

MEDICAL ONCOLOGY

PAPER-II

Time: 3 hours
Max. Marks:100

MED.ONCO/D/19/17/II

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:

1. a) What is minimal residual disease(MRD) in acute leukemia? 2+4+4
b) Various methods of detection, cut off value and limitations of MRD in acute lymphoblastic leukemia.
c) Prognostic and therapeutic implications of MRD in acute lymphoblastic leukemia.
2. a) Solitary pulmonary nodule. 4+3+3
b) Growing teratoma syndrome.
c) Port site metastasis.
3. a) Differential diagnosis of pulmonary infiltrates in cancer patients. 3+4+3
b) Evaluation and management of pulmonary infiltrate in cancer patients.
c) Describe chemotherapy related pulmonary toxicity.
4. a) Indications of radionuclide bone scan in oncology practice. 3+2+5
b) What is a superscan?
c) Management of metastatic bone disease.
5. a) What are tumour markers? 2+4+4
b) Describe in detail the role of tumour markers in gynecological malignancies.
c) Management of rising CA 125 in previously treated case of epithelial ovarian cancer.
6. a) Robotic surgery. 3+4+3
b) Video assisted thoracic surgery.
c) Natural orifice transluminal endoscopic surgery(NOTES).
7. a) Management of post chemotherapy residual mass in germ cell tumour. 4+3+3
b) Types of retroperitoneal lymph node dissection (RPLND).
c) Long term complications of RPLND.

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8. a) Endoscopic ultrasound. 2+4+4
b) Role of endobronchial ultrasound in staging of mediastinal nodes in non-small cell lung cancer.
c) BI-RADS classifications for mammography.
9. a) Define febrile neutropenia. 2+4+2+2
b) How will you evaluate and manage patients with febrile neutropenia in oncology clinical practice?
c) Antibiogram.
d) Pegfilgrastim.
10. a) WHO classification of primary brain tumours. 4+4+2
b) Prognostic and diagnostic molecular markers in primary brain tumours.
c) Role of Bevacizumab in glioblastoma multiforme.
