

ON-LINE EXAMINATION

Brought to you by: Advanced Medical Publishing, USA

http://WWW.rabex .net

Rabex 2009

Radiation & Cancer Biology Practice Examination

for Residents in Radiation Oncology

The 2009 annual practice examination in *Radiation and Cancer biology* has been created specifically to help residents in radiation oncology and radiation therapy study for their board exams. The exam consists of approximately 200 questions in molecular/ mechanistic radiobiology; cellular radiobiology; tumor radiobiology; normal tissue radiobiology; and radiation risks and protection. All sections are suitable forboth therapy and dagnostic residents. The total allowed exam time is 200 min. The exam can be used as an aid to self-study, or a group of residents can take the exam on-line beginning June 15 2009 up to May 15 2010. The exam may open up sooner. Please visit Rabex site at: http://www.Rabex.net

Please save UserName and password to log back in and review the questions & Answers. From the first log in time, you have approximately 1 months period to log back in and review. Important: Please click Review Anwers to see the Questions & Answers.

Prepaid Form

Please submit your payment with the required information. Advanced Medical Publishing will sign the participants. The Login User Name and Password will be e-mailed to individual registrant.

The exam will be given only on-line. Please check our Rabex site for Radiation and Cancer Biology at;

http://www.Rabex.net

In addition to hard copy, please e-mail the applicants information to:

Info@rabex.net

Requirement: please note that the form below must be filled for all the examinee and mail or fax to address below.

No of online Rabex 2009 \$75 :

WI Residents add 5.5% sales tax: Total amt.:				\$ \$	
Please provide the	e address, name, e-r	mail, phone no. of the	Program/Resider	nts Director or the	Proctor.
Name:		e-mail:		phone:	
Method of Payme	nt (Payment with Ord	der Required):Che	ck enclosed	MasterCardV	isaDiscover
Card No.:	/	<u> </u>	/	Exp	/
Ship to:					
Phone:		_ Fax:		E-mail:	
Mail, fax, webo	rder, or phone orde	r to:			
	Adv	anced Medical P	ublishing, Inc	., USA	
		PO Box 5046 • Madi	son, WI 53705		
	Pr	none: 608-833-2599 • F	ax: 608-833-2255	•	

e-mail: info@rabex.net or info@advmedpub.com • Website: http://www.Rabex.net

Required Information for on-line Examination www.Rabex.net

Please provide the address, name, e-mail, phone no. of the Program Director or the Proctor. Please check mark:

I am ----- an Individual ----- or a Resident or ----- a Program Director at: ----- Country of Origin

----- (Residency Program) University Medical School ----- (Residency Program) University Affilated Medical School

----- Private Medical Institution ----- Private Practice Center/Clinic/Hospital ----- Radiation Biology

----- Biology ----- Basic Research Center/Dept.

Address:					
Name:	e-mail:	phone:			

Please provide the name, e-mail, phone no. and address of each Resident:

Name:	e-mail:	Year in Residency:	
Name:			
Name:	e-mail:	Year in Residency:	
Name:			
Name:	e-mail:	Year in Residency:	
Name:			
Name:			
Name:			
Name:	e-mail:	Year in Residency:	
Name:			
Name:	e-mail:	Year in Residency:	
Name:			
Name:	e-mail:	Year in Residency:	
Name:			
Name:	e-mail:	Year in Residency:	
	and the second se		



© 1992-2009 Advanced Medical Publishing, Inc., USA. All Rights Reserved.