

2014
WAHLU
CASE CLINIC
CHALLENGE

Hank George, FALU

Perpetrator

**This was presented at the
November dinner meeting**

**Note that the correct answers
are in GREEN on each slide**

#1

**Your 48 year-old female applicant had a 0.77 mm
SS melanoma removed 16 months ago.**

Which of these path report findings would be **least significant
in terms of her 10-year mortality risk?**

A. Ulceration

B. Lymphovascular invasion

C. Level III

D. Complete regression

#2

You have 4 applicants with a history of carcinoma in situ diagnosed 8 months ago.

Which has the **highest** mortality risk?

- A. Ductal carcinoma in situ of the breast
- B. Gallbladder adenocarcinoma in situ
- C. **Bladder carcinoma in situ**
- D. Colon adenocarcinoma in situ

#3

Which of the following terms is **best used** to describe degenerative changes in the spine incited by osteoarthritis?

A. Scoliosis

B. Spondylosis

C. Spondylitis

D. Spondylolisthesis

#4

**Your 36 year-old applicant was treated for
Hodgkin lymphoma 18 years ago.**

**Her MD told her she now has a silent cardiac problem
due to her HL Rx.**

Which of these is **least likely to be that problem?**

A. Premature coronary artery disease

B. Aortic regurgitation

C. Left ventricular diastolic dysfunction

D. Endocarditis

#5

**Your applicant had an episode of upper GI bleeding
5 months ago.**

Which of these potential disclosures is of **least concern
from an underwriting perspective?**

- A. He was told he had a Mallory-Weiss episode**
- B. He was treated with propranolol**
- C. He has been an asymptomatic hepatitis B carrier**
- D. His bleeding was preceded by severe abdominal pain**

#6

Applicant says treated for mild depression 1 year ago and “fine now.” No details provided.

Which of these drugs is the **biggest RED FLAG for an understated high-risk case?**

- A. Alprazolam (Xanax)**
- B. Phenyelzine (Nardil)**
- C. Olanzapine (Zyprexa)**
- D. Amitriptyline (Elavil)**

#7

Applicant's treadmill test was negative for ischemia.

Which of these is the **highest risk
“other” finding in this setting?**

- A. Delayed heart rate return**
- B. Chronotropic incompetence**
- C. Peak systolic BP 210 mmHg**
- D. Diastolic BP increases 20 mmHg**

#8

Four 62 year-old applicants recently had low hemoglobin and elevated MCV. No diagnosis has yet been made.

Which of these diagnoses is **least likely**?

- A. Folic acid deficiency
- B. Thalassemia Intermedia**
- C. Myelodysplastic syndrome
- D. Vitamin B-12 deficiency

#9

Your 57 year-old female applicant said she had liver disease 9 years ago but was never treated. Her current GGT is 110 (0-70) and alkaline phosphatase is 290 (30-140). ALT and AST are normal.

Which of these is the **most likely diagnosis?**

- A. Primary biliary cirrhosis**
- B. Nonalcoholic steatohepatitis**
- C. Chronic hepatitis C**
- D. Polycystic liver disease**

#10

Your 49 year-old male applicant presented in the ER with severe chest pain 9 months ago. MI was ruled out and he has been “ok” since.

Which of these factors at the time of the CP is **least significant** to his insurability?

- A. ECG showed a new complete RBBB
- B. Both chest pain and dyspnea were present
- C. Nitroglycerin promptly relieved the chest pain
- D. CP occurred while shoveling snow

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WIDOW
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#11

Your 71 year-old applicant is a volunteer school bus driver.

**She has has been taking 1 psych drug for 6 months
and she does not remember her diagnosis.**

Which of these would confer the **LOWEST mortality risk?**

A. Mirtazapine (Remeron)

B. Zolpidem (Ambien)

C. Diazepam (Valium)

D. Aripiprazole (Abilify)

#12

Your 80 year-old applicant's current blood profile has 4 tests that have decreased substantially in the last 12 months.

He does not take medication...or even have a doctor.

Which is **least significant** to his insurability?

A. TC from 155 to 101

B. GGT from 75 to 17

C. BUN from 14 to 4

D. ALT from 16 to 5

#13

4 applicants each had cancer diagnosed 20 years ago and are now “cured.” Each was treated with 1 chemotherapy drug.

Who is **most likely** to have silent heart damage caused by the chemotherapy?

- A. Testicular cancer treated with cisplatin
- B. Breast cancer treated with doxorubicin**
- C. Ovarian cancer treated with paclitaxel
- D. Non-Hodgkin lymphoma treated with melphalan

#14

55 year-old male has one isolated lab abnormal on the current screening blood profile.

Which one would be **least likely to confer extra mortality risk?**

A. Total bilirubin 2.7 (0.3-1.0)

B. Total bilirubin 0.2 (0.3-1.0)

C. Serum Globulin 1.9 (2.3-3.4)

D. HDL-C 29 (> 45)

#15

Which of the following is **not a RED FLAG
for occult pancreatic carcinoma
in a 55-year old diagnosed with type 2 diabetes
3 months ago by his family doctor?**

- A. He presented with polydipsia, polyphagia and polyuria**
- B. He is underweight**
- C. He began his treatment with insulin only**
- D. His ALT and GGT are both elevated**