Jeana Fleitz, M.Ed., RT(R)(M) "The X-Ray Lady" 6511 Glenridge Park Place, Suite 6 Louisville, KY 40222 Telephone (502) 425-0651

E-mail address xrayladyce@gmail.com Website www.x-raylady.com

Imaging Breast Cancer in At-Risk Populations

Part 1 1.	Males account for% of breast cancer cases.			
	a. b. c. d.	1 5 10 18		
2. The approximate chances of a woman 50 to 60 years old developin breast cancer is 1 out of:		proximate chances of a woman 50 to 60 years old developing invasive cancer is 1 out of:		
	a. b. c. d.	257 67 36 24		
Part 2 3. Inheritance of a genetic condition copy of a gene is referred to as:		ance of a genetic condition that occurs when a mutation is present in one f a gene is referred to as:		
	a. b. c. d.	a single nucleotide linkage transference autosomal recessive autosomal dominant		
4.	A nucle	eotide is a molecule consisting of a/an containing base.		
	a. b. c. d.	nitrogen hydrogen oxygen sulfide		
5.		morphism refers to a common mutation typically defined as an allele ncy of at least%.		
	a. b. c. d.	22 16 9 1		

6.	First-degree relatives are:		
	a. b.	parents siblings	
	c. d.	children of the person all of the above	
7.	The si	The single greatest risk factor for ovarian cancer is:	
	a. b. c. d.	increasing age family history of ovarian cancer consistent use of hormone replacement therapy (HRT) multiple pregnancies at a late age	
8.	When a parent carries an autosomal dominant genetic predisposition, e has a chance of inheriting the predisposition.		
	a. b.	10:10 25:25	
	c. d.	50:50 75:75	
9.	Germline refers to cells from which are derived.		
	a. b. c.	nerves muscles bones	
	d.	eggs or sperm	
10.	The Bi	RCA1 gene is located on chromosome:	
	a. b.	7 9	
	c. d.	13 17	
11.	. The BRAC2 gene is located on chromosome:		
	a. b.	7 9	
	c. d.	13 17	
12.	Li-Frau	umeni syndrome is due to mutations in the gene:	
	a. b. c. d.	BRCA1 BRCA2 PTEN TP53	

13.	It is estimated that% of the general population may be heterozygote carrier of ataxia telangiectasia (AT) mutations.	
	a. 1 b. 3 c. 5 d. 7	
14.	Peutz-Jeghers syndrome is related to mutations in the gene at chromosome 19p 13.3.	
	a. BRCA1 b. BRCA2 c. PTEN d. STK11	
15.	Breast cancer occurring in <i>BRCA1</i> mutation carriers is more likely to be all of the following, except :	
	 a. estrogen-receptor negative b. progesterone receptor negative c. borderline histopathology d. HER2/neu receptor-negative 	
16.	When comparing self-reported information with independently verified cases, the sensitivity of a history of ovarian cancer is%.	
	a. 20 b. 30 c. 60 d. 90	
17.	A test with high sensitivity has a false-negative rate.	
	a. highb. lowc. moderated. minus zero	
18.	Sporadic cancer refers to cancer developing in people who carry a high-risk mutation.	
	a. True b. False	
19.	Cumulative risk of breast cancer increases with all of the following, except:	
	 a. increasing age b. early menarche c. late menopause d. early first full-term pregnancy 	

20.	Since BRCA1/2 mutation carriers are heterozygotes, radiation sensitivity may occur only after:		
	 a. one or more full-term pregnancies b. a genetic mutation has damaged the normal copy of the gene c. a somatic mutation has damaged the normal copy of the gene d. the radiation exposure follows aggressive chemotherapy 		
21.	The risk of breast cancer increases by approximately 10% for each g of dail alcohol intake.	у	
	a. 10 b. 6 c. 2 d. 0.5		
22.	Before age years, the risk of developing epithelial ovarian cancer is remote, even in hereditary cancer families.		
	a. 55 b. 40 c. 35 d. 30		
23.	Factors associated with an increase in risk for ovarian cancer include all of the following, except :		
	 a. increasing age b. nulliparity c. bilateral tubal ligation d. menopausal use of hormone replacement therapy 		
24.	Ovarian cancer risk is reduced >% in women with documented BRCA1 or BRCA2 mutations who chose risk-reducing salpingo-oophorectomy (RRSO).		
	a. 90 b. 75 c. 50 d. 25		
25.	Generally, the Claus or Gail models should not be used for women who have both breast and ovarian cancer.		
	a. True b. False		
26.	Ashkenazi Jews are Jewish individuals from one of the major ancestral groups whose ancestors lived in:		
	 a. Germany b. Poland c. Russia d. All of the above 		

27.	The Gail model has been found to be reasonably accurate in all of the following, except :	
	a. b. c. d.	large groups of white women women compliant with breast screening women from same age-risk strata individual patients
Part 3 28.	After g	ender and age, the strongest known predictive risk factor for breast cancer
	a. b. c. d.	radiation exposure obesity long term hormone replacement therapy (HRT) positive family history
29.		on carriers who have a risk of developing breast cancer that may exceed omprise no more than % to% of all breast cancers.
	a. b. c. d.	1 – 2 5 – 10 25 – 30 45 – 50
30.	Hereditary breast cancer is characterized by early age at onset, on average 5 years earlier than in sporadic cases.	
	a. b. c. d.	6 10 15 20
31.	In families with both breast and ovarian cancer, the <i>BRCA1</i> gene appears to be responsible for up to% of the cases.	
	a. b. c. d.	90 70 50 30
32.		reast cancer, pancreatic cancer, and prostate cancer are more strongly ated with mutations in:
	a. BRCA1 b. BRCA2 c. TP53 d. PTEN	

33.	Mutations in the <i>BRCA2</i> gene are thought to account for approximately% breast cancer in families with multiple individuals affected by the disease.	
	 a. 15 b. 35 c. 55 d. 75 	
34.	The <i>BRCA2</i> gene is a large gene with exons that encode a protein of 3,418 amino acids.	
	a. 6 b. 12 c. 27 d. 42	
35. A variety of evidence now points to <i>BRCA1</i> and <i>BRCA2</i> being direct the DNA repair process.		
	a. True b. False	
36.	Nearly distinct mutations and sequence variations in the <i>BRCA1</i> and <i>BRCA</i> gene have already been described.	
	 a. 300 b. 500 c. 1000 d. 2000 	
37.	A higher rate of variant of uncertain significance (VUS) appears in:	
	a. Chineseb. Norwegiansc. Asiansd. African Americans	
38.	The transmission, together, of 2 or more genes on the same chromosome, as a result of their being in very close physical proximity to one another is referred to as:	
	 a. cosegregation b. collaboration c. penetrance d. confounding 	
39.	Approximately 1 in individuals in the general population may carry a pathogenic mutation in the <i>BRCA1</i> gene.	
	 a. 1000 b. 800 c. 400 d. 150 	

40.	specifi	effect occurs when a gene mutation is observed in high frequency in a ic population due to the presence of that gene mutation in a single ancestor mall number of ancestors.
	a. b. c. d.	linkage recessive Mendelian founder
41.		roportion of individuals carrying a mutation that will manifest the disease is ed to as the:
	a. b. c. d.	proband allele congregate penetrance
42.		dividual through whom a family with a genetic disorder is ascertained is ed to as:
	a. b. c. d.	proband allele congregate penetrance
43.	Among Ashkenazi Jewish men with breast cancer (regardless of age), the likelihood of having 1 of 3 founder mutations is 1 in:	
	a. b. c. d.	5 10 15 25
44.	The only model for estimating the likelihood of a <i>BRCA</i> mutation to in unaffected relatives, male breast cancer, bilateral breast cancer, and diagnosis for all affected individuals is the:	
	a. b. c. d.	Couch Shattuck-Eidens Frank Parmigiani
45.	Genet	ic testing for BRCA1 and BRCA2 has been available to the public since:
	a. b. c. d.	1978 1985 1996 2001

46.	A/An _	is a physical site or location of a specific gene on a chromosome.
	a.	contraband
	b. c.	exon locus
	d.	missense
47.		tive segments of DNA scattered throughout the genome in noncoding s between gene or within genes is called a:
	a. b. c. d.	microsatellite germline missense locus
48.	being t	equency with which a test result yields a negative result when the individual sested is actually unaffected and/or does not have the gene mutation in on is referred to as:
	a. b.	reliability representative
	C.	specificity
	d.	sensitivity
49.	cancer	ard to prognosis, a Norwegian and related studies reported that breast occurring in <i>BRCA1</i> mutation carriers were more likely to have all of the ng characteristics, except :
	a.	invasive
	b. c.	high grade low mitotic rates
	d.	estrogen receptor negative
50.		RCA2 founder mutation (999del5) gene accounts for nearly all hereditary cancer in:
	a.	Ireland
	b.	Iceland
	c. d.	Sweden Russia
51.		n cancer arising in women with <i>BRCA1</i> and <i>BRCA2</i> gene mutations is kely to be invasive:
	a.	dysgerminoma
	b. c.	granulosa cell Sertoli Leydig
	d.	serous adenocarcinoma

52.	Li-Fraumeni syndrome is characterized by:	
	a. b. c. d.	premenopausal breast cancer childhood sarcoma childhood brain tumors and leukemia all of the above
53.		udy of 3,228 women diagnosed with breast cancer before age 51, three er alleles in <i>CHEK2</i> contributed to 8% of early onset breast cancer in:
	a. b. c. d.	Russia Poland China Turkey
54.	All of	the following are characteristics of Cowden syndrome, except :
	a. b. c. d.	skin manifestations including multiple trichilemmonas, oral fibromas and papillomas thyroid disease both benign and malignant is more common in women 60 to 75 years of age excess of gastrointestinal malignancies
55.	5. Those affected with ataxia telangiectasia have a hypersensitivity to:	
	a. b. c. d.	shellfish radiation nitrates penicillin
56.	and bu	syndrome is characterized by melanocytic macules on the lips, perioral uccal regions and multiple gastrointestinal polyps.
	a. b. c. d.	Cowden Peutz-Jeghers Ataxia telangiectasia Li-Fraumeni
57.	ВАСН	11 is also known as:
	a. b. <i>c.</i> d.	STK11 PT53 BRIP1 BRCA1
58.		r to <i>BRIP1</i> and <i>BRCA2</i> , biallelic mutations in have also been shown to Franconi anemia.
	a. b. c. d.	CASP8 TGFB1 STK11 PALB2

		general population, strong evidence suggests that regular mammography ing of women aged 50 to 59 years' leads to a% to% reduction in cancer mortality.
	a. b. c. d.	5 – 15 25 – 30 45 – 50 60 –65
60.		ling to the reference, in one study mean tumor doubling time in <i>BRCA1/2</i> nutation carriers was days.
	a. b. c. d.	15 25 45 65
61.		ancer Genetics Studies Consortium task force has recommended for carriers of a <i>BRCA1</i> or <i>BRCA2</i> high-risk mutation that:
	a. b. c. d.	annual mammography should begin at age 25 to 35 years mammograms should be done at a consistent location when possible prior films should be available for comparison all of the above
62.	resona	combined studies for detection of hereditary breast cancer, magnetic ince imaging (MRI) identified% of the cancers as compared to 40% by lography.
	a. b. c. d.	82 75 60 35
63.		of the mammography detected cancers in women with a negative MRI r to be:
	a. b. c. d.	tubular mucinous medullary carcinoma ductal carcinoma <i>in situ</i>
64.		ening study comparing digital and routine mammography found that digital lography resulted in:

a.

b.

c. d. fewer recalls

lower cancer detection rates

higher cancer detection rates decrease in contrast resolution

65.	In a multicenter, breast cancer case-control study, among <i>BRCA1</i> mutation carriers, breastfeeding for 1 year or more was associated with approximately% reduced risk of breast cancer.	
	a. b. c. d.	15 25 30 45
66.		f oral contraceptives among <i>BRCA1</i> mutation carriers is associated with a ically significant 20% increase in breast cancer risk, particularly if use:
	a. b. c. d.	began after 1980 began after age 35 lasted for 5 or more years occurred when estrogen doses were relatively low
67.	Preve	National Surgical Adjuvant Breast and Bowel Project, Breast Cancer ntion Trial (NSABP-P1), tamoxifen was shown to reduce the risk of invasive cancer by%.
	a. b. c. d.	85 62 49 27
68.	According to data from the Prevention and Observation of Surgical End Points study group, of 105 mutation carriers who underwent bilateral risk-reducing mastectomy (RRM), the risk of breast cancer after a mean follow-up of 6.4 year was approximately reduced by%.	
	a. b. c. d.	90 80 70 60
69.	reduct	general population, removal of both ovaries has been associated with a ion in breast cancer risk of up to% depending on parity, weight, and artificial menopause.
	a. b. c. d.	95 75 55 35
70.		en with founder Ashkenazi Jewish (AJ) mutations were over times more han women without mutations to develop contralateral breast cancer.
	a. b. c. d.	3 5 10 15

71.	The Cancer Genetics Studies Consortium Task force recommends that female carriers of a <i>BRCA1</i> high-risk mutation undergo annual or semiannual scree using transvaginal ultrasound (TVUS) and serum CA 125 levels beginning at to to years.	
	a. b. c. d.	15-20 25-35 40-45 50-65
72.	72. Among the general population, parity decreases the risk of ovarian canc%.	
	a. b. c. d.	15 25 45 65
73.	The av	verage age of ovarian cancer in BRCA1 mutation carriers is:
	a. b. c. d.	24 35 48 56
Part 6 74.	Although 78% of test decliners/deferrers felt that their health was at risk, they reported that learning about their <i>BRCA1/2</i> mutation status would cause them worry most (76%) about:	
	a. b. c. d.	loss of their job their own health their life insurance their children's health
75.	5. The more important factor in the decision to decline genetic testing was cit	
	a. b. c. d.	apprehension about the impact of the test results financial costs associated with counseling and testing time required to travel to a genetic clinic work, family, and social obligations
76.	_	eral tendency to overestimate inherited risk of breast and ovarian cancer een noted in at-risk populations.
	a. b.	True False

77.	A qualitative study of 22 men from 16 high-risk families in Ireland revealed that their decision to undergo genetic testing was related to whether:		
	a. b. c. d.	their insurance company would pay for the testing male breast cancer had occurred in their family they had a daughter or daughters their mother had been diagnosed with breast or ovarian cancer	
78.	Across all studies, the rate of <i>BRCA</i> test results to at-risk children ranging in age from 4 to 25 years is approximately%.		
	a. b. c. d.	15 25 50 75	
79.	Testing for <i>BRCA1/2</i> has been almost universally limited to adults older than 18 years.		
	a. b.	True False	
80.	Eugen	ics refers to the use of genetic knowledge to:	
	a. b. c. d.	select a genetic counselor determine the best course of treatment regulate parenthood share the information with extended family	
81.	In a study of healthy women who underwent risk-reducing mastectomy, 76.6% reported:		
	a. b. c. d.	either no change in body image or improvement in body image worsening self-image after surgery increased distress levels after surgery worsening sexual life	
82.	In a retrospective questionnaire study of 583 women with a personal history of breast cancer and who underwent contralateral prophylactic mastectomy, overall % of all participants stated that they were savery satisfied.		
	a. b. c. d.	96 83 70 54	

Part 7 83.		the following are true about HER2-positive breast cancer, except:
	a. b. c. d.	is fast growing is considered aggressive the drug trastuzumab is effective as a treatment about 50% to 75% of women with breast cancer have HER2-positive tumors
84.	A 2+ score on the immunohistochemistry (IHC) test is:	
	a. b. c. d.	HER2-negative HER2-positive borderline or equivocal indeterminate
Part 8	3	
85.		breast Cancer Risk Assessment tool only calculates risk for women of age or older. 20 25 30 35
Part 9 86.	9 Candidates for genetic counseling include people with:	
	a. b. c. d.	multiple primary cancers cancers associated with birth defects a diagnosis of cancer at an atypically young age all of the above
87.		ndardized graphic representation of family relations in which patterns of se transmission are tracked is referred to as a:
	a. b. c. d.	cosegregation familial track pedigree kindred
88.		amily history having a minimum of generations will help identify tance patterns.

a. b. c. d.

89.	The genetic relatedness between individuals descended from at least one common ancestor is referred to as:
	 a. consanguinity b. cosegregation c. de novo d. microsatellite
90.	In taking a family history, for any relative not affected with cancer, collect information regarding:
	 a. current age or age at death b. if deceased, cause of death c. whether routinely screened for cancer d. all of the above
91.	The manner in which a genetic trait or disorder is passed from one generation to the next is referred to as:
	 a. mode of inheritance b. de novo mutation c. genomic imprinting d. penetrance
92.	All of the following are examples of diseases that fit the Mendelian trait inheritance pattern, except :
	 a. sickle-cell anemia b. Tay-Sachs disease c. cystic fibrosis d. diabetes
93.	Non-Mendelian forms of inheritance include all of the following, except : a. autosomal dominant b. chromosomal c. multifactorial d. mitochondrial
94.	When the affected person has one copy of a mutated allele and one allele is functioning normally, the type of inheritance is referred to as:
	 a. chromosomal b. X-linked c. autosomal dominant d. multifactorial
95.	In X-linked recessive inheritance, male and female offspring have a% chance of inheriting the mutated allele from the carrier.
	a. 75 b. 50 c. 25 d. 5

96.	Chromosomal disorders generally are not inherited conditions rather they occur as error in meiosis at the time of concept of a given individual.	
	 a. autosomal dominant b. multifactorial c. de novo d. X-linked 	
97.	Examples of chromosomal disorders with increase risk of malignancy include leukemia associated with:	
	 a. Down syndrome b. Parkinson's disease c. Tay-sachs disease d. spina bifida 	
98.	Disease inheritance caused by genetic and environmental factors is referred to as:	
	 a. de novo b. multifactorial c. X-linked d. autosomal recessive 	
99.	The occurrence of 2 or more cell lines with different genetic or chromosome makeup within a single individual or tissue is referred to as:	
	 a. mosaicism b. de novo b. consanguinity c. genomic imprinting 	
100.	When beginning a risk assessment counseling session, the most important factor in determining decisions about screening and other risk-reduction strategies may be the:	
	 a. counselors attitude about risk-assessment b. availability of testing laboratories c. the person's perception of his or her cancer risk d. ability to financially pay for testing and counseling 	
101.	The statement "you have a 3-fold increased risk of colorectal cancer" is an example of a risk estimate.	
	a. assumedb. perceivedc. relatived. absolute	

102.	02. Potential benefits and burdens of a negative test result when a disease- mutation has been identified in the family, include all of the following, ex	
	a.	reassurance and reduction of anxiety about personal cancer risk due to heredity
	b. c. d.	relief that children are not at increased risk adjustments to the change in expected life course potential insurance, employment, or social discrimination
103.	03. The primary component of the posttest session is:	
	a. b. c. d.	result notification informing extended family members determining level of risk deciding on available interventions
Part 1	n	
104.	Estima minim	ates based on the International HapMap Project Phase 2 indicate that a um of carefully chosen single nucleotide polymorphisms (SNPs) would uired to conduct a dense whole genome SNP scan.
	a. b. c. d.	10,000 100,000 350,000 550,000
Part 1 105.		
	a. b. c. d.	3 5 7 9
106.	The ex	Recutive director of the NCRP cited as a preventable driver of the tic increase in radiation exposure.
	a. b. c. d.	emergency room visits defensive medicine self referral aging population
107.	 Scientific committees starting in thes evaluated risk estimates workers. 	
	a. b. c.	1930 1940 1950 1960

108.	The degree to which a diagnostic study accurately reveals the presence or absence of disease in a patient is referred to as diagnostic:	
	a. accuracyb. efficacyc. efficiencyd. precision	
109.	The Mammography Quality Standards Act (MQSA) regulations requires that the radiation dose to the breast must not exceed rad.	
	a. 0.1 b. 0.3 c. 1.0 d. 1.5	
110.	As discussed in the International Commission on Radiation Protection (ICRP) publication number 84, the radiation risk is highest during organogenesis, a period from to weeks after conception.	
	a. 2-7 b. 10-12 c. 15-20 d. 24-28	
111.	The NCRP guidelines recommend that a monthly equivalent radiation dose limit for the embryo should not exceed rem once the pregnancy becomes known.	
	 a. 0.05 b. 1.0 c. 1.5 d. 2.0 	
112.	The glandular breast dose is approximately% of the entrance skin exposure in mammography.	
	a. 3 b. 5 c. 10 d. 15	
113.	The best measurement indicator of risk is:	
	 a. mean glandular breast measurement b. mid-line measurements c. in-air exposure at the surface of the breast d. surface dose 	

114.	The failure to maintain consistent exposures when extremely short or long exposure times are used is known as law failure.
	 a. linearity b. reciprocity c. heel-effect d. gravitational
115.	The type of filter usually used for small and average sized breast thickness is:
	 a. aluminum b. tungsten c. rhodium d. molybdenum
116.	An effect, which allows for greater radiation intensity on the cathode side of the x-ray tube, is referred to as:
	 a. reciprocity b. heel effect c. line focus principle d. inverse square law
117.	All of the following are true regarding breast compression, except:
	 a. creates a more uniform tissue thickness b. results in an increased radiation dose c. allows for a more uniform image density d. improves image quality
118.	In magnification mammography, the radiation dose to the breast:
	 a. increase b. decreases slightly c. decreases drastically d. remains the same
119.	In mammography, CAD detection schemes are capable of detecting% to% of breast cancers.
	 a. 25-35 b. 40-50 c. 60-75 d. 80-90
120.	All of the following are true regarding CAD, except: a. the purpose of CAD is to identify and highlight hard-to-find features and anomalies on medical images
	the ACR recommends that all mammography CAD algorithms should use "for presentation" image datain the future certain CAD schemes are expected to increase the
	radiologists' reading time d. breast advocacy groups recognize the benefits of CAD