

# Breast Cancer Screening

🕒 Expires Thursday, October 31, 2019

📖 Nursing

👤 John Link , M.D.

---

## Examination

- 1. The incidence of breast cancer has leveled off at about \_\_\_\_\_ per 100,000 population per year.**
  - a. 20 cases
  - b. 120 cases
  - c. 200 cases
  - d. 250 cases
  - e. 320 cases
  
- 2. The two most definite major risk factors for developing breast cancer are**
  - a. radiation exposure and alcohol consumption
  - b. late onset of menopause and oral contraceptive usage
  - c. obesity and long term estrogen exposure
  - d. the BRCA1 and BRCA2 genes
  - e. being a woman and aging
  
- 3. All of the following endocrine factors are independently associated with an increased risk for developing breast cancer EXCEPT**
  - a. late age of menarche
  - b. late age at first pregnancy
  - c. nulliparity
  - d. late onset of menopause
  - e. early age of menarche
  
- 4. Large studies that involve the use of estrogen for 10 or more years have found that the risk of developing breast cancer is about**
  - a. double
  - b. triple
  - c. quadruple
  - d. 5 times higher
  - e. 10 times higher
  
- 5. Approximately \_\_\_\_ of breast cancer is caused by inherited genetic abnormalities.**
  - a. 60%
  - b. 40%
  - c. 30%
  - d. 25%
  - e. 10%
  
- 6. Breast Cancer Gene 2 (BRCA2) resides on the \_\_\_\_\_ chromosome.**
  - a. 8th
  - b. 17th
  - c. 13th
  - d. 11th
  - e. 5th

7. Regarding the BRCA1 and BRCA2 genes, all of the following are true EXCEPT
- Both genes are associated with an increased risk of developing breast cancer (60% to 80%) usually before the age of 60.
  - There is also an increased risk of developing ovarian cancer (15% to 30%) in women who carry either of these genes.
  - Both genes are autosomal recessive.
  - They can be passed through the father's as well as the mother's side of the family.
  - The BRCA1 gene is also associated with Ashkenasi Jewish families.
8. The incidence of breast cancer varies widely around the world with the highest rates seen in affluent and westernized countries and the lowest rates seen in the Asian countries. The environmental factor that is responsible for this phenomenon is
- dietary fat
  - unknown
  - excessive alcohol consumption
  - radiation fallout from the atomic bombs
  - obesity
9. African-American women have NOT experienced the same drop in mortality when compared to White woman and this may be explained by
- the lack of tamoxifen usage
  - an increased exposure to high dose radiation
  - a lower dietary fat intake
  - the lack of consistent mammography screening in this population
  - the lack of adjuvant chemotherapy
10. If a breast cancer can be found before it becomes larger than 1 cm in size, the 20-year disease free survival exceeds
- 40%
  - 50%
  - 75%
  - 80%
  - 95%
11. The ten-year survival for cancers with negative lymph nodes is greater than
- 40%
  - 50%
  - 75%
  - 80%
  - 95%
12. There has been some controversy over the age at when screening should start, but there is now general consensus to begin at age
- 30 and repeat annually thereafter
  - 30 and repeat semi-annually thereafter
  - 40 and repeat annually thereafter
  - 40 and repeat semi-annually thereafter
  - 50 and repeat annually thereafter
13. Approximately \_\_\_\_\_ of palpable breast cancers are not visible on the two-view mammogram and these are considered to be the "false negative" group.
- 1%
  - 10%
  - 18%

- d. 21%
  - e. 25%
14. Ductal carcinoma in situ (DCIS) accounts for about \_\_\_\_\_ of mammographically detected cancer.
- a. 15% to 20%
  - b. 5% to 10%
  - c. 20% to 25%
  - d. 1% to 5%
  - e. 25% to 30%
15. A stellate or spiculated mass with ductal calcifications seen on mammogram is most often associated with
- a. ductal carcinoma in situ
  - b. invasive ductal cancer
  - c. a benign process
  - d. infiltrating lobular carcinoma
  - e. medullary carcinoma
16. Mammographic accuracy can be improved by having two independent readings of each screening study, which increases the number of discovered cancers by approximately
- a. 50%
  - b. 40%
  - c. 30%
  - d. 20%
  - e. 10%
17. The use of stereotactic localization and biopsy of small stellate lesions or areas with indeterminate calcifications that are not seen with the ultrasound is a method of management that has markedly reduced the
- a. incidence of death related to medullary carcinoma of the breast
  - b. need for MRI or PET scanning techniques
  - c. number of open surgical biopsies for benign lesions
  - d. incidence of death related to ductal carcinoma of the breast
  - e. need for special magnification x-rays known as mags
18. There are a number of advantages to having a preoperative needle diagnosis of cancer, which include all of the following EXCEPT
- a. helps determine how long the surgical procedure will take.
  - b. helps the surgeon plan the appropriate operation.
  - c. decreases the need for doing a second operation to clear involved margins.
  - d. helps the surgeon determine if lymph node sampling is indicated.
  - e. decreases the need for doing a second operation to do lymph node sampling.
19. Regarding digitalization of mammographic images, all of the following statements are true EXCEPT
- a. it allows for manipulation of the images
  - b. it allows for image transmission
  - c. it allows for more accuracy, which has been demonstrated in randomized trials
  - d. presently, its cost precludes a rapid conversion from traditional film mammography
  - e. it allows for better storage
20. Present studies are looking at the ability of \_\_\_\_\_ in imaging the axilla for possible tumor extension or nodal involvement.
- a. magnetic resonance imaging (MRI)

- b. ultrasound
- c. "tagged" antibodies
- d. mags
- e. positron emission tomography (PET scanning)



©2018 All Rights Reserved, e-EdCredits.com