



Education
Initiative in
Urology

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UROLOGY

CME Posttest

Release Date: July 15, 2002

FAQs on Intravesical Immunotherapy for Superficial Bladder Cancer

CME Instructions

This activity comprises four parts to be sent to you throughout the year. To earn credit, you must read and complete all four parts. To receive documentation of your participation in this four-part CME activity for a total of 1 hour of CME credit, please complete the following steps:

1. Read each newsletter.
2. Complete the CME posttest included in each of the four parts.
3. Mail or fax each of the completed posttests to Projects In Knowledge, One Harmon Plaza, Secaucus, NJ 07094; fax: 1-201-617-7333.
4. After reading the final part, complete the CME evaluation survey contained therein.
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At the end of the series, Projects In Knowledge will mail you a certificate of completion for this activity if your combined score for all four posttests is 70% or higher. If your combined score is lower than 70%, you will be notified by mail and given an opportunity to take a single test covering information from all four parts.

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Please indicate your answers below (circle one):

1. For treating BCG cystitis, which of the following antibiotics did Dr. O'Donnell recommend, due to its fast onset of action, efficacy against BCG, and high concentration in urine?
 - a. Isoniazid
 - b. Rifampin
 - c. Ciprofloxacin
 - d. Tetracycline
2. For a patient who develops mild rash during BCG/interferon, Dr. O'Donnell favors:
 - a. Local treatment with hydrocortisone cream and continuation of BCG/interferon without dose reduction
 - b. A one-third dose reduction in BCG and a one-half dose reduction of interferon
 - c. A one-third dose reduction in BCG with interferon continued at 50 mIU
 - d. A one-third dose reduction in BCG with interferon increased to 100 mIU
 - e. Treatment discontinuation
3. Which of the following should *not* be used as a prophylactic antibiotic in a patient receiving BCG/interferon because of its activity against BCG?
 - a. Amoxicillin/clavulanate
 - b. Clarithromycin
 - c. Trimethoprim/sulfamethoxazole
 - d. Vancomycin
4. Vesicorenal reflux is associated with an increased risk of BCG sepsis.
 - a. True
 - b. False