

RADIOTHERAPY

PAPER-II

RTH/D/18/41/II

Time: 3 hours
Max. Marks:100

Important Instructions:

- Attempt all questions in order.
- Each question carries 10 marks.
- Read the question carefully and answer to the point neatly and legibly.
- Do not leave any blank pages between two answers.
- Indicate the question number correctly for the answer in the margin space.
- Answer all the parts of a single question together.
- Start the answer to a question on a fresh page or leave adequate space between two answers.
- Draw table/diagrams/flowcharts wherever appropriate.

Write short notes on:

- a) Dose schedules for hypofractionated radiotherapy in breast cancer. 3+4+3
 - b) Indications and contraindications for hypofractionated RT in breast cancer as per current ASTRO recommendations.
 - c) Precautions to be taken while planning hypofractionated RT in breast cancer.
- a) Indications, methods and dose schedules for brachytherapy in oral tongue cancer. 6+4
 - b) Indications and results of post-operative adjuvant radiation therapy in oral cancers.
- a) Risk classification in testicular germ cell tumours. 5+5
 - b) Management options in stage I testicular seminoma.
- a) Indications & results of radiotherapy in Wilm's tumour. 5+5
 - b) Describe the timing, treatment planning and dose schedule of radiotherapy for a 3-year old boy with Stage III Wilm's tumour.
- a) Describe the types of accelerated hyperfractionation schedules in treatment of head and neck cancers with their rationale. 6+4
 - b) What is the evidence regarding benefit of the above approaches in treatment of locally advanced head and neck cancer?
- a) Treatment options and protocols for a case of NSCLC stage IIIB. 6+4
 - b) Discuss the options for targeted therapy in NSCLC stage IIIB.
- a) What is Intensity Modulated Arc Therapy (IMAT)? 2+3+2+3
 - b) Enumerate the currently available systems and treatment units for delivery of IMAT.
 - c) What is Tomotherapy?
 - d) Enumerate advantages and disadvantages of IMAT and Tomotherapy.

P.T.O.

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| 8. | a) Management of a patient of small cell lung cancer presenting with Superior Vena Caval Obstruction Syndrome. | 6+4 |
| | b) Indications, dose schedules and benefit of prophylactic cranial RT in small cell lung cancer. | |
| 9. | a) Risk stratification in prostate cancer. | 5+5 |
| | b) Management options in an eighty-year-old male with low risk prostate cancer. | |
| 10. | a) Various motion management techniques in radiation therapy. | 5+5 |
| | b) Deep Inspiratory Breath Hold (DIBH) technique | |
