CONTINUING EDUCATION TEST

Radioimmunoassay's Role in Patient Management

For each of the following questions, select the best answer. Then circle the reader service card number that corresponds to the answer you have selected. 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 the *Journal*. Answers to these test questions should be returned on the reader service card no later than December 1, 1991. Supply your name, address, and VOICE number in the spaces provided on the card. Your VOICE number appears on the upper left hand corner of your *Journal* mailing label. No credit can be recorded without it. A 70% correct response rate is required to receive 0.1 CEU credit for this article. Members participating in the continuing education activity will receive documentation on their VOICE transcript, which is issued in March of each year. Nonmembers may request verification of their participation but do not receive transcripts.

 A. The clinical value of a radio- immunoassay procedure is dependent on 162. the reflection of disease progression 163. the specificity 164. the quantity performed 165. the sensitivity 	E. Tumor markers have been developed for the more common types of cancers and include markers for carcinoma of the 182. lung 183. breast 184. thyroid 185. cervix	The RIA procedure of choice in the management of patients with breast cancer is 200. CA 15-3 201. CA 19-9 202. CA 125 203. CEA
166. only 162, 163, & 165 167. all of the above	186. brain 187. only 182, 183, & 185 188. only 182, 183, & 186	J. For determining true iron defi-
B. Tumor marker radioimmuno- assay procedures have recently been developed and they include 168. CEA 169. CA 19-9 170. PSA 171. CA-125 172. all of the above	F. The reason tumor markers are increasingly more important is because they can differentiate effects of the tumor. 189. True 190. False	ciency, a(n) RIA proce- dure is performed. 204. angiotension I 205. methotrexate 206. CA 19-9 207. ferritin
C. The RIA procedure that is use- ful for patients with tumors that are producing high levels of carcinoem- bryonic antigen is 173. CEA 174. CA 19-9 175. PSA 176. CA-125 177. CA 15-3	G. The PSA radioimmunoassay is used for the prognosis and manage- ment of cancer. 191. breast 192. prostate 193. cervical 194. lung 195. brain	 K. Renal arterial hypertension is differentiated by a(n) RIA procedure. 208. angiotension I 209. methotrexate 210. CA 19-9 211. ferritin
D. Statistically, one in five deaths in the United States is attributed to 178. heart disease 179. accidental death 180. drug induced death 181. cancer		 It is extremely important to provide to physicians timely methotrexate levels on chemotherapy patients because