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# Mark schemes

1.	(a)	potential axis: unit mV and suitable labelling of 0 and 1 for scale $\checkmark$		
		time axis suitable use of numbers from 0 to 0.6 / 1 $\checkmark$	2	
	(b)	Possible answers to include:	2	
		electrodes are not non-reactive 🗸		
		electrodes are not securely taped in place $\checkmark$		
		the patient is not relaxed or does not remain still $\checkmark$		
		the amplifier is not low noise $\checkmark$		
		the amplifier has damaged shielded leads / interference from other AC sources ✓ Any 3 points with reason and some extension to explain. Be aware of the section 3.1 in the instructions to examiners.		
		If more than 3 answers given remember		
		'right + wrong = wrong'	3	[5]
2	(a)	$t = (32.5 - 3.0) \times 10^{-6} (= 29.5 \times 10^{-6} \text{ s}) \checkmark$		
		1st mark is for correctly using the timing from the first and last reflection.	1	
			1	
		$s = vt = 1560 \times 29.5 \times 10^{-6} \checkmark (= 46 \times 10^{-3} \text{ m})$		
		ect for 2nd and 3rd mark if wrong reflections used.	1	
		Eyeball length = $\frac{46 \times 10^{-3}}{2}$ =23 × 10 <sup>-3</sup> $\checkmark$ m		

3rd mark is for dividing by 2 and is independent

(b) The mark scheme gives some guidance as to what statements are expected to be seen in a 1 or 2 mark (L1), 3 or 4 mark (L2) and 5 or 6 mark (L3) answer.

Guidance provided in section 3.10 of the 'Mark Scheme Instructions' document should be used to assist in marking this question.

Mark	Criteria
6	Select the B-scan, Cover all 3 areas in detail, referring to both scans in at least 2 areas, without error. It must relate to amniocentesis.
5	Select the B-scan, Cover all 3 areas, referring to both scans in at least 2 areas. May contain minor errors. It must relate to amniocentesis.
4	choose the B-scan Cover at least 2 areas, referring to both scans Or cover all 3 areas referring to one scan
3	Cover at least 2 areas referring to one scan Or Cover 1 area referring to both scans in detail It may or may not choose the B-scan.
2	Cover 1 area referring to both scans It may or may not choose the B-scan
1	Cover 1 area referring to one scan. It may or may not choose the B-scan
0	No relevant comments

### Difference between the A-scan and B-scan

- Multiple sensors in B-scan as opposed to one sensor in A-scan
- A scan intensity determines amplitude
- B scan intensity determines brightness

## Advantages/Disadvantages

## A-scan

- An A-scan only produces a graph
- Good for accurately determining distances (where a limited number of surfaces lie along a straight line)
- With complex structures it is difficult to identify which surface produces which echo
- The structures may not lie along one line

#### B-scan

- B-scan produces a picture
- A 2D cross section is obtained rather than a single line
- Allows the structures to be identified more easily
- Allows features that are not along one line to be identified
- Harder to accurately determine distances along a straight line

## Suitability

Why a B-scan is suitable

• Multiple features of needle, foetus, uterus and placenta require an image to identify

Why an A-scan is not suitable

- Multiple features of needle, foetus, uterus and placenta
- are complex structures
- which do not lie along a straight line
- cannot be easily identified on a graph

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#### Medical Physics - Biological Measurement and Non-ionising Imaging

3.

(a) The mark scheme gives some guidance as to what statements are expected to be seen in a 1 or 2 mark (L1), 3 or 4 mark (L2) and 5 or 6 mark (L3) answer.
Guidance provided in section 3.10 of the 'Mark Scheme Instructions' document should be used to assist in marking this guestion.

Mark	Criteria	
6	All 3 areas covered in some detail. 6 marks can be awarded even if there is an error and/or parts of one aspect missing.	
5	All 3 areas covered at least 2 in detail. Whilst there will be gaps, there should only be an occasional error.	
4	Two areas successfully discussed, or one discussed and two others covered partially. Whilst there will be several gaps, there should only be an occasional error.	
3	One area discussed and one discussed partially, or all three covered partially. There are likely to be several errors and omissions in the discussion.	
2	Only one area discussed, or makes a partial attempt at two areas.	
1	None of the three areas covered without significant error.	
0	No relevant analysis.	

Points to consider

How an ultrasound pulse is produced:

- alternating potential difference applied across the crystal
- causes crystal to expand and contract
- creating pressure waves in the crystal / plastic membrane
- frequency of alternating pd equal to that of crystal / resonant frequency of crystal
- which is above 20 kHz.

How the ultrasound reflection is detected:

- pressure wave in the crystal
- causes crystal to expand and contract
- which produces a potential difference across the crystal.

The same transducer acts as receiver as well as transmitter:

- short application of ac to produce short pulse
- use of backing material to damp and stop vibration of crystal
- crystal must stop vibrating before reflection reaches it.

(b) 
$$\lambda = \frac{c}{f} = \frac{1600}{1.0 \times 10^6} = 0.0016$$

Resolution = 1.6 mm  $\checkmark$ 

Allow 1 sf answer of 2 mm

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Medical Physics - Biological Measurement and Non-ionising Imaging