

**2015 WAHLU**  
**CASE CLINIC CHALLENGE**

Good Luck  
*(You'll need it!)*

# Ground Rules

- Each table will write down their consensus best answer to 10 questions
- Tables will exchange answer sheets and grade them as I reveal the correct answers
- Underwriters at the tables with the 1<sup>st</sup>, 2<sup>nd</sup> and 3<sup>rd</sup> highest scores will win the prizes
- If there is a tie, we will go on with up to 6 more, harder questions until there is 1 winner each for 1<sup>st</sup>, 2<sup>nd</sup> and 3<sup>rd</sup> place

May the Force be with you!

Listen to every question  
**VERY CAREFULLY**

There are clues in some that could  
allow you to rule out as many as  
3 possible answers...  
even if you don't know the **correct** one!

***Here we go...***

1. Applicant admits to using an illicit drug, recreationally, within the past 2 years.

Which of these drugs would you be **MOST CONCERNED ABOUT** in terms of mortality and morbidity?

- A. Ecstasy
- B. Alprazolam
- C. Synthetic marijuana
- D. Dimethyltryptamine

**2.** Applicant is said to have inflammatory bowel disease, but no final diagnosis has been made.

Which of the following findings does **NOT** support a diagnosis of Crohn disease instead of ulcerative colitis?

- A. Skip areas without disease
- B. Involvement of the full bowel wall through to the serosa
- C. Readily friable colon lining during colonoscopy
- D. Involvement of the anus

**3.** Applicant tests cotinine-positive and says he is using the nicotine patch for another reason.

Which one of these reasons is **LEAST LIKELY** to be true?

A. Ulcerative colitis

B. Crohn disease

C. ADHD

D. Tourette syndrome

4. Applicant's APS shows he's a C282Y/H63D Double Heterozygote

Which of the following disorders is he at increased risk for developing...at some point in his life?

- A. Hereditary hemochromatosis
- B. Muscular dystrophy
- C. Porphyria cutanea tarda
- D. Early-onset Alzheimer dementia

**5.** Applicant was diagnosed with nonalcoholic fatty liver disease.

Which of the following findings suggests **MOST STRONGLY** that he has nonalcoholic steatohepatitis?

- A. “Bright liver” on hepatic ultrasound
- B. Elevated MCV on CBC
- C. Thrombocytopenia
- D. ALT:AST ratio of 1.7



**6.** 40 year-old male with new, abnormal, asymptomatic and unexplained echocardiogram and ECG findings, has a history of childhood cancer.

Which of these malignancies did he **MOST LIKELY** have... if these new findings are, in fact, related to prior cancer treatment?

- A. Ewing sarcoma
- B. Hodgkin lymphoma
- C. Acute lymphoblastic leukemia
- D. Wilms Tumor

7. 50 year-old female says she had “skin cancer removed 6 months ago” and she remembers its name.

Which of these tumors has the **WORST** 5-year survival prognosis?

- A. Bowen disease
- B. Merkel cell carcinoma
- C. Lentigo maligna melanoma
- D. Keratoacanthoma

8. 37 year-old female applicant has 2 relatives with history of cancer.

One, her mother, was diagnosed with breast cancer at age 29.

Which of these other tumor family histories makes it **LEAST LIKELY** that the applicant has a BRCA breast cancer mutation?

- A. Father – prostate cancer, age 50
- B. Brother – pancreatic cancer, age 49
- C. Sister – ovarian cancer, age 33
- D. Sister – glioblastoma multiforme, age 44

These have been too d--- easy!

Let's up the ante a bit, shall we?



9. 54 year-old male applicant diagnosed by his family practitioner with type 2 diabetes, just 3 months ago.

Which of these risk factors is **NOT** a major mortality **RED FLAG...SPECIFICALLY** over the next 12 months?

- A. Father diagnosed with pancreatic cancer at age 51
- B. BMI is 17.9
- C. eGFR is 49 (normal  $\geq 60$ )
- D. Diabetes onset marked by 3 acute symptoms:  
hyperphagia, polyuria and polydipsia

**10.** Applicant saw MD 2 months ago with a suspiciously enlarged lymph node.

Which of these diagnoses is **MOST LIKELY** to present with this new particular new finding?

- A. Niemann Pick disease
- B. Sjögren syndrome
- C. Celiac disease
- D. Castleman disease

**Please exchange your score cards  
with the designated nearby table.**

Time to score the results and see if we  
have winners...or need to go to the  
**dreaded** tie-breakers!

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- D. Castleman disease**

# Time for extra innings!

We have 6 more questions. We keep going until we have our winner(s)...or run out of questions!

**Read each question very carefully.**

You have been warned



**11.** Applicant was diagnosed with prostate cancer.

Which one of the following factors in his history does **NOT NECESSARILY** make him a HIGH RISK case?

- A. Gleason Score = 4, 4 (8)
- B. Age 54 at diagnosis
- C. Baseline PSA before any treatment = 25.7 ng
- D. Positive digital rectal examination (DRE) prior to the biopsy that made the diagnosis

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**12.** App for \$5,000,000 on rich 10-year old spoiled brat.

Case is financially kosher...but the kid has a psych history.

Given their typical natural histories through adolescence, which disorder is **MOST LIKELY** to correlate with him being a **HIGHLY** unfavorable risk at age 25?

- A. Conduct disorder
- B. Body dysmorphic disorder
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**13.** Applicant had a localized but **HIGH RISK** prostatic adenocarcinoma diagnosed 3 years ago.

Which of these combinations of current lab findings is of **GREATEST** underwriting concern...that is, related **SOLELY** to his prostate cancer history?

- A. High GGT + high AP...with normal AST + ALT
- B. High GGT...with normal AP, AST + ALT
- C. High AP...with normal GGT, AST + ALT
- D. High ALT + high GGT...with normal AST + AP

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**14.** Applicant had a Doppler echocardiogram and an unexpected heart valve abnormality is found.

Which of the following Doppler echo findings (note that all are described as “mild”) has the greatest **ADVERSE** implications for his insurability, assuming he is otherwise healthy with no heart-related diagnosis?

- A. Mild pulmonic regurgitation
- B. Mild aortic insufficiency
- C. Mild tricuspid regurgitation
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**15.** APS reveals that a 57 year-old, otherwise healthy applicant has **leukoaraiosis**.

Which of these phrases best describe this condition?

- A. Severe depigmentation on the ears, nose and forehead
- B. Meningeal lymphomatosis
- C. Hypoperfusion with demyelination of the brain white matter
- D. Leukemic white blood cells in the cerebrospinal fluid

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**16.** Credible reinsurer research shows that all the following blood tests should have huge protective value...that is, if we could use them to screen at older ages.

Considering all issues and concerns for each test, which one is **LEAST UNLIKELY** to be used in underwriting screening?

- A. RDW
- B. Apolipoprotein E 2-3-4 genotypes
- C. Growth differentiation factor 15 (GDF-15)
- D. Lipoprotein Lp(a)

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**Hat's (way) off to the  
winners!!**

**This year you REALLY had to know  
your stuff to finish “in the money,”  
as they say!**