

Wrist fusion

Earn CE credits at home

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1.	Diagnosis of rheumatoid arthritis does	6.	Thecoordinates the move-
	not involve:		ment of the distal and proximal rows.
	Reviewing family history		Radius c. Hamate
b.	Examining joints for inflammation and	b.	Scaphoid d. Carpal
	deformity		
c.	Blood tests	7.	Carpal bones connect the
d.	Stress tests		andto the bones in
			the hand.
2.	A/Anutilizes a sterile	a.	Capitate and trapezium
	needle and syringe to drain joint fluid.		Scaphoid and pisiform
a.	Arthrocentesis		Radius and ulna
b.	Arthroscopy	d.	Trapezoid and lunate
c.	Spinal tap		
d.	Synovectomy	8.	Second-line drugs include all but:
		a.	Cortisione
3	develops during	b.	Methotrexate
	the early, acute inflammatory stage.		
a.	Subluxation of the ulna	d.	Adalimumab
b.	Intrinsic contracture		
c.	Fixed DRUJ	9.	If theis not fused, a
d.	Bony compression		patient will have continued rotation in
	,		the hand,
4.	bones are the long	a.	Radius c. Ulna
	bones in the palm.		Hamate d. Lunate
a.	Phalanges c. Carpal		
	Trapezium d. Metacarpal	10	. Fusing wrist bones together may:
			Prevent deformity

b. Eliminate pain

d. All of the above

Mark one box next to each number. Only one correct or best answer can be selected for each question.

c. Improve alignment

a	b	C	d		a	b	C	d
				6				
				7				
				8				
				9				
				10				
]					6			

a. Scaphoid

b. Lunate

5. The proximal row does not include the:

c. Trapezoid

d. Pisiform

 11. The intraoperative phase of a wrist fusion begins with a: a. Dissection down the extensor retinaculum b. Opening of the radiocarpal joint c. Dorsal, longitudinal incision over Lister tubercle d. Synovectomy 12. Types of NSAIDS are: a. Salicylates b. Traditional NSAIDS 	 16. Steroids are used to alleviate: a. Lupus b. Rheumatoid arthritis c. Vasculitis d. All of the above 17stimulate or restore the ability of the immune system to fight disease or infection. a. Analgesics b. Corticosteroids 	
c. Cox-2 selective inhibitorsd. All of the above	c. BRMs d. Cox-2	
 13. Prostaglandins do all but: a. Promote inflammation b. Facilitate the function of blood platelets c. Protect the stomach lining d. Halt joint damage 14. Disease-modifying anti-rheumatic drugs are effective in a. Rheumatoid arthritis b. Psoriatic arthritis c. Ankylosing spondylitis d. All of the above 15 is a hormone produced in the 	 18block the Cox enzymes and reduce prostaglandins. a. Steroids	
adrenal gland. a. Calcitonin c. Cortisol	b. Pyramidalc. Strap	
b. Thyroxine d. GnRh	d. Cremaster	
297 SEPTEMBER 2008 PART 2 OF 2 Wrist fusion	abcd abcd	
Wrist rusion 11	16	

 $\label{lem:mark-one-box-next} \mbox{Mark one box next to each number.} \mbox{ Only one correct or best answer can be selected for each question.}$



Pain management for patients with a substance abuse history

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1.	Health care workers should be
	cautious when prescribing opioids to

- a. Transplant recipients
- b. Cardiac patients
- c. Diabetic patients
- d. Recovering addicts
- 2. One component of pain is _
- a. Physical
- c. Pain scale
- b. Pre-existing
- d. Opioids
- 3. The emotional components of pain
- a. Anger
- b. Sadness
- c. Depression
- d. All of the above
- 4. Acute pain in postoperative surgical patients is due to:
- a. Emotional distress
- b. Preexisting disease
- c. Surgical procedure
- d. A combination of B and C
- leads to a rise in heart rate, increased oxygen consumption and overall cardiac workload.
- a. Opioid prescription
- b. Unrelieved pain
- c. Arterial blockage
- d. Intoxication

- is a chronic, relapsing and treatable disease characterized by lack of control over consumption and compulsive use despite harmful consequences.
- a. Addiction
- c. Crohn's
- b. Diabetes
- d. Arthritis
- 7. The most important step in proper postoperative pain management is:
- a. Administration of prescription drugs
- b. Maintaining the dopamine pathway
- c. Proper preoperative assessment
- d. Understanding and treating a patient's addiction
- 8. An example of a pain assessment tool is a:
- a. Numeric Scale
- c. Picture scale
- b. Visual analog scale d. All of the above
- 9. A patient's altered level of consciousness in the acute postoperative phase of care due to intraoperative anesthetics makes it hard to successfully administer:
- a. An IV drip
- c. A pain assessment
- b. Oral analgesics d. All of the above
- 10. Physical indications of pain in the acute postoperative setting include:
- a. Sweating
- b. Elevated heart rate
- c. Trouble moving/taking deep breaths
- d. All of the above

299 NOVEMBER 2008 2 CE CREDITS PART 1 OF 2										
Pain management for patients		a	b	C	d		a	b	C	d
with a substance abuse history	1					6		\Box		
☐ Certified Member ☐ Certified Nonmember	•	_	_	_	_	U	_	_	_	_
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Address	4					9				
City StateZIP	5					10				
Telephone	Mark	one box ne	ext to each	number.	Only one o	orrect or best answe	er can be s	selected fo	or each que	estion.

11. One way to help ensure postoperative pain	16	. Methad	lone is	used ir	1 the tre	atment of a	ddic-					
management for a patient with a history of		tion to:										
opioid addiction is:	a.	Opiates										
a. Obtain a preoperative substance abuse history	b.	Alcohol										
b. Consult an addictionologist	C.	Metham	npheta	mines								
c. Administer frequent pain scale tests	d.	All of th	e abov	e								
d. Begin a preoperative pain management regi-												
men						se include:						
		Impairs	_									
12. Which of the following is not an alternative		Debilita	-	owsine	ess.							
pain treatment?		Liver da	_									
a. Electro-shock therapy	d.	Methad	one ha	s no sei	rious sid	e effects						
b. Local and regional anesthesia												
c. Epidural blocks	18	•	•			, W						
d. Local pain pumps				ohoric l	high ass	ociated witl	n					
		drug us										
13. Postoperative fears for opioid-dependent		Epineph										
patients may include:		Dopami										
a. Being judged by the care giver		Endorph										
b. Suffering a relapse into drug use	d.	Morphir	ne									
c. Not receiving enough pain medication												
d. All of the above	19	-	•			t for a subst	ance					
		abuser										
14. Blocking the action of cyclooxygenase and		The pati		-								
inhibiting prostaglandin production can be		The pati		ecovery	history							
accomplished with:		A full ph	•									
a. Steroidal treatment	d.	All of th	e abov	e								
b. A Clonodine patch							_					
c. NSAID therapy	20			-		large doses	have					
d. All of the above		a highe										
		Pain thr										
15is a synthetic narcotic used to treat		Drug-se	-	oehavid	or							
opioid addiction.		Tolerand										
a. Heroin c. Methadone	d.	All of th	e abov	e								
b. Clonodine d. Prednisone												
299 NOVEMBER 2008 PART 2 OF 2		a	b	c	d		a	b	c	d		
Pain management for patients		u	U		u		a	D		u		
with a substance abuse history	11					16						
	• •	_	_	_	_	10	_	_	_	_		
	12					17						
	12	_	_	_	_	17	_	_	_	_		
	13					18						
	13					18						



Drug discovery, development and approval processes

Earn CE credits at home

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- 1. The drug sildenafil citrate (Viagra®) was originally developed to treat ____.
- **a.** Angina
- **b.** Erectile dysfunction
- **c.** Hypertension
- d. Glaucoma
- 2. A drug containing active molecules that have never been included in another new drug application is called
- **a.** A new molecular entity
- **b.** An original compound
- c. A unique chemical compound
- **d.** A prototype
- 3. Which is not a principal concept affecting drug interaction?
- a. Onset
- **b.** Peak effect
- c. Duration of action
- **d.** Frequency of future doses
- 4. ____studies encompass the entire process of the drug within the body.
- **a.** Toxicology
- c. Post-clinical
- **b.** Pharmacokinetic **d.** Biotransformation
- 5. ____studies determine the dosage and safety of the drug for human use.

1

2

- **a.** Toxicology
- **c.** Post-clinical

- **b.** Pharmacokinetic **d.** Biotransformation

- 6. Toxicology studies are used to determine:
- a. Toxic, side and adverse effects
- **b.** Reversal agents
- c. Addictive properties
- d. All of the above
- 7. _____denotes a study when subjects and administrators are unaware of grouping status.
- a. Single blind
- b. Double blind
- c. Placebo
- d. None of the above
- 8. A written plan of action that follows the scientific process is a .
- **a.** Theory
- **b.** Hypothesis
- c. Protocol
- d. Trial
- 9. Examples of clinical safeguard trials include:
- a. Informed Consent
- **b**. Audits
- c. Institutional review boards
- **d.** All of the above
- 10. Human trials have phases.
- **a.** 2
- **c.** 4
- **b.** 3
- **d.** 5

301 JANUARY 2009 2 CE CREDITS PART 1 OF 2

Drug discovery, development and approval processes

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b C

d

- 7

b

C

d

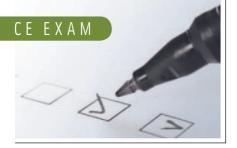
- 10
- Mark one box next to each number. Only one correct or best answer can be selected for each question.

	_contains all information known	10		_			ıa iaentiiyi	ing			
about a new	-		_			urposes					
a. New drug ap	•					Phase 3					
	ıg administration (FDA)	b.	Phase 2		d.	Phase 4					
	ug evaluation and research (CDER)										
d. Center for dis	sease control (CDC)	17		•	-		ıls is usuall	y a			
				-			ntrol trial.				
•	alid foryears from the		Phase 1								
-	e of application.	b.	Phase 2		d.	Phase 4					
	c. 20										
b. 15	d. 25	18			•	•	nical trials a	are			
			current	tly und	erway	worldwi	de?				
	istinguishes the source of goods of	f a.	50-55,0	000							
one party fr	om those of another.	b.	55-60,0	000							
a. Phrase		c.	60-65,0	000							
b. Symbol		d.	65-70,0	000							
c. Design											
d. Trademark		19	One of	the big	gest le	gal chall	enges in cli	inical			
			trials is			<u> </u>	-				
14. A new drug	application is filed with the FDA at	. a.	Luring								
the end of_			Misrepr	•							
	c. Phase 3		Clarity								
b. Phase 2	d. Phase 4	d.	FDA reg	ulatior	ns and s	afeguard	ls				
15 is cond	ucted on a small group of people	20). Increas	ing leg	jal thre	ats may	lead to a de	ecline			
(20-80).			in								
a. Phase 1	c. Phase 3	a.	Quality								
b. Phase 2	d. Phase 4		Willing								
			Clinical								
		d.	Market	able dr	ugs						
	NUARY 2009 PART 2 OF 2					٠			 .		
	ery, developmemt		a	b	C	d		a	b	C	d
and approv	al processes	11					16				
		••	_		_	_		_	_	_	_
		12					17				
		12	J	_	_	_	17	_	_	_	_
		13					18				

14

15

20



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Wound Management

306 **JUNE 2009** 2 CE credits

1.		und to	heal can result	ь.	is cla		-
	in				•	-	of wound healing.
a.	Additional surg			a.	Contraction		Hemostasis
b.	Longer hospita	_		b.	Proliferation	d.	Maturation
C.	Long-term disa	•	J				
d.	All of the above	9		7.	-	-	led as the first line
					of defense agair	ıst in	fection at the
2.			cal incision will be		wound site.		
	repaired by		·	a.	Neutrophil leuc	ocyt	es
a.	Primary intenti			b.			
b.	Secondary inte			C.	Eosinophils		
C.	Polyglactin sut	ure		d.	Monocytes		
d.	Adhesive strips	ò					
				8.		•	ds known as
3.	Regeneration a	nd re _l	pair of a pressure		are vital for cell	-to-	cell and tissue
	ulcer is an exam	ıple o	f		adhesion.		
a.	Primary intenti	on		a.	Fibroblasts	c.	Electrolytes
b.	Secondary inte	ntion		b.	Proteoglycans	d.	Glycoproteins
c.	Granulation						
d.	Epithelialisatio	n		9.	By keeping a wo	und	moist,
				a.	Infection is mor	e lik	ely
4.	The proliferation	n pha	se of healing	b.	Healing time is	prolo	onged
	includes		_•	c.	Healing rates in	crea	se
a.	Inflammation	c.	Contraction	d.	Scarring is incre	ased	d
b.	Granulation	d.	B&C				
				10.	. Spillage of bile	durir	ıg a cholecystectom <u>ı</u>
5.	The cessation of	fblee	ding following an		is classified as a		wound.
	injury is		_•	a.	Clean		
a.	Contraction	c.	Hemostasis	b.	Clean/Contamir	nated	d
b.	Proliferation	d.	Maturation	c.	Contaminated		
				d.	Dirty/Infected		

WOUND MANAG	EMENT	PART 1 OF 2	306	J	JNE	2009	2 CE	credit	;				
☐ Certified Member ☐	Certified N	onmember			a	b	С	d		a	b	С	d
☐ My address has changed	d. The addre	ss below is the new address.	1	ı					6				
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Address			4	1					9				
City		State Zip		5					10				
Telephone		State Zip				xt to each			stad for	oach au	oction		

11	One intrinsic fac	tora	ffecting wound	16	is ann	ther	critical nutrient for
	healing is		-	-0.	collagen synthes		circum matricine roi
a.	Wound perfusio	n		a.	Iron	c.	Vitamin C
b.	Radiotherapy			b.	Zinc	d.	All of the above
c.	Medication						
d.	Wound infection	1		17.	Attributes of a si	ırgio	cal dressing include
					the ability to		
12.	One extrinsic fac	tor a	ffecting wound	a.	Enable gaseous	excl	nange
	healing is		•	b.	Maintain a dry e	nvir	onment
a.	Disease	c.	Oxygen tension	c.	Compress the wo	ound	I
b.	Age	d.	Radiotherapy	d.	Adhere to the sk	in	
13.	Surgical patient	s sho	uld eat within	18.	Low-cost, transp	arei	nt adhesive film
			l clinical outcome.		dressings are ide		
a.	6	c.	24	a.	Infected wounds	6	
b.	12	d.	48	b.	Straight forward	sur	gical wounds
				c.	Acute surgical w	oun	ds
14.	is a cr	itica	l nutrient in opti-	d.	Nonsurgical wou	ınds	
	mizing the tensi	e str	ength of new tissue.		-		
a.	Carbohydrate			19.	Factors to consid	ler w	hen selecting a
b.	Protein				wound dressing	inclı	ıde
c.	Fat			a.	Level of exudate	25	
d.	Vitamin A			b.	Depth of the wor	und	
				c.	Cost		
15.	is a	criti	cal nutrient for	d.	All of the above		
	collagen synthes	is.					
a.	Vitamin A	c.	Vitamin B	20.	A mild to modera	ite a	mount of exudate
b.	Vitamin E	d.	Vitamin K		requires a		dressing.
				a.	Alginate		
				b.	Simple adhesive	filn	1
				c.	Hydrocolloid dre	essir	ng

d. Adhesive film/foam

WOUND MANAGEMENT PART 2 OF 2

	a	b	С	d		a	b	С	d
1					6				
2					7				
3					8				
4					9				
5					10				

Mark one box next to each number.



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Maslow's Hierarchy of Needs

1.	Maslow developed the concept for the	6.	Needs that must occur for the body to
	hierarchy of needs by observing		survive areneeds.
a.	Kurt Goldstein c. Monkeys	a.	Safety c. Belongingness
b.	His students d. Infants	b.	Esteem d. Physiological
2.	Based on observed reactions, the most	7.	The body regulates itself by
	important need in monkeys is	a.	Controlling its temperature
a.	Water	b.	Counterbalancing hormones
b.	Food	c.	Homeostasis
c.	Play	d.	All of the above
d.	None of the above		
		8.	Fear can prevent an individual from
3.	Thelevel of the pyramid		fulfillingneeds.
	addresses the need of being.	a.	Esteem
a.	Safety needs	b.	Belongingness
b.	Self-actualization	c.	Safety
c.	Esteem needs	d.	Physiological
d.	Physiological needs		
		9.	Belongingness needs can be influenced
4.	needs make up the four lower		by
	components of Maslow's pyramid.	a.	Socially-accepted behaviors
a.	Deficit	b.	Education levels
b.	Being	c.	Economic status
C.	Safety	d.	All of the above
d.	Esteem		
		10.	. According to Maslow, a child who grows
5.	Drawing conclusions about spirituality is		up in an affluent neighborhood is
	an example ofneeds.		likely to join a gang.
a.	Deficit	a.	More
b.	Being	b.	Less
C.	Safety	c.	Just as
d.	Esteem	d.	Cannot determine

MASLOW'S HIERARCHY OF NEEDS 308 AUGUST 2009 2 CE credits PART 1 OF 2 ☐ Certified Member ☐ Certified Nonmember d b b d ☐ My address has changed. The address below is the new address. 1 Certification No. 2 7 3 8 Name 4 9 Address 5 10 State Zip City

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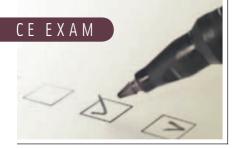
308 AUGUST 2009

11	. The highest platform in the category of	16.	"The single component of being"				
	deficit needs is		describes				
a.	Physiological c. Esteem	a.	High self-esteem				
b.	Belongingness d. Safety	b.	Self-actualization				
		c.	Social acceptance				
12.	Self-esteem begins to manifest at	d.	Maslow's Hierarchy of Needs				
a.	Age 2						
b.	Age 5	17.	Fluctuation within Maslow's hierarcl	19			
C.	Age 12		is				
d.	Birth	a.	Common c. Constant				
		b.	Probable d. All of the above	/e			
13.	The lower form of self-esteem is						
	characterized by	18.	The process of self-actualization can	l			
a.	A need to be respected by others		include				
b.	A low opinion of oneself	a.	Defining oneself spiritually				
C.	Confidence in one's abilities	b.	Focusing on resolving deficits				
d.	Inferiority complexes	c.	Rejecting unfavorable aspects of one's				
			life				
14.	The higher form of self-esteem is	d.	A&B				
	characterized by						
a.	A need to be respected by others	19.	Self-actualization is limited to	•			
b.	A low opinion of oneself	a.	Dignitaries				
C.	Confidence in one's abilities	b.	Everyone				
d.	None of the above	c.	Scientists				
		d.	Explorers				
15.	Low self-esteem is characterized						
	by	20.	Maslow's Hierarchy of Needs is espe	cially			
a.	Constantly seeking validation/		relevant in thefield.				
	acceptance	a.	Medical				
b.	Lack of self-respect	b.	Educational				
c.	Unrealistic expectations for oneself	c.	Self-help				
d.	All of the above	d.	All of the above				

MASLOW'S HIERARCHY OF NEEDS PART 2 OF 2

	a	b	С	d		a	b	С	d
10					16				
12					17				
13					18				
14					19				
15					20				

Mark one box next to each number.



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Endoscopic Thoracic Sympathectomy

309 SEPTEMBER 2009 2 CE credits

l.	ETS was initially	dev	eloped to treat	6.	ETS is a treatment for	
		_•		a.	Hyperhydrosis	
۱.	Goiter			b.	Epilepsy	
).	Glaucoma			c.	Irregular heartbeat	
	Epilepsy			d.	All of the above	
l.	All of the above					
				7.	Treatment options for idiopathic	
2.	The	i	s responsible for		craniofacial erythema include	_
	controlling invo	lunta	ary bodily functions.	a.	Endoscopic thoracic sympathectomy	
۱.	Autonomic nerv	ous:	system	b.	Valium	
).	Central nervous	syst	tem	c.	Cognitive behavioral therapy	
	Regulatory syst	em		d.	All of the above	
l.	Homeostatic eff	ect				
				8.	is a vascular disorder that	
3.	Thesystem	m slo	ows down a function.		affects blood flow to extremities in col	d
۱.	Homeostatic	c.	Parasympathetic		conditions.	
).	Sympathetic	d.	Autonomic	a.	Erythromelalgia	
				b.	Raynaud's Syndrome	
l.	The "fight or flig	ht" ı	response is triggered	c.	Complex regional pain syndrome	
	by the	syst	em.	d.	Нурохіа	
۱.	Homeostatic	c.	Parasympathetic			
).	Sympathetic	d.	Autonomic	9.	Raynaud's Syndrome can result in	
5.	The a	are d	estroyed during the	a.	Gangrene c. Skin atrophy	
	ETS procedure.		,	b.	Skin ulcers d. All of the above	
۱.	Sympathetic tru	nk				
).	Sympathetic ga	nglia	a	10.	. Thermography and radiography are two)
	Spinal nerves				methods of detecting	
ı.	None of the abo	ve		a.	Erythromelalgia	
				b.	Raynaud's Syndrome	
				c.		
				d.		

309 SEPTEMBER 2009 2 CE credits ENDOSCOPIC THORACIC SYMPATHECTOMY PART 1 OF 2 ☐ Certified Member ☐ Certified Nonmember ☐ My address has changed. The address below is the new address. 1 Certification No. 2 7 3 8 Name 4 9 Address 5 10 П State Zip City

Mark one box next to each number.

Only one correct or best answer can be selected for each question.

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309 SEPTEMBER 2009

11.	Clamping the nerves allows for	16.	Erythromelalgia cannot be described
a.	Irreversible procedure		as
b.	Temporary relief	a.	Idiopathic
	Improved functionality	b.	A rare disease
d.	Easier reversal process	c.	A curable disease
	·	d.	A&B
12.	Ais not used in the ETS procedure.		
a.	Harmonic scalpel	17.	can trigger an EM flare-up.
b.	Hemostat	a.	Heat
c.	Video tower	b.	Physical activity
d.	Fiber-optic light source	c.	Anger
		d.	A & B
13.	Complications associated with ETS		
	sometimes include	18.	EM can develop due to
a.	Respiratory problems	a.	Psychological disorders
b.	Compensatory sweating	b.	Neurologic or blood disorders
c.	Horner's Syndrome	c.	Physical contact with a carrier
d.	All of the above	d.	A & B
14.	Disfiguring asymmetry of the face can	19.	do not blush in social
	indicate		situations.
a.	Raynaud's Syndrome	a.	Babies
b.	Horner's Syndrome	b.	Cognitive-behavioral therapy patient
c.	Erythromelalgia	c.	ETS recipients
d.	Complex regional pain syndrome	d.	Everyone blushes
15.	A reversal of the ETS procedure is	20.	Cognitive-behavioral therapy can
	possible by		include
a.	Performing a nerve graft	a.	Rational emotive behavior therapy
b.	Removing the clip from the nerve	b.	Dialectic behavior therapy
c.	A or B, depending on the surgeon's method	c.	Cognitive therapy
d.	The ETS procedure is not reversible	d.	All of the above

ENDOSCOPIC THORACIC SYMPATHECTOMY PART 2 OF 2

	b	С	d		b	С	d
10				16			
12				17			
13				18			
14				19			
15				20			

Mark one box next to each number.



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Note this exam awards three continuing education credits.

Members: \$18, nonmembers: \$30

Radical Mastectomy and Reconstruction

6. The

310 OCTOBER 2009 3 CE credits

1. Breasts consist generally of ______.

c. d. 2. a. b.	Subcuticular fat Overlying skin All of the aboveare modified sweat glands. Breasts Mammary glands Nipples	b. c. d.	lymphatic system. Parasternal lymph nodes Axillary lymph nodes Lymphatic vessels Intercostal veins	
d. 2. a. b. c.	All of the aboveare modified sweat glands. Breasts Mammary glands	b. c. d.	Axillary lymph nodes Lymphatic vessels Intercostal veins	
2. a. b. c.	are modified sweat glands. Breasts Mammary glands	c. d.	Lymphatic vessels Intercostal veins	
a. b. c.	Breasts Mammary glands	d.	Intercostal veins	
a. b. c.	Breasts Mammary glands			
b. c.	Mammary glands	7.	The manner of the decree of the second	
c.		7.	The second of th	
	Nipples		The mammary glands are completely	
d.			functional at	
	Superficial fascia	a.	Puberty	
		b.	The end of pregnancy	
3.	compose the suspensory	c.	Birth	
	ligaments of the breast.	d.	Conception	
a.	Connective tissue stroma			
b.	Individual ductal and lobule systems	8.	hPI is a hormone given off by the	_•
c.	Dermal tissues of the breast	a.	Placenta	
d.	None of the above	b.	Pituitary gland	
		c.	Secretory glands	
4.	The lateral arterial blood supply to the	d.	None of the above	
	breast does not include the			
a.	Fourth intercostal artery	9.	is the leading cause of	
b.	Thoracoacromial artery		death in women aged 40-44.	
c.	Lateral thoracic artery	a.	Heart disease c. Breast Cancer	
d.	Superior thoracic axillary artery	b.	Lung cancer d. None of the above	re
	Nearly percent of lymphatic drain-	10	. The risk of developing breast cancer is	
	age of the breast drains laterally and		related to	
	superiorly to the axillary lymph nodes.		Age when first child is born	
	c. 75		Genetic factors	
b.	70 d. 80		Family history	
		d.	All of the above	

are the primary region

RADICAL MASTECTOMY AND RECONSTRUCTION PART 1 OF 3 310 OCTOBER 2009 3 CE credits

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ı	2					7				
ı	3					8				
ı	4					9				
ı	5					10				

Mark one box next to each number.

310 OCTOBER 2009 stimulates the secretory 16. Patients have many treatment options, cells for lactation. including a. Placental lactogen Radiation therapy **b.** Prolactin b. Chemotherapy c. Oxytocin Hormonal therapy **d.** B&C d. All of the above 12. Breast cancers account for _____ percent 17. In TNM classification, the number of all cancers in women and _____percent following a T indicates _____ of cancer deaths. a. Size of the tumor **a.** 30.16 **c.** 16, 30 **b.** If the cancer has metastasized **b.** 43, 30 **d.** 43, 16 c. If the cancer has spread to the lymph nodes 13. _____provides a standardized way d. All of the above for physicians to determine information about a cancer's metastasis. 18. _____is considered a "breastconserving surgery." a. Staging c. Lumpectomy **b.** Mammogram **d.** None of the above a. Mastectomy b. Breast reconstruction 14. The most common staging system is the c. Needle localization and wide excision **d.** B&C a. Mammogram b. Lumpectomy 19. In a ______, the surgeon removes a c. Tumor Nodal Metastasis small volume of breast tissue. **d.** None of the above a. Mastectomy c. Lumpectomy **b.** Breast reconst. **d.** B & C 15. Pathological staging includes the results 20. Removal of one or both breasts in a male of a_ a. Mammogram or female patient is a _____. **b.** Lumpectomy a. Mastectomy c. Tumor Nodal Metastasis b. Breast reconstruction **d.** All of the above c. Lumpectomy

RADICAL MASTECTOMY AND RECONSTRUCTION PART 2 OF 3

d. Needle localization and wide excision

	a	b	С	d		a	b	С	d
11					16				
12					17				
13					18				
14					19				
15					20				

Mark one box next to each number.

310 OCTOBER 2009

21.	An example of a minimally-invasive	26.	Axillary components and the pectoralis
	procedure is a		muscles are removed in a
a.	Simple mastectomy	a.	Simple mastectomy
b.	Skin-sparing mastectomy	b.	Radical mastectomy
c.	Halstead mastectomy	c.	Modified radical mastectomy
d.	A & B	d.	Bilateral mastectomy
22.	Methylene blue is used during a	27.	To prevent cancer seeding, the wound
	mastectomy to		is
a.	Sterilize the surgical site	a.	Cauterized
b.	Provide local anesthetic	b.	Closed with absorbable suture
c.	Outline the sentinel node	c.	Irrigated with sterile water
d.	None of the above	d.	All of the above
23.	The complete removal of the entire breast	28.	Complications of a mastectomy include
	tissue is a		•
a.	Simple mastectomy	a.	Infection c. Cancer metastasis
b.	Radical mastectomy	b.	Disfigurement d. All of the above
c.	Modified radical mastectomy		
d.	Halstead mastectomy	29.	In a modified radical mastectomy,
			are removed.
24.	A/anis used to separate the	a.	Only axillary components
	breast tissue from the skin.	b.	Axillary components & pectoralis muscles
a.	Electrosurgical pencil	c.	Both breasts, in their entirety
b.	#15 blade	d.	Only suspicious lumps
c.	Harmonic scalpel		
d.	None of the above	30.	Specimens from mastectomy patients
			are examined by the pathology
25.	In a TRAM flap reconstruction, the surgeon		department.
	reconstructs the breasts with	a.	Prior to scheduling surgery
a.	Warm saline c. AlloDerm®		Intraoperatively
b.	Autologous fat d. Artificial fillers	c.	Postoperatively
	-	d.	At follow-up appointments
R A	DICAL MASTECTOMY AND REC	D N <u>S</u>	STRUCTION PART 3 OF 3

	a	b	С	d		a	b	С	d
21					26				
22					27				
23					28				
24					29				
25					30				

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In-Office Autologous Fat Grafting

	311 NUVEMBER 2009 2 CE cream	[5					
l.	Plastic surgery most often addresses which of Maslow's needs?	6.	The choice of anesthetic for cosmetic procedures depends on	•			
۱.	Physiological	a.	The patient's health				
).	Safety	b.	The number of procedures being				
	Love and belonging		performed				
l.	Prestige and esteem	c.	The patient's current medications				
		d.	All of the above				
2.	The most common facial locations for						
	autologous fat grafting include	7.	In a fat grafting procedure, the				
۱.	Nasolabial folds		are filled first.				
).	Chin	a.	Nasolabial folds				
	Marionette grooves	b.	Cheeks				
l.	All of the above	c.	Jaw line				
		d.	None of the above				
3.	Which of the following does not describe						
	an autologous fat graft?	8.	Nose reconstructions are believed to h	ıave			
۱.	Safe c. Temporary		been performed as early as				
).	Permanent d. Reversible	a.	2,000 BCE c. 1880				
		b.	d. The Middle Age	S			
ŀ.	The ultimate goal of cosmetic surgery						
	is	9.	Who is the considered the father of				
۱.	Help the patient achieve a positive self-		plastic surgery?				
	evaluation	a.	Pierre Joseph Desault				
).	Fix the patient's physical short-comings	b.	Karl Ferdinand von Gräefe				
	Create a new image for the patient	c.	Johann Friedrich Dieffenbach				
l.	Reverse the affects of aging	d.	Sir Harold Gillies				
5 .	Patients who have undergone	10	O. Most cosmetic surgery cases are perfor	med			
	are not good candidates for autologous		under .				

IN-OFFICE AUTOLOGOUS FAT GRAFTING PART 1 OF 2 311 NOVEMBER 2009 2 CE credits

b. Organ transplant **d.** All of the above

fat grafting.

a. Oral surgery

surgery

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Name		3	[
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	b	C	d		b	С	d
1				6			
2				7			
3				8			
4				9			
5				10			

a. Local anesthetic

b. IV with sedation

d. Acetaminophen

c. General anesthesia

ox next to each number.

c. Abdominal surgery

311 NOVEMBER 2009

11.	11. Alternative options for facial augmentation include		16. Cosmetic surgery became popular during the Renaissance due to							
_	Botox									
			Injectable fillers				Social pressures			
D.	chemical peers	a.	All of the above	D.	Nose amputation as punishment	a.	All of the above			
12.	The term "plastic	c" is	derived from							
	a/anword.				17. The oldest association for aesthetic					
a.	Indian	c.	Latin		surgery in the Un	ited	l States is the			
b.	Greek	d.	Sanskrit	a.	American Acade	my (of Facial Plastic and			
					Reconstructive S	urg	ery			
13.	For facial proced	ures	, the patient is put	b.	American Associ	atio	n of Plastic Surgeons			
	in the	_po	sition.	c.	American Associ	atio	n of Oral Surgeons			
a.	Trendelenburg			d.	American Board	of P	lastic Surgery			
b.	Supine									
c.	Reverse Trendel	enb	urg	18.	The term "plastic	sur	gery" was coined			
d.	d. Fowler's				by		.•			
				a.	Pierre Joseph De	sau	lt			
14.	Who was a leadir	ng pi	ioneer in skin grafts	b.	Karl Ferdinand v	on G	iräefe			
	and sex-reassign	ıme	nt surgery?	c. Johann Friedrich Dieffenbach						
a.	Gasparo Tagliaco	ozzi		d.	Sir Harold Gillies)				
b.	Karl Ferdinand v	on G	iräefe							
c.	Johann Friedrich	ı Die	ffenbach	19.	From 1997 to 200)7, t	he number of			
d.	Sir Harold Gillies	5			cosmetic procedu	ıres	in the United States			
					increased		_•			
15.	After the fat is ha	arve	sted, the next step	a.	162 percent	c.	92 percent			
	is to		•	b.	233 percent					
a.	Inject the donor	fat i	into the specified							
	areas			20.	The father of mod	lern	plastic surgery			
b.	Place the syring	es ir	ı a centrifuge		is					
c.	Apply a cold com	ipre:	ss to the surgical site	a.	Pierre Joseph Desault					
d.	Cleanse the inje	ctio	n site	b.	. Karl Ferdinand von Gräefe					
•			c.	c. Johann Friedrich Dieffenbach						

IN-OFFICE AUTOLOGOUS FAT GRAFTING PART 2 OF 2

d. Sir Harold Gillies

	b	С	d		b	С	d
11				16			
12				17			
13				18			
14				19			
15				20			

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☐ Check Enclosed	Yes, I want to pay by credit card	: Usa MasterCard	☐ AmEx
Card #	Expiration Date	Signature	
Wrist Fusion: Fighting ba	nck against rheumatoid ar	thritis	
a b c d	a b c d	a b c d	a b c d
1. 🗆 🗎 🗎	7. 🗆 🗆 🗆	13.	19.
2.	9.	14.	Mark one box next to each number.
4.	10.	16.	Only one correct or best answer can be selected for each question.
5.	11.	17.	be selected for each question.
6. 🗌 🗎 🔲	12.	18.	
Pain management for pa	itients with a substance at	ouse history	
a b c d	a b c d	a b c d	a b c d
1. 🗆 🗆 🗆	7. 🗆 🗆 🗆	13.	19.
2. 🗆 🗆 🗆	8.	14.	20.
3.	9.	15.	Mark one box next to each number. Only one correct or best answer can
4.	11.	16.	be selected for each question.
6	12	18 \square \square \square	

Drug Discovery: Development and approval proces	sses	
a b c d a b c d	a b c d	a b c d
1	13. 🔲 🔲 🔲	19. 🔲 🔲 🔲
2.	14.	20.
3	15. 🔲 🗎 🗎	Mark one box next to each number.
4	16. 🗌 🗎 🔲	Only one correct or best answer can be selected for each question.
5	17. 🔲 🔲 🔲	
6	18.	
The Role of the Surgical Technologist in Wound Ma	nagement	
a b c d a b c d	a b c d	a b c d
1	13. 🗌 🗎 🗎	19. 🔲 🔲 🔲
2	14.	20.
3	15. 🔲 🔲 🔲	Mark one box next to each number.
4	16. 🗌 🗎 🔲	Only one correct or best answer can be selected for each question.
5	17. 🗌 🗎 🗎	
6	18.	
Maslow's Hierarchy of Needs		
a b c d a b c d	a b c d	a b c d
1 7	13. 🗌 🗎 🔲	19.
2 8	14.	20.
3 9	15. 🗌 🗎 🔲	Mark one box next to each number.
4.	16.	Only one correct or best answer can be selected for each question.
5.	17. 🗌 🗎 🔲	
6.	18.	
A Surgical Cure for Chronic Blushing: Endoscopic	Thoracic Sympathectomy	
a b c d a b c d	a b c d	a b c d
1.	13.	19. 🗌 🗎 🔲
2 8	14.	20.
3 9	15. 🗌 🗎 🔲	Mark one box next to each number. Only one correct or best answer can
4	16.	be selected for each question.
5	17. 🗌 🗎 🗎	
6	18.	

Factial Plastic Surgery:	Autologous Fat Grafting		
a b c d	a b c d	a b c d	a b c d
1	7. 🗌 🗎 🔲	13. 🔲 🔲 🔲	19. 🔲 🔲 🔲
2. 🗌 🗎 🖂	8. 🗌 🗎 🔲	14.	20.
3. 🗌 🗎 🗎	9. 🗌 🗎 🔲	15. 🗌 🗎 🗎	Mark one box next to each number.
4. 🗌 🗎 🔲	10.	16.	Only one correct or best answer can be selected for each question.
5. 🗌 🗎 🗎	11.	17.	
6. 🗌 🗎 🔲	12. 🗌 🗎 🗎	18.	
Radical Mastectomy and	Reconstruction		
a b c d	a b c d	a b c d	a b c d
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2. 🗌 🗎 🗎	10.	18.	26. 🗌 🗎 🗎
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4. 🗆 🗆 🗆	12.	20.	28. 🗌 🗎 🗎
5. 🗌 🗎 🔲	13. 🗌 🗎 🔲	21. 🗌 🗎 🗎	29. 🗌 🗎 🔲
6. 🗌 🗎 🔲	14.	22.	30. 🗌 🗎 🗎
7. 🗌 🗎 🗎	15. 🗌 🗎 🔲	23.	Mark one box next to each number.
8. 🗌 🗎 🖂	16. 🗌 🗎 🔲	24.	Only one correct or best answer can be selected for each question.

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