2021



Radiation & Cancer Biology Practice Examination (Rabex)

for Residents in Radiation Oncology Marcelo Vazquez, MD, PhD, Editor-in-Chief Siamak Shahabi, Phd, Chief-Technical Editor

- The 2021 annual practice examination in *Radiation and Cancer Biology* has been created specifically to help residents in radiation oncology in preparation for their board exam.
- The exam consists of 200 questions covering all the 2019-20 ABR guidelines subject categories.
- The new 2020 ABR guidelines are outlined in www.Rabex.net
- · Please visit the Rabex website for more detail on Table of Contents, at www.Rabex.net
- · Each Exam is restricted to one resident.
- The total allowed exam time is 200 min.
- The exam opens on June 1, 2021 open ended.
- The institution should schedule the exam as suits their residents schedule.
- · Resident and program director will receive a full score analysis.

Features

- Real time scoring.
- Email score to program director.
- Review the Questions and Answers using the same the same user ID and password.
- Review the Questions and Answers right after the exam is finished.
- Ranking Percentile among the residents.
- Score break-down in all the subject categories
- Each Exam is restricted to one resident.
- The total allowed exam time is 200 min.

Registration Form Submission

Please submit the filled registration form via email with required information to <u>info@Rabex.net</u>. The Login User Name and Password will be e-mailed to individual registrant automatically.



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Rabex 2021: Required On-line Examination Registration Form Email completed form to: info@Rabex.net

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

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

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

Biology ----- Basic Research Center/Department.

Address: Required

Residency Program	n Director:	
	e-mail:	P:
Radiation Biologist	/ Instructor:	
Name:	e-mail:	P:
Residency Program	n Coordinator:	
Name:	e-mail:	P:
Department Chairr	nan:	
Name:	e-mail:	P:

Please provide each Resident's name, e-mail, & year in Residency:

Name:	_ email:	PGY :
Name:	_ email:	PGY :
Name:	_ email:	PGY :
Name:	_ email:	PGY :
Name:	_ email:	PGY :
Name:	_ email:	PGY :
Name:	_ email:	PGY :
Name:	_ email:	PGY :
Name:	_ email:	PGY :
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