RTH/J/17/41/II

RADIOTHERAPY

PAPER – 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:

1.	a) Latest FIGO staging system for cancer of endometrium.b) What is the role of radiation in Stage I Ca endometrium?	6+4
2.	a) Techniques of post-mastectomy external radiation.b) How are the adjacent fields matched?	6+4
3.	 a) Enumerate the technical steps of Stereotactic Body Radiotherapy (SBRT) in a flowchart. b) When is SBRT used in lung cancers? c) What T and N stage lung cancers are suitable for SBRT? d) Strategies for manpaging motion in SBRT for lung tumours. 	3+2+2+3
4.	A 40 year male presents with a complaint of hematuria and his CT scan shows a left renal mass with a renal vein thrombus and poorly functioning left kidney.a) What other investigation will you do and why?b) What treatment will you suggest and why?c) A year later, the patient has extensive bone and lung metastasis. How will you treat the patient?	3+3+4
5.	RTOG 90-03 used four different fractionation regimens to treat head-neck cancers, while the UK CHART trial used two different fractionation regimens. Drawing from the results of these two landmark trials explain:a) Various fractionation schedules that have been used in head-neck cancers.b) The radiobiologic principles that may account for the variable outcomes of patients assigned to the various arms.	5+5
6.	What are the clinical features of retinoblastoma? Write a note on bilateral retinoblastoma.	4+6

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7.	a) Techniques of total body irradiation.b) What are the organs to be shielded in total body irradiation and how?	6+4
8.	a) What are the high-risk factors for medulloblastoma?b) How does risk-stratification affect its treatment?	5+5
9.	How do you keep a patient of testicular NSGCT stage I on surveillance? What are the poor prognostic factors?	6+4
10.	Problems of giving chemotherapy to elderly patients.	10
