

## CONTINUING EDUCATION TEST #1

# Breast Tumor Scintigraphy

For each of the following questions, select the best answer. Then circle the number on the CE Tests Answer Sheet that corresponds to the answer you have selected. Complete the answer sheet. Keep a record of your responses so that you can compare them with the correct answers, which will be published in the next issue of *JNMT*. Answers to these test questions should be returned on the Answer Sheet no later than **November 15, 1996**. An 80% correct response rate is required to receive 1.0 CEH (Continuing Education Hour) credit for each article. SNM Technologist Section members can find their VOICE number on the upper left-hand corner of their *JNMT* mailing labels. If you've joined our Nonmember VOICE Tracking Program, please check the **NMVT** box on the Answer Sheet (no extra fee is required). Documentation will appear on your VOICE transcript which is issued in March of each year. Nonmembers who have not joined our Nonmember VOICE Tracking Program must mail a \$10.00 check or money order, made payable to SNM, along with the completed quiz. You will receive a certificate of completion indicating credit awarded for receiving a passing score of 80% or better.

**A.** Breast cancer is the most common visceral neoplasm affecting American women and the incidence is increasing.

- 101. true
- 102. false

**B.** Early breast cancer detection methods include which of the following?

- 103. screening mammography
- 104. breast self-examination
- 105. clinical breast examination
- 106. 103, 104 and 105

**C.** Breast neoplasms as small as 1–2 cm can be detected through good patient education and the performance of monthly breast self-examination.

- 107. true
- 108. false

**D.** Screening mammography's threshold for detection of breast lesions may be as low as \_\_\_\_\_.

- 109. 1 mm
- 110. 1 cm
- 111. 2 mm
- 112. 2 cm

**E.** Mortality in women over 50 yr old has been reduced 30% by early mammographic detection of breast tumors.

- 113. true
- 114. false

**F.** Breast tissue for evaluation of the presence of cancer can be acquired through \_\_\_\_\_.

- 115. fine-needle aspiration cytology
- 116. surgical open breast biopsy
- 117. stereotactic needle biopsy
- 118. 115, 116 and 117

**G.** A neoplastic cell has a \_\_\_\_\_ times higher rate of metabolism when compared to a normal cell.

- 119. 2–8
- 120. 4–10
- 121. 6–12
- 122. 8–14

**H.** Positioning is of major importance when performing breast scintigraphy.

- 123. true
- 124. false

**I.** Breast neoplasms will take up  $^{99m}\text{Tc}$ -sestamibi in the range of just above normal breast activity to more than \_\_\_\_\_ times that found in normal tissue.

- 125. 3
- 126. 5
- 127. 7
- 128. 9

**J.** Visualization of a breast tumor can be seen as early as \_\_\_\_\_ postinjection of  $^{99m}\text{Tc}$ -sestamibi.

- 129. 1–2 min
- 130. 3–4 min
- 131. 5–6 min
- 132. 7–8 min

**K.** The negative predictive value in the authors' laboratory for  $^{99m}\text{Tc}$ -sestamibi imaging of palpable breast lumps was \_\_\_\_\_.

- 133. 91.6%
- 134. 93.1%
- 135. 94.0%
- 136. 100%

**L.** Benign hypercellular breast lesions and inflammation may have false-positive uptake of  $^{99m}\text{Tc}$ -sestamibi.

- 137. true
- 138. false

**M.** Other radiopharmaceuticals used in breast scintigraphy include \_\_\_\_\_.

- 139.  $^{67}\text{Ga}$ -citrate
- 140.  $^{201}\text{Tl}$ -chloride
- 141.  $^{99m}\text{Tc}$ -labeled WBCs
- 142.  $^{18}\text{F}$ -FDG
- 143. 140 and 142

## CONTINUING EDUCATION TEST #2

### Calculation and Prevention of Radionuclide Intake

**N.** *Reasons to perform bioassays include which of the following?*

- 144. confirm contamination
  - 145. demonstrate adequate protection
  - 146. confirm violation of regulations
  - 147. demonstrate nonstochastic effects
  - 148. all of the above are correct
- 

**O.** *Stochastic effects are health effects that do not occur randomly and the severity of the effect varies with the radiation dose.*

- 149. true
  - 150. false
- 

**P.** *Stochastic effects have a dose threshold and are distinguished pathologically from randomly occurring disease.*

- 151. true
  - 152. false
- 

**Q.** *10 CFR 20 requires licensees to limit the occupational dose to individuals to a TEDE of \_\_\_\_\_.*

- 153. 0.05 Sv
  - 154. 0.50 Sv
  - 155. 5.00 Sv
  - 156. 50.0 Sv
  - 157. 500 Sv
- 

**R.** *10 CFR 20 requires licensees to limit the sum of the occupational dose to individuals from the DDE plus the CDE to any organ (except the skin, lens of the eye and extremities) to \_\_\_\_\_.*

- 158. 0.1 Sv
  - 159. 0.2 Sv
  - 160. 0.3 Sv
  - 161. 0.4 Sv
  - 162. 0.5 Sv
- 

**S.** *10 CFR 35 requires bioassays to be performed within 72 hr of administration of greater than \_\_\_\_\_ of <sup>131</sup>I.*

- 163. 3 mCi
  - 164. 5 mCi
  - 165. 10 mCi
  - 166. 30 mCi
  - 167. 50 mCi
- 

**T.** *ALI values for a given radionuclide can differ dramatically based upon the chemical form or the route of intake.*

- 168. true
  - 169. false
- 

**U.** *A stochastic ALI value is the amount of radionuclide intake that will result in a CEDE of \_\_\_\_\_.*

- 170. 0.01 Sv
  - 171. 0.05 Sv
  - 172. 0.10 Sv
  - 173. 0.50 Sv
  - 174. 1.00 Sv
- 

**V.** *The DAC is the concentration of radionuclides in air that, if breathed by reference man for 2000 hr under conditions of light work, would result in an intake of one ALI or an external exposure of \_\_\_\_\_.*

- 175. 0.01 Sv
  - 176. 0.05 Sv
  - 177. 0.10 Sv
  - 178. 0.50 Sv
  - 179. 1.00 Sv
- 

**W.** *The most common routes of radioiodine intake in nuclear medicine are by inhalation or ingestion.*

- 180. true
  - 181. false
- 

**X.** *Which of the following affect the volatility of <sup>131</sup>I?*

- 182. temperature
- 183. pH
- 184. contact with tap water
- 185. 182 and 184
- 186. 182, 183, and 184

**Answers to CE Article Test #1, June 1996**

The Continuing Education article "The Declared Pregnant Woman in Nuclear Medicine" by Daniel F. Kane, et al. was accompanied by a CE test. The correct answers are as follows.

- |        |        |        |        |        |        |
|--------|--------|--------|--------|--------|--------|
| A. 101 | D. 115 | G. 129 | J. 138 | M. 156 | P. 168 |
| B. 110 | E. 122 | H. 134 | K. 146 | N. 161 |        |
| C. 112 | F. 125 | I. 135 | L. 150 | O. 162 |        |

**Answers to CE Article Test #2, June 1996**

The Continuing Education article "Effective Interacting with the Terminally Ill Patient" by Kathy S. Thomas was accompanied by a CE test. The correct answers are as follows.

- |        |        |        |         |         |
|--------|--------|--------|---------|---------|
| Q. 169 | T. 181 | W. 194 | Z. 208  | CC. 216 |
| R. 176 | U. 184 | X. 197 | AA. 212 |         |
| S. 180 | V. 191 | Y. 203 | BB. 214 |         |

**CONTINUING EDUCATION TESTS #1 and #2**

**Answer Sheet**

|     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |
|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|
| 101 | 111 | 121 | 131 | 141 | 151 | 161 | 171 | 181 | 191 | 201 | 211 | 221 | 231 | 241 |
| 102 | 112 | 122 | 132 | 142 | 152 | 162 | 172 | 182 | 192 | 202 | 212 | 222 | 232 | 242 |
| 103 | 113 | 123 | 133 | 143 | 153 | 163 | 173 | 183 | 193 | 203 | 213 | 223 | 233 | 243 |
| 104 | 114 | 124 | 134 | 144 | 154 | 164 | 174 | 184 | 194 | 204 | 214 | 224 | 234 | 244 |
| 105 | 115 | 125 | 135 | 145 | 155 | 165 | 175 | 185 | 195 | 205 | 215 | 225 | 235 | 245 |
| 106 | 116 | 126 | 136 | 146 | 156 | 166 | 176 | 186 | 196 | 206 | 216 | 226 | 236 | 246 |
| 107 | 117 | 127 | 137 | 147 | 157 | 167 | 177 | 187 | 197 | 207 | 217 | 227 | 237 | 247 |
| 108 | 118 | 128 | 138 | 148 | 158 | 168 | 178 | 188 | 198 | 208 | 218 | 228 | 238 | 248 |
| 109 | 119 | 129 | 139 | 149 | 159 | 169 | 179 | 189 | 199 | 209 | 219 | 229 | 239 | 249 |
| 110 | 120 | 130 | 140 | 150 | 160 | 170 | 180 | 190 | 200 | 210 | 220 | 230 | 240 | 250 |

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VOICE No. \_\_\_\_\_ Or please check one:  NMVTP participant (no fee required)       Nonmember—\$10 check or money order enclosed

Return a copy of this answer sheet no later than November 15, 1996 to:  
 Continuing Education Coordinator, *Journal of Nuclear Medicine Technology*  
 Marcia Ferg, The Society of Nuclear Medicine, 1850 Samuel Morse Dr., Reston, VA 22090-5316.  
 FAX: (703) 708-9015.