CLINICAL CHEMISTRY

PRACTICE EXAM QUESTION 400 QUESTIONS

TEST YOUR KNOWLEDGE AS IF YOU WERE TAKING A
BOARD EXAM

CLINICAL CHEMISTRY EXAM

1. 75'F = 'C

a. 15.5 c. 23.8 b. 21. 0 d. 32.6

2. 20'C = 'F

a. 25 c. 68 d. 86

3. Morphine is the major metabolite of:

a. Cocaine c. Marijuana b. Heroin d. Phnecyclidine

4. Substances with modified structures that are analogs of prescription pharmaceuticals of abused drugs are known

as?

a. Designer drugs c. Trade drugs b. Generic drugs d. Toxic drugs

5. All of the following may be used to cleanse the skin when drawing blood for ethanol analysis, except:

a. Alcohol swab

c. Soap and water

b. Merthiolate d. Zephiran

6. The drug of choice for controlling petit mal (absence seizure)

a. Phenobarbital c. Vancomycin

b. Carbamazepine d. Ethosuximide (Zarontin)

7. It is used for treatment of petit mal (absence seizure) and grand mal:

a. Theophylline c. Valporic acid (Depakene)

b. Lithium d. Digoxin

8. A Cardiac glycoside that is used in the treatment of congenital heart failure and arrhythmias by increasing the

force and velocity by increasing the force and velocity of myocardial contraction is:

a. Digoxin c. Lithium b. Acetaminophen d. Phenytoin

9. Pharmacological parameters that determine serum drug concentration:

Liberation
 absorption
 Distribution
 metabolism

5. Excretion

a. 1 and 3 c. 1, 2, 3 and 4 b. 2 and 4 d. 1, 2, 3, 4 and 5

10. The most serious effect of methanol ingestion is:

a. Hallucinations c. Psychosis b. Blindness d. Liver damage

11. Zinc protoporphyrin or free erythrocyte protoporphyrin measurements are useful to assess blood concentrations

of:

a. Lead c. Arsenic d. Beryllium

12. Estrogen and progesterone receptors assays are useful in assessing prognosis in which of the following?

a. Ovarian cancer c. Breast cancer b. Endometriosis d. Amenorrhea

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13. Which tumor marker is used to determine the usefulness of trastuzumab (Herceptin) therapy for breast cancer?

a. PR c. HER-2/ neu

b. CEA d. Estrogen receptor (ER)

14. Which of the following tumor markers is used to monitor persons with breast cancer for recurrence of disease?

a. Cathepsin- D c. CA- 15-3

b. Retinoblastoma gene d. Estrogen receptor (ER)

15. Body mass index of an obese person?

a. BMI <18.5 kg/m2 UNDERWEIGHT c. BMI 25 to 29.9 k/m2 OVERWEIGHT

b. BMI of 18.5 to 24.9 kg/m2 NORMAL d. BMI> 30 kg/m2 OBESE

16. Body mass index of an overweight person?

a. BMI <18.5 kg/m2 UNDERWEIGHT c. BMI 25 to 29.9 k/m2 OVERWEIGHT

b. BMI of 18.5 to 24.9 kg/m2 NORMAL d. BMI> 30 kg/m2 OBESE

17. Secondary hypothyroidism:

a. Decreased T3 T4, decreased TSH c. Normal T3 T4, Increased TSH

b. Increased T3 T4, Increased TSH b. Decreased T3 T4, Increased TSH

18. Secondary hypothyroidism:

a. Decreased T3 T4, decreased TSH c. Normal T3 T4, Increased TSH

b. Increased T3 T4, Increased TSH b. Decreased T3 T4, Increased TSH

19. The thyroid gland produces all of the following except:

a. TSH c. T3

b. Thyroglobulin d. T4

20.Most useful test for assessing thyroid function:

a. TSH c. Thyroglobulin

b. Serum T3 and T4 d. Thyroid autoimmune antibodies

21. The biologically most active, naturally occurring androgen is:

a. Androstenedione c. Dehydroeplandrosterone

b. Epiandrosterone 4. testosterone

22. Decreases aldosterone:

a. Low serum Na+ and K+ c. Low serum Na+ and high serum K+

b. High serum Na+ and K+ d. High serum Na+, low serum K+

23. Zone fasciculata (F- ZONE) cells, the middle layer of the adrenal cortex produces:

a. Aldosterone c. Cortisol and cortisone

b. Sulfate DHEAs d. All of these

24. Its major action is to regulate renal free water excretion and, therefore, has a central role in water balance:

a. Aldosterone c. Prolactin

b. Oxytocin d. Vasopressin (ADH)

25. Adrenal cushing's syndrome:

a. Increased ACTH and cortisol c. Increased ACTH, decreased cortisol

b. Decreased ACTH and cortisol d. Decreased ACTH, increased cortisol

26. Pituitary cushing's syndrome (cushing's disease)

a. Increased ACTH and cortisol c. Increased ACTH, decreased cortisol

b. Decreased ACTH and cortisol

d. Decreased ACTH, increased cortisol

27. Prolactin, considered a stress hormone, has vital functions in relationship to reproduction. It is produced by the:

a. Anterior pituitary gland c. Thyroid gland

b. Posterior pituitary gland d. Ovaries

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28. Which of the following produces hormones?

1. Anterior pituitary gland

2. Posterior pituitary gland

a. 1 and 2

b. 1, 2 and 3

29. The neurohypophysis is the:

a. Hypothalamus b. Anterior pituitary

a. Renal failure

c. Thyroid gland d. Posterior pituitary

Thyroid gland

c. 1, 3 and 4

d. 1, 2, 3 and 4

4. Parathyroid gland

30. Which of the following is the primary mechanism causing respiratory alkalosis?

c. Congestive heart failure

d. Too much bicarbonate

31. Which of the following is the primary mechanism of compensation for metabolic acidosis?

a. Hyperventilation

b. Hyperventilation

c. Release of epinephrine

b. Aldosterone release

b. Bicarbonate excretion

32. In Emphysema patient suffering from fluid accumulation in the alveolar spaces is likely to be in what metabolic state?

a. Respiratory acidosis

b. Metabolic acidosis

c. Respirator alkalosis b. Metabolic alkalosis

33. In the circulatory system, bicarbonate leaves the red blood cells and enters the plasma through an exchange mechanism with _____ to maintain electroneutrality.

a. Chloride

c. Lactate

b. Carbonic acid

d. Sodium

34. The normal ratio of carbonic acid to bicarbonate in arterial blood is

a. 1:20

c. 0.003: 1.39

b. 7.4: 6.1

d. 20:1

35. Conditions associated with low anion gap may be caused by:

- 1. Uremia/ Renal failure
- 2. Ketoacidosis in starvation or diabetes
- 3. Methanol, ethanol, ethylene glycol, or salicylate poisoning
- 4. Lactic acid
- 5. Hypoalbuminemia
- 6. Hypercalcemia

a. 1, 2 and 3 b. 1, 2, 3 and 4 c. 5 and 6

d. All of these

36. Conditions associated with elevated anion gap may be caused by:

- 1. Uremia/Renal failure
- 2. Ketoacidosis in starvation or diabetes
- 3. Methanol, ethanol, ethylene glycol, or salicylate poisoning
- 4. Lactic acid
- 5. Hypoalbuminemia
- 6. Hypercalcemia

a. 1, 2 and 3 b. 1, 2, 3 and 4 c. 5 and 6

d. All of these

37. It is the major anion that counterbalances the major cation, sodium:

a. Potassium

c. Chloride

b. Magnesium

d. Bicarbonate

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38. Which method is not affected by ex	xcess lipids or proteins causing falsely decreased sodium
(pseudohyponatremia) measurement?	
a. Direct ISE	c. Flame photometry d. None of these
b. Indirect ISE	d. None of these
39. Sodium produces which color in a f	flame?
a. Red	c. Yellow
b. Violet	d. Magnesium
40. Hyponatremia can be classified ac	cording to:
a. Chloride values	c. Glucose determination
b. Anion gap	d. Plasma/ Serum osmolality
41. Which electrolyte is significantly in	nvolved in the transmission of nerve impulses?
a. Iron	c. Potassium
b. Phosphorus	b. Sodium
42. Electrolytes important for blood co	pagulation:
a. Sodium, chloride, potassium	c. Calcium, Magnesium
b. Bicarbonate, potassium, chloride	b. Magnesium, phosphate
43. Electrolytes important for acid bas	
a. Sodium, chloride, potassium	c. Calcium, Magnesium
b. Bicarbonate, potassium, chloride	b. Magnesium, phosphate
44. Electrolyte essential for myocardia	
a. Sodium, chloride, potassium	c. Potassium, magnesium, calcium
b. Bicarbonate, potassium, chloride	d. Calcium, Magnesium
45. CDC reference method for determine	ination of cholesterol:
a. Liebermann Burchardt rreaction	
b. Salkowski reaction	
c. Cholesterol oxidase reaction	
d. Abell, levy and brodie method	
46. Friedwald formula (FF) is not valid	for triglycerides overmg/ dL
a. over 100 mg/dL	
b. over 200 mg/dL	
c. over 300 mg/dL	
d. over 400 mg/dL	
_	easured, fasting becomes a requirement. Require fasting of patients:
a. 2 to 4 hours	c. 6 to 8 hours
b. 4 to 6 hours	d. 12 to 14 hours
48. Triglyceride levels, as chylomicron	s, peak in the blood hours after ingestion of a meal.
a. 2 to 4 hours	c. 6 to 8 hours
b. 4 to 6 hours	d. 12 to 14 hours
49. Abnormal lipoprotein present in palecithin: cholesterol acyltransferase (L	atients with Biliary Cirrhosis or cholestasis and in patients with mutations in _CAT)
a. LDL	,
b. IDL	

c. Lp (a) d. LpX

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reliable indicators for pancreatic ar		
a. Insulinoma b. Ingestion of hypoglycemic drugs	d. Type 2	
51. Dubowski method for glucose ut	ilizes:	to be delta a
a. Phosphomolybdic acid	c. Ortho-	
b. Arsenomolybdic acid	u. Potass	ium ferricyanide
52. A specimen is appropriate for gl	acose analysis if serum or plasma	a is separated from the cells within minutes.
a. 15 minutes	c. 45 min	utes
b. 30 minutes	d. 60 min	utes
53. It is a sensitive test for cholesta	is caused by chronic alcohol or (drug ingestion:
a. AST	c. ALT	
b. ALP	d. GGT	
54. In the bowers and mccomb met	nod for determining alkaline pho	sphatase activity, the substrate used is:
a. Monophosphate	c. Disodiı	ım phenylphosphate
b. Phenylphosphate	b. Para- r	itrophenylphosphate
	· · · · · · · · · · · · · · · · · · ·	reaking of the pyrophosphate bond in adenosine
triphosphate (ATP) or a similar com	c. Ligase	
a. Transferase	b. Lyase	
b. Hydrolase	j	
56. Inorganic cofactors, such as chl	·	
a. Apoenzyme	c. Coenzy	
b. Holoenzyme	d. Activat	cor
57. One international Unit (IU) of en substrate concentration, ph and ter		nzyme that under specified reaction conditions of rate at the rate of:
a. 1 Millimole/ min		omole/ min
b. 1 Nanomole/ min	d. 1 Picor	nole/ min
_		ight cause a false increase in this analyte?
a. The patient had two cigarettes 15	·	
b. The patient was fasting for hours		m inc
c. Immediately after phlebotomy, th d. The patient has a steak dinner the	•	on ice
59. A complete deficiency of hypox	anthine guanine phosphoribosyl	ransferase results in which disease?
a. Lesch- Nyhan syndrome	c. Megaloblastic anemia	
b. Maple syrup urine disease	d. Reye's syndrome	
60. When plasma creatinine concer	tration is elevated, GFR is, i	ndicating renal damage.
a. Increased	c. Normal	
b. Decreased	d. Variable	
61. Azotemia due to obstruction of prostate, or severe infection: a. Pre- renal azotemia b. Renal azotemia	ırine flow anywhere in the urinar	y tract by renal calculi, tumors of the bladder or
c. Post- renal azotemia		
d. None of these		

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62. Prerenal azotemia is causes by:	
a. Acute renal failure	c. Congestive heart failure
b. Chronic renal failure	d. Urinary tract obstruction
	•
but who do not demonstrate a protein deficiency, is:	ie malnourished and lose both adipose and muscle tissue,
a. Marasmus	D. 1.335 (c. 1.
	c. Debilitated
b. Kwasgiorkor	d. None of these
64. Biochemical marker for bone resorption that can be de	etected in serum and urine:
a. Troponin	c. Fibronectin
b. Adiponectin	d. Cross- linked C- telopeptides (CTXs)
65. Variants demonstrate a wide variety of cellular interac	tions, including roles in cell adhesion, tissue
differentiation, growth, and wound healing:	c. Fibronectin
a. Troponin	d. Cross- linked C- telopeptides (CTXs)
b. Adiponectin	
66. Indicator of nutrition; binds thyroid hormones and ret	inol (vitamin A) binding protein:
a. Orosomucoid	c. Prealbumin
b. Ceruplasmin	b. Hemopexin
	·
67. In a chemical reaction, the amount of product formed	
and the related to the concentration of the analyte in the	unknown. This type of measurement is known as: c. Rate
a. Colorimetric	b. Ultraviolet
b. End-point	b. Ottraviolet
68. The process by which fluorescence of an analyte is red	uced due to its energy by interacting with other substances
in solution known as:	
a. Ionization	c. Phosphorescence
b. Quenching	d. self- absorption
_	·
69. Reflectance spectrometry uses which of the following	
a. Luminometer	c. Tungsten- halogen lamp
b. Photomultiplier tube	d. UV lamp

70. The lamps most commonly used for ultraviolet (UV) work are:

a. Deuterium and mercury arc lamps

c. Silicon carbide rod

b. Tungsten- halogen lamps

d. Tungsten lamp

71. The more light absorbed, the higher the concentration of analyte in this technique of measuring the amount of light absorbed by a solution

a. Atomic absorption

c. Nephelometry

b. Fluorometry

d. Spectrophotometry

72. Beer's law states that the concentration of a substance is (1) ___ proportiona to the amount of light absorbed or (2) ___ proportional to the logarithm of the transmitted light

a. Directly, inversely

b. Indirectly, direct

c. Both directly proportionald. Both inversely proportional

73. Colligative properties include all of the following, except:

- a. Osmolality
- b. Vapor pressure
- c. Freezing point
- d. Osmotic pressure

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74. This centrifuge uses a very high- torque and low- inertia motor to spread monolayers of cells rapidly across a special slide for critical morphologic studies:

a. Horizontal centrifuge
b. Fixed- angle centrifuge
c. Ultracentrifuge
d. Cytocentrifuge

75. Chemicals should be stored:

a. Alphabetically, for easy accessibility c. According to their chemical properties and classification

b. Inside a safety cabinet with proper ventilation d. Inside a fume hood, if toxic vapors can be released when

opened

76. The purest type of reagent water is:

a. Type I c. Type III b. Type II d. All are equal

77. Physical actions can, overtime, contribute to repetitive strain disorders such as tenosynovitis, bursitis, and

ganglion cysts:

a. Mechanical hazard c. Ergonomic hazard

b. Cryogenic hazard
d. Compressed gases hazard

78. No recirculation; total exhaust to the outside through a hepa filter:

a. BSC Class IIA1 c. BSC Class IIB1 b. BSC Class IIB2

79. Thirty percent (30%) recirculated, 70% exhausted air:

a. BSC Class IIA1 c. BSC Class IIB1 b. BSC Class IIB2

80. Seventy percent (70%) recirculated to the cabinet work area through hepa; 30% balance can be exhausted

through hepa back into the room or to outside through a canopy unit:

a. BSC Class IIA1 c. BSC Class IIB1 b. BSC Class IIB2 b. BSC Class IIB2

81. These pipettes have an oval bulb in the center and a tapered dispensing end:

a. Mohr c. Volumetric b. Ostwald- Folin d. Serologic

82. These pipettes have the bulb closer to the delivery tip and are used for accurate measurement of viscous fluids,

such as blood or serum:

a. Mohr c. Volumetric b. Ostwald- Folin d. Serologic

83. Defined as parts per hundred parts:

a. Concentration c. Percent d. Osmolality

84. An indication of relative concentration:

a. Concentration c. Percent d. Osmolality

85. Gradual change in the control sample results:

a. Shift

b. Trend or drift

c. Dispersion

d. None of these

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86. Chance an individual does not have a given disease or condition if the test is within the reference interval:

a. Diagnostic sensitivity

b. Diagnostic specificity

c. Positive predictive value
d. Negative predictive value

87. The criteria for a good standard curve is/are:

a. The line is straight c. The line goes through the origin, or intersects, of the two axes

b. The line connects all points d. all of these

88. All are advantages of POINT-OF-CARE TESTING (POCT) EXCEPT:

a. Smaller blood specimen required c. Fast turnaround time

b. Patient convenience d. Lower cost

89. Most evacuated tubes on the market have at least ___ month/s shelf life.

a. 2 Months c. 6 Months b. 3 Months d. 12 Months

90. In situations where blood is drawn at high altitudes (>5,000 FEET):

a. Decrease in draw volume c. Same blood draw volume

b. Increased in draw volume b. Cannot be determined

91. If evacuated tubes are stored at low temperature

a. Decrease in draw volume

b. Increased in draw volume

c. Same blood draw volume

b. Cannot be determined

92. Most common complication of phlebotomy:

a. Anemia c. Vascular b. Cardiovascular b. Infection

93. Symptoms of hypoglycemia usually occur when blood glucose has fallen below ___ mg/ dL

a. 50 mg/dL c. 70 mg/dL b. 60 mg/dL d. 80 mg/dL

94. The plasma protein mainly responsible for maintaining colloidal osmotic pressure in vivo is:

a. Albumin c. Alpha2- macroglobulin

b. Pre-albumin d. Beta2- microglobulin

95. The smallest and most dense lipoprotein particle:

a. LDL c. VLDL

b. HDL d. Chylomicrons

96. What is the compound that comprises the majority of the NPN fractions in serum?

a. Uric acid c. Ammonia b. Creatinine d. Urea

97. Most common drug of abuse:

a. Cocaine

b. Ethanol

c. Methanol

d. Marijuana

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98. Which type of cancer is associated with the highest level of AFP?

a. Hepatoma c. Testicular cancer

b. Ovarian cancer d. Breast cancer

99. Chemical name of vitamin B2:

c. Riboflavin a. Retinol d. ascorbic acid b. Thiamine

100. The biologically most active, naturally occurring androgen is:

a. DHEA c. Epiandrosterone b. Androstenedione

d. Testosterone

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c. Isthmus

d. Cavities

1. The saccharogenic method for amylase determinations a. The amount of product produced	
b. The amount of substrate consumed	c. The amount of iodine presentd. The amount of starch present
2. Elevation of tissue enzymes in serum may be used to de	tect
a. Tissue necrosis or damage	c. Infectious diseases
b. Inflammation	d. Diabetes mellitus
3. Elevation of serum amylase and lipase is commonly see	
a. Acute pancreatitis	c. Gallbladder disease
b. Acute appendicitis	d. Acid reflux disease
4. The isoenzymes LD-4 and LD-5 are elevated in	
a. Liver disease	c. Renal disease d. Myocardial infarction
b. Pulmonary embolism	d. Myocardiat illiarction
5. What is the most heat stable ALP isoenzyme?	
a. Placenta	c. Liver
b. Intestine	d. Bone
6. What organ produces vasopressin?	
a. Hypothalamus	c. Anterior Pituitary
b. Posterior Pituitary	d. Adrenal cortex
7. What common substrate is used in the biosynthesis of a	drenal steroids?
a. Tyrosine	c. Progesterone
b. pH	d. Cholesterol
8. Diurnal, EXCEPT:	
a. GH	c. ACTH
b. Prolactin	d. LH
9. Tropic hormones, EXCEPT:	
a. TSH	c. GH
b. ACTH	d. FSH
10. A hormone and an enzyme	
a. Renin	c. TSH
b. ADH	d. Cortisol
11. Calcium concentration is regulated by:	
a. Insulin	c. Thyroxine
b. Parathyroid hormone	d. Vitamin C
12. Fundamental to thyroid physiology	
a. lodine	c. TSH
b. Thyroglobulin	d. TRH
13. Thyroid hormones are derived from which of the follow	ving?
a. Histidine	c. Tyrosine
b. Cholesterol	d. Phenylalanine
14. The thyroid gland produces all of the following EXCEPT	`` ``
a. TSH	c. T3
b. Thyroglobulin	d. T4

15. Thyroid cells are organized into ____.

a. Follicles

b. Colloids

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16. It is the center of thyroid hormone production a. Follicle b. Colloid	c. Isthmus d. Cavities	
17. Thyroxine present in largest amounta. Freeb. Ionized	c. Bound to albumin d. Bound to globulin	
18. Which is NOT a function of the thyroid gland?a. Protein synthesisb. Development of fetal brain	c. Waste excretion d. Regulation of metabolism	
19. All of the following are symptoms of hypothyroidism,a. Fatigueb. Depression	EXCEPT: c. Cold intolerance d. Good appetite	
20. Hypothyroidism is generally associated with all of thea. TSH receptor antibodiesb. Depression	e following EXCEPT: c. An elevation of TSH levels d. TPO antibodies	
21. Sensitive marker for hyperfunctioning thyroid gland: a. TSH b. T4	c. T3 d. Tg	
22. The primary serum test to screen for thyroid disease: a. TSH b. T4	c. T3 d. Tg	
23. If the screening TSH is high, which test is likely to be a cholesterol b. FT4	ordered next? c. Ferritin d. Glucose	
24. In patients with developing subclinical hyperthyroid	ism, TSH levels will likely be, and fT4 will likely be	
a. Decreased, increased b. Increased, decreased	c. Decreased, normal d. Increased, normal	
25. Insulin-like growth factor-1 is produced in the: a. Pituitary gland b. Thyroid gland	c. Bone d. Liver	
 26. All of the following are true for thyroid gland EXCEPT: a. Depends on TPO to permit iodination of the tyrosyl residues to make MIT and DIT b. Is an ineffective iodine trap c. Depends on TPO to permit the joining of two DIT residues to form T3 d. Usually functions independent of TSH levels 		
27. Causes excess cortisol: a. Cushing syndrome b. Addison's disease	c. Conn's syndrome d. Acromegaly	

a. Klinefelter syndrome b. Turner syndrome

c. Congenital adrenal hyperplasia

d. Down syndrome

28. Female born with XX chromosomes develops ambiguous genitalia or genitals that appear male. What is this

29. Master gland:

condition?

a. Hypothalamus c. Thyroid gland b. Pituitary gland d. Adrenal gland

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30. What is the most abundant pituitary hormone?

a. TSH c. LH b. GH d. FSH

31. Which of the following tissues does not secrete steroid hormones?

a. Ovaries c. Testes

b. Pituitary gland d. Adrenal cortex

32. Which of the following hormones involved in calcium regulation acts by decreasing both calcium and

phosphorous?

a. PTH c. Vitamin D b. Calcitonin d. Cortisol

33. It is measured in plasma and CSF as a marker for bacterial infection.

a. Albumin

c. Procalcitonin b. Troponin d. Cortisol

34. The first hormones to respond to stress

a. Cortisol c. Catecholamine

b. Aldosterone d. DHEA

35. Which hormone is responsible for an increase in body temperature after ovulation?

a. Estrogen c. Progesterone

b. LH d. FSH

36. This hormone is given to a pregnant woman in order to induce contractions:

c. Estrogen a. Oxytocin

d. Progesterone b. Prolactin

37. Which test is the most specific for myocardial infarction?

c. Myoglobin a. CK d. Troponin b. LDH

38. In analyzing cardiac markers, which marker increases first?

a. Decreased, increased c. Decreased, normal d. Increased, normal b. Increased, decreased

39. Anticoagulant of choice for TDM

a. EDTA c. Sodium fluoride

b. Heparin d. Oxalate

40. What is the most common substance abused?

a. Cannabinoids c. Shabu b. Ecstasy d. Alcohol

41. Specimen for drug analysis EXCEPT:

c. Semen a. Blood

d. Oral Secretions b. Urine

42. Validity of drug test result:

a. 6 months c. 2 years b. 1 year d. 3 years

43. An enzyme that is also used as a tumor marker.

c. Aldolase a. LD d. Catalase b. Lipase

44. A tumor marker used in the assessment of choriocarcinoma or hydatidiform mole is

c. AFP a. B-hCG

d. IgG b. CEA

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45. Tumor marker tests are used to:

a. Monitor response to therapy c. Detect recurrent disease

b. Aid in staging of cancer d. All of these

46. CA 19-9 is what type of tumor marker?

a. Hormone c. Protein b. Carbohydrate d. Enzyme

47. Which of the following is NOT a driving force for more automation?

c. Fast turnaround time a. Increased use of chemistry panels

d. Expectation of high-quality, accurate results b. High-volume testing

48. Which of the following steps in automation generally remains a manual process in most laboratories?

c. Reagent delivery a. Preparation of the sample

d. Chemical reaction phase b. Specimen measurement and delivery

49. Which of the following are considered medical emergencies?

I. Diabetic ketoacidosis II. Renal Glycosuria III. Marked Hyperkalemia

a. I, II, III c. I, II b. I, III d. I

50. What is the national reference laboratory for Clinical Chemistry?

a. EAMC c. LCP b. SLH d. NKTI

51. Sealed heparinized arterial blood was left at room temperature for 2 hours. The most likely changes in PO2

(mmHg), PCO2(mm Hg), and pH, respectively, are:

C. Decrease, increase, and decrease A. Increase, increase and increase D. Decrease, decrease, and increase B. Decrease, decrease, and decrease

52. The adrenal medulla secretes which of the following in the greatest quantity?

C. Epinephrine A. Metanephrine D. Dopamine B. Noradrenaline

53. Homovanillic acid is the principal urine metabolite of:

A. Norepinephrine C. Epinephrine B. Epinephrine

54. Diurnal variation is important to consider when collecting blood for the assay of:

A. Catecholamines C. Cortisol

D. Thyroid hormones B. Creatinine

55. T-3 uptake is actually a measurement of:

C. TBG A. T-3

D. Free thyroxine B. T-4

56. Active hormonal form of T3 an T4:

A. Those bound to TBG C. Those bound to transthyretin

D. Those in free from B. Those bound to albumin

57. The principle is based on the reaction of urinary estrogen with a mixture of phenol and sulfuric acid to produce

D. Dopamine

pink color. This refers to:

A. Kober reaction C. Zimmermann reaction B. Trinder reaction D. Porter-Silber reaction

58. The Kober reaction is used in the assay of:

C. Testosterone A. Urinary estrogen

B. Glucocorticoids D. Epinephrine

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59. In the Porter-Silber assay, the	e dihydroxyacetone side chain of	f the steroid hormone	reacts with:
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- A. Sulfuric acid-hydroquinone and forms reddish-brown color
- B. m-dinitrobenzene and forms purple color
- C. Ceric and arsenite compound and forms a yellow product
- D. 2, 4 -dinitrophenylhydrazizne and forms a yellow derivative

60. The assay employed for 17-ketosteroids, in which steroids react with m-dinitrobenzene in alcoholic KOH solution resulting to the formation of a purple color:

A. Kober Reaction C. Porter-Silber Reaction

B. Zimmerman reaction D. Pisano Method

61. Zollinger-Ellison syndrome is characterized by elevated blood levels of:

A. Cholecystokinin C. Pepsin
B. Trypsin D. Gastrin

62. Tumor marker most useful in the detection of familial medullary carcinoma of the thyroid:

A. Calcitonin C. CEA
B. CA 125 D. CA 19-9

63. What metal toxin in urine is detected by the Reinsch test?

A. Lead C. Bromide B. Mercury D. Zinc

64. Trinder's reagent (mercuric chloride, HCl, and ferric nitrate) is used in the colometric assay for:

A. Acetaminophen

B. Salicylate

C. Theophylline

D. Ethanol

65. Caffeine is an important metabolite of this drug, which is assayed in newborns and young children to monitor its therapeutic level. What is this?

A. Acetaminophen C. Theophylline
B. Digoxin D. Phenobarbital

66. Odor of bitter almond gives a clue of:

A. Cyanide poisoning C. Arsenic poisoning

B. Ethanol poisoning D. Carbon monoxide poisoning

67. Benzoylecgonine is the major metabolite of:

A. Heroin C. Cocaine
B. Marijuana D. Phencyclidine

68. The formation of this crystal in urine, although not a constant finding is an important diagnostic clue of ethylene glycol poisoning:

A. Uric acid C. Triple phosphate
B. Ammonium biurate D. Calcium oxalate

69. What is the major carrier of drugs in the circulation?

A. Albumin C. Transferrin
B. Globulin D. Hemoglobin

70. Fire extinguishers designated as Class A are used for:

A. Paper and wood C. Flammable liquids and gases

B. Electrical equipment fire D. All of the above

71. It is a specialized colorimeter designed to scan and quantitate electrophoresis patterns:

A. Densitometer C. Atomizer

B. Detector D. Monochromator

CLINICAL CHEMISTRY EXAM

72. The element that distinguishes proteins from carboh	ydrate and lipid compounds is:
A. Carbon	C. Nitrogen
B. Oxygen	D. Phosphorus
73. Parfentjev's method is for the determination of:	
A. Fibrinogen	C. Globulin
B. Albumin	D. Amylase
74. Apolipoprotein A is the primary protein component of	of:
A. HDL	C. LDL
B. IDL	D. VLDL
75. It is biologically important, as it serves as the starting	g point in many metabolic pathways including Vitamin D
synthesis, steroid hormone synthesis, and bile acid meta	
A. Cholesterol	C. Triglycerides
B. Phospholipid	D. Free fatty acids
2.1 1100p1101ip10	D. Tree facty acids
76. What is the current reference method for cholestero	l analysis?
A. Abell-Kendall method	C. Salkowski method
B. Bloor's method	D. Lieberman-Burchardt
77. A mild condition that appears to result from a genetic	c defect in transport of bilirubin from sinusoidal blood int
the hepatocyte:	C. Dubin-Johnson
A. Gilbert Syndrome	D. Rotor Syndrome
B. Crigler-Najjar Syndrome	D. Notor Syndrome
78. What reagent is used in the Evelyn-Malloy method to	dissociate the unconjugated bilirubin from protein?
A. Methanol	C. Caffeine
B. Ethanol	D. Acetic acid
79. The Jaffe reaction is employed for the quantitation of	of·
A. Urea	C. Protein
B. Creatinine	D. Uric acid
80. Lloyd's reagent improves the specificity of what cold A. Jaffe	
	C. Lieberman-Burchardt
B. Caraway	D. Biuret
81. What is the major end product of protein and amino	acid catabolism?
A. Urea	C. Creatine
B. Uric acid	D. Creatinine
82. Uric acid when oxidized by the enzyme uricase is trar	nsformed to:
A. Allantoin	C. Xanthine
B. Monosodium urate	D. Ammonia
83. The sweat chloride test is useful in the diagnosis of:	
A. Dehydration	C. Azotemia
B. Cystic fibrosis	D. Diabetes
84. Which trace metal accumulates in Wilson's disease?	
A. Cobalt	C. Nickel
B. Copper	D. Zinc
85. What is the anticoagulant of choice for blood gas and	alvsis?
22 and an analysis of onlored for broom bus unit	y

C. Oxalate

D. Citrate

A. EDTA

B. Heparin

CLINICAL CHEMISTRY EXAM

86. The pH of blood is critically maintained at what le	vel:
A. 7.00-7.50	C. 7.15-7.35
B. 7.50-7.70	D. 7.35-7.45
87. In which of the following are the thyroid hormone:	s classified:
A. Amino acid derivatives	
B. Steroid hormones	C. Fatty acid derivatives D. Peptide hormones
	D. Peptide normones
88. Which of the following polypeptide hormones may beta chains that are biochemically unique?	y be described as having alpha chains that are biochemically identical but
A. FSH, TSH, ACTH, LH	C. LH, ACTH, HCG, TRH
B. TSH, LH, TRH, HCG	D. HCG, FSH, TSH, LH
89. The thyroid gland produces all of the following ho	
A. TSH	C. Thyroxine
B. Calcitonin	D. Triidothyronine
90. In hypothyroidism, one would expect the total T4	level to be, and the T3 uptake to be
A. Increased, increased	C. Decreased, increased
B. Decreased, decreased	D. Increased, decreased
91. How can primary hypothyroidism be differentiate	d from secondary hypothyroidism?
A. T3	C. TSH
B. T4	D. Both A and B
92. 5-Hydroxyindoleacetic acid is the primary metabo	
A. Epinephrine	C. Norepinephrine
B. Prolactin	D. Serotonin
93. A marked increase in 5-HIAA excretion occurs in p	atients with:
A. Argentaffinoma	C. Diabetes insipidus
B. Pheochromocytoma	D. Diabetes mellitus
04. Digavin proceinamide and quiniding are drugs th	at may be electified as:
94. Digoxin, procainamide and quinidine are drugs th a A. Aminoglycosides	C. Antidepressant
B. Anticonvulsants	D. Cardioactive
95. Lithium therapy is widely used in the treatment of	
A. Hypertension	C. Aggression
B. Hyperactivity	D. Manic-depression
96. A drug that relaxes the smooth muscles of the bro	nchial passages is:
A. Acetaminophen	C. Phenytoin
B. Lithium	D. Theophylline
07 Which of the fallowing statements moutains to	the effect of other old
97. Which of the following statements pertains to	
1. Ethanol functions as a depressant of the central ner	•
2. Initial effect is an increase in heart rate and blood p 3. Long-term abuse can impair most organs of the bod	
4. Blood alcohol content of 0.35 to 0.50 % is associate	
4. 1 and 3	C. 1, 2 and 3
B. 2 and 4	D. 1, 2, 3 and 4
98. This toxin has high affinity to keratin, can be i	dentified from hair and nails:
A. Lead	C. Mercury
B. Cyanide	D. Arsenic
99. This common substance of abuse is derived from	Cannabis sativa leaves and stems. Which of the following is it?
A. Heroine	Cannabis sativa leaves and stems. Which of the following is it: C. Marijuana
	O. Mangana

D. Amphetamines

D. Vit. K

100. All of the following vitamins are lipid in nature and classified as fat-soluble, EXCEPT:

A. Vit. A

C. Vit. D

B. Cocaine

A. Vit. A

B. Vit. C

CLINICAL CHEMISTRY EXAM

1. True about analbuminemia EXCEPT:

a. Low/absent levels in serum

c. Acquired

b. Congenital

d. Autosomal recessive

2. A congenital disorder characterized by a split in the in the albumin band when serum is subjected to electrophoresis is known

a. Analbuminemia

c. Bisalbuminemia

b. Anodic albuminemia

d. Prealbuminemia

3. Which of the following has been found to be the most sensitive and helpful indicator of nutritional status in very ill patients?

a. Transthyretin

c. Albumin

b. Transferrin

d. Somatomedin C

4. What is the formula for globulin?

a. TP + albumin b. TP - albumin c. TP x albumin d. TP / albumin

5. What is the normal albumin: globulin ratio?

a. 1:2 b. 2:1 c. 5:1

d. 1:5

6. The following are the amino acids where creatine is synthesized from, EXCEPT:

a. Glycine

c. Arginine

b. Methionine

d. Cysteine

7. The uric acid is synthesized from the following, EXCEPT:

a. Adenine b. Purine

c. Thymidine

d. Guanine

8. What is the indirect measure for urea determination?

a. Fearon

c. Uricase

b. Jaffe

d. Berthelot

9. What is the indirect method for uric acid determination?

a. Urease b. Uricase c. Berthelot

d. Nesslerization

10. What is the indirect method for ammonia determination?

a. Nesslerization

c. Uricase

b. Glutamate dehydrogenase

d. Berthelot

11. The sample used for this analyte is EDTA plasma which is placed on ice.

a. Urea

c. Creatinine

b. Ammonia

d. Uric acid

12. The protein content of the diet will affect primarily the test results for:

a. Creatinine

c. Uric acid

b. Creatine

d. Urea

13. Specimen for ammonia should be centrifuged within how many minutes?

a. 10

c. 30

b. 20

d. 60

14. If there is a delay of testing for ammonia, the specimen should be put at what temperature?

a. 37C

c. 4C

d. -20C b. 22C

15. When measuring ammonia blood levels, which of the following might cause a false increase in this analyte?

- a. The patient had two cigarettes 15 minutes prior to blood draw.
- b. The patient was fasting for hours prior to blood collection.
- c. Immediately after phlebotomy, the blood sample was maintained on ice.
- d. The patient had a steak dinner the night before the blood draw.

CLINICAL CHEMISTRY EXAM

16. Creatinine concentration in the blood has a direct relationship to: a. Muscle mass c. Age and gender b. Dietary protein intake d. More than one of the above 17. BUN = 80; Crea = 4 a. Malnutrition c. Chronic Kidney Disease b. Low protein intake d. Overhydration 18. A BUN:Crea ratio of >20:1 with normal crea indicates: a. Pre-renal disease c. Post-renal disease b. Renal disease d. Normal 19. Any condition that results in a decrease in blood flow to the kidney results to: a. Pre-renal azotemia c. Post-renal azotemia b. Renal azotemia d. None of the above 20. It comprises the majority of NPNs in serum. a. Uric acid c. Ammonia d. Urea b. Creatinine 21. Which one of the following is not an NPN substance? c. Creatinine a. Allantoin d. Urea b. Ammonia 22. An urea N result of 9 mg/dL is obtained by a technologist. What is the urea concentration? c. 18.0 mg/dL a. 3.2 mg/dL d. 19.3 mg/dL b. 4.2 mg/dL 23. A complete deficiency of hypoxanthine guanine phosphoribosyltransferase results in which disease? a. Lesch-Nyhan syndrome c. Maple syrup urine disease b. Modification of diet in renal disease d. Reye's syndrome 24. CrCl is used to estimate the c. Renal glomerular and tubular mass a. Tubular secretion of creatinine d. Glomerular filtration rate b. Glomerular secretion of creatinine 25. What specimen/s is/are collected for the determination of creatinine clearance? c. First morning urine a. Plasma and 24-hour urine d. Midstream clean catch urine b. Plasma only 26. All of the following are the parameters used for the calculation of estimated GFR (eGFR) EXCEPT: c. Urine creatinine a. Gender and race d. BUN and albumin b. Blood Creatinine 27. n the Jaffe reaction, a red-orange chromogen is formed when creatinine reacts with: a. Picric acid c. Diacetyl monoxime b. Biuret reagent d. Both a and b 28. Testing blood from a patient with acute glomerulonephritis would most likely result in which of the laboratory findings? a. Decreased creatinine c. Increased glucose b. Decreased urea d. Increased creatinine 29. Chylomicron comes from _____ to the thoracic duct and then to the circulation. a. Blood c. Pericardium b. Peritoneum d. Lymph

30. Which of the following is considered a lipid?

a. Chylomicrons

c. Cholesterol

b. LDL

d. HDL

CLINICAL CHEMISTRY EXAM

31. In what major organ of the body is the majority of the body's cholesterol synthesized?

a. Heart c. Gallbladder b. Pancreas d. Liver

32. Which lipoprotein migrates farthest towards the anode during electrophoresis?

a. Chylomicron c. LDL b. VLDL d. HDL

33. What is the patient preparation for lipid?

a. Water not allowed, fast for 10 hrs. c. Water allowed, fast for 12 hrs

b. Water, smoking, coffee, tea allowed, fast for 10 hrs d. Water, smoking, coffee, tea allowed, fast for 16 hrs

34. Which of the following would be most adversely affected by a nonfasting sample?

a. HDL c. Cholesterol b. LDL d. Triglycerides

35. What is the current reference method for cholesterol analysis?

c. Bloor's method a. GC-MS d. Salkowski method b. Abell-Kendall method

36. Two step method for cholesterol analysis:

c. Abell-Kendall a. Pearson, Stern, and Mac Gavack d. Schoenheimer b. Bloors

37. What is the end color of the Salkowski reaction?

c. Yellow a. Orange d. Green b. Red

38. What is the end color of the Van Handel and Zilversmith reaction?

c. Yellow a. Orange b. Red d. Blue

39. The most likely cause for serum/plasma to appear "milky" is the presence of

c. LDL a. Chylomicrons d. HDL b. VLDL

40. Which lipoprotein delivers endogenous lipids?

c. LDL a. Chylomicron d. HDL b. VLDL

41. An abnormal lipoprotein found in patients with obstructive biliary disease:

c. Lp(a) a. B-VLDL d. LDL b. LpX

42. Which of the following is referred to as the "good cholesterol"?

a. HDL c. VLDL

b. LDL d. Free cholesterol

43. Which of the following apoproteins is responsible for receptor binding for IDL and the chylomicron remnant produced in fat transport?

a. Apo A1 c. Apo E b. Apo C d. Apo B

44. Which of the following enzymes is found bound to HDL and LDL in blood plasma and acts to convert free cholesterol into

cholesteryl esters?

c. LCAT d. CETP

a. Cholesterol esterase b. Lipoprotein lipase

45. Which of the following transfers cholesterol esters to chylomicrons and LDL from the HDL?

a. Cholesterol esterase

b. Lipoprotein lipase

c. LCAT

d. CETP

CLINICAL CHEMISTRY EXAM

46. Which is NOT true about unconjugated bilirubin?

a. Direct bilirubin c. Indirect bilirubin b. Water insoluble d. Non-polar

47. The bilirubin fraction that is covalently attached to albumin and contributes to the conjugated bilirubin value is:

a. Direct c. Delta b. Indirect d. Bound

48. Considered as a liver function test, EXCEPT:

a. AST c. Amylase b. ALT d. ALP

49. Hepatocellular damage may be best assessed by which of the following parameters?

a. Serum AST and ALT levels c. Bilirubin, GGT, and ALP b. GGT and ALP d. Ammonia and urea

50. Jendrassik-Grof method reagent

a. Caffeine c. N-butanol d. Acetic acid b. Methanol

51. What is the purpose of the caffeine in the Jendrassik-Grof method?

a. Catalyst c. Accelerator b. Coenzyme d. Cofactor

52. What is the formula for indirect bilirubin?

a. TB + DB c. TB x DB b. TB - DB d. TB / DB

53. In an adult, if total bilirubin value is 3.1 mg/dL and conjugated bilirubin is 1.1 mg/dL, what is the unconjugated bilirubin value?

a. 2.0 mg/dL

c. 1.0 mg/dL d. 3.4 mg/dL b. 4.2 mg/dL

54. Liver disease, EXCEPT:

a. Anemia c. ALT b. Hemochromatosis d. AST

55. Gastric enzyme proteolysis:

a. Gastrin c. Lipase b. Amylase d. Trypsin

56. Chief plasma cation whose main function is maintain osmotic pressure:

a. Chloride c. Sodium b. Calcium d. Potassium

57. What formula is this: Na+ + K+ - (Cl- + HCO3-)?

c. Henderson-Hasselbach equation a. Anion gap

b. Osmolal gap

58. In the Henderson-Hasselbach equation, the numerator denotes the function of:

a. Kidney c. Lung b. Liver d. Heart

59. In the Henderson-Hasselbach equation, the denominator denotes the function of:

a. Kidney c. Lung b. Liver d. Heart

60. Calculation of the anion gap is useful for QC of:

- a. Calcium
- b. Electrolyte profile
- c. Phosphorous
- d. Magnesium

CLINICAL CHEMISTRY EXAM

61. Considering a normal G	Gaussian curve distribution,	how many values	from a population will be within 2 SD?
----------------------------	------------------------------	-----------------	--

A. 95.45% C. 68.27% B. 75.30% D. 99.73%

62. A delta check:

- A. Relates control difference from mean
- B. Reports patient value difference from previous analysis
- C. Evaluates statistical drift
- D. Flags abnormal results

63. Which of the following instruments is used in the clinical laboratory to detect beta and gamma emissions?

A. Fluorometer

B. Nephelometer

C. Scintillation counter

D. Spectrophotometer

64. In potentiometry, the following are types of reference electrodes, EXCEPT:

A. Glass electrode

B. Standard hydrogen electrode C. Saturated calomel electrode

D. Silver-silver chloride electrode

65. Which of the following substances are introduced in a continuous-flow analyzer to minimize diffusion of reagents and mixing between samples?

A. Membranes C. Air bubbles
B. Resins D. Gel polymers

66. The protein fraction that migrates the fastest toward the anode

A. Albumin C. Alpha1-globulin B. Beta-globulin D. Gamma-globulin

67. Which of the following substances is markedly increased in nephrotic syndrome?

A. Ceruloplasmin C. Alpha-1-antitrypsin

B. Alpha-2-macroglobulin D. Albumin

68. The neocuproine method for glucoses is based on:

A. Glucose oxidase reaction

B. Copper reduction by glucose

C. Condenstaion reaction

D. Hexokinase reaction

69. Select the enzyme most specific for beta D-glucose

A. Hexokinase

B. Glucose-6phosphate dehydrogenase

C. Phosphohexisomerase

D. Glucose oxidase

70. All of the following are characteristics of Type II diabetes mellitus except:

A. Insulin levels may or may not be abnormal

B. It is more common than Type I diabetes

C. It requires insulin therapy to control hyperglycemia

D. It is associated with obesity and more common in persons greater than 40 years old

71. Select the order of mobility of lipoproteins electrophoresed on cellulose acetate or agarose at pH 8.6.

A. - Chylomicrons -prebeta- beta - alpha +

B. - Beta - prebeta - alpha- chylomicrons +

C. - Chylomicrons - beta - prebeta - alpha +

D. - Alpha - beta - prebeta- chylomicrons +

72. Select the lipoprotein fraction that carries most of the endogenous triglycerides

A. VLDL C. HDL

B. LDL D. Chylomicrons

73. The lipoprotein that transports the exogenous triglycerides:

A. HDL C. VLDL

B. LDL D. Chylomicrons

74. Apolipoprotein A is the primary protein component of:

A. HDL C. VLDL

B. LDL D. None of these

CLINICAL CHEMISTRY EXAM

75.All are TRUE for CRP, EXCEPT	
a. Elevated in bacterial infection	c. It is an acute inflammatory marker
b. It may be used as a cardiac marker	c. It is an acute inflammatory markerd. It is a chronic inflammatory marker
b. It may be used as a caraide marker	d. It is a chrome initallimatory marker
76. Overall process of guaranteeing quality patient care and i	
a. Quality Assessment	c. Quality Assurance
b. Quality Control	d. Quality Systems
77. Method A and Method B for cholesterol both give a value analyzed by Method A gives 185 mg/dL and by Method B give a. Method B is biased	of 200 mg/dL for a serum sample; however, the same QC materiales 212 mg/dL. What might cause this?
b. Method A is imprecise	
c. Both methods are showing a matrix effect for the QC mater	ial
d. Any of the above answers may be correct	
78. A Gaussian distribution is usually:	
A. Bell-shaped	C. Bimodal
B.Rectangular	D. Skewed
79. What type of additive is in a blood collection tube with a	
a. Lithium or sodium heparin	c. Thrombin
b. Potassium EDTA	d. No additive
80. Blood is collected from a patient who has been fasting sir tests would NOT give a valid test result?	nce midnight; the collection time is 7 am. Which of the following
a. Cholesterol	c. Total bilirubin
b. Triglycerides	d. Potassium
91 All of the following migrate with the alpha? globuling EV	PEDT.
81. All of the following migrate with the alpha2 globulins, EXC	JEP I.
a. Alpha2-macroglobulin	c. Haptoglobin
b. Ceruloplasmin	d. Transferrin
82. Hormone that regulates synthesis and release of the thyr	oid hormones is produced in:
a. Hypothalamus	c. Posterior pituitary gland
b. Anterior pituitary gland	d. Thyroid
83. A drug that relaxes the smooth muscles of the bronchial p	passage:
a. Acetaminophen	c. Phenytoin
b. Lithium	d. Theophylline
84. Violation of which rule does NOT indicate systematic erro	or?
a. 1:3s	c. 2:1s
b. 4:1s	d. 2:2s
OF Which of the fellowing entire equipments is generally evitable	a for most dwid analyses (TDM)2
85. Which of the following anticoagulants is generally suitabl a. Heparin	c. Citrate
b. EDTA	
b. EDTA	d. Oxalate
86. Effects include thickening of the cervical mucus, red which basal body temperature rises after ovulation.	uction of uterine contractions, and thermogenic effect, in
	<u>_</u>
a. Estrogen	c. Testosterone
b. Progesterone	d. None of the above
87. How should a laboratory verify the reference range is	•
a. Call another laboratory	c. Test samples from healthy people
b. Use the numbers form a textbook	d. Look on a medical internet site
88. Releasing factors are produced by the, and tropic ho	rmones are produced by the

a. Hypothalamus; pituitary b. Pituitary; hypothalamus

d. Pituitary; target gland

c. Specific endocrine glands; hypothalamus

CLINICAL CHEMISTRY EXAM

89. Hepatocellular damage and necrosis:	
a. Serum bilirubin level	c. Serum ALP and other "obstructive" enzymes
b. Ratio of direct and total bilirubin	d. Serum aminotransferase levels
90. How would 6.32 be rounded off to one less decimal plac	e?
a. 6.32	c. 7.0
b. 6.4	d. 6.3
91. Before an OGTT is performed, individuals should ingest a	at least per day of carbohydrates for the days preceding
the test.	
a. 75 grams CHO per day for 2 days	
b. 100 grams CHO per day for 2 days	
c. 100 grams CHO per day for 3 days	
d. 150 grams CHO per day for 3 days	
92. Which type of analytical error is recognized by an HIL inc	dex?
a. Instrument not properly calibrated	c. Presence of bubbles in the light path of a photometric method
b. Presence of interfering substances in sample	d. Analyte concentration so high it depletes the active reagent
93. All are TRUE for B2, EXCEPT:	
a. Conjugated bilirubin	c. Polar bilirubin
b. Water soluble	d. Indirect-reacting
94. What is the main reason that causes the following blood pH= 7.25 pCO2= 36 mmHg HCO3= 19 mEq/L	gas values:
a. Hypoventilation	c. Hyperventilation
b. Bicarbonate retention	d. Bicarbonate loss
95. When selecting quality control reagents for measuring a a. A quality control reagent prepared in a urine matrix b. A quality control reagent prepared in a serum matrix c. A quality control reagent prepared in deionized water d. The matrix does not matter; any quality control reagent as	
96. For carbon dioxide determination, acidifying the sample	·
a. Converts the various forms of CO2 in plasma to gaseous C	
b. Prevents conversion of the various forms of CO2 in plasma	
c. Converts all CO2 and carbonic acid to HCO3-	a to gaseous coz by altation with an acid burier
d. Prevents conversion of all CO2 and carbonic acid to HCO3) -
	positive risk factor for the occurrence of coronary heart disease?
a. HDL cholesterol <35 mg/dL	c. Total cholesterol <200 mg/dL
b. LDL cholesterol <30 mg/dL	d. HDL cholesterol >60 mg/dL
98. Lead toxicity can be acquired by the following, EXCEPT:	
a. Skin contact	c. Inhalation
b. Animal bites	d. Ingestion
99. The most common method used in a clinical laboratory t	to measure osmolality is:
a. Vapor pressure	c. Freezing point depression
b. Boiling point	d. Osmotic pressure

c. Serum d. Urine

100. Which specimen is the sample of choice for lead screening?

a. Whole blood

b. Hair

CLINICAL CHEMISTRY EXAM

1. Negative predictive value:

- a. Ability of a test to detect a given disease or condition.
- b. Ability of a test to correctly identify the absence of a given disease or condition.
- c. Chance of an individual having a given disease or condition if the test is abnormal.
- d. Chance an individual does not have a given disease or condition if the test is within the reference interval

2. A delta check is a method that:

a. Determines the mean and variance of an instrument

b. Monitors the testing system for precision

c. Monitors patient sample day by day

d. Is determined by each laboratory facility

3. Measures of spread, EXCEPT:

a. Coefficient of variation

c. Mode

b. Range

d. Standard deviation

4. Random errors, EXCEPT:

a. Reagent dispensing

b. Reagent lot variability

c. Variation in handling techniques: pipetting, mixing, timing

d. Variation in operator

5. Type of systemic error where the magnitude changes as a percent of the analyte present; error dependent on analyte concentration.

a. Constant systematic error

c. Bias

b. Proportional systematic error

d. None of the above

6. A pre-analytical error can be introduced by:

a. Drawing a coagulation tube before an EDTA tube

c. Transporting the specimen in a biohazard bag

b. Mixing an EDTA tube 8 to 10 times

d. Vigorously shaking the blood tube to prevent clotting

7. Two (2) consecutive control values exceed the same 2 standard deviation limit

a. 1:2Sb. 2:2S

c. R:4S d. 4:1S

8. A trend in QC results is most likely caused by

a. Deterioration of the reagent

c. Improper dilution of standards

b. Miscalibration of the instrument

d. Electronic noise

9. Which of the following plots is best for comparison of precision and accuracy among laboratories?

a. Levy-Jennings

c. Cusum

b. Tonks-Youden

d. Linear regression

10. Which of the following terms refers to the closeness with which the measured value agrees with the true value?

a. Random error

c. Accuracy

b. Precision

d. Reliability

11. Beta cell destruction, usually leading to absolute insulin deficiency:

a. Type 1 DM

c. Type 3 DM

b Type 2 DM

d. All of the above

12. Which of the following conclusions may be made regarding these data?

RANDOM GLUCOSE: 186 mg/dL FASTING GLUCOSE: 114 mg/dL 2-HOUR OGTT: 153 mg/dL

HbA1c: 5.9%

- a. Data represents normal glucose status
- b. Data represents an impaired glucose status
- c. Data represents the presence of insulinoma
- d. Data represents diagnosis of diabetes

CLINICAL CHEMISTRY EXAM

13. Select the enzyme that is most specific for beta D-glucose:

a. Glucose oxidase c. Hexokinase

b. Glucose-6-phosphate dehydrogenase d. Phosphohexose isomerase

14. In normal glucose metabolism, blood glucose level increases rapidly after carbohydrates are ingested but returns to a normal level after:

a. 30 minutes

c. 60 minutes (1 hour)

b. 45 minutes

d. 120 minutes (2 hours)

15. Symptoms of hypoglycemia usually occur when blood glucose has fallen below ___ mg/Dl

a. 50 mg/dL c. 70 mg/dL b. 60 mg/dL d. 80 mg/dL

16. Formation of glucose-6-phosphate from noncarbohydrate sources:

a. Glycolysis c. Glycogenolysis b. Gluconeogenesis d. Glycogenesis

17. Long-term estimation of glucose concentration can be followed by measuring:

a. Glycosylated hemoglobin (HbA1c) c. Glycosylated albumin b. Fructosamine d. None of the above

18. The plasma protein mainly responsible for maintaining colloidal osmotic pressure in vivo is:

a. Albumin c. Alpha2-macroglobulin d. Beta2-microglobulin

19. Which dye gives a much greater absorbance change at 630 nm than it would at 500 nm?

C. BCP (Bromcresol purple)

a. HABA (Hydroxyazobenzene-benzoic acid b. BCG (Bromcresol green) c. BCP (Bromcresol purple) d. Tetrabromosulfophthalein

20. Which of the following conditions is the result of a low alpha-1 antitrypsin level?

a. Asthma c. Pulmonary hypertension

b. Emphysema d. Sarcoidosis

21. Which test is the most sensitive in detecting early monoclonal gammopathies?

a. Immunoelectrophoresis c. Capillary electrophoresis of serum and urine

b. Urinary electrophoresis for monoclonal light chains d. Serum-free light chain immunoassay

22. "Gold standard" in the diagnosis of acute coronary syndrome (ACS):

a. Brain natriuretic peptide (BNP) c. High-sensitivity CRP (hs-CRP)

b. Cross-linked c-telopeptides d. Troponin

23. When should blood specimens for lipid studies be drawn?

a. Immediately after eating
b. Anytime during the day
c. In the fasting state, approximately 2 to 4 hours after eating
d. In the fasting state, approximately 12 hours after eating

24. The turbid, or milky, appearance of serum after fat ingestion is caused by the presence of?

a. Bilirubin c. Chylomicron
b. Cholesterol d. Phospholipid

25. Which of the following lipid tests is least affected by the fasting status of the patient?

a. Cholesterol c. Fatty acid b. Triglyceride d. Lipoprotein

26. An abnormal lipoprotein present in patients with biliary cirrhosis or cholestasis:

a. LDL c. Lp(a) b. B-VLDL d. LpX

27. The smallest and most dense lipoprotein particle:

a. LDL c. VLDL

b. HDL d. Chylomicrons

CLINICAL CHEMISTRY EXAM

28. LDL primarily contains:

a. Apo AIb. Apo-AIIc. Apo-B100d. Apo-B48

29. Which of the following apoproteins is inversely related to risk for coronary heart disease?

a. Apo-A1 c. Apo-B100 d. Apo-E

30. Select the order of mobility of lipoproteins electrophoresed on cellulose acetate or agarose at pH 8.6.

a. – Chylomicrons \rightarrow pre- $\beta \rightarrow \beta \rightarrow \alpha$ + b. – $\beta \rightarrow$ pre- $\beta \rightarrow \alpha \rightarrow$ chylomicrons + d. – $\alpha \rightarrow \beta \rightarrow$ pre- $\beta \rightarrow$ chylomicrons +

31. . A patient's total cholesterol is 300 mg/dL, his HDL cholesterol is 50 mg/dL, and his triglyceride is 200 mg/dL. What is this patient's calculated LDL cholesterol?

patient's calculated LDL cholesterol?

a. 200 c. 290 b. 210 d. 350

32. Which of the following is associated with Tangier disease?

a. Apoprotein C-II deficiency

b. Homozygous apo-B100 deficiency

c. Apoprotein C-II activated lipase
d. Apoprotein A-I deficiency

33. The kinetic methods for quantifying serum triglyceride employ enzymatic hydrolysis. The hydrolysis of triglyceride may be

accomplished by what enzyme?

a. Amylase c. Lactate dehydrogenase

b. Leucine aminopeptidase d. Lipase

34. It is usually the result of any type of obstruction in which urea is reabsorbed into the circulation.

a. Pre-renal azotemia

b. Renal azotemia

c. Post-renal azotemia

d. None of the above

35. Creatinine is formed from the:

a. Oxidation of creatine
b. Catabolism of proteins and amino acids
c. Catabolism of purines
d. Oxidation of purines

36. Which of the following is measured using glutamate dehydrogenase and is a measure of advanced stages, poor prognosis,

and coma in liver disease?

a. Total bilirubin

b. Ammonia c. Unconjugated bilirubin

d. Urea

37. In the diacetyl method, what does diacetyl react with to form a yellow product?

a. Ammonia c. Uric acid b. Urea d. Nitrogen

38. The red complex developed in the Jaffe method to determine creatinine measurements is a result of the complexing of

creatinine with which of the following?

a. Alkaline picrate c. Sulfuric acid b. Diacetyl monoxide d. Sodium hydroxide

39. During chemotherapy for leukemia, which of the following analytes would most likely be elevated in the blood?

a. Uric acid

b. Urea c. Creatinine d. Ammonia

40. What is the compound that comprises the majority of the NPN fractions in serum?

a. Uric acid c. Ammonia b. Creatinine d. Urea

41. The reaction rate depends only on enzyme concentration:

a. First-order kinetics

b. Zero-order kinetics

c. Second-order kinetics

d. None of the above

42. To what class of enzymes does lactate dehydrogenase belong?

a. Isomerases
b. Ligases
c. Oxidoreductases

d. Transferases

CLINICAL CHEMISTRY EXAM

43. Increase in the serum enzyme levels indicate:

a. Decreased enzyme catabolism c. Tissue damage and necrosis

b. Accelerated enzyme production d. Increased glomerular filtration rate

44. The highest levels of total LD are seen in:

a. AMI and pulmonary infarctionb. Pernicious anemia and hemolytic disordersc. Skeletal muscle disordersd. Viral hepatitis and cirrhosis

45. In what order (first to last) will the enzymes AST, CK, and LD become elevated in the serum during AMI?

a. AST, LD, CK c. CK, AST, LD b. CK, LD, AST d. LD, CK, AST

46. Macroenzymes, EXCEPT:

a. ALT and AST c. GGT b. CK d. G6PD

47. All of the following factors will adversely affect the accurate quantification of bilirubin in serum, EXCEPT:

a. Lipemia c. Exposure to light b. Hemolysis d. Specimen refrigeration

48. What enzyme catalyzes the conjugation of bilirubin?

a. Leucine aminopeptidase c. Uridine diphosphate glucuronyltransferase

b. Glucose-6-phosphate dehydrogenase d. Carbamoyl phosphate synthetase

49. Which bilirubin fraction is conjugated and covalently bound to albumin?

a. Alpha c. Delta b. Beta d. Gamma

50. Direct bilirubin, EXCEPT:

a. Insoluble in water c. Conjugated with glucuronic acid

b. Conjugated in the liver d. Excreted in the urine of jaundiced patients

51. Crigler-Najjar syndrome

a. Inability to transport bilirubin from the sinusoidal membrane to the microsomal region

b. Deficiency of the enzyme system required for conjugation of bilirubin

c. Inability to transport bilirubin glucuronides to the bile canaliculi

d. Severe liver cell damage accompanied by necrosis

52. Indirect-reacting bilirubin may be quantified by reacting it initially in which reagent?

a. Dilute hydrochloric acid c. Caffeine-sodium benzoate

b. Dilute sulfuric acid d. Sodium hydroxide

53. Which substrate is used in the Bowers-McComb method for ALP?

a. p-Nitrophenyl phosphateb. β-Glycerophosphatec. Phenylphosphated. α-Naphthylphosphate

54. Major intracellular cation:

a. Bicarbonate c. Potassium b. Chloride d. Sodium

55. Electrolyte(s) essential for blood coagulation:

a. Calcium c. Sodium and chloride

b. Calcium and magnesium d. Bicarbonate, potassium and chloride

56. Hyponatremia due to increased water retention, EXCEPT:

a. Congestive heart failure c. Diuretic use b. Hepatic cirrhosis d. Renal failure

57. ____ can occur when sodium is measured using indirect ion-selective electrodes (ISEs) in a patient who is hyperproteinemic or hyperlipidemic.

a. Hyponatremia c. Pseudohyponatremia b. Hypernatremia d. Pseudohypernatremia

CLINICAL CHEMISTRY EXAM

58. Hyperkalemia, EXCEPT:

results?

a. Primary hyperthyroidism

b. Secondary hyperthyroidism

a. Acidosis b. Alkalosis	c. Oral or intravenous potassium therapy d. Diuretics		
59. A disorder characterized by increased production of ch			
a. Multiple myeloma	c. Cystic fibrosis		
b. Hypoparathyroidism	d. Wilson disease		
60. The anticoagulant of choice for arterial blood gas meas	urements is in the state.		
a. Lithium heparin; dry	c. Lithium heparin; liquid		
b. EDTA; dry	d. Sodium citrate; dry		
	a., a a a.		
61. Elevated anion gap, EXCEPT:			
a. Hypernatremia	c. Ketoacidosis		
b. Hypercalcemia	d. Renal failure		
62. A patient's blood gas results are: pH = 7.50 pCO2 = 55 m a. Respiratory acidosis	m Hg HCO3– = 40 mmol/L. This indicates: c. Metabolic acidosis		
b. Respiratory alkalosis	d. Metabolic alkalosis		
63. In the Henderson-Hasselbalch equation, the denominat			
a. Kidney function	c. Liver function		
b. Lung function	d. Renal function		
64. Fever:			
a. Will decrease pCO2 by 3%	c. Will decrease pCO2 by 7%		
b. Will increase pCO2 by 3%	d. Will increase pCO2 by 7%		
•			
65. Which of the following blood gas parameters are measu	red directly by the blood gas analyzer electrochemically?		
a. pH, HCO3- and total CO2	c. pH, pCO2 and pO2		
b. pCO2, HCO3- and pO2	d. pO2, HCO3- and total CO2		
66. The normal ratio of carbonic acid to bicarbonate in arte	rial blood is:		
a. 1:20	c. 0.003:1.39		
b. 7.4:6.1	d. 20:1		
67. How would blood gas parameters change if a sealed spe			
a. pO2 increases, pCO2 increases, pH increasesb. pO2 decreases, pCO2 decreases, pH decreases	c. pO2 decreases, pCO2 increases, pH decreases		
b. poz decreases, pooz decreases, pri decreases	d. pO2 increases, pCO2 increases, pH decreases		
68. Manganese toxicity resembles:			
a. Parkinson's disease	c. Alzheimer's disease		
b. Wilson's disease	d. Menkes disease		
	- 6t2		
69. Which trace metal is contained in glucose tolerance			
a. Chromium	c. Selenium		
b. Copper	d. Zinc		
70. To what metal does ceruloplasmin firmly bind?			
a. Chromium	c. Zinc		
b. Copper	d. Iron		
	G. 11 611		
71. Tropic hormones, EXCEPT:			
a. ACTH b. FSH	c. TSH		
D. 1 O.1	d. GH		
72. Select the most appropriate single screening test for the	roid disease.		
a. Free thyroxine index	c. Total T4		
b. Total T3 assay	d. TSH assay		
	•		
1/3 A nationt has an elevated serum T3 and free T4 and	undetectable TSH. What is the most likely cause of these		

c. Euthyroid with increased thyroxine-binding proteins

d. Euthyroid sick syndrome

CLINICAL CHEMISTRY EXAM

74. The biologically most active, naturally occurring androgen is: c. Epiandrosterone a. DHEA

b. Androstenedione

d. Testosterone

75. Diabetes insipidus:

c. High specific gravity a. Vasopressin deficiency d. None of the above b. Vasopressin excess

76. Most widely used screening test for Cushing's syndrome:

a. Overnight low-dose dexamethasone suppression test

c. Petrosal sinus sampling b. Corticotropin-releasing hormone stimulation test d. Metyrapone stimulation test

77. The definitive suppression test to prove autonomous production of growth hormone is:

a. Oral glucose loading c. Estrogen priming

b. Somatostatin infusion d. Dexamethasone suppression

78. Zollinger–Ellison (Z–E) syndrome is characterized by great elevation of:

a. Gastrin c. Pepsin

b. Cholecystokinin d. Glucagon

79. Critical to blood glucose homeostasis and blood pressure:

c. Catecholamine a. Aldosterone b. Cortisol d. Cholesterol

80. The main estrogen produced by the ovaries and used to evaluate ovarian function:

a. Estriol (E3) c. Epiestriol

d. Hydroxyestrone b. Estradiol (E2)

81. Heroin is synthesized from what drug?

c. Ecgonine a. Diazepam

b. Morphine d. Chlorpromazine

82. Characterized by odor of bitter almonds, altered mental status and tachypnea in the absence of cyanosis.

a. Arsenic toxicity c. Cyanide overdose b. Carbon monoxide intoxication d. Iron poisoning

83. Acetaminophen is particularly toxic to what organ?

a. Heart c. Spleen b. Kidney d. Liver

84. All of the following requires TDM, EXCEPT:

a. Salicylates c. Ibuprofen

b. Acetaminophen d. All of the above

85. Most common drug of abuse:

a. Cocaine c. Methanol b. Ethanol d. Marijuana

86. Specimen of choice for the determination of circulating concentrations of most drugs:

a. Expectorated sputum c. Serum or plasma

b. Gastric fluid d. Urine

87. Single most important factor in therapeutic drug monitoring (TDM):

a. Amount of WBCs in the specimen c. Timing of specimen collection

b. Presence of glucose in the specimen d. Volume of specimen

88. In pharmacokinetics, the concentration of the drug ____ as the rate of elimination and distribution exceeds absorption.

a. Declines c. Rises b. Spuriously declines

d. Spuriously rises

CLINICAL CHEMISTRY EXAM

89. Most common route of drug delivery:

a. Intravenous c. Rectal

b. Oral d. Transcutaneous

90. Select the five pharmacological parameters that determine serum drug concentration:

- a. Absorption, anabolism, perfusion, bioactivation, excretion
- b. Liberation, equilibration, biotransformation, reabsorption, elimination
- c. Liberation, absorption, distribution, metabolism, excretion
- d. Ingestion, conjugation, integration, metabolism, elimination

91. An anti-neoplastic drug that inhibits DNA synthesis in all cells

a. Clozapine c. Methotrexate b. Ethosuximide d. Procainamide

92. All of the following are immunosuppressive drugs, EXCEPT:

a. Cyclosporine c. Sirolimus (rapamycin)

b. Phenytoin d. Tacrolimus

93. All of the following are cardioactive drugs, EXCEPT:

a. Aminoglycoside c. Procainamide b. Digixon d. Quinidine

94. An orally administered drug used to treat manic depression (bipolar disorder):

a. Digoxin c. Phenytoin b. Lithium d. Theophylline

95. When measuring trace metals in blood other than lead, what type of tube should be used?

a. Navy blue top
b. Green top
c. Purple top
d. Red top

96. Chemical name of Vitamin B2:

a. Retinol c. Riboflavin b. Thiamine d. Ascorbic acid

97. Plays a role in the synthesis of amino acids and DNA:

a. Folic acid c. Both of these b. Pteroylglutamic acid d. None of these

98. A deficiency of this vitamin results to rickets and osteomalacia:

a. Vitamin A c. Vitamin E b. Vitamin D d. Vitamin K

99. Which is used to determine trastuzumab (Herceptin) therapy for breast cancer?

a. PR c. HER-2/neu b. CEA d. CA-15-3

100. Which type of cancer is associated with the highest level of AFP?

a. Hepatoma c. Testicular cancer
b. Ovarian cancer d. Breast cancer

CLINICAL CHEMISTRY EXAM

1. 75'F = 'C

a. 15.5 c. 23.8 d. 32.6 b. 21. 0

2. 20'C = 'F

c. 68 a. 25 d. 86 b. 53

3. Morphine is the major metabolite of:

a. Cocaine c. Marijuana b. Heroin d. Phnecyclidine

4. Substances with modified structures that are analogs of prescription pharmaceuticals of abused drugs are known as?

a. Designer drugs c. Trade drugs b. Generic drugs d. Toxic drugs

5. All of the following may be used to cleanse the skin when drawing blood for ethanol analysis, except:

a. Alcohol swab c. Soap and water

b. Merthiolate d. Zephiran

6. The drug of choice for controlling petit mal (absence seizure)

c. Vancomycin a. Phenobarbital

d. Ethosuximide (Zarontin) b. Carbamazepine

7. It is used for treatment of petit mal (absence seizure) and grand mal:

c. Valporic acid (Depakene) a. Theophylline

d. Digoxin b. Lithium

8. A Cardiac glycoside that is used in the treatment of congenital heart failure and arrhythmias by increasing the force and velocity by increasing the force and velocity of myocardial contraction is:

c. Lithium a. Digoxin

d. Phenytoin b. Acetaminophen

9. Pharmacological parameters that determine serum drug concentration:

1. Liberation 2. absorption 4. metabolism 3. Distribution

5. Excretion

a. 1 and 3 c. 1, 2, 3 and 4 b. 2 and 4 d. 1, 2, 3, 4 and 5

10. The most serious effect of methanol ingestion is:

a. Hallucinations c. Psychosis b. Blindness d. Liver damage

11. Zinc protoporphyrin or free erythrocyte protoporphyrin measurements are useful to assess blood concentrations of:

a. Lead c. Arsenic b. Mercury d. Beryllium

12. Estrogen and progesterone receptors assays are useful in assessing prognosis in which of the following?

a. Ovarian cancer c. Breast cancer

b. Endometriosis d. Amenorrhea

CLINICAL CHEMISTRY EXAM

13. Which tumor marker is used to determine the usefulness of trastuzumab (Herceptin) therapy for breast cancer?

a. PR c. HER-2/ neu

b. CEA d. Estrogen receptor (ER)

14. Which of the following tumor markers is used to monitor persons with breast cancer for recurrence of disease?

a. Cathepsin- D

b. Retinoblastoma gene

d. Estrogen receptor (ER)

c. CA- 15-3

15. Body mass index of an obese person?

a. BMI <18.5 kg/m2 UNDERWEIGHT c. BMI 25 to 29.9 k/m2 OVERWEIGHT

b. BMI of 18.5 to 24.9 kg/m2 NORMAL **d. BMI> 30 kg/m2 OBESE**

16. Body mass index of an overweight person?

a. BMI <18.5 kg/m2 UNDERWEIGHT C. BMI 25 to 29.9 k/m2 OVERWEIGHT

b. BMI of 18.5 to 24.9 kg/m2 NORMAL d. BMI> 30 kg/m2 OBESE

17. Secondary hypothyroidism:

a. Decreased T3 T4, decreased TSH c. Normal T3 T4, Increased TSH

b. Increased T3 T4, Increased TSH

b. Decreased T3 T4, Increased TSH

18. Primary hypothyroidism:

a. Decreased T3 T4, decreased TSH c. Normal T3 T4, Increased TSH

b. Increased T3 T4, Increased TSH

b. Decreased T3 T4, Increased TSH

19. The thyroid gland produces all of the following except:

a. TSH c. T3

b. Thyroglobulin d. T4

20.Most useful test for assessing thyroid function:

a. TSH c. Thyroglobulin

b. Serum T3 and T4 d. Thyroid autoimmune antibodies

21. The biologically most active, naturally occurring androgen is:

a. Androstenedione c. Dehydroeplandrosterone

b. Epiandrosterone 4. testosterone

22. Decreases aldosterone:

a. Low serum Na+ and K+ c. Low serum Na+ and high serum K+

b. High serum Na+ and K+ d. High serum Na+, low serum K+

23. Zone fasciculata (F- ZONE) cells, the middle layer of the adrenal cortex produces:

a. Aldosterone c. Cortisol and cortisone

b. Sulfate DHEAs d. All of these

24. Its major action is to regulate renal free water excretion and, therefore, has a central role in water balance:

a. Aldosterone c. Prolactin

b. Oxytocin d. Vasopressin (ADH)

25. Adrenal cushing's syndrome:

a. Increased ACTH and cortisol c. Increased ACTH, decreased cortisol

b. Decreased ACTH and cortisol d. Decreased ACTH, increased cortisol

26. Pituitary cushing's syndrome (cushing's disease)

a. Increased ACTH and cortisol c. Increased ACTH, decreased cortisol

b. Decreased ACTH and cortisol d. Decreased ACTH, increased cortisol

27. Prolactin, considered a stress hormone, has vital functions in relationship to reproduction. It is produced by the:

a. Anterior pituitary gland

c. Thyroid gland

b. Posterior pituitary gland d. Ovaries

CLINICAL CHEMISTRY EXAM

28. Which of the following produces hormones?

Anterior pituitary gland
 Posterior pituitary gland

Thyroid gland
 Parathyroid gland

a. 1 and 2 b. 1, 2 and 3 **c. 1, 3 and 4** d. 1, 2, 3 and 4

29. The neurohypophysis is the:

a. Hypothalamusb. Anterior pituitary

c. Thyroid glandd. Posterior pituitary

30. Which of the following is the primary mechanism causing respiratory alkalosis?

a. Renal failure

c. Congestive heart failure

b. Hyperventilation

d. Too much bicarbonate

31. Which of the following is the primary mechanism of compensation for metabolic acidosis?

a. Hyperventilation

c. Release of epinephrine

b. Aldosterone release

b. Bicarbonate excretion

32. In Emphysema patient suffering from fluid accumulation in the alveolar spaces is likely to be in what metabolic state?

a. Respiratory acidosis

c. Respirator alkalosis

b. Metabolic acidosis

b. Metabolic alkalosis

33. In the circulatory system, bicarbonate leaves the red blood cells and enters the plasma through an exchange mechanism with ____ to maintain electroneutrality.

a. Chloride

c. Lactate

b. Carbonic acid

d. Sodium

34. The normal ratio of carbonic acid to bicarbonate in arterial blood is

a. 1:20

c. 0.003: 1.39

b. 7.4: 6.1 d. 20:1

35. Conditions associated with low anion gap may be caused by:

- 1. Uremia/ Renal failure
- 2. Ketoacidosis in starvation or diabetes
- 3. Methanol, ethanol, ethylene glycol, or salicylate poisoning
- 4. Lactic acid
- 5. Hypoalbuminemia
- 6. Hypercalcemia

36. Conditions associated with elevated anion gap may be caused by:

- 1. Uremia/ Renal failure
- 2. Ketoacidosis in starvation or diabetes
- 3. Methanol, ethanol, ethylene glycol, or salicylate poisoning
- 4. Lactic acid
- 5. Hypoalbuminemia
- 6. Hypercalcemia

a. 1, 2 and 3 c. 5 and 6 d. All of these

37. It is the major anion that counterbalances the major cation, sodium:

a. Potassium

c. Chloride

b. Magnesium

d. Bicarbonate

CLINICAL CHEMISTRY EXAM

38. Which method is not affected by exces	ss lipids or proteins causing falsely decreased sodium
(pseudohyponatremia) measurement?	. Flanca allastana atm.
a. Direct ISE	c. Flame photometry
b. Indirect ISE	d. None of these
39. Sodium produces which color in a flan	ne?
a. Red	c. Yellow
b. Violet	d. Magnesium
40. Hyponatremia can be classified accor	ding to:
a. Chloride values	c. Glucose determination
b. Anion gap	d. Plasma/ Serum osmolality
41. Which electrolyte is significantly invol	ved in the transmission of nerve impulses?
a. Iron	c. Potassium
b. Phosphorus	b. Sodium
42. Electrolytes important for blood coag	ulation:
a. Sodium, chloride, potassium	c. Calcium, Magnesium
b. Bicarbonate, potassium, chloride	b. Magnesium, phosphate
,,	is in a green in the first of t
43. Electrolytes important for acid base b	
a. Sodium, chloride, potassium	c. Calcium, Magnesium
b. Bicarbonate, potassium, chloride	b. Magnesium, phosphate
44. Electrolyte essential for myocardial rh	nythm and contractility:
a. Sodium, chloride, potassium	c. Potassium, magnesium, calcium
b. Bicarbonate, potassium, chloride	d. Calcium, Magnesium
45. CDC reference method for determinat	tion of cholesterol:
a. Liebermann Burchardt rreaction	
b. Salkowski reaction	
c. Cholesterol oxidase reaction	
d. Abell, levy and brodie method	
46. Friedwald formula (FF) is not valid for	triglycerides over mg/ dL
a. over 100 mg/dL	<u> </u>
b. over 200 mg/dL	
c. over 300 mg/dL	
d. over 400 mg/dL	
47. When TAG and LDL- C are being measu	ured, fasting becomes a requirement. Require fasting of patients:
_	. 6 to 8 hours
	. 12 to 14 hours
48. Triglyceride levels, as chylomicrons. p	eak in the blood hours after ingestion of a meal.
	. 6 to 8 hours
	l. 12 to 14 hours
49. Abnormal lipoprotein present in patie	ents with Biliary Cirrhosis or cholestasis and in patients with mutations in
lecithin: cholesterol acyltransferase (LCA)	·
a. LDL	
b. IDL	

c. Lp (a)

CLINICAL CHEMISTRY EXAM

	-	nsulin to insulin. The amount of circulating C-peptide provides	
a. Insulinoma	ind insulin secretions	s (beta cell function), it is decreased in: c. Type 1 DM	
b. Ingestion of hypoglycemic drugs	;	d. Type 2 DM	
51. Dubowski method for glucose ι	ıtilizos		
a. Phosphomolybdic acid	atiti265.	c. Ortho- toluidine	
b. Arsenomolybdic acid		d. Potassium ferricyanide	
b. Arsenomotybuic acid			
52. A specimen is appropriate for g	glucose analysis if ser	rum or plasma is separated from the cells within minutes.	
a. 15 minutes		c. 45 minutes	
b. 30 minutes		d. 60 minutes	
53. It is a sensitive test for cholest	asis caused by chron	ic alcohol or drug ingestion:	
a. AST	-	c. ALT	
b. ALP		d. GGT	
FA 10.4b - b d b			
	thod for determining	alkaline phosphatase activity, the substrate used is:	
a. Monophosphate		c. Disodium phenylphosphate	
b. Phenylphosphate		b. Para- nitrophenylphosphate	
55. Catalyzes the joining of two sul	bstrate molecules, co	oupled with breaking of the pyrophosphate bond in adenosine	
triphosphate (ATP) or a similar cor	npound:	o Ligaço	
a. Transferase		c. Ligase	
b. Hydrolase		b. Lyase	
56. Inorganic cofactors, such as ch	loride or magnesium	ions, are called:	
a. Apoenzyme	norrae or magnesiam	c. Coenzyme	
b. Holoenzyme		d. Activator	
b. Hotochzyme		u. Activator	
	-	amount of enzyme that under specified reaction conditions of	
substrate concentration, ph and te	emperature, causes u	sage of substrate at the rate of:	
a. 1 Millimole/ min		c. 1 Micromole/ min	
b. 1 Nanomole/ min		d. 1 Picomole/ min	
58. When measuring ammonia bloo	od levels, which of th	e following might cause a false increase in this analyte?	
a. The patient had two cigarettes 1	·		
b. The patient was fasting for hours	·		
c. Immediately after phlebotomy, t	•		
d. The patient has a steak dinner th	•		
-	•	osphoribosyltransferase results in which disease?	
a. Lesch- Nyhan syndrome	c. Megaloblast		
b. Maple syrup urine disease	d. Reye's syndı	rome	
60. When plasma creatinine conce	entration is elevated,	GFR is, indicating renal damage.	
a. Increased	c. Normal		
b. Decreased	d. Variable		
61. Azotemia due to obstruction of	f urine flow anywhers	e in the urinary tract by renal calculi, tumors of the bladder or	
prostate, or severe infection:	Itom any wildie	and armary trace by remate detecting turners or the bladder of	
a. Pre- renal azotemia			
b. Renal azotemia			
c. Post- renal azotemia			
d. None of these			

CLINICAL CHEMISTRY EXAM

62. Prerenal azotemia is causes by:

a. Acute renal failure

b. Chronic renal failure

c. Congestive heart failure

d. Urinary tract obstruction

63. The term describing patients who are chronically calorie malnourished and lose both adipose and muscle tissue, but who do not demonstrate a protein deficiency, is:

a. Marasmus

c. Debilitated

b. Kwasgiorkor

d. None of these

64. Biochemical marker for bone resorption that can be detected in serum and urine:

a. Troponin

c. Fibronectin

b. Adiponectin

d. Cross-linked C-telopeptides (CTXs)

65. Variants demonstrate a wide variety of cellular interactions, including roles in cell adhesion, tissue differentiation, growth, and wound healing:

a. Troponin

c. Fibronectin

b. Adiponectin

d. Cross-linked C-telopeptides (CTXs)

66. Indicator of nutrition; binds thyroid hormones and retinol (vitamin A) binding protein:

a. Orosomucoid

c. Prealbumin

b. Ceruplasmin

b. Hemopexin

67. In a chemical reaction, the amount of product formed is measured at specific intervals during a specified period and the related to the concentration of the analyte in the unknown. This type of measurement is known as:

a. Colorimetric

c. Rate

b. End-point

b. Ultraviolet

68. The process by which fluorescence of an analyte is reduced due to its energy by interacting with other substances in solution known as:

a. Ionization

c. Phosphorescence

b. Quenching

d. self- absorption

69. Reflectance spectrometry uses which of the following?

a. Luminometer

c. Tungsten- halogen lamp

b. Photomultiplier tube

d. UV lamp

70. The lamps most commonly used for ultraviolet (UV) work are:

a. Deuterium and mercury arc lamps

c. Silicon carbide rod

b. Tungsten- halogen lamps

d. Tungsten lamp

71. The more light absorbed, the higher the concentration of analyte in this technique of measuring the amount of light absorbed by a solution

a. Atomic absorption

c. Nephelometry

b. Fluorometry

d. Spectrophotometry

72. Beer's law states that the concentration of a substance is (1) ___ proportiona to the amount of light absorbed or (2) ___ proportional to the logarithm of the transmitted light

a. Directly, inversely

c. Both directly proportional

b. Indirectly, direct

d. Both inversely proportional

73. Colligative properties include all of the following, except:

a. Osmolality

b. Vapor pressure

c. Freezing point

d. Osmotic pressure

CLINICAL CHEMISTRY EXAM

74. This centrifuge uses a very high-torque and low-inertia motor to spread monolayers of cells rapidly across a special slide for critical morphologic studies:

a. Horizontal centrifuge
b. Fixed- angle centrifuge
c. Ultracentrifuge
d. Cytocentrifuge

75. Chemicals should be stored:

a. Alphabetically, for easy accessibility c. According to their chemical properties and classification

b. Inside a safety cabinet with proper ventilation d. Inside a fume hood, if toxic vapors can be released when

opened

76. The purest type of reagent water is:

a. Type I c. Type III d. All are equal

77. Physical actions can, overtime, contribute to repetitive strain disorders such as tenosynovitis, bursitis, and

ganglion cysts:

a. Mechanical hazard

b. Cryogenic hazard
d. Compressed gases hazard

78. No recirculation; total exhaust to the outside through a hepa filter:

a. BSC Class IIA1
b. BSC Class IIA2
c. BSC Class IIB1
b. BSC Class IIB2

79. Thirty percent (30%) recirculated, 70% exhausted air:

a. BSC Class IIA1
b. BSC Class IIA2
c. BSC Class IIB1
b. BSC Class IIB2

80. Seventy percent (70%) recirculated to the cabinet work area through hepa; 30% balance can be exhausted

through hepa back into the room or to outside through a canopy unit:

a. BSC Class IIA1
b. BSC Class IIA2
c. BSC Class IIB1
b. BSC Class IIB2

81. These pipettes have an oval bulb in the center and a tapered dispensing end:

a. Mohr
b. Ostwald- Folin
c. Volumetric
d. Serologic

82. These pipettes have the bulb closer to the delivery tip and are used for accurate measurement of viscous fluids,

such as blood or serum:

a. Mohr c. Volumetric d. Serologic

83. Defined as parts per hundred parts:

a. Concentration c. Percent
b. Dilution d. Osmolality

84. An indication of relative concentration:

a. Concentration c. Percent d. Osmolality

85. Gradual change in the control sample results:

a. Shift

b. Trend or drift

c. Dispersion

d. None of these

CLINICAL CHEMISTRY EXAM

86. Chance an individual does not have a given disease or condition if the test is within the reference interval:

a. Diagnostic sensitivity

b. Diagnostic specificity

c. Positive predictive value

d. Negative predictive value

87. The criteria for a good standard curve is/are:

a. The line is straight c. The line goes through the origin, or intersects, of the two axes

b. The line connects all points d. all of these

88. All are advantages of POINT-OF-CARE TESTING (POCT) EXCEPT:

a. Smaller blood specimen required c. Fast turnaround time

b. Patient convenience d. Lower cost

89. Most evacuated tubes on the market have at least ___ month/s shelf life.

a. 2 Months
c. 6 Months
b. 3 Months
d. 12 Months

90. In situations where blood is drawn at high altitudes (>5,000 FEET):

a. Decrease in draw volume c. Same blood draw volume

b. Increased in draw volume b. Cannot be determined

91. If evacuated tubes are stored at low temperature

a. Decrease in draw volume

b. Increased in draw volume

c. Same blood draw volume

b. Cannot be determined

92. Most common complication of phlebotomy:

a. Anemia c. Vascular b. Cardiovascular b. Infection

93. Symptoms of hypoglycemia usually occur when blood glucose has fallen below ___ mg/ dL

a. 50 mg/dL b. 60 mg/dL

94. The plasma protein mainly responsible for maintaining colloidal osmotic pressure in vivo is:

d. 80 mg/dL

a. Albumin

a. Albumin c. Alpha2- macroglobulin b. Pre-albumin d. Beta2- microglobulin

95. The smallest and most dense lipoprotein particle:

a. LDL c. VLDL

b. HDL d. Chylomicrons

96. What is the compound that comprises the majority of the NPN fractions in serum?

a. Uric acid c. Ammonia

b. Creatinine d. Urea

97. Most common drug of abuse:

a. Cocaineb. Ethanol

a. Mathana

c. Methanol

d. Marijuana

CLINICAL CHEMISTRY EXAM

98. Which type of cancer is associated with the highest level of AFP?

a. Hepatoma

b. Ovarian cancer c. Testicular cancer

d. Breast cancer

99. Chemical name of vitamin B2:

a. Retinol c. Riboflavin

b. Thiamine d. ascorbic acid

100. The biologically most active, naturally occurring androgen is:

a. DHEA c. Epiandrosterone

b. Androstenedione d. Testosterone

CLINICAL CHEMISTRY EXAM

1. The saccharogenic method for amylase determinations a. The amount of product produced b. The amount of substrate consumed	measures c. The amount of iodine present d. The amount of starch present
2. Elevation of tissue enzymes in serum may be used to de a. Tissue necrosis or damage b. Inflammation	etect c. Infectious diseases d. Diabetes mellitus
3. Elevation of serum amylase and lipase is commonly see a. Acute pancreatitis b. Acute appendicitis	e n in c. Gallbladder disease d. Acid reflux disease
4. The isoenzymes LD-4 and LD-5 are elevated ina. Liver diseaseb. Pulmonary embolism	c. Renal disease d. Myocardial infarction
5. What is the most heat stable ALP isoenzyme?a. Placentab. Intestine	c. Liver d. Bone
6. What organ produces vasopressin?a. Hypothalamusb. Posterior Pituitary	c. Anterior Pituitary d. Adrenal cortex
7. What common substrate is used in the biosynthesis of a a. Tyrosine b. pH	adrenal steroids? c. Progesterone d. Cholesterol
8. Diurnal, EXCEPT: a. GH b. Prolactin	c. ACTH d. LH
9. Tropic hormones, EXCEPT: a. TSH b. ACTH	c. GH d. FSH
10. A hormone and an enzyme a. Renin b. ADH	c. TSH d. Cortisol
11. Calcium concentration is regulated by:a. Insulinb. Parathyroid hormone	c. Thyroxine d. Vitamin C
12. Fundamental to thyroid physiologya. Iodineb. Thyroglobulin	c. TSH d. TRH
13. Thyroid hormones are derived from which of the follow a. Histidine b. Cholesterol	wing? c. Tyrosine d. Phenylalanine
14. The thyroid gland produces all of the following EXCEP a. TSH b. Thyroglobulin	T: c. T3 d. T4
15. Thyroid cells are organized into	

c. Isthmus

d. Cavities

a. Follicles

b. Colloids

CLINICAL CHEMISTRY EXAM

16. It is the center of thyroid hormone production a. Follicle c. Isthmus b. Colloid d. Cavities 17. Thyroxine present in largest amount a. Free c. Bound to albumin b. Ionized d. Bound to globulin 18. Which is NOT a function of the thyroid gland? a. Protein synthesis c. Waste excretion b. Development of fetal brain d. Regulation of metabolism 19. All of the following are symptoms of hypothyroidism, EXCEPT: a. Fatigue c. Cold intolerance b. Depression d. Good appetite 20. Hypothyroidism is generally associated with all of the following EXCEPT: a. TSH receptor antibodies c. An elevation of TSH levels b. Depression d. TPO antibodies 21. Sensitive marker for hyperfunctioning thyroid gland: a. TSH c. T3 b. T4 d. Tg 22. The primary serum test to screen for thyroid disease: a. TSH c. T3 b. T4 d. Tg 23. If the screening TSH is high, which test is likely to be ordered next? c. Ferritin a. Cholesterol d. Glucose b. FT4 24. In patients with developing subclinical hyperthyroidism, TSH levels will likely be _____, and fT4 will likely be a. Decreased, increased c. Decreased, normal d. Increased, normal b. Increased, decreased 25. Insulin-like growth factor-1 is produced in the: a. Pituitary gland c. Bone b. Thyroid gland d. Liver 26. All of the following are true for thyroid gland EXCEPT: a. Depends on TPO to permit iodination of the tyrosyl residues to make MIT and DIT b. Is an ineffective iodine trap c. Depends on TPO to permit the joining of two DIT residues to form T3 d. Usually functions independent of TSH levels 27. Causes excess cortisol: c. Conn's syndrome

a. Cushing syndrome

b. Addison's disease

c. Conn's syndrome

d. Acromegaly

28. Female born with XX chromosomes develops ambiguous genitalia or genitals that appear male. What is this condition?

a. Klinefelter syndrome

b. Turner syndrome

c. Congenital adrenal hyperplasia

d. Down syndrome

29. Master gland:

a. Hypothalamus c. Thyroid gland b. Pituitary gland d. Adrenal gland

CLINICAL CHEMISTRY EXAM

30. What is the most abundant pituitary hormone?

a. TSH c. LH d. FSH

31. Which of the following tissues does not secrete steroid hormones?

a. Ovaries c. Testes

b. Pituitary gland d. Adrenal cortex

32. Which of the following hormones involved in calcium regulation acts by decreasing both calcium and phosphorous?

a. PTH c. Vitamin D

b. Calcitonin d. Cortisol

33. It is measured in plasma and CSF as a marker for bacterial infection.

a. Albumin
b. Troponin
c. Procalcitonin
d. Cortisol

34. The first hormones to respond to stress

a. Cortisol c. Catecholamine

b. Aldosterone d. DHEA

35. Which hormone is responsible for an increase in body temperature after ovulation?

a. Estrogen c. Progesterone

b. LH d. FSH

36. This hormone is given to a pregnant woman in order to induce contractions:

a. Oxytocin c. Estrogen b. Prolactin d. Progesterone

37. Which test is the most specific for myocardial infarction?

a. CK c. Myoglobin b. LDH d. Troponin

38. In analyzing cardiac markers, which marker increases first?

a. Myoglobinc. Troponin Tb. CK-MBd. Troponin I

39. Anticoagulant of choice for TDM

a. EDTA c. Sodium fluoride

b. Heparin d. Oxalate

40. What is the most common substance abused?

a. Cannabinoids c. Shabu b. Ecstasy d. Alcohol

41. Specimen for drug analysis EXCEPT:

a. Blood c. Semen

b. Urine d. Oral Secretions

42. Validity of drug test result:

a. 6 months c. 2 years b. 1 year d. 3 years

43. An enzyme that is also used as a tumor marker.

a. LD
b. Lipase

c. Aldolase
d. Catalase

44. A tumor marker used in the assessment of choriocarcinoma or hydatidiform mole is

a. B-hCG c. AFP

b. CEA d. IgG

CLINICAL CHEMISTRY EXAM

45. Tumor marker tests are used to:

a. Monitor response to therapy c. Detect recurrent disease

b. Aid in staging of cancer d. All of these

46. CA 19-9 is what type of tumor marker?

a. Hormone c. Protein d. Enzyme

47. Which of the following is NOT a driving force for more automation?

a. Increased use of chemistry panels c. Fast turnaround time

b. High-volume testing d. Expectation of high-quality, accurate results

48. Which of the following steps in automation generally remains a manual process in most laboratories?

a. Preparation of the sample

c. Reagent delivery

b. Specimen measurement and delivery d. Chemical reaction phase

49. Which of the following are considered medical emergencies?

I. Diabetic ketoacidosis II. Renal Glycosuria III. Marked Hyperkalemia

a. I, II, III c. I, II d. I

50. What is the national reference laboratory for Clinical Chemistry?

a. EAMC **c. LCP** b. SLH d. NKTI

51. Sealed heparinized arterial blood was left at room temperature for 2 hours. The most likely changes in PO2 (mmHg), PCO2(mm Hg), and pH, respectively, are:

A. Increase, increase and increase C. Decrease, increase, and decrease

B. Decrease, decrease, and decrease D. Decrease, decrease, and increase

52. The adrenal medulla secretes which of the following in the greatest quantity?

A. Metanephrine
B. Noradrenaline
C. Epinephrine
D. Dopamine

53. Homovanillic acid is the principal urine metabolite of:

A. Norepinephrine

B. Epinephrine

D. Dopamine

54. Diurnal variation is important to consider when collecting blood for the assay of:

A. Catecholamines C. Cortisol

B. Creatinine D. Thyroid hormones

55. T-3 uptake is actually a measurement of:

A. T-3 **C. TBG**

B. T-4 D. Free thyroxine

56. Active hormonal form of T3 an T4:

A. Those bound to TBG C. Those bound to transthyretin

B. Those bound to albumin D. Those in free from

57. The principle is based on the reaction of urinary estrogen with a mixture of phenol and sulfuric acid to produce pink color. This refers to:

A. Kober reaction

C. Zimmermann reaction

B. Trinder reaction

D. Porter-Silber reaction

B. Trinder reaction

D. Porter-Silber reaction

58. The Kober reaction is used in the assay of:

A. Urinary estrogen

B. Glucocorticoids C. Testosterone D. Epinephrine

CLINICAL CHEMISTRY EXAM

59. In the Porter-Silber assay, the dihydroxyacetone side chain of the steroid hormone reacts with:

- A. Sulfuric acid-hydroquinone and forms reddish-brown color
- B. m-dinitrobenzene and forms purple color
- C. Ceric and arsenite compound and forms a yellow product
- D. 2, 4 -dinitrophenylhydrazizne and forms a yellow derivative

60. The assay employed for 17-ketosteroids, in which steroids react with m-dinitrobenzene in alcoholic KOH solution resulting to the formation of a purple color:

A. Kober Reaction C. Porter-Silber Reaction

B. Zimmerman reaction D. Pisano Method

61. Zollinger-Ellison syndrome is characterized by elevated blood levels of:

A. Cholecystokinin C. Pepsin D. Gastrin B. Trypsin

62. Tumor marker most useful in the detection of familial medullary carcinoma of the thyroid:

C. CEA A. Calcitonin D. CA 19-9 B. CA 125

63. What metal toxin in urine is detected by the Reinsch test?

A. Lead C. Bromide B. Mercury D. Zinc

64. Trinder's reagent (mercuric chloride, HCl, and ferric nitrate) is used in the colometric assay for:

A. Acetaminophen C. Theophylline B. Salicylate D. Ethanol

65. Caffeine is an important metabolite of this drug, which is assayed in newborns and young children to monitor its therapeutic level. What is this?

A. Acetaminophen C. Theophylline B. Digoxin D. Phenobarbital

66. Odor of bitter almond gives a clue of:

A. Cyanide poisoning C. Arsenic poisoning

D. Carbon monoxide poisoning B. Ethanol poisoning

67. Benzoylecgonine is the major metabolite of:

C. Cocaine A. Heroin D. Phencyclidine B. Marijuana

68. The formation of this crystal in urine, although not a constant finding is an important diagnostic clue of ethylene glycol poisoning:

C. Triple phosphate A. Uric acid D. Calcium oxalate B. Ammonium biurate

69. What is the major carrier of drugs in the circulation?

C. Transferrin A. Albumin D. Hemoglobin B. Globulin

70. Fire extinguishers designated as Class A are used for:

A. Paper and wood C. Flammable liquids and gases

B. Electrical equipment fire D. All of the above

71. It is a specialized colorimeter designed to scan and quantitate electrophoresis patterns:

A. Densitometer C. Atomizer

B. Detector D. Monochromator

CLINICAL CHEMISTRY EXAM

72. The element that distinguishes proteins from carbol	hydrate and lipid compounds is:
A. Carbon	C. Nitrogen
B. Oxygen	D. Phosphorus
73. Parfentjev's method is for the determination of:	
A. Fibrinogen	C. Globulin
B. Albumin	D. Amylase
2. / ((Sairiii)	-
74. Apolipoprotein A is the primary protein component A. HDL	of: C. LDL
B. IDL	D. VLDL
synthesis, steroid hormone synthesis, and bile acid met	
A. Cholesterol	C. Triglycerides
B. Phospholipid	D. Free fatty acids
76. What is the current reference method for cholester	ol analysis?
A. Abell-Kendall method	C. Salkowski method
B. Bloor's method	D. Lieberman-Burchardt
B. Bloof Siffethou	D. Lieberman-Burchardt
77. A mild condition that appears to result from a genet	ic defect in transport of bilirubin from sinusoidal blood into
the hepatocyte:	C. Dubin-Johnson
A. Gilbert Syndrome	D. Rotor Syndrome
B. Crigler-Najjar Syndrome	D. Notor Syndrome
79 What reasont is used in the Evolun-Mallay method t	a dissociate the unconjugated bilirubin from protein?
78. What reagent is used in the Evelyn-Malloy method t <mark>A. Methanol</mark>	C. Caffeine
B. Ethanol	D. Acetic acid
79. The Jaffe reaction is employed for the quantitation	
A. Urea	C. Protein
B. Creatinine	D. Uric acid
80. Lloyd's reagent improves the specificity of what col	lorimetric method of determination?
A. Jaffe	C. Lieberman-Burchardt
B. Caraway	D. Biuret
81. What is the major end product of protein and amino	
A. Urea	C. Creatine
B. Uric acid	D. Creatinine
82. Uric acid when oxidized by the enzyme uricase is tra	insformed to:
A. Allantoin	C. Xanthine
B. Monosodium urate	D. Ammonia
B. Worldsodiam drace	D. Allinoma
83. The sweat chloride test is useful in the diagnosis of:	
A. Dehydration	C. Azotemia
B. Cystic fibrosis	D. Diabetes
84. Which trace metal accumulates in Wilson's disease?	
A. Cobalt	C. Nickel
B. Copper	D. Zinc
b. Copper	
85. What is the anticoagulant of choice for blood gas an	nalysis?

C. Oxalate

D. Citrate

A. EDTA

B. Heparin

CLINICAL CHEMISTRY EXAM

but

86. The pH of blood is critically maintained at what level:	
A. 7.00-7.50 B. 7.50-7.70	C. 7.15-7.35
B. 7.30 7.70	D. 7.35-7.45
87. In which of the following are the thyroid hormones classific	ed:
A. Amino acid derivatives	C. Fatty acid derivatives
B. Steroid hormones	D. Peptide hormones
88. Which of the following polypeptide hormones may be desc beta chains that are biochemically unique?	cribed as having alpha chains that are biochemically identical
A. FSH, TSH, ACTH, LH	C. LH, ACTH, HCG, TRH
B. TSH, LH, TRH, HCG	D. HCG, FSH, TSH, LH
89. The thyroid gland produces all of the following hormones	
A. TSH B. Calcitonin	C. Thyroxine D. Triidothyronine
B. Catcitoriii	D. Triidotriyronine
90. In hypothyroidism, one would expect the total T4 level to	be, and the T3 uptake to be
A. Increased, increased	C. Decreased, increased
B. Decreased, decreased	D. Increased, decreased
91. How can primary hypothyroidism be differentiated from se	econdary hypothyroidism?
A. T3	C. TSH
B. T4	D. Both A and B
92. 5-Hydroxyindoleacetic acid is the primary metabolite of:	
A. Epinephrine	C. Norepinephrine
B. Prolactin	D. Serotonin
93. A marked increase in 5-HIAA excretion occurs in patients v	
A. Argentaffinoma	C. Diabetes insipidus
B. Pheochromocytoma	D. Diabetes mellitus
94. Digoxin, procainamide and quinidine are drugs that may be	e classified as:
A. Aminoglycosides	C. Antidepressant
B. Anticonvulsants	D. Cardioactive
95. Lithium therapy is widely used in the treatment of:	
A. Hypertension	C. Aggression
B. Hyperactivity	D. Manic-depression
96. A drug that relaxes the smooth muscles of the bronchial pa	accades is:
A. Acetaminophen	C. Phenytoin
B. Lithium	D. Theophylline
97. Which of the following statements pertains to the effe	
1. Ethanol functions as a depressant of the central nervous sys	tem
2. Initial effect is an increase in heart rate and blood pressure3. Long-term abuse can impair most organs of the body; primar	cy tissue affected is the liver
4. Blood alcohol content of 0.35 to 0.50 % is associated with co	
A. 1 and 3	C. 1, 2 and 3
B. 2 and 4	D. 1, 2, 3 and 4
	16 1 . 1
98. This toxin has high affinity to keratin, can be identified	
A. Lead B. Cyanida	C. Mercury
B. Cyanide	D. Arsenic
99. This common substance of abuse is derived from Cannabis	s sativa leaves and stems. Which of the following is it?

C. Marijuana

D. Amphetamines

100. All of the following vitamins are lipid in nature and classified as fat-soluble, EXCEPT:

A. Vit. A

B. Vit. C

D. Vit. K

A. Heroine

B. Cocaine

CLINICAL CHEMISTRY EXAM

1. True about analbuminemia EXCEPT:

a. Low/absent levels in serum

d. Autosomal recessive

c. Acquired

2. A congenital disorder characterized by a split in the in the albumin band when serum is subjected to electrophoresis is known

as:

b. Congenital

a. Analbuminemia c. Bisalbuminemia

b. Anodic albuminemia d. Prealbuminemia

3. Which of the following has been found to be the most sensitive and helpful indicator of nutritional status in very ill patients?

a. Transthyretin c. Albumin

b. Transferrin d. Somatomedin C

4. What is the formula for globulin?

a. TP + albumin c. TP x albumin b. TP - albumin d. TP / albumin

5. What is the normal albumin: globulin ratio?

a. 1:2 c. 5:1 d. 1:5

6. The following are the amino acids where creatine is synthesized from, EXCEPT:

a. Glycine c. Arginine b. Methionine d. Cysteine

7. The uric acid is synthesized from the following, EXCEPT:

a. Adenine
b. Purine
c. Thymidine
d. Guanine

8. What is the indirect measure for urea determination?

a. Fearon c. Uricase b. Jaffe d. Berthelot

9. What is the indirect method for uric acid determination?

a. Urease c. Berthelot d. Nesslerization

10. What is the indirect method for ammonia determination?

a. Nesslerization c. Uricase
b. Glutamate dehydrogenase d. Berthelot

11. The sample used for this analyte is EDTA plasma which is placed on ice.

a. Urea c. Creatinine d. Uric acid

12. The protein content of the diet will affect primarily the test results for:

a. Creatinine c. Uric acid b. Creatine d. Urea

13. Specimen for ammonia should be centrifuged within how many minutes?

a. 10 b. 20 c. 30 d. 60

14. If there is a delay of testing for ammonia, the specimen should be put at what temperature?

a. 37C c. 4C b. 22C d. -20C

15. When measuring ammonia blood levels, which of the following might cause a false increase in this analyte?

- a. The patient had two cigarettes 15 minutes prior to blood draw.
- b. The patient was fasting for hours prior to blood collection.
- c. Immediately after phlebotomy, the blood sample was maintained on ice.
- d. The patient had a steak dinner the night before the blood draw.

CLINICAL CHEMISTRY EXAM

16. Creatinine concentration in the blood has a direct relationship to: a. Muscle mass c. Age and gender b. Dietary protein intake d. More than one of the above 17. BUN = 80; Crea = 4 a. Malnutrition c. Chronic Kidney Disease b. Low protein intake d. Overhydration 18. A BUN: Crea ratio of >20:1 with normal crea indicates: a. Pre-renal disease c. Post-renal disease b. Renal disease d. Normal 19. Any condition that results in a decrease in blood flow to the kidney results to: a. Pre-renal azotemia c. Post-renal azotemia b. Renal azotemia d. None of the above 20. It comprises the majority of NPNs in serum. a. Uric acid c. Ammonia b. Creatinine d. Urea 21. Which one of the following is not an NPN substance? c. Creatinine a. Allantoin d. Urea b. Ammonia 22. An urea N result of 9 mg/dL is obtained by a technologist. What is the urea concentration? c. 18.0 mg/dL a. 3.2 mg/dL d. 19.3 mg/dL b. 4.2 mg/dL 23. A complete deficiency of hypoxanthine guanine phosphoribosyltransferase results in which disease? a. Lesch-Nyhan syndrome c. Maple syrup urine disease b. Modification of diet in renal disease d. Reye's syndrome 24. CrCl is used to estimate the c. Renal glomerular and tubular mass a. Tubular secretion of creatinine d. Glomerular filtration rate b. Glomerular secretion of creatinine 25. What specimen/s is/are collected for the determination of creatinine clearance? c. First morning urine a. Plasma and 24-hour urine d. Midstream clean catch urine b. Plasma only 26. All of the following are the parameters used for the calculation of estimated GFR (eGFR) EXCEPT: c. Urine creatinine a. Gender and race d. BUN and albumin b. Blood Creatinine 27. n the Jaffe reaction, a red-orange chromogen is formed when creatinine reacts with: a. Picric acid c. Diacetyl monoxime b. Biuret reagent d. Both a and b 28. Testing blood from a patient with acute glomerulonephritis would most likely result in which of the laboratory findings? a. Decreased creatinine c. Increased glucose b. Decreased urea d. Increased creatinine 29. Chylomicron comes from _____ to the thoracic duct and then to the circulation. a. Blood c. Pericardium b. Peritoneum d. Lymph

30. Which of the following is considered a lipid?

a. Chylomicrons

c. Cholesterol

b. LDL

d. HDL

CLINICAL CHEMISTRY EXAM

31. In what major organ of the body is the majority of the body's cholesterol synthesized?

a. Heart c. Gallbladder b. Pancreas d. Liver

32. Which lipoprotein migrates farthest towards the anode during electrophoresis?

a. Chylomicron c. LDL b. VLDL d. HDL

33. What is the patient preparation for lipid?

a. Water not allowed, fast for 10 hrs.

c. Water allowed, fast for 12 hrs

b. Water, smoking, coffee, tea allowed, fast for 10 hrs d. Water, smoking, coffee, tea allowed, fast for 16 hrs

34. Which of the following would be most adversely affected by a nonfasting sample?

a. HDL c. Cholesterol b. LDL d. Triglycerides

35. What is the current reference method for cholesterol analysis?

a. GC-MS c. Bloor's method

b. Abell-Kendall method d. Salkowski method

36. Two step method for cholesterol analysis:

a. Pearson, Stern, and Mac Gavack c. Abell-Kendall d. Schoenheimer

37. What is the end color of the Salkowski reaction?

a. Orange c. Yellow d. Green

38. What is the end color of the Van Handel and Zilversmith reaction?

a. Orange c. Yellow b. Red d. Blue

39. The most likely cause for serum/plasma to appear "milky" is the presence of

a. Chylomicrons
c. LDL
d. HDL

40. Which lipoprotein delivers endogenous lipids?
a. Chylomicron
b. VLDL
c. LDL
d. HDL

41. An abnormal lipoprotein found in patients with obstructive biliary disease:

a. B-VLDL c. Lp(a) b. LpX d. LDL

42. Which of the following is referred to as the "good cholesterol"?

a. HDL c. VLDL

b. LDL d. Free cholesterol

43. Which of the following apoproteins is responsible for receptor binding for IDL and the chylomicron remnant produced in fat transport?

a. Apo A1 b. Apo C c. Apo E d. Apo B

44. Which of the following enzymes is found bound to HDL and LDL in blood plasma and acts to convert free cholesterol into

cholesteryl esters?

a. Cholesterol esterase

c. LCAT
d. CETP

b. Lipoprotein lipase

45. Which of the following transfers cholesterol esters to chylomicrons and LDL from the HDL?

a. Cholesterol esterase

b. Lipoprotein lipase

c. LCAT

d. CETP

CLINICAL CHEMISTRY EXAM

46. Which is NOT true about unconjugated bilirubin?

a. Direct bilirubin c. Indirect bilirubin b. Water insoluble d. Non-polar

47. The bilirubin fraction that is covalently attached to albumin and contributes to the conjugated bilirubin value is:

a. Direct c. Delta b. Indirect d. Bound

48. Considered as a liver function test, EXCEPT:

a. AST c. Amylase b. ALT d. ALP

49. Hepatocellular damage may be best assessed by which of the following parameters?

a. Serum AST and ALT levels c. Bilirubin, GGT, and ALP b. GGT and ALP d. Ammonia and urea

50. Jendrassik-Grof method reagent

c. N-butanol a. Caffeine d. Acetic acid b. Methanol

51. What is the purpose of the caffeine in the Jendrassik-Grof method?

a. Catalyst c. Accelerator b. Coenzyme d. Cofactor

52. What is the formula for indirect bilirubin?

a. TB + DB c. TB x DB b. TB - DB d. TB / DB

53. In an adult, if total bilirubin value is 3.1 mg/dL and conjugated bilirubin is 1.1 mg/dL, what is the unconjugated bilirubin value?

a. 2.0 mg/dL

c. 1.0 mg/dL d. 3.4 mg/dL b. 4.2 mg/dL

54. Liver disease, EXCEPT:

a. Anemia c. ALT b. Hemochromatosis d. AST

55. Gastric enzyme proteolysis:

a. Gastrin c. Lipase b. Amylase d. Trypsin

56. Chief plasma cation whose main function is maintain osmotic pressure:

a. Chloride c. Sodium b. Calcium d. Potassium

57. What formula is this: Na+ + K+ - (Cl- + HCO3-)?

c. Henderson-Hasselbach equation a. Anion gap

b. Osmolal gap

58. In the Henderson-Hasselbach equation, the numerator denotes the function of:

a. Kidney c. Lung b. Liver d. Heart

59. In the Henderson-Hasselbach equation, the denominator denotes the function of:

a. Kidney c. Lung b. Liver d. Heart

60. Calculation of the anion gap is useful for QC of:

a. Calcium

b. Electrolyte profile

c. Phosphorous

d. Magnesium

CLINICAL CHEMISTRY EXAM

61. Considering a normal Gaussian curve distribution, how many values from a population will be within 2 SD?

A. 95.45%

C. 68.27%

B. 75.30%

D. 99.73%

62. A delta check:

A. Relates control difference from mean

B. Reports patient value difference from previous analysis

C. Evaluates statistical drift

D. Flags abnormal results

63. Which of the following instruments is used in the clinical laboratory to detect beta and gamma emissions?

A. Fluorometer

C. Scintillation counter

B. Nephelometer

D. Spectrophotometer

64. In potentiometry, the following are types of reference electrodes, EXCEPT:

A. Glass electrode

B. Standard hydrogen electrode

C. Saturated calomel electrode

D. Silver-silver chloride electrode

65. Which of the following substances are introduced in a continuous-flow analyzer to minimize diffusion of reagents and mixing between samples?

A. Membranes

C. Air bubbles

B. Resins

D. Gel polymers

66. The protein fraction that migrates the fastest toward the anode

A. Albumin

C. Alpha1-globulin

B. Beta-globulin

D. Gamma-globulin

67. Which of the following substances is markedly increased in nephrotic syndrome?

A. Ceruloplasmin

C. Alpha-1-antitrypsin

B. Alpha-2-macroglobulin

D. Albumin

68. The neocuproine method for glucoses is based on:

A. Glucose oxidase reaction

B. Copper reduction by glucose

C. Condenstaion reaction

D. Hexokinase reaction

69. Select the enzyme most specific for beta D-glucose

A. Hexokinase

C. Phosphohexisomerase

B. Glucose-6phosphate dehydrogenase

D. Glucose oxidase

70. All of the following are characteristics of Type II diabetes mellitus except:

A. Insulin levels may or may not be abnormal

B. It is more common than Type I diabetes

C. It requires insulin therapy to control hyperglycemia

D. It is associated with obesity and more common in persons greater than 40 years old

71. Select the order of mobility of lipoproteins electrophoresed on cellulose acetate or agarose at pH 8.6.

A. - Chylomicrons -prebeta- beta - alpha +

B. - Beta - prebeta - alpha- chylomicrons +

C. - Chylomicrons - beta - prebeta - alpha +

D. - Alpha - beta - prebeta- chylomicrons +

72. Select the lipoprotein fraction that carries most of the endogenous triglycerides

A. VLDL

C. HDL

B. LDL

D. Chylomicrons

73. The lipoprotein that transports the exogenous triglycerides:

A. HDL B. LDL

C. VLDL **D. Chylomicrons**

74. Apolipoprotein A is the primary protein component of:

A. HDL

C. VLDL

B. LDL D. None of these

CLINICAL CHEMISTRY EXAM

JE All TRUE (ORD. EVOERT	
75.All are TRUE for CRP, EXCEPT	
a. Elevated in bacterial infection	c. It is an acute inflammatory marker
b. It may be used as a cardiac marker	d. It is a chronic inflammatory marker
76. Overall process of guaranteeing quality patient care and is	regulated throughout the total testing system:
a. Quality Assessment	c. Quality Assurance
b. Quality Control	d. Quality Systems
77. Method A and Method B for cholesterol both give a value of	of 200 mg/dL for a serum sample; however, the same QC material
analyzed by Method A gives 185 mg/dL and by Method B gives	s 212 mg/dL. What might cause this?
a. Method B is biased	
b. Method A is imprecise	
c. Both methods are showing a matrix effect for the QC mater	ial
d. Any of the above answers may be correct	
78. A Gaussian distribution is usually:	
A. Bell-shaped	C. Bimodal
B.Rectangular	D. Skewed
79. What type of additive is in a blood collection tube with a re	
a. Lithium or sodium heparin	c. Thrombin
b. Potassium EDTA	d. No additive
80 Blood is collected from a natient who has been fasting sin	ce midnight; the collection time is 7 am. Which of the following
tests would NOT give a valid test result?	oe interior, the concection time is 7 am. Which of the following
a. Cholesterol	
b. Triglycerides	c. Total bilirubin
b. Higtycerides	d. Potassium
81. All of the following migrate with the alpha2 globulins, EXC	EPT:
a. Alpha2-macroglobulin	
b. Ceruloplasmin	c. Haptoglobin
	d. Transferrin
82. Hormone that regulates synthesis and release of the thyro	oid hormones is produced in:
a. Hypothalamus	c. Posterior pituitary gland
b. Anterior pituitary gland	d. Thyroid
02 A drug that releves the smooth muscles of the bronchiel n	
83. A drug that relaxes the smooth muscles of the bronchial p	_
a. Acetaminophen	c. Phenytoin
b. Lithium	d. Theophylline
84. Violation of which rule does NOT indicate systematic erro	r?
a. 1:3s	c. 2:1s
b. 4:1s	d. 2:2s
85. Which of the following anticoagulants is generally suitable	
a. Heparin	c. Citrate
b. EDTA	d. Oxalate
86 Effects include thickening of the cervical mucus redu	action of uterine contractions, and thermogenic effect, in
which basal body temperature rises after ovulation.	decion of atermic contractions, and thermogenic effect, in
	_
a. Estrogen	c. Testosterone
b. Progesterone	d. None of the above
87. How should a laboratory verify the reference range it	uses for a particular test?
a. Call another laboratory	c. Test samples from healthy people
b. Use the numbers form a textbook	d. Look on a medical internet site
5. USC THE HUMBERS TOTHER LEARLINGER	a. 200k on a modical medifier site
88. Releasing factors are produced by the, and tropic hor	mones are produced by the

a. Hypothalamus; pituitaryb. Pituitary; hypothalamus

d. Pituitary; target gland

c. Specific endocrine glands; hypothalamus

CLINICAL CHEMISTRY EXAM

89. Hepatocellular damage and necrosis:	
a. Serum bilirubin level	c. Serum ALP and other "obstructive" enzymes
b. Ratio of direct and total bilirubin	d. Serum aminotransferase levels
90. How would 6.32 be rounded off to one less decimal place?	
a. 6.32	c. 7.0
b. 6.4	d. 6.3
91. Before an OGTT is performed, individuals should ingest at	least per day of carbohydrates for the days preceding
the test.	
a. 75 grams CHO per day for 2 days	
b. 100 grams CHO per day for 2 days	
c. 100 grams CHO per day for 3 days	
d. 150 grams CHO per day for 3 days	
92. Which type of analytical error is recognized by an HIL inde	
a. Instrument not properly calibrated	c. Presence of bubbles in the light path of a photometric method
b. Presence of interfering substances in sample	d. Analyte concentration so high it depletes the active reagent
93. All are TRUE for B2, EXCEPT:	
a. Conjugated bilirubin	c. Polar bilirubin
b. Water soluble	d. Indirect-reacting
94. What is the main reason that causes the following blood gapH= 7.25 pCO2= 36 mmHg HCO3= 19 mEq/L	as values:
a. Hypoventilation	c. Hyperventilation
b. Bicarbonate retention	d. Bicarbonate loss
95. When selecting quality control reagents for measuring an	analyte in urine, the medical technologist should select:
a. A quality control reagent prepared in a urine matrix	
b. A quality control reagent prepared in a serum matrix	
c. A quality control reagent prepared in deionized water	
d. The matrix does not matter; any quality control reagent as lo	ong as the analyte of measure is chemically pure
96. For carbon dioxide determination, acidifying the sample:	
a. Converts the various forms of CO2 in plasma to gaseous CO	2 by dilution with an acid buffer
b. Prevents conversion of the various forms of CO2 in plasma t	o gaseous CO2 by dilution with an acid buffer
c. Converts all CO2 and carbonic acid to HCO3-	
d. Prevents conversion of all CO2 and carbonic acid to HCO3-	
97. Which of the following laboratory values is considered a po	ositive risk factor for the occurrence of coronary heart disease?
a. HDL cholesterol <35 mg/dL	c. Total cholesterol <200 mg/dL
b. LDL cholesterol <30 mg/dL	d. HDL cholesterol >60 mg/dL
98. Lead toxicity can be acquired by the following, EXCEPT:	
a. Skin contact	c. Inhalation
b. Animal bites	d. Ingestion
99. The most common method used in a clinical laboratory to	measure osmolality is:
a. Vapor pressure	c. Freezing point depression
b. Boiling point	d. Osmotic pressure
	•

c. Serum

d. Urine

100. Which specimen is the sample of choice for lead screening?

a. Whole blood

b. Hair

CLINICAL CHEMISTRY EXAM

1. Negative predictive value:

- a. Ability of a test to detect a given disease or condition.
- b. Ability of a test to correctly identify the absence of a given disease or condition.
- c. Chance of an individual having a given disease or condition if the test is abnormal.
- d. Chance an individual does not have a given disease or condition if the test is within the reference interval

2. A delta check is a method that:

- a. Determines the mean and variance of an instrument
- b. Monitors the testing system for precision
- c. Monitors patient sample day by day
- d. Is determined by each laboratory facility

3. Measures of spread, EXCEPT:

- a. Coefficient of variation
- b. Range

d. Standard deviation

4. Random errors, EXCEPT:

- a. Reagent dispensing
- b. Reagent lot variability

- c. Variation in handling techniques: pipetting, mixing, timing
- d. Variation in operator

5. Type of systemic error where the magnitude changes as a percent of the analyte present; error dependent on analyte concentration.

- a. Constant systematic error
- b. Proportional systematic error

c. Bias

c. Mode

d. None of the above

6. A pre-analytical error can be introduced by:

- a. Drawing a coagulation tube before an EDTA tube
- b. Mixing an EDTA tube 8 to 10 times

- c. Transporting the specimen in a biohazard bag
- d. Vigorously shaking the blood tube to prevent clotting

7. Two (2) consecutive control values exceed the same 2 standard deviation limit

a. 1:2S

b. 2:2S

c. R:4S d. 4:1S

8. A trend in QC results is most likely caused by

a. Deterioration of the reagent

- c. Improper dilution of standards
- b. Miscalibration of the instrument d. Electronic noise

9. Which of the following plots is best for comparison of precision and accuracy among laboratories?

a. Levy-Jennings

c. Cusum

b. Tonks-Youden

d. Linear regression

10. Which of the following terms refers to the closeness with which the measured value agrees with the true value?

a. Random error

c. Accuracy

b. Precision d. Reliability

11. Beta cell destruction, usually leading to absolute insulin deficiency:

a. Type 1 DM

c. Type 3 DM

. Type 2 DM d. All of the above

12. Which of the following conclusions may be made regarding these data?

RANDOM GLUCOSE: 186 mg/dL FASTING GLUCOSE: 114 mg/dL 2-HOUR OGTT: 153 mg/dL

HbA1c: 5.9%

- a. Data represents normal glucose status
- b. Data represents an impaired glucose status
- c. Data represents the presence of insulinoma
- d. Data represents diagnosis of diabetes

CLINICAL CHEMISTRY EXAM

13. Select the enzyme that is most specific for beta D-glucose:

c. Hexokinase a. Glucose oxidase

d. Phosphohexose isomerase b. Glucose-6-phosphate dehydrogenase

14. In normal glucose metabolism, blood glucose level increases rapidly after carbohydrates are ingested but returns to a normal level after:

a. 30 minutes c. 60 minutes (1 hour) b. 45 minutes d. 120 minutes (2 hours)

15. Symptoms of hypoglycemia usually occur when blood glucose has fallen below ___ mg/Dl

a. 50 mg/dL c. 70 mg/dL b. 60 mg/dL d. 80 mg/dL

16. Formation of glucose-6-phosphate from noncarbohydrate sources:

c. Glycogenolysis a. Glycolysis d. Glycogenesis b. Gluconeogenesis

17. Long-term estimation of glucose concentration can be followed by measuring:

c. Glycosylated albumin a. Glycosylated hemoglobin (HbA1c)

d. None of the above b. Fructosamine

18. The plasma protein mainly responsible for maintaining colloidal osmotic pressure in vivo is:

c. Alpha2-macroglobulin a. Albumin d. Beta2-microglobulin b. Prealbumin

19. Which dye gives a much greater absorbance change at 630 nm than it would at 500 nm?

C. BCP (Bromcresol purple) a. HABA (Hydroxyazobenzene-benzoic acid

d. Tetrabromosulfophthalein b. BCG (Bromcresol green)

20. Which of the following conditions is the result of a low alpha-1 antitrypsin level?

a. Asthma c. Pulmonary hypertension

b. Emphysema d. Sarcoidosis

21. Which test is the most sensitive in detecting early monoclonal gammopathies?

a. Immunoelectrophoresis c. Capillary electrophoresis of serum and urine

b. Urinary electrophoresis for monoclonal light chains d. Serum-free light chain immunoassay

22. "Gold standard" in the diagnosis of acute coronary syndrome (ACS):

c. High-sensitivity CRP (hs-CRP) a. Brain natriuretic peptide (BNP)

d. Troponin b. Cross-linked c-telopeptides

23. When should blood specimens for lipid studies be drawn?

c. In the fasting state, approximately 2 to 4 hours after eating a. Immediately after eating

d. In the fasting state, approximately 12 hours after eating b. Anytime during the day

d. LpX

24. The turbid, or milky, appearance of serum after fat ingestion is caused by the presence of?

a. Bilirubin c. Chylomicron b. Cholesterol d. Phospholipid

25. Which of the following lipid tests is least affected by the fasting status of the patient?

a. Cholesterol c. Fatty acid b. Triglyceride d. Lipoprotein

26. An abnormal lipoprotein present in patients with biliary cirrhosis or cholestasis:

a. LDL c. Lp(a) b. B-VLDL

27. The smallest and most dense lipoprotein particle:

c. VLDL a. LDL

b. HDL d. Chylomicrons

CLINICAL CHEMISTRY EXAM

28. LDL primarily contains:

a. Apo Al **c. Apo-B100** b. Apo-All d. Apo-B48

29. Which of the following apoproteins is inversely related to risk for coronary heart disease?

 a. Apo-A1
 c. Apo-B100

 b. Apo-B
 d. Apo-E

30. Select the order of mobility of lipoproteins electrophoresed on cellulose acetate or agarose at pH 8.6.

a. – Chylomicrons \rightarrow pre- $\beta \rightarrow \beta \rightarrow \alpha$ + b. – $\beta \rightarrow$ pre- $\beta \rightarrow \alpha \rightarrow$ chylomicrons + d. – $\alpha \rightarrow \beta \rightarrow$ pre- $\beta \rightarrow$ chylomicrons +

31. . A patient's total cholesterol is 300 mg/dL, his HDL cholesterol is 50 mg/dL, and his triglyceride is 200 mg/dL. What is this patient's calculated LDL cholesterol?

a. 200 c. 290 b. **210** d. 350

32. Which of the following is associated with Tangier disease?

a. Apoprotein C-II deficiency

b. Homozygous apo-B100 deficiency

c. Apoprotein C-II activated lipase

d. Apoprotein A-I deficiency

33. The kinetic methods for quantifying serum triglyceride employ enzymatic hydrolysis. The hydrolysis of triglyceride may be accomplished by what enzyme?

a. Amylase c. Lactate dehydrogenase

b. Leucine aminopeptidase d. Lipase

34. It is usually the result of any type of obstruction in which urea is reabsorbed into the circulation.

a. Pre-renal azotemia
b. Renal azotemia
c. Post-renal azotemia
d. None of the above

35. Creatinine is formed from the:

a. Oxidation of creatine
b. Catabolism of proteins and amino acids
c. Catabolism of purines
d. Oxidation of purines

36. Which of the following is measured using glutamate dehydrogenase and is a measure of advanced stages, poor prognosis,

and coma in liver disease?

a. Total bilirubin

b. Ammonia c. Unconjugated bilirubin

d. Urea

37. In the diacetyl method, what does diacetyl react with to form a yellow product?

a. Ammonia c. Uric acid d. Nitrogen

38. The red complex developed in the Jaffe method to determine creatinine measurements is a result of the complexing of creatinine with which of the following?

a. Alkaline picratec. Sulfuric acidb. Diacetyl monoxided. Sodium hydroxide

39. During chemotherapy for leukemia, which of the following analytes would most likely be elevated in the blood?

a. Uric acid

b. Urea c. Creatinine d. Ammonia

40. What is the compound that comprises the majority of the NPN fractions in serum?

a. Uric acid c. Ammonia b. Creatinine d. Urea

41. The reaction rate depends only on enzyme concentration:

a. First-order kinetics

b. Zero-order kinetics

c. Second-order kinetics

d. None of the above

42. To what class of enzymes does lactate dehydrogenase belong?

a. Isomerases
b. Ligases
c. Oxidoreductases

d. Transferases

CLINICAL CHEMISTRY EXAM

43. Increase in the serum enzyme levels indicate:

c. Tissue damage and necrosis a. Decreased enzyme catabolism

d. Increased glomerular filtration rate b. Accelerated enzyme production

44. The highest levels of total LD are seen in:

c. Skeletal muscle disorders a. AMI and pulmonary infarction d. Viral hepatitis and cirrhosis b. Pernicious anemia and hemolytic disorders

45. In what order (first to last) will the enzymes AST, CK, and LD become elevated in the serum during AMI?

a. AST, LD, CK c. CK, AST, LD b. CK, LD, AST d. LD, CK, AST

46. Macroenzymes, EXCEPT:

a. ALT and AST c. GGT b. CK d. G6PD

47. All of the following factors will adversely affect the accurate quantification of bilirubin in serum, EXCEPT:

a. Lipemia c. Exposure to light b. Hemolysis d. Specimen refrigeration

48. What enzyme catalyzes the conjugation of bilirubin?

a. Leucine aminopeptidase c. Uridine diphosphate glucuronyltransferase

b. Glucose-6-phosphate dehydrogenase d. Carbamoyl phosphate synthetase

49. Which bilirubin fraction is conjugated and covalently bound to albumin?

c. Delta a. Alpha d. Gamma b. Beta

50. Direct bilirubin, EXCEPT:

a. Insoluble in water c. Conjugated with glucuronic acid

d. Excreted in the urine of jaundiced patients b. Conjugated in the liver

51. Crigler-Najjar syndrome

a. Inability to transport bilirubin from the sinusoidal membrane to the microsomal region

b. Deficiency of the enzyme system required for conjugation of bilirubin

c. Inability to transport bilirubin glucuronides to the bile canaliculi

d. Severe liver cell damage accompanied by necrosis

52. Indirect-reacting bilirubin may be quantified by reacting it initially in which reagent?

a. Dilute hydrochloric acid c. Caffeine-sodium benzoate

b. Dilute sulfuric acid d. Sodium hydroxide

53. Which substrate is used in the Bowers-McComb method for ALP?

a. p-Nitrophenyl phosphate c. Phenylphosphate b. β-Glycerophosphate d. α-Naphthylphosphate

54. Major intracellular cation:

c. Potassium a. Bicarbonate d. Sodium b. Chloride

55. Electrolyte(s) essential for blood coagulation:

a. Calcium c. Sodium and chloride

d. Bicarbonate, potassium and chloride b. Calcium and magnesium

56. Hyponatremia due to increased water retention, EXCEPT:

a. Congestive heart failure c. Diuretic use b. Hepatic cirrhosis d. Renal failure

57. ____ can occur when sodium is measured using indirect ion-selective electrodes (ISEs) in a patient who is hyperproteinemic or hyperlipidemic.

c. Pseudohyponatremia a. Hyponatremia

d. Pseudohypernatremia b. Hypernatremia

CLINICAL CHEMISTRY EXAM

58. Hyperkalemia, EXCEPT:	
a. Acidosis	c. Oral or intravenous potassium therapy
b. Alkalosis	d. Diuretics
59. A disorder characterized by increased production of	
a. Multiple myeloma	c. Cystic fibrosis
b. Hypoparathyroidism	d. Wilson disease
60. The anticoagulant of choice for arterial blood gas me	asurements is in the state.
a. Lithium heparin; dry	c. Lithium heparin; liquid
b. EDTA; dry	d. Sodium citrate; dry
61. Elevated anion gap, EXCEPT:	
a. Hypernatremia	c. Ketoacidosis
b. Hypercalcemia	d. Renal failure
62. A patient's blood gas results are: pH = 7.50 pCO2 = 55	_
a. Respiratory acidosis	c. Metabolic acidosis
b. Respiratory alkalosis	d. Metabolic alkalosis
63. In the Henderson-Hasselbalch equation, the denomin	
a. Kidney function	c. Liver function
b. Lung function	d. Renal function
64. Fever:	W. I
a. Will decrease pCO2 by 3%	c. Will decrease pCO2 by 7%
b. Will increase pCO2 by 3%	d. Will increase pCO2 by 7%
	sured directly by the blood gas analyzer electrochemically?
a. pH, HCO3- and total CO2	c. pH, pCO2 and pO2
b. pCO2, HCO3- and pO2	d. pO2, HCO3- and total CO2
66. The normal ratio of carbonic acid to bicarbonate in a	
a. 1:20	c. 0.003:1.39
b. 7.4:6.1	d. 20:1
	pecimen is left at room temperature for 2 or more hours?
a. pO2 increases, pCO2 increases, pH increases	c. pO2 decreases, pCO2 increases, pH decreases
b. pO2 decreases, pCO2 decreases, pH decreases	d. pO2 increases, pCO2 increases, pH decreases
68. Manganese toxicity resembles:	
a. Parkinson's disease	c. Alzheimer's disease
b. Wilson's disease	d. Menkes disease
69. Which trace metal is contained in glucose tolera	nce factor?
a. Chromium	c. Selenium
b. Copper	d. Zinc
70. To what metal does ceruloplasmin firmly bind?	
a. Chromium	c. Zinc
b. Copper	d. Iron
71. Tropic hormones, EXCEPT:	
a. ACTH	c. TSH
b. FSH	d. GH
72. Select the most appropriate single screening test for	thyroid disease.
a. Free thyroxine index	c. Total T4
b. Total T3 assay	d. TSH assay
	•

73. A patient has an elevated serum T3 and free T4 and undetectable TSH. What is the most likely cause of these

c. Euthyroid with increased thyroxine-binding proteins

d. Euthyroid sick syndrome

results?

a. Primary hyperthyroidism

b. Secondary hyperthyroidism

CLINICAL CHEMISTRY EXAM

74. The biologically most active, naturally occurring androgen is: c. Epiandrosterone a. DHEA d. Testosterone b. Androstenedione 75. Diabetes insipidus: c. High specific gravity a. Vasopressin deficiency d. None of the above b. Vasopressin excess 76. Most widely used screening test for Cushing's syndrome: a. Overnight low-dose dexamethasone suppression test c. Petrosal sinus sampling b. Corticotropin-releasing hormone stimulation test d. Metyrapone stimulation test 77. The definitive suppression test to prove autonomous production of growth hormone is: a. Oral glucose loading c. Estrogen priming b. Somatostatin infusion d. Dexamethasone suppression 78. Zollinger–Ellison (Z–E) syndrome is characterized by great elevation of: a. Gastrin c. Pepsin b. Cholecystokinin d. Glucagon 79. Critical to blood glucose homeostasis and blood pressure: c. Catecholamine a. Aldosterone b. Cortisol d. Cholesterol 80. The main estrogen produced by the ovaries and used to evaluate ovarian function: c. Epiestriol a. Estriol (E3) d. Hydroxyestrone b. Estradiol (E2) 81. Heroin is synthesized from what drug? c. Ecgonine a. Diazepam d. Chlorpromazine b. Morphine 82. Characterized by odor of bitter almonds, altered mental status and tachypnea in the absence of cyanosis. a. Arsenic toxicity c. Cyanide overdose b. Carbon monoxide intoxication d. Iron poisoning 83. Acetaminophen is particularly toxic to what organ? a. Heart c. Spleen b. Kidney d. Liver 84. All of the following requires TDM, EXCEPT: a. Salicylates c. Ibuprofen b. Acetaminophen d. All of the above 85. Most common drug of abuse: a. Cocaine c. Methanol d. Marijuana b. Ethanol 86. Specimen of choice for the determination of circulating concentrations of most drugs: a. Expectorated sputum c. Serum or plasma b. Gastric fluid d. Urine 87. Single most important factor in therapeutic drug monitoring (TDM): a. Amount of WBCs in the specimen c. Timing of specimen collection b. Presence of glucose in the specimen d. Volume of specimen 88. In pharmacokinetics, the concentration of the drug ____ as the rate of elimination and distribution exceeds absorption. a. Declines c. Rises b. Spuriously declines d. Spuriously rises

CLINICAL CHEMISTRY EXAM

89. Most common route of drug delivery:

a. Intravenous c. Rectal

b. Oral d. Transcutaneous

90. Select the five pharmacological parameters that determine serum drug concentration:

- a. Absorption, anabolism, perfusion, bioactivation, excretion
- b. Liberation, equilibration, biotransformation, reabsorption, elimination
- c. Liberation, absorption, distribution, metabolism, excretion
- d. Ingestion, conjugation, integration, metabolism, elimination

91. An anti-neoplastic drug that inhibits DNA synthesis in all cells

a. Clozapine c. Methotrexate
b. Ethosuximide d. Procainamide

92. All of the following are immunosuppressive drugs, EXCEPT:

a. Cyclosporine c. Sirolimus (rapamycin)

b. Phenytoin d. Tacrolimus

93. All of the following are cardioactive drugs, EXCEPT:

a. Aminoglycoside c. Procainamide b. Digixon d. Quinidine

94. An orally administered drug used to treat manic depression (bipolar disorder):

a. Digoxin c. Phenytoin d. Theophylline

b. Lithium d. Theophylline

95. When measuring trace metals in blood other than lead, what type of tube should be used?

a. Navy blue top
b. Green top
c. Purple top
d. Red top

b. Green top d. Red top

96. Chemical name of Vitamin B2:

a. Retinol c. Riboflavin
b. Thiamine d. Ascorbic acid

97. Plays a role in the synthesis of amino acids and DNA:

a. Folic acid
b. Pteroylglutamic acid
c. Both of these
d. None of these

98. A deficiency of this vitamin results to rickets and osteomalacia:

a. Vitamin A c. Vitamin E d. Vitamin K

99. Which is used to determine trastuzumab (Herceptin) therapy for breast cancer?

a. PR b. CEA c. HER-2/neu d. CA-15-3

100. Which type of cancer is associated with the highest level of AFP?

a. Hepatoma c. Testicular cancer b. Ovarian cancer d. Breast cancer