

SURGICAL ONCOLOGY
PAPER-III

SURONC/J/18/47/III

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. Management of well differentiated thyroid cancer in the context of American Thyroid Association 2015 Guidelines. 10
2. a) Superior vena cava syndrome 3+3+4
b) Psuedomyxoma peritonii
c) Incidentally detected gallbladder cancer
3. a) Management of regionally metastatic cutaneous melanoma. 7+3
b) Recent advances in treatment of melanoma.
4. a) Concept of sentinel node biopsy in solid organ malignancies. 2+(3+5)
b) Discuss in brief the techniques and current applications with level 1 evidence for each organ where it is performed.
5. How do you classify pancreatic cancers based on criteria for resectability? What is "Artery first approach" for pancreatic head resection? Discuss briefly different methods, advantages and disadvantages. 4+2+4
6. Discuss the basis and current role of different molecular diagnostic assays available for prognosticating early breast cancer. Discuss the advances in treatment of triple negative breast cancer. 6+4
7. Mechanism and role of different radiopharmaceuticals used in the diagnosis and management of common solid organ malignancies. 10
8. Discuss role and extent of surgery in carcinoma of the uterine cervix. Add a note on early diagnosis and prevention of cervical cancer. 4+(2+4)
9. Discuss the National Programme for Prevention and Control of Cancer, Diabetes, Cardiovascular diseases and Stroke (NPCDCS) and Tertiary Care Cancer Centers and State Cancer Institutes under it. 10

P.T.O.

10. Management of a T4bN₂M₀, ER/PR positive, Her 2 neu 3+ breast cancer in a 40-year-old lady under the context of latest available evidence. 10
