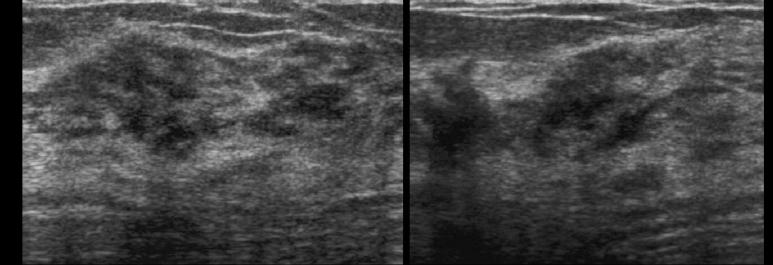












9 - Not a special case

Shape

4 - Irregular

Margins

3 - Not circumscribed

Orientation

3 - Not Parallel (includes round)

Continue, Next Case

Echogenicity

5 - Hypoechoic

Posterior Features

2 - None

Calcifications

1 - None

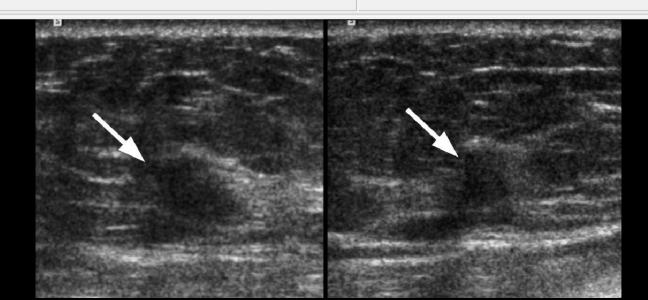
Final Assessment

6 - 4C Moderate Suspicion, biopsy

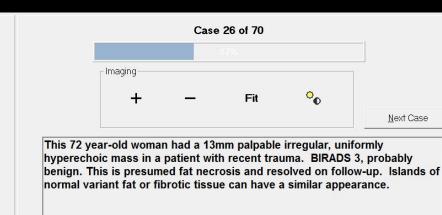


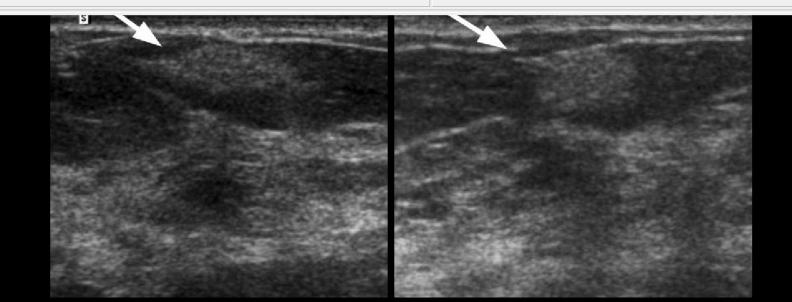
<u>N</u>ext Case

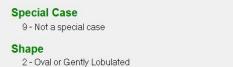
This 46 year-old woman had an 11mm nonpalpable, indistinctly marginated hypo- to isoechoic mass that was a malignant IDC proven by bx. BIRADS 4C, moderate suspicion.











Margins

3 - Not circumscribed

Orientation

3 - Not Parallel (includes round)

Continue, Next Case

Echogenicity

5 - Hypoechoic

Posterior Features

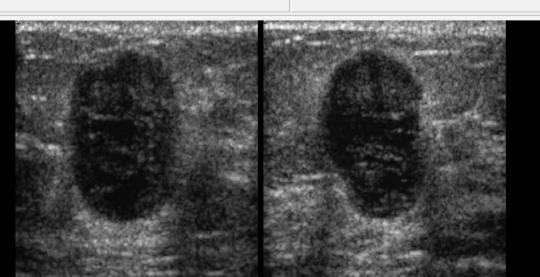
3 - Enhancement

Calcifications

1 - None

Final Assessment

6 - 4C Moderate Suspicion, biopsy



9 - Not a special case

Shape

2 - Oval or Gently Lobulated

Margins

3 - Not circumscribed

Orientation

2 - Parallel

Echogenicity

5 - Hypoechoic

Posterior Features

3 - Enhancement

Calcifications

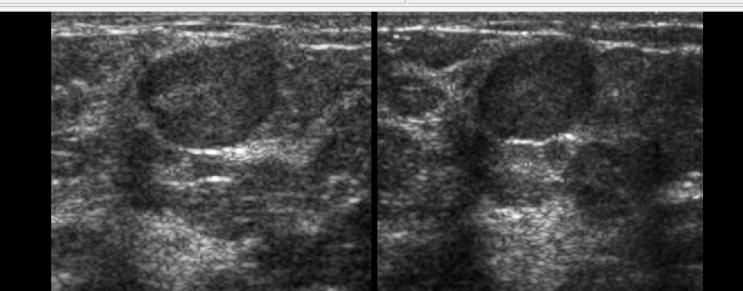
1 - None

Final Assessment

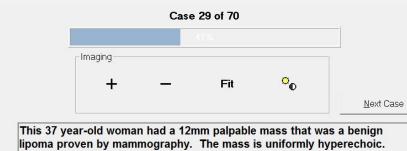
4 - 4A Low suspicion, biopsy

Continue, Next Case

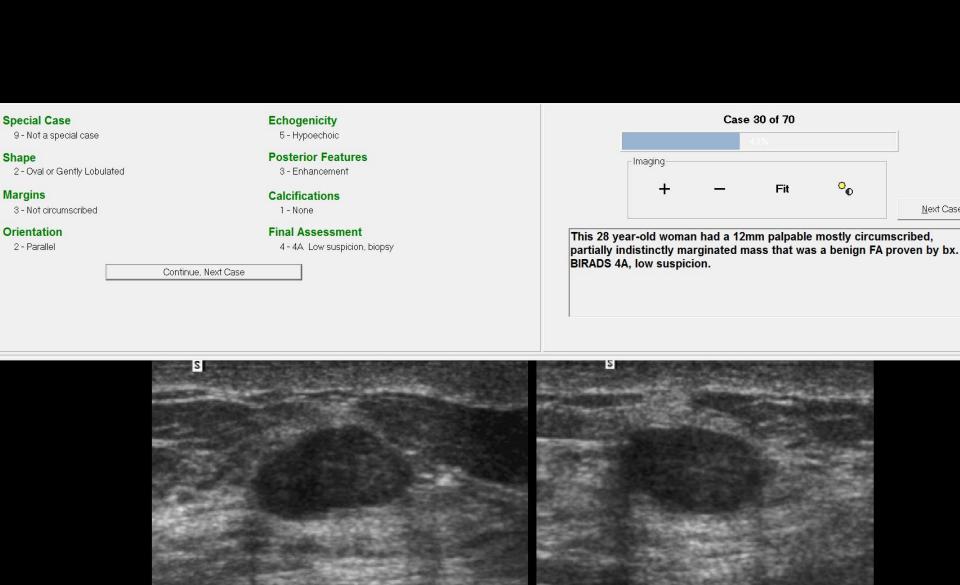
This 52 year-old woman had a 15mm palpable, oval (almost round), mostly circumscribed, partially indistinctly marginated, hypoechoic mass with posterior enhancement (that was new mammographically), of low suspicion, BIRADS 4A. Core biopsy showed malignant IDC, grade III.







This 37 year-old woman had a 12mm palpable mass that was a benign lipoma proven by mammography. The mass is uniformly hyperechoic. BIRADS 2, benign.





3 - Not circumscribed

Orientation

2 - Parallel

Continue, Next Case

Echogenicity

4 - Complex (cystic and solid)

Posterior Features

3 - Enhancement

Calcifications

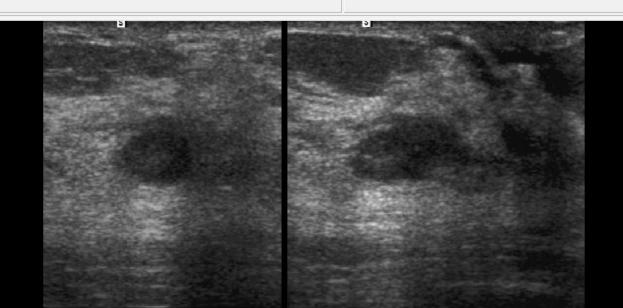
1 - None

Final Assessment

5 - 4B Intermediate Suspicion, biopsy

-Imaging-0 Fit Next Case This 59 year-old woman had a 12mm nonpalpable indistinctly marginated hypoechoic mass that proved to be malignant intracystic papillary DCIS on bx. The mass had been stable for two years (erroneously followed). BIRADS 4B, intermediate suspicion.

Case 31 of 70



Special Case

9 - Not a special case

Shape

4 - Irregular

Margins

3 - Not circumscribed

Orientation

3 - Not Parallel (includes round)

Continue, Next Case

Echogenicity

5 - Hypoechoic

Posterior Features

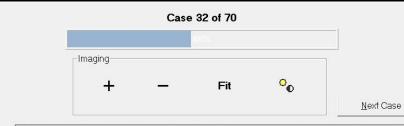
3 - Enhancement

Calcifications

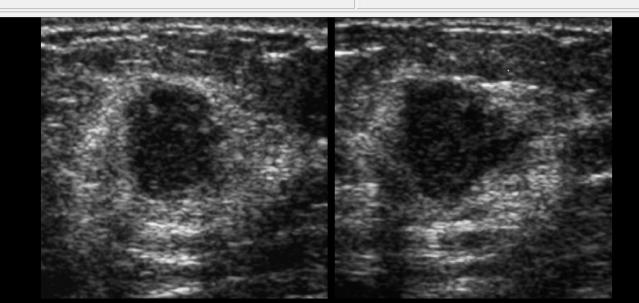
3 - Microcalcifications in a mass

Final Assessment

7 - Highly suggestive of malignancy



This 57 year-old woman had a 13mm palpable microlobulated mass with an echogenic halo that was a malignant IDC grade III proven by bx. Echogenic foci within the mass were due to microcalcifications. BIRADS 5, highly suggestive of malignancy.



Special Case

9 - Not a special case

Shape

4 - Irregular

Margins

3 - Not circumscribed

Orientation

3 - Not Parallel (includes round)

Continue, Next Case

Echogenicity

5 - Hypoechoic

Posterior Features

3 - Enhancement

Calcifications

3 - Microcalcifications in a mass

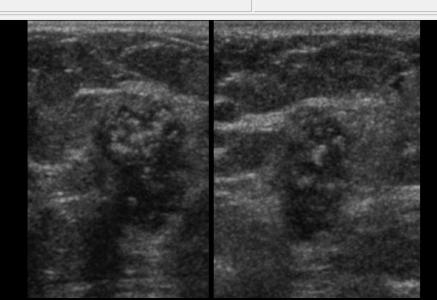
Final Assessment

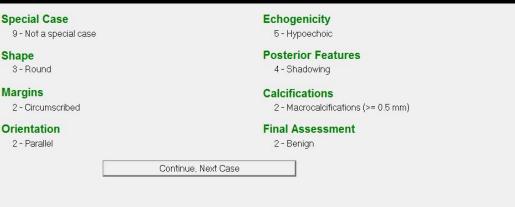
6 - 4C Moderate Suspicion, biopsy

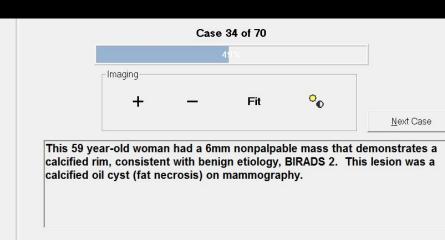


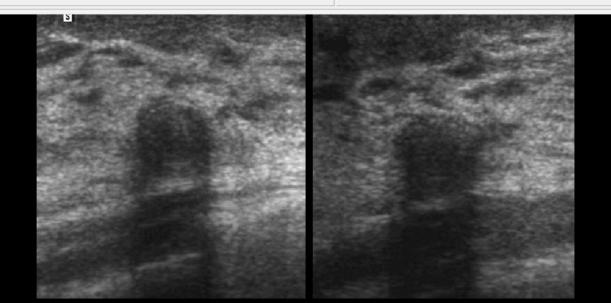
This 56 year-old woman had a 16mm palpable mass that was a malignant IDC grade II proven by bx. This irregular, vertically oriented mass with macro- and microcalcifications within it is moderately suspicious, BIRADS 4C.

Next Case

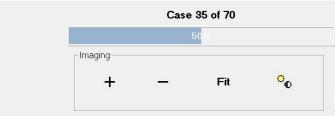






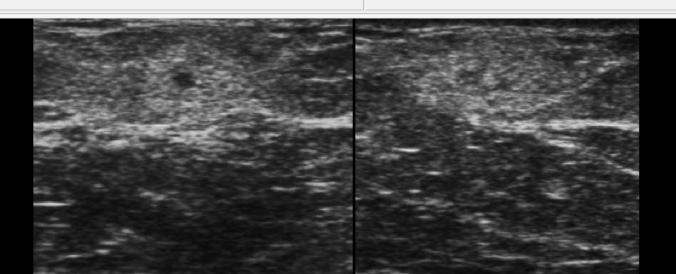




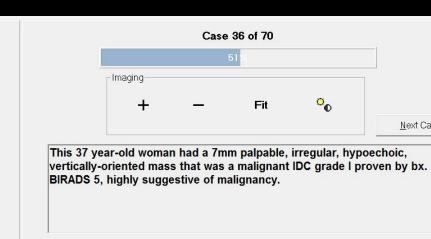


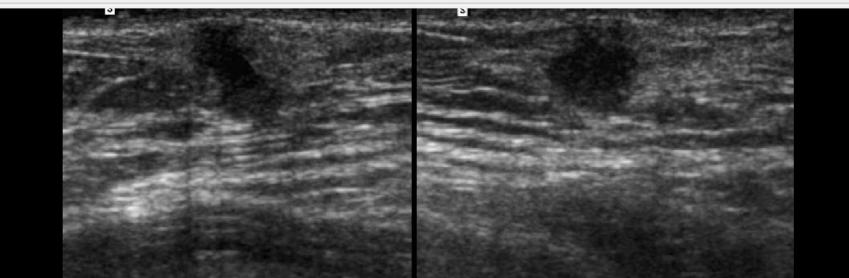
This 40 year-old woman had a 9mm palpable mass which was predominantly hyperechoic with a tiny cystic component. In the setting of trauma, this is consistent with fat necrosis, though follow-up is appropriate to exclude an underlying mass that bled. BIRADS 3, probably benign. This resolved.

Next Case

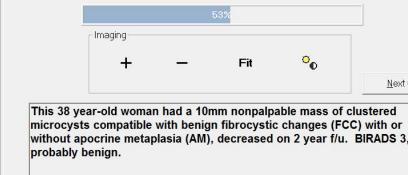






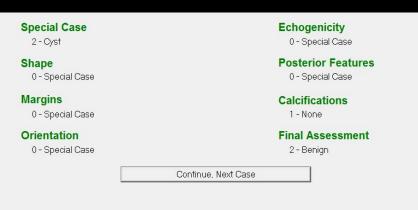


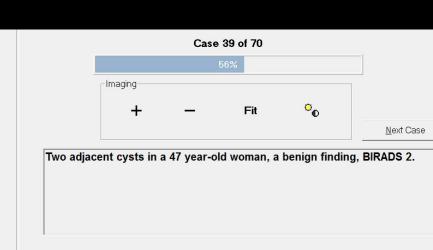


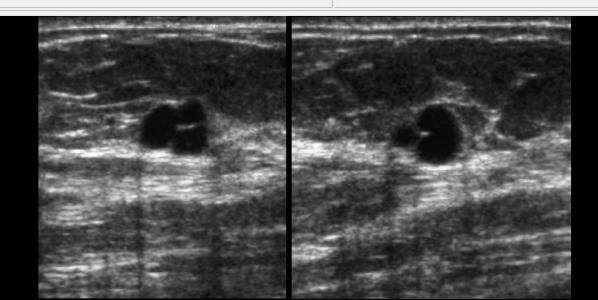


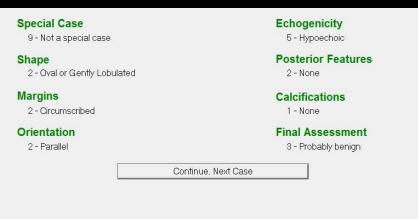
Case 37 of 70

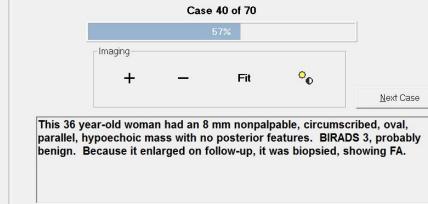


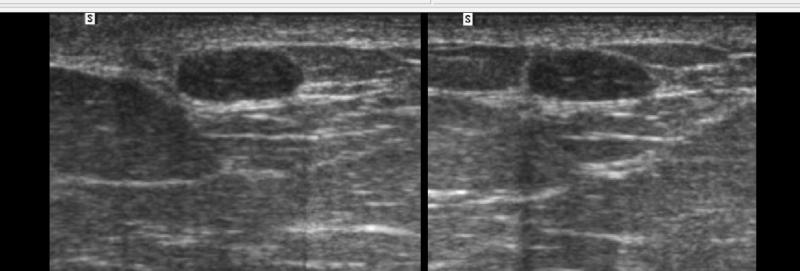


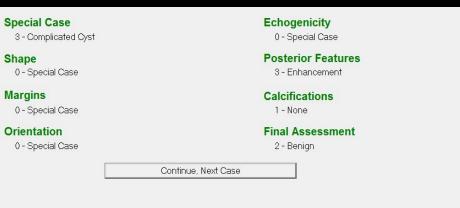


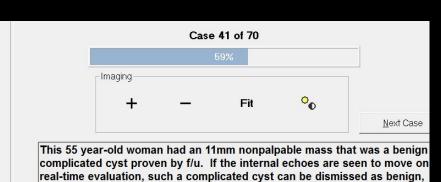


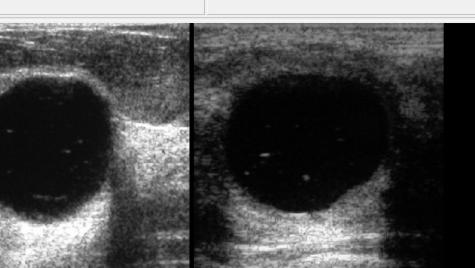




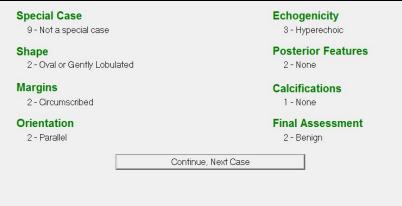


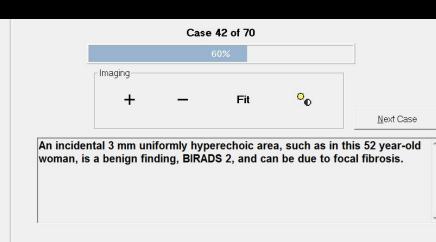


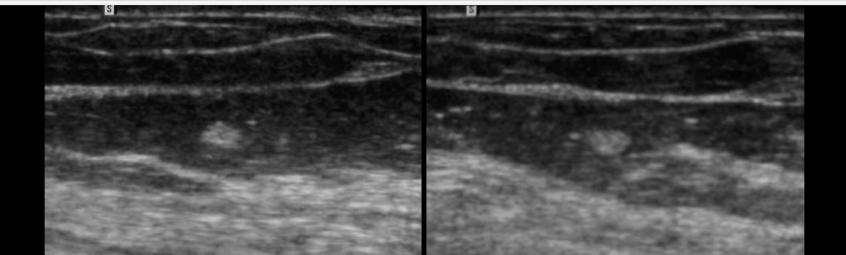




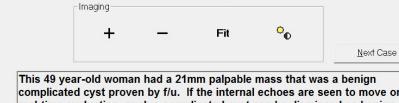
BIRADS 2.





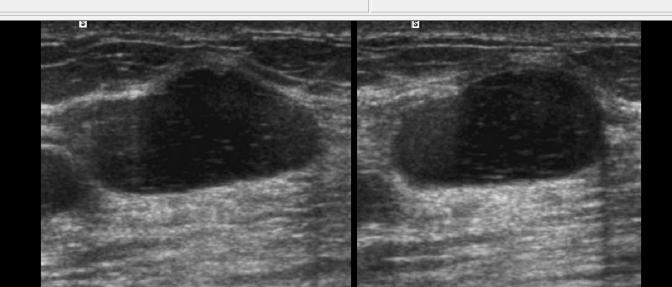


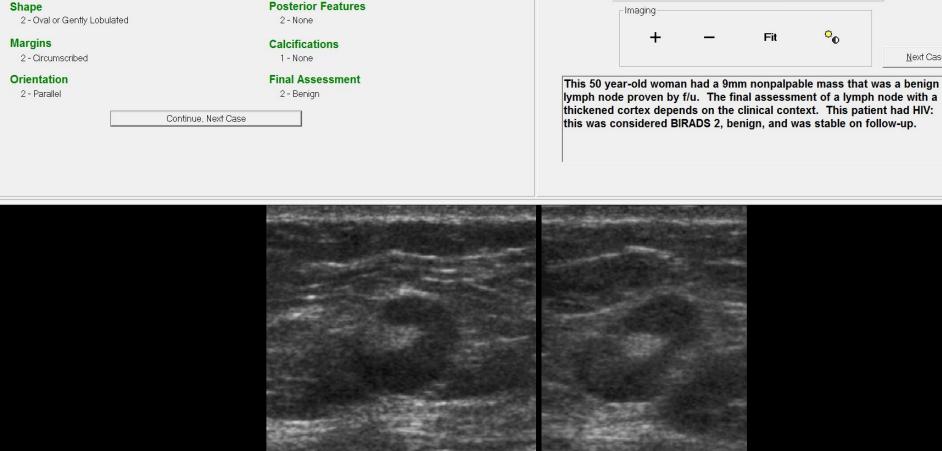
Echogenicity Special Case 3 - Complicated Cyst 5 - Hypoechoic **Posterior Features** Shape 2 - Oval or Gently Lobulated 3 - Enhancement Margins **Calcifications** 2 - Circumscribed 1 - None Orientation **Final Assessment** 3 - Probably benign 2 - Parallel Continue, Next Case



Case 43 of 70

complicated cyst proven by f/u. If the internal echoes are seen to move on real-time evaluation, such a complicated cyst can be dismissed as benign, BIRADS 2. If abscess is suspected clinically, aspiration would be appropriate (resulting in BIRADS 4A assessment).





Echogenicity

Posterior Features

7 - Mixed hyper- and hypoechoic

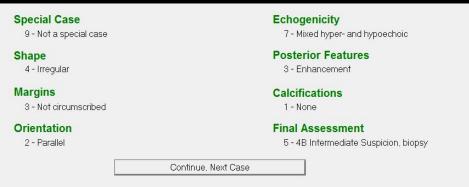
Special Case

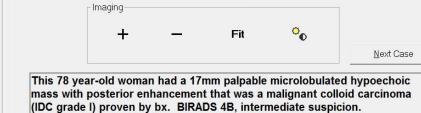
7 - Lymph Node

Case 44 of 70

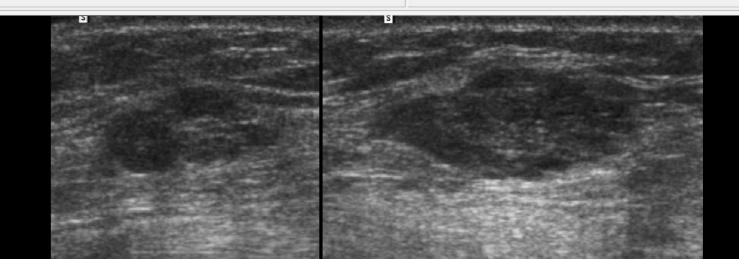
0

Next Case





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Special Case

9 - Not a special case

Shape

2 - Oval or Gently Lobulated

Margins

3 - Not circumscribed

Orientation

2 - Parallel

Echogenicity

5 - Hypoechoic

Posterior Features

3 - Enhancement

Calcifications

1 - None

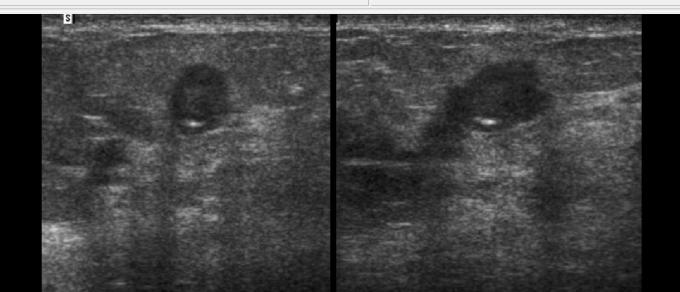
Final Assessment

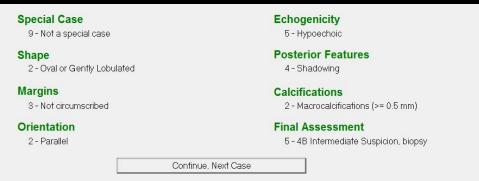
5 - 4B Intermediate Suspicion, biopsy

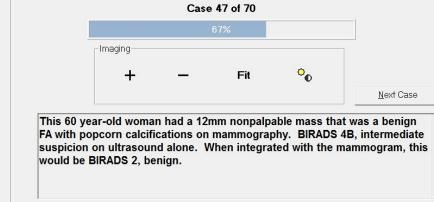
Continue, Next Case

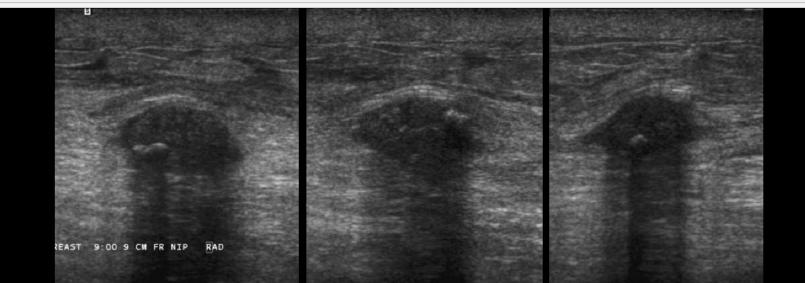
This 40 year-old woman had an 11mm palpable oval, partially circumscribed, partially indistinctly marginated hypoechoic mass with a macrocalcification. Biopsy showed malignant IDC grade II with an extensive intraductal component. BIRADS 4B, intermediate suspicion.

Next Case

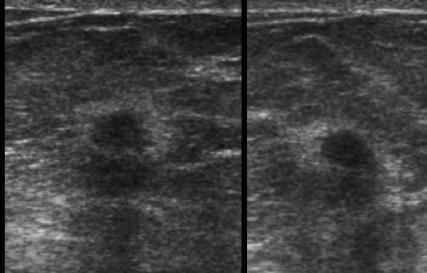




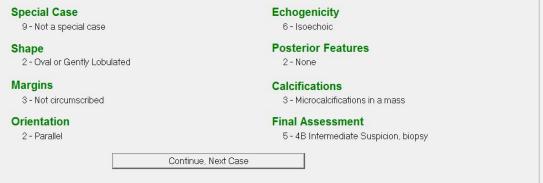


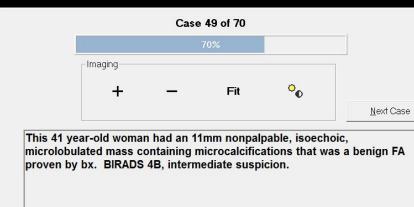


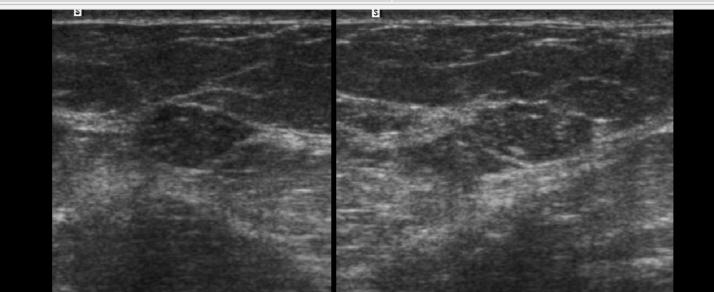


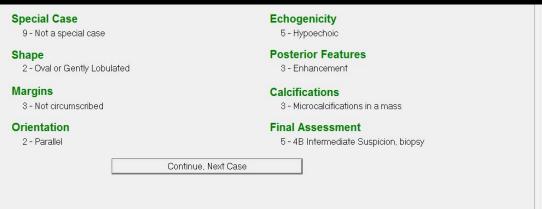


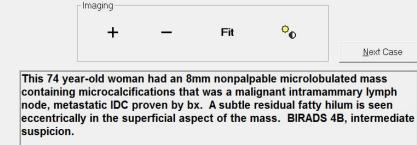
Next Case





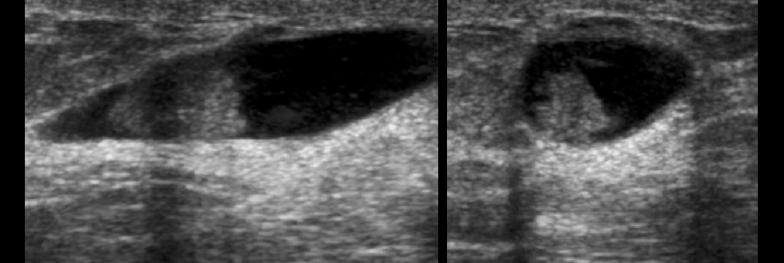


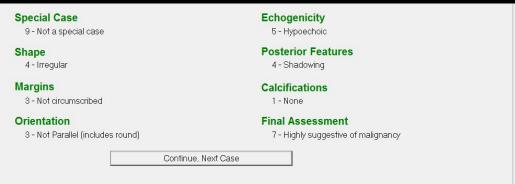


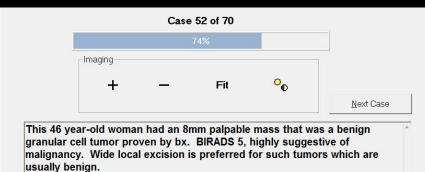


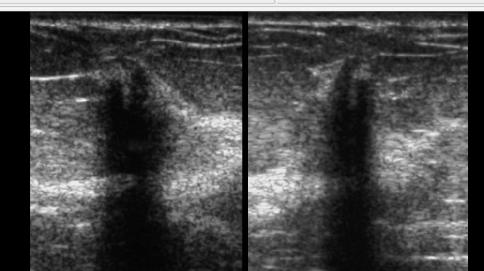
Case 50 of 70

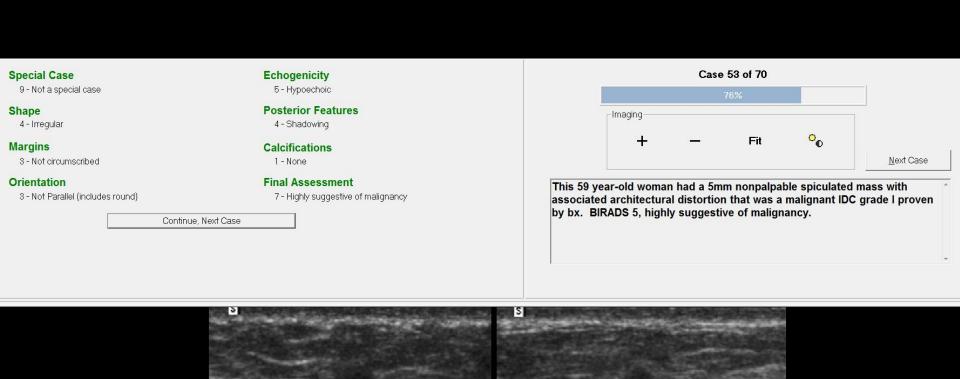




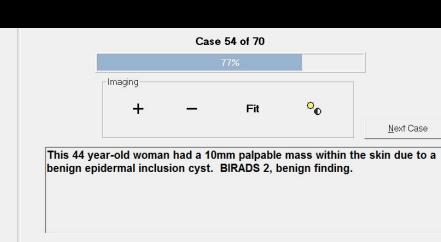


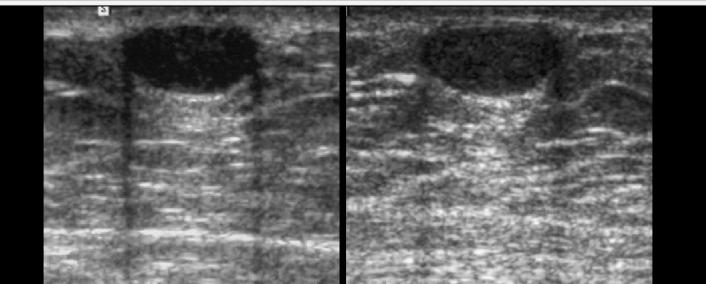


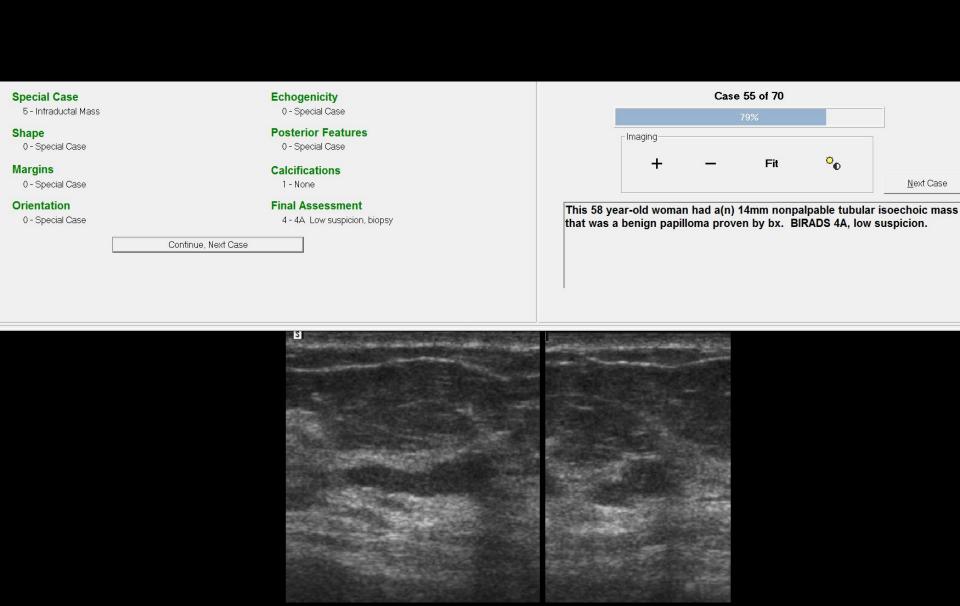






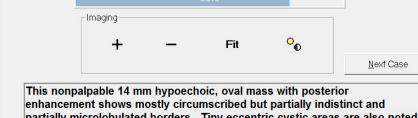








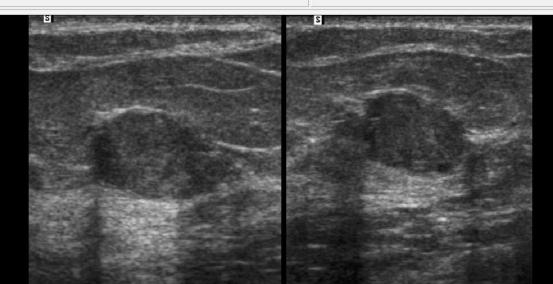
Continue, Next Case



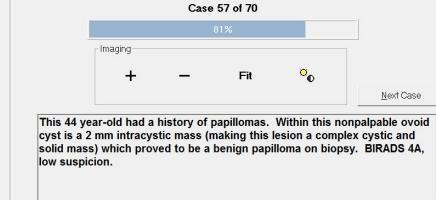
4B, intermediate suspicion.

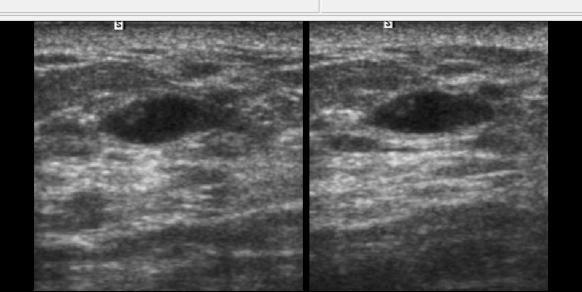
Case 56 of 70

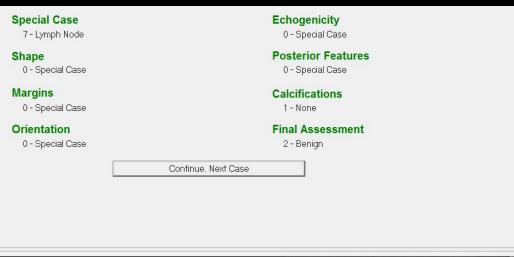
partially microlobulated borders. Tiny eccentric cystic areas are also noted 71 year-old with biopsy proven fibroadenoma with DCIS within it. BIRADS

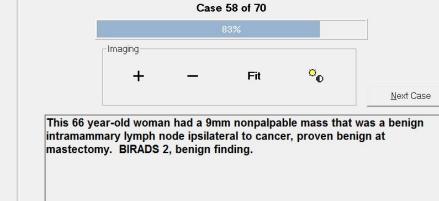


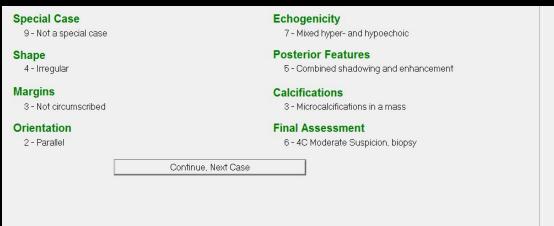


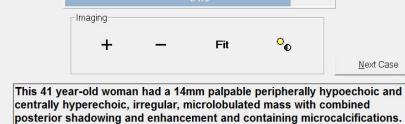












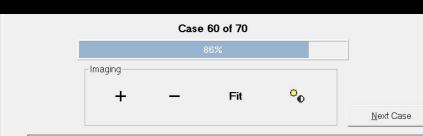
This proved to be malignant IDC, grade III, on core biopsy. BIRADS 4C,

Case 59 of 70

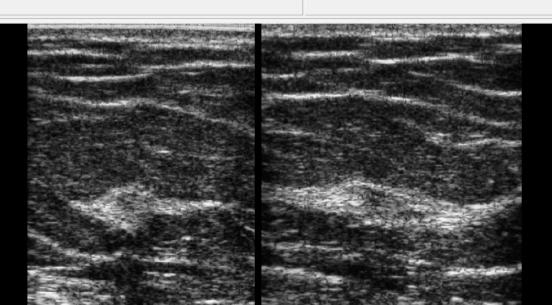
S

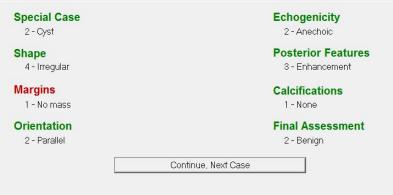
moderate suspicion.

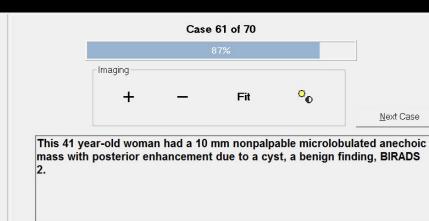


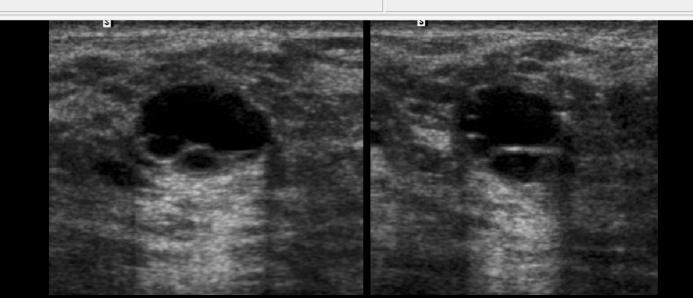


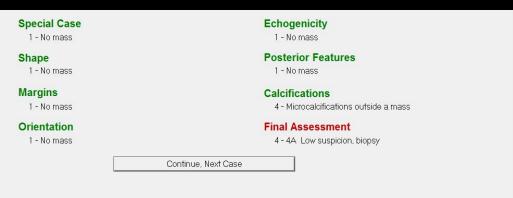
This 20 mm band-like area of hyperechoic tissue in this 40 year-old woman is a normal variant, usually representing an area of relatively denser or fibrotic tissue. BIRADS 2, benign finding.

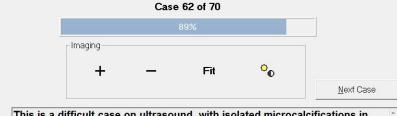




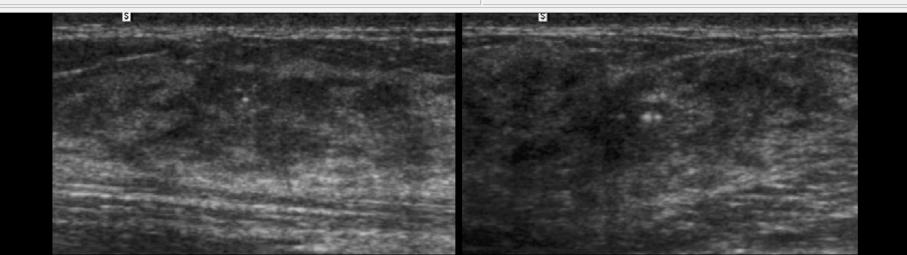


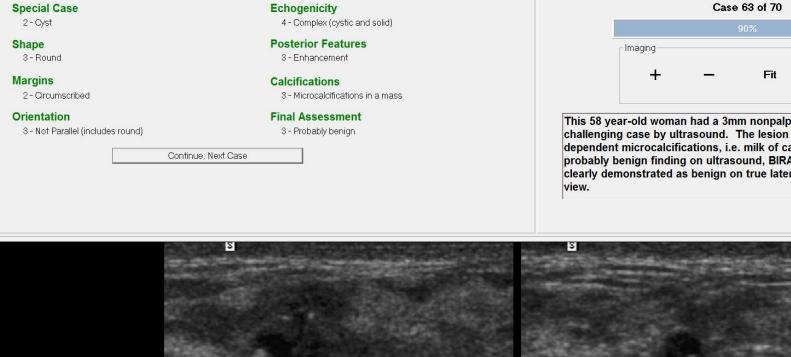






This is a difficult case on ultrasound, with isolated microcalcifications in background of heterogeneous echotexture in this 58 year-old woman. Truly such a case cannot be adequately assessed by ultrasound alone and would in practice be BIRADS 0, incomplete, with mammogram required. These calcifications were biopsied under ultrasound guidance showing fibrocystic changes.

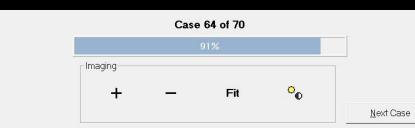




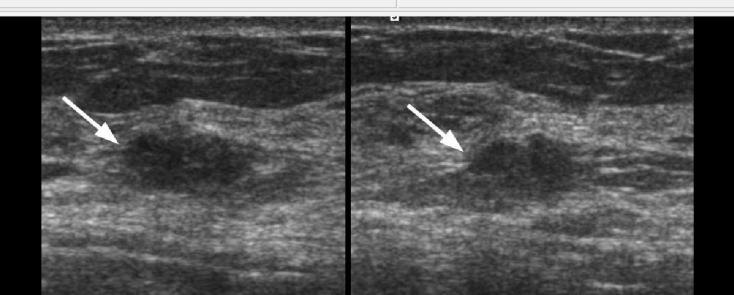
O Next Case This 58 year-old woman had a 3mm nonpalpable mass. This is a challenging case by ultrasound. The lesion is a cyst containing a few dependent microcalcifications, i.e. milk of calcium. As such, this is a

probably benign finding on ultrasound, BIRADS 3, though this was more clearly demonstrated as benign on true lateral magnification mammographic

Echogenicity Special Case 9 - Not a special case 6 - Isoechoic **Posterior Features** Shape 4 - Irregular 2 - None Margins Calcifications 3 - Not circumscribed 1 - None Orientation **Final Assessment** 5 - 4B Intermediate Suspicion, biopsy 2 - Parallel Continue, Next Case



This 74 year-old woman had a 13mm nonpalpable mass. This isoechoic mass was quite subtle on sonography, but has indistinct margins and is irregular in shape. As such, it is of intermediate suspicion, BIRADS 4B. Core biopsy showed malignant IDC, grade I.



Special Case

9 - Not a special case

Shape

4 - Irregular

Margins

3 - Not circumscribed

Orientation

3 - Not Parallel (includes round)

Continue, Next Case

Echogenicity

7 - Mixed hyper- and hypoechoic

Posterior Features

4 - Shadowing

Calcifications

3 - Microcalcifications in a mass

Final Assessment

7 - Highly suggestive of malignancy

Haging

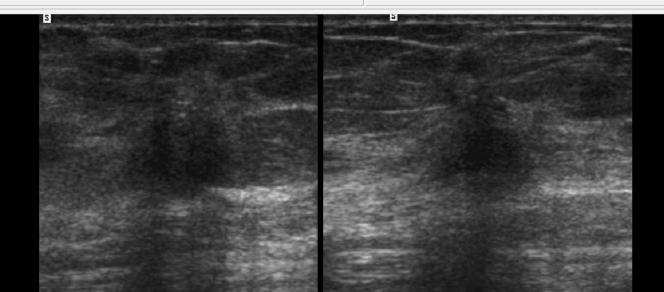
+ - Fit

Next Case

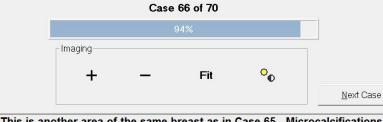
This 74 year-old woman had an 8mm palpable spiculated mixed hyper- and hypoechoic mass with associated architectural distortion,

Case 65 of 70

This 74 year-old woman had an 8mm palpable spiculated mixed hyper- and hypoechoic mass with associated architectural distortion, microcalcifications, and posterior shadowing that was malignant (IDC, grade I with an extensive intraductal component) on biopsy. BIRADS 5, highly suggestive of malignancy.





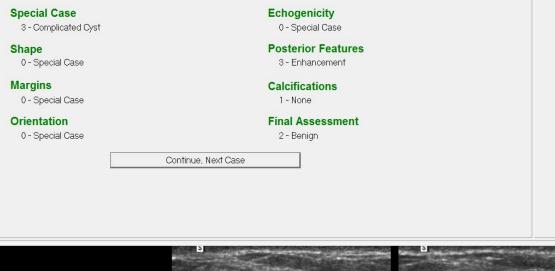


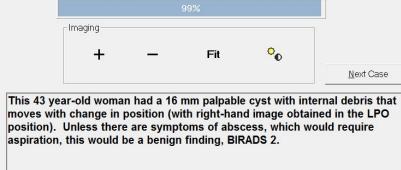
This is another area of the same breast as in Case 65. Microcalcifications are present without a discrete massover a 70 mm area in this 74 year-old woman. On the right-hand image, note that the calcifications are within a duct (arrow), which makes the finding of at least intermediate suspicion, BIRADS 4B. This proved to be malignant: micropapillary DCIS with microcalcifications, better seen on magnification mammographic images.



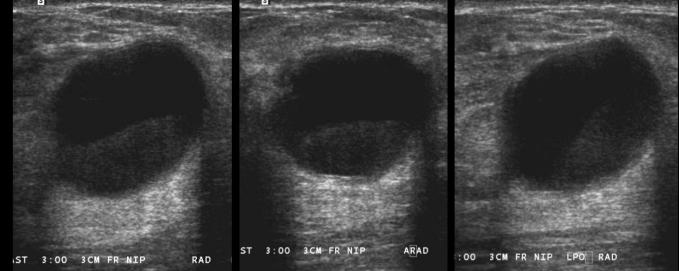








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Special Case 9 - Not a special case

Shape

4 - Irregular Margins

3 - Not circumscribed

Orientation

3 - Not Parallel (includes round)

Continue, Next Case

Echogenicity

2 - Anechoic

Posterior Features

2 - None

Calcifications

1 - None

Final Assessment

5 - 4B Intermediate Suspicion, biopsy

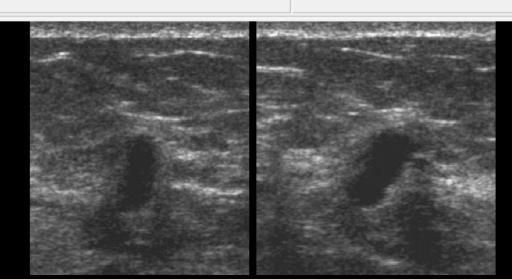
+ - Fit

Next Case

is 55 year-old woman had an 8mm nonpalpable vertically-oriented

Case 70 of 70

This 55 year-old woman had an 8mm nonpalpable vertically-oriented anechoic mass with indistinct margins. This had decreased since prior sonograms and resolved on follow-up and was a resolving cyst, but its sonographic appearance on this study in isolation is of intermediate suspicion, BIRADS 4B.



Instructions

- For installing CD of interactive quiz
 - Please call TNI head office if you would to obtain a CD of interactive quiz

Details on how to perform quiz

Installation instructions:

For Windows 95/98/ME/2000/NT/XP only

- Start Windows
- 2. Set display color depth to 24-bit color or higher (16.7 million colors or higher)
- Insert CD-ROM
- 4. Determine the drive letter of you CD-ROM drive, for example "D"
- Click the "Start" button, then click "Run..."
- Type "D:\Setup.exe" where "D" is replaced by the drive letter of your CD-ROM drive.
- 7. Click "OK"
- Follow the instructions on the screen.

OR

- 3. same as above
- 4. Double click the "My Computer" icon.
- Double click the CD-ROM drive.
- Double click the "Setup.exe" icon
- Follow instructions on screen.

To Start Program

Double click the "acr" icon labeled "ACRIN-Avon 6666 Ultrasound Feature Quiz" on your <u>desktop</u> to start.

Uninstall instructions:

- Click "Start", then click "Settings", then choose "Control Panel"
- Double click "Add/Remove Programs"
- Select "ACRIN-Avon 6666 Ultrasound Feature Quiz" and click "Add/Remove". Select "Automatic" uninstall (if the option is available).

ACRIN-AVON 6666 Ultrasound Quiz

Purpose:

This quiz is being used to establish performance in:

- Biopsy appropriate lesions (pathology standard and consensus standard)
- · NOT biopsying lesions per protocol
- Probably benign lesions per protocol
- Agreement in feature analysis, source of error in interpretation

General Information:

This quiz consists of 70 total cases. At the beginning of each case, assume the case is not palpable.

Orthogonal views are provided and normals are included in the quiz. When choosing your answer, use the worst applicable descriptor. Final Assessment

Probably Benign Lesions are defined as

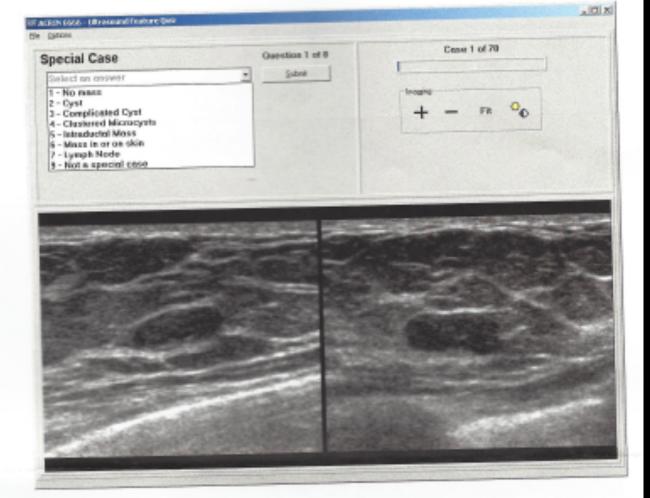
- Complicated cysts
- · Oval or gently lobulated, circumscribed, horizontal, with no posterior features
- Clustered microscysts
- Uniformly hyperechoic masses

All data will be kept confidential and anonymized for analysis

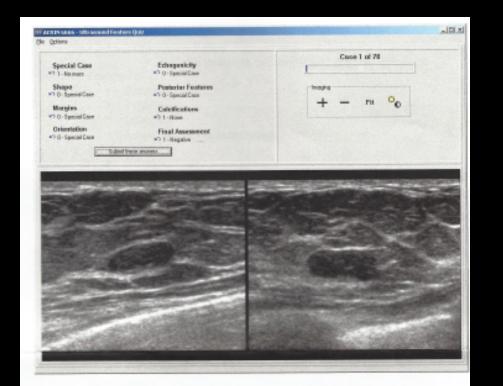
Getting Started:

Double click the "acr" icon labeled "ACRIN-Avon 6666 Ultrasound Feature Quiz" on your desktop to start.

- · At program launch, click the "Start Quiz" button.
- A small box will appear asking you to enter your user ID. Your ID is your name (last, first) you will then be taken to the first case.
- · Each question must be answered
- To choose an answer, make a selection from the drop-down list and then click "Submit" to record your answer. There are 8 questions in each case.



- If the lesion is a special case or normal, you may select "not applicable" for some of the descriptors such as shape or orientation.
- Following each case will be a summary of your answers for that particular case (see image below).
- You will be given the opportunity to modify any of your choices by using the blue "back" (undo) arrow to choose another answer. You will be taken back to the specific question and you may change your answer. Click "Submit" to record your new answer.



For each case the following questions will be asked and you will choose one of the numbered answers:

- Special Case
 - 1= No mass
 - 2=Cyst
 - 3=Complicated Cyst
 4=Clustered Microcysts
 5=Intraductal Mass
 - 6-Mass in or on skin
 - 7-Lymph node
 - 8=Not a special case
- Shape
 - 0-Special Case
 - 1=No Mass
 - 2=Oval or Gently Lobulated
 - 4=Irregular

3=Round

- o Margins
- 0=Special Case (e.g. intraductal mass)

- 1=No mass
- 2=Circumscribed
- 3-Not circumscribed
 - Includes indistinct, microlobulated, angular, speculated
- Orientation
 - 0=Special Case
 - 1=No mass
 2=Parallel
 - · 3-Not parallel (includes round)
- o Echogenicity
 - 0=Special Case
 - 1=No mass
 - 2=Anechoic
 - 3=Hyperechoic
 - 4=Complex (cystic and solid)
 5=Hypoechoic
 - 6=Isoechoic
 - · 7=Mixed hyper- and hypoechoic
- Posterior Features
 0=Special case
 - 1=No mass
 - 2=None
 - 3-Enhancement
 - 4=Shadowing
 5=Combined
- 5=Combined
 Calcifications
 - 1=None
 - 2=Macrocalcifications (> 0.5mm)
 - 3=Microcalcifications in a mass
 - · 4=Microcalcifications outside a mass
- Final Assessment
 - 1=Negative
 - 2=Benign
 - 3=Probably benign
 - 4=4A, Low suspicion, biopsy
 5=4B, Intermediate suspicion, biopsy
 - 6=4C, Moderate suspicion, biopsy
 - · 7=Highly suggestive of malignancy

Brightness/Contrast:

There are two ways to access the Brightness/Contrast window:

 Click the Brightness/Contrast icon (Yellow dot and half black, half white dot. Resembles brightness and contrast for your monitor) in the Imaging box.

OR

(2) Click the "Options" menu, then click "Brightness/Contrast"

A window with Brightness along the x-axis and Contrast along the y-axis will appear. Click and hold the left mouse button, then drag the mouse along the desired axis to adjust.

Zooming:

There are two ways to adjust the zooming level:

- Click the "Zoom In" icon (+, plus sign) in the Imaging box. Click the "Zoom Out" icon (-, minus sign) in the Imaging box.
- (2) If you have a scroll wheel on your mouse, you can scroll the wheel up and down to zoom in and out.

To return the image to the original window size, click the "Fit" button.

If your image is zoomed larger than the screen size, you can "Hand Pan" the image by clicking and holding down the left mouse button. The mouse icon will change to a hand. Then, move your mouse in the direction you wish the image to be moved.

Leaving the quiz:

The dataset will be stored only at the completion of a case. If you pause do so at the end of a case (once you hit "Submit these answers")

To exit the quiz and return at a later time, use the same ID as you did when you began the quiz. This will bring you back to where you left off.