

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:

- 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.
- a) Solitary pulmonary nodule. 4+3+3
 - b) Growing teratoma syndrome.
 - c) Port site metastasis.
- 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.
- a) Indications of radionuclide bone scan in oncology practice. 3+2+5
 - b) What is a superscan?
 - c) Management of metastatic bone disease.
- 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.
- a) Robotic surgery. 3+4+3
 - b) Video assisted thoracic surgery.
 - c) Natural orifice transluminal endoscopic surgery(NOTES).
- 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) Antibigram.
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.
