

ONCOLOGY QUIZ

1. Answer **D**. Dysplasia refers to an alteration in the size, shape, and organization of differentiated cells. The presence of completely undifferentiated tumor cells that don't resemble cells of the tissues of their origin is called anaplasia. An increase in the number of normal cells in a normal arrangement in a tissue or an organ is called hyperplasia. Replacement of one type of fully differentiated cell by another in tissues where the second type normally isn't found is called metaplasia.

2. Answer **A**. Verbalizing feelings is the client's first step in coping with the situational crisis. It also helps the health care team gain insight into the client's feelings, helping guide psychosocial care. Option B is inappropriate because suppressing speculation may prevent the client from coming to terms with the crisis and planning accordingly. Option C is undesirable because some methods of reducing tension, such as illicit drug or alcohol use, may prevent the client from coming to terms with the threat of death as well as cause physiologic harm. Option D isn't appropriate because seeking information can help a client with cancer gain a sense of control over the crisis.

3. Answer **C**. A client with a cerebellar brain tumor may suffer injury from impaired balance as well as disturbed gait and incoordination. Visual field deficits, difficulty swallowing, and psychomotor seizures may result from dysfunction of the pituitary gland, pons, occipital lobe, parietal lobe, or temporal lobe — not from a cerebellar brain tumor. Difficulty swallowing suggests medullary dysfunction. Psychomotor seizures suggest temporal lobe dysfunction.

4. Answer **C**. Radiation therapy may cause fatigue, skin toxicities, and anorexia regardless of the treatment site. Hair loss, stomatitis, and vomiting are site-specific, not generalized, adverse effects of radiation therapy.

5. Answer **C**. Fine needle aspiration and biopsy provide cells for histologic examination to confirm a diagnosis of cancer. A breast self-examination, if done

regularly, is the most reliable method for detecting breast lumps early. Mammography is used to detect tumors that are too small to palpate. Chest X-rays can be used to pinpoint rib metastasis.

6. Answer **D**. The nurse should instruct the client to keep the stoma moist, such as by applying a thin layer of petroleum jelly around the edges, because a dry stoma may become irritated. The nurse should recommend placing a stoma bib over the stoma to filter and warm air before it enters the stoma. The client should begin performing stoma care without assistance as soon as possible to gain independence in self-care activities.

7. Answer **D**. Chemotherapy commonly causes nausea and vomiting, which may lead to fluid and electrolyte imbalances. Signs of fluid loss include dry oral mucous membranes, cracked lips, decreased urine output (less than 40 ml/hour), abnormally low blood pressure, and a serum potassium level below 3.5 mEq/L.

8. Answer **C**. Women are instructed to examine themselves to discover changes that have occurred in the breast. Only a physician can diagnose lumps that are cancerous, areas of thickness or fullness that signal the presence of a malignancy, or masses that are fibrocystic as opposed to malignant.

9. Answer **D**. Like other viral and bacterial venereal infections, human papillomavirus is a risk factor for cervical cancer. Other risk factors for this disease include frequent sexual intercourse before age 16, multiple sex partners, and multiple pregnancies. A spontaneous abortion and pregnancy complicated by eclampsia aren't risk factors for cervical cancer.

10. Answer **D**. Leucovorin is administered with methotrexate to protect normal cells, which methotrexate could destroy if given alone. Probenecid should be avoided in clients receiving methotrexate because it reduces renal elimination of

methotrexate, increasing the risk of methotrexate toxicity. Cytarabine and thioguanine aren't used to treat osteogenic carcinoma.

11. Answer **D**. Colorectal polyps are common with colon cancer. Duodenal ulcers and hemorrhoids aren't preexisting conditions of colorectal cancer. Weight loss — not gain — is an indication of colorectal cancer.

12. Answer **B**. The American Cancer Society guidelines state, "Women older than age 40 should have a mammogram annually and a clinical examination at least annually [not every 2 years]; all women should perform breast self-examination monthly [not annually]." The hormonal receptor assay is done on a known breast tumor to determine whether the tumor is estrogen- or progesterone-dependent.

13. Answer **C**. Indigestion, or difficulty swallowing, is one of the seven warning signs of cancer. The other six are a change in bowel or bladder habits, a sore that does not heal, unusual bleeding or discharge, a thickening or lump in the breast or elsewhere, an obvious change in a wart or mole, and a nagging cough or hoarseness. Persistent nausea may signal stomach cancer but isn't one of the seven major warning signs. Rash and chronic ache or pain seldom indicate cancer.

14. Answer **B**. Because thrombocytopenia impairs blood clotting, the nurse should inspect the client regularly for signs of bleeding, such as petechiae, purpura, epistaxis, and bleeding gums. The nurse should avoid administering aspirin because it may increase the risk of bleeding. Frequent rest periods are indicated for clients with anemia, not thrombocytopenia. Strict isolation is indicated only for clients who have highly contagious or virulent infections that are spread by air or physical contact.

15. Answer **A**. The American Cancer Society recommends a mammogram yearly for women over age 40. The other statements are incorrect. It's recommended that

women between ages 20 and 40 have a professional breast examination (not a mammogram) every 3 years.

16. Answer **D**. The nurse should obtain the client's baseline blood pressure and pulse and respiratory rates before administering the initial dose and then continue to monitor vital signs throughout therapy. A naloxone challenge test may be administered before using a narcotic antagonist, not a narcotic agonist. The nurse shouldn't discontinue a narcotic agonist abruptly because withdrawal symptoms may occur. Morphine commonly is used as a continuous infusion in clients with severe pain regardless of the ability to tolerate fluids.

17. Answer **B**. Antimetabolites act during the S phase of the cell cycle, contributing to cell destruction or preventing cell replication. They're most effective against rapidly proliferating cancers. Miotic inhibitors interfere with cell division or mitosis during the M phase of the cell cycle. Alkylating agents affect all rapidly proliferating cells by interfering with DNA; they may kill dividing cells in all phases of the cell cycle and may also kill nondividing cells. Antineoplastic antibiotic agents interfere with one or more stages of the synthesis of RNA, DNA, or both, preventing normal cell growth and reproduction.

18. Answer **B**. When following the ABCD method for assessing skin lesions, the A stands for "asymmetry," the B for "border irregularity," the C for "color variation," and the D for "diameter."

19. Answer **B**. Tactile agnosia (inability to identify objects by touch) is a sign of a parietal lobe tumor. Short-term memory impairment occurs with a frontal lobe tumor. Seizures may result from a tumor of the frontal, temporal, or occipital lobe. Contralateral homonymous hemianopia suggests an occipital lobe tumor.

20. Answer **C**. Presence of Bence Jones protein in the urine almost always confirms the disease, but absence doesn't rule it out. Serum calcium levels are elevated

because calcium is lost from the bone and reabsorbed in the serum. Serum protein electrophoresis shows elevated globulin spike. The serum creatinine level may also be increased.

21. Answer **C**. The tissue-destructive effects of cancer chemotherapy typically cause stomatitis, resulting in ulcers on the oral mucosa that appear as red, open sores. White, cottage cheese-like patches on the tongue suggest a candidal infection, another common adverse effect of chemotherapy. Yellow tooth discoloration may result from antibiotic therapy, not cancer chemotherapy. Rust-colored sputum suggests a respiratory disorder, such as pneumonia.

22. Answer **B**. To decrease the pain of stomatitis, the nurse should provide a solution of hydrogen peroxide and water for the client to use as a mouth rinse. (Commercially prepared mouthwashes contain alcohol and may cause dryness and irritation of the oral mucosa.) The nurse also may administer viscous lidocaine or systemic analgesics as prescribed. Stomatitis occurs 7 to 10 days after chemotherapy begins; thus, stopping chemotherapy wouldn't be helpful or practical. Instead, the nurse should stay alert for this potential problem to ensure prompt treatment. Monitoring platelet and leukocyte counts may help prevent bleeding and infection but wouldn't decrease pain in this highly susceptible client. Checking for signs and symptoms of stomatitis also wouldn't decrease the pain.

23. Answer **A**. The incidence of prostate cancer increases after age 50. The digital rectal examination, which identifies enlargement or irregularity of the prostate, and PSA test, a tumor marker for prostate cancer, are effective diagnostic measures that should be done yearly. Testicular self-examinations won't identify changes in the prostate gland due to its location in the body. A transrectal ultrasound, CBC, and BUN and creatinine levels are usually done after diagnosis to identify the extent of the disease and potential metastases

24. Answer **A**. Anticipatory grieving is an appropriate nursing diagnosis for this client because few clients with gallbladder cancer live more than 1 year after

diagnosis. Impaired swallowing isn't associated with gallbladder cancer. Although surgery typically is done to remove the gallbladder and, possibly, a section of the liver, it isn't disfiguring and doesn't cause Disturbed body image. Chronic low self-esteem isn't an appropriate nursing diagnosis at this time because the diagnosis has just been made.

25. Answer **B**. If a radioactive implant becomes dislodged, the nurse should pick it up with long-handled forceps and place it in a lead-lined container, then notify the radiation therapy department immediately. The highest priority is to minimize radiation exposure for the client and the nurse; therefore, the nurse must not take any action that delays implant removal. Standing as far from the implant as possible, leaving the room with the implant still exposed, or attempting to put it back in place can greatly increase the risk of harm to the client and the nurse from excessive radiation exposure.

26. Answer **A**. The client must report changes in visual acuity immediately because this adverse effect may be irreversible. Tamoxifen isn't associated with hearing loss. Although the drug may cause anorexia, headache, and hot flashes, the client need not report these adverse effects immediately because they don't warrant a change in therapy.

27. Answer **A**. The liver is one of the five most common cancer metastasis sites. The others are the lymph nodes, lung, bone, and brain. The colon, reproductive tract, and WBCs are occasional metastasis sites.

28. Answer **B**. A low-fat diet (one that maintains weight within 20% of recommended body weight) has been found to decrease a woman's risk of breast cancer. A baseline mammogram should be done between ages 30 and 40. Monthly breast self-examinations should be done between days 7 and 10 of the menstrual cycle. The client should continue to perform monthly breast self-examinations even when receiving yearly mammograms.

29. Answer **C**. Bone marrow suppression becomes noticeable 7 to 14 days after floxuridine administration. Bone marrow recovery occurs in 21 to 28 days.

30. Answer **D**. During an MRI, the client should wear no metal objects, such as jewelry, because the strong magnetic field can pull on them, causing injury to the client and (if they fly off) to others. The client must lie still during the MRI but can talk to those performing the test by way of the microphone inside the scanner tunnel. The client should hear thumping sounds, which are caused by the sound waves thumping on the magnetic field.