

PROVISIONAL ANSWER KEY

Question 30/2024/OL

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Question1:-All the following are risk reduction strategies in BRCA mutated individuals except

A:-Prophylactic B/L salpingectomy

B:-Prophylactic B/L salpingo oophorectomy

C:-Prophylactic B/L Oophorectomy

D:-Prophylactic B/L Mastectomy

Correct Answer:- Option-C

Question2:-Which of the following will have very low/no risk of prolonged Azoospermia?

A:-2 cycles of BEP

B:-ABVD chemotherapy

C:-Radioactive Iodine therapy

D:-CHOP chemotherapy

Correct Answer:- Option-B

Question3:-Which of the following is the preferred method to establish tissue diagnosis of cutaneous melanoma?

A:-Punch biopsy

B:-Deep shave biopsy

C:-Incision biopsy

D:-Excision biopsy

Correct Answer:- Option-D

Question4:-Cancer immune editing includes all except

A:-Elimination

B:-Equilibrium

C:-Evolution

D:-Escape

Correct Answer:- Option-C

Question5:-Which of the following is not a factor used in the prognostication of advanced stage Hodgkin lymphoma by the International Prognostic Score (IPS)?

A:-Stage IV

B:-Male gender

C:-WBC \geq 15,000 cells/ μ L

D:-Age 40 years and more

Correct Answer:- Option-D

Question6:-What is the treatment of choice for solitary plasmacytoma?

A:-Steroids followed by chemotherapy

B:-40 to 50 Gy of radiation

C:-Surgery followed by 40 to 50 Gy of radiation

D:-Surgery alone and radiation only in high risk patients

Correct Answer:- Option-B

Question7:-MRD negativity in ALL and MMR in CML:

A:- $<$ 0.1% and $<$ 0.01% respectively

B:- $<$ 0.01% and $<$ 0.1% respectively

C:- $<$ 0.001% and $<$ 0.01% respectively

D:- $<$ 0.0001% and $<$ 0.1% respectively

Correct Answer:- Option-B

Question8:-A 45 year old gentleman underwent endoscopic removal of a colonic polyp. Which of the following is NOT an indication for colon resection surgery?

A:-Lymphovascular invasion

B:-Ulcerated lesion

C:-Lesion in upper 1/3rd of submucosa

D:-Poor differentiation

Correct Answer:- Option-C

Question9:-A 50 year-old patient presents with breast cancer involving axillary and infraclavicular lymph nodes and exhibits a pCR at mastectomy and sentinel node biopsy following neo adjuvant chemotherapy. What is the current standard of care for adjuvant RT?

A:-No adjuvant RT is indicated for a pathologic complete response

B:-Adjuvant RT to the chest wall and regional nodes

C:-Adjuvant RT directed only to the undissected level 3 node

D:-Adjuvant RT directed only to the chest wall

Correct Answer:- Option-B

Question10:-What is the most common type of small bowel malignancy?

A:-Adenocarcinoma

B:-Lymphoma

C:-Carcinoid

D:-Schwannoma

Correct Answer:- Option-C

Question11:-Which is the most common tumour suppressor gene mutation in pancreatic cancer?

A:-kras

B:-CDKN2A/p16

C:-BRCA2

D:-TGFBR2

Correct Answer:- Option-B

Question12:-Platelet dysfunction is seen with

A:-Imatinib

B:-Dasatinib

C:-Bosutinib

D:-Ponatinib

Correct Answer:- Option-B

Question13:-Which of the following is not included in 5 A's model of smoking Cessation?

A:-Ask

B:-Arrange

C:-Analyze

D:-Assist

Correct Answer:- Option-C

Question14:-Among the following, routine antiemetic prophylaxis can be avoided in all except:

A:-Bevacizumab

B:-Fludarabine

C:-Vinblastine

D:-Eribulin

Correct Answer:- Option-D

Question15:-Which drug-adverse event is wrongly matched?

A:-Dasatinib - Pleural / Pericardial effusions

B:-Bosutinib - Constipation/Ileus

C:-Nilotinib - Metabolic syndrome/Diabetes/Dyslipidemia

D:-Ponatinib - Arterio-occlusive disease

Correct Answer:- Option-B

Question16:-All of the following are indication for annual screening MRI of breast except

A:-BRCA mutation

B:-Atypical hyperplasia

C:-Untested first degree relative of BRCA carrier

D:-Life time risk of breast cancer 20-25% or greater, as defined by models that are largely based on family history

Correct Answer:- Option-B

Question17:-All of the following are indication for surgical biopsy after core needle biopsy except

A:-LCIS

B:-Atypical ductal hyperplasia

C:-Radial scar

D:-Failure sample calcifications

Correct Answer:- Option-A

Question18:-Anthracyclines inhibit:

A:-Trop 1

B:-Trop 2A

C:-Trop 3A

D:-Trop 3B

Correct Answer:- Option-B

Question19:-All of the following tumours are positive for CD 30 except:

A:-Hodgkins Lymphoma

B:-ALCL

C:-Embryonal carcinoma

D:-Follicular Lymphoma

Correct Answer:- Option-D

Question20:-ENDURANCE trial studied newly disgnosed patients with Multiple Myeloma. All are true except

A:-Trial compared - VRd (Bortezomib, Lenalidomide, Dexamethasone) vs KRd (Carflizomib, Lenalidomide, Dexamethasone)

B:-Improvement was seen in PFS (Progression free survival) but not in OS (Overall survival)

C:-Did not include high-risk cytogenetic patients

D:-Toxicity of KRd was higher than VRd

Correct Answer:- Option-B

Question21:-B/I prophylactic mastectomy - decreases the breast cancer risk by

A:-90-95%

B:-100%

C:-85-90%

D:-95-100%

Correct Answer:- Option-A

Question22:-Which of the following is not a component of Gail model for breast cancer risk estimation?

A:-Age at menarche

B:-Number of previous breast biopsies

C:-Atypical Ductal hyperplasia

D:-No of 1st and 2nd degree relatives with breast cancer

Correct Answer:- Option-D

Question23:-The statement regarding dermatofibrosarcoma protuberans is true except:

A:-They rarely metastasize

B:-They are mostly CD34+ve and factor XIIIa -ve

C:-The hallmark of dermatofibrosarcoma protuberans is t(15;22) (q22;q13)

D:-The most common site of metastasis are bone/lung

Correct Answer:- Option-C

Question24:-Which feature is NOT a criterion for MGUS?

A:-Serum monoclonal M protein (M-protein) concentration < 3 g/dL

B:-Bone marrow plasma cell concentration < 10%

C:-No evidence of end organ damage

D:-Normal free light chain ratio

Correct Answer:- Option-D

Question25:-In CML, presence of which of the following points towards poor prognosis?

A:-Splenomegaly

B:-Hepatomegaly

C:-Lymphadenopathy

D:-Bony tenderness

Correct Answer:- Option-C

Question26:-Oberlin criteria is used in which malignancy?

A:-Osteosarcoma

B:-Rhabdomyosarcoma

C:-Wilms tumor

D:-Ewings sarcoma

Correct Answer:- Option-B

Question27:-All are acquired resistance genes in NSCLC except

A:-T790M

B:-Trans differentiation from lung adenocarcinoma to small cell lung cancer

C:-BRAF class 2 and class 3 alterations in non V600E mutant lung cancer

D:-MET amplification

Correct Answer:- Option-C

Question28:-For which of the following cancers is alcohol consumption not a risk factor?

A:-Breast cancer

B:-Oesophageal cancer

C:-Pancreatic cancer

D:-Pharyngeal cancer

Correct Answer:- Option-D

Question29:-Which is most accurate regarding risk factors for breast cancer?

A:-Without a positive family history, the likelihood of developing breast cancer is typically low

B:-A prior diagnosis of breast cancer is a well-established risk factor for developing a new breast cancer

C:-Late age at menarche is a typical risk factor for breast cancer

D:-Obesity increases breast cancer risk only in premenopausal individuals

Correct Answer:- Option-B

Question30:-According to the Society of Surgical Oncology, American Society for Radiation Oncology and American Society of Clinical Oncology Consensus Guidelines, which statement regarding Breast-Conserving Surgery (BCS) in ductal carcinoma in situ is most accurate?

A:-Positive margins are associated with at least a twofold increase in Ipsilateral Breast Tumor Recurrence (IBTR)

B:-Compared with 2-mm margins, wider margin widths significantly lower risk for IBTR

C:-BCS plus radiations typically reduced long-term survival compared with mastectomy

D:-IBTR rates are usually higher with use of systemic therapy

Correct Answer:- Option-A

Question31:-Regarding the use of High dose methotrexate, choose the CORRECT statement.

A:-The preferred dose in osteosarcoma is 8-12 g/m² over 24 hours

B:-The preferred drug to counter toxicity is Glucosamine

C:-The drug is not dialysable during conventional hemodialysis

D:-There is strong evidence to support its role in the prevention of CNS relapse in high-risk DLBCL

Correct Answer:- Option-C

Question32:-Regarding induction therapy of Acute myeloid leukemia in older adults, which is TRUE?

A:-Venetoclax and azacytidine can produce CR in around 60% of patients

B:-Venetoclax is initiated at a starting dose of 400 mg per day

C:-The risk of infectious complications is similar between Venetoclax + Azacytidine and DA3+7 regimens

D:-The poor prognostic effect of P53 mutation is overcome by the combination of Azacytidine + Venetoclax

Correct Answer:- Option-A

Question33:-Which of the following is a suitable agent for tackling positive MRD status in acute lymphoblastic leukemia?

A:-CAR T cells

B:-Blinatumumab

C:-Bortezomib

D:-Rituximab

Correct Answer:- Option-B

Question34:-Which of the following is NOT an inhibitor of VEGF?

A:-Pazopanib

B:-Cabozantinib

C:-Lenvatinib

D:-Alpelisib

Correct Answer:- Option-D

Question35:-Regarding CDK/6 inhibitors in hormone-positive breast cancer, choose the CORRECT statement.

A:-Palbociclib produced OS benefits in metastatic cancer

B:-Ribociclib has not proven OS benefit in the adjuvant setting

C:-Abemaciclib has the highest inhibitory effect on CDK6

D:-All three agents are given in an intermittent schedule to avoid neutropenia

Correct Answer:- Option-C

Question36:-Which of the following is NOT TRUE regarding DNA repair and use of PARP inhibitors?

A:-PARP is a critical component of the Base excision repair pathway

B:-NHEJ is the most important pathway for repair of double-stranded breaks

C:-PARP-1 inhibition affects both single-stranded as well as double-stranded break repairs

D:-Gene conversion is a method of homologous recombination that is independent of RAD51

Correct Answer:- Option-C

Question37:-Which of the following is the target of lenalidomide?

A:-Ikaros

B:-Cereblon

C:-VEGF-1

D:-PDL1

Correct Answer:- Option-B

Question38:-Regarding the mechanism of action of anti-emetic agents, choose the CORRECT statement.

A:-Palonosetron works mainly in the periphery and has little central action

B:-NK-1 receptor antagonists have only central action

C:-Olanzapine acts as an antiemetic by mainly blocking the muscarinic receptors

D:-5HT3 antagonists act by blocking the effect of serotonin from GI mucosa afferent transmission to CNS

Correct Answer:- Option-D

Question39:-Regarding the management of toxicities of BTK inhibitors, choose the CORRECT statement.

A:-Headache in patients on Acalabrutinib is an early sign of intermittent hypertension and should trigger a continuous BP monitoring scheme

B:-Atrial fibrillation due to BTKi usually occurs within the first 6 months of therapy is rare after 1 year

C:-Atrial fibrillation is associated with high risk of mortality in BTKi and should trigger immediate stoppage of the BTKi

D:-Bruising in a patient on ibrutinib can be managed conservatively and need not trigger stop of the agent

Correct Answer:- Option-D

Question40:-Regarding immune therapy (Check point inhibitors) related AE (irAE), which is the TRUE statement?

A:-Most irAEs happen in the first 8-12 weeks of starting treatment

B:-Pneumonitis is the commonest AE leading to emergency room visits

C:-Steroids should be started for grade 1 colitis to prevent further worsening

D:-Skin rash upto 30% of BSA is considered as a grade I AE

Correct Answer:- Option-A

Question41:-A 46-year-old male with NSCLC, Adenocarcinoma, PDL1 60%, is started on Pembrolizumab. After 6 weeks, when he presents for his 3rd dose, he complains of abdominal pain and increased stool frequency upto 5 times a day, with occasional streaks of blood. His CBC, RFT, LFT, TSH and Cortisol levels are normal. Which of the following is a TRUE statement regarding further management of the current problem?

A:-No further workup is required as this is unrelated to the current medication. He can be advised to take bulking agents to reduce the frequency

B:-Stool culture and C diff evaluation should be done as the first step and then a colonoscopy may be considered

C:-Pembrolizumab may be continued and no specific intervention is needed at this point

D:-Steroids can be started at 0.5 mg per kg

Correct Answer:- Option-B

Question42:-Regarding cytokine release syndrome associated with immune therapies, choose the CORRECT statement.

A:-CRS doesn't depend on cell dose when using CART cell therapy

B:-CRS associated with CART therapy is characterized by elevated IL 6 while that associated with bispecific T cell activating monoclonals does not show IL 6 elevation

C:-Cardiac dysfunction associated with CRS is usually reversible

D:-Tocilizumab for CRS is administered as a one-time dose and should not be repeated even if symptoms persist

Correct Answer:- Option-C

Question43:-Regarding ALK mutated lung cancer and ALK inhibitors in lung cancer, choose the INCORRECT statement.

A:-ALK-positive lung cancers are more likely to be never smokers and younger

B:-If chemotherapy is required in ALK mutated adenocarcinoma, pemetrexed based regimen is preferred

C:-Alectinib is more efficacious in terms of PFS than crizotinib and also causes lesser anemia

D:-Second-generation TKIs like alectinib or brigatinib are preferred for first-line therapy over crizotinib

Correct Answer:- Option-C

Question44:-A 50-year female with ER+ve, PR-ve, Her-2 2+ (FISH negative) breast cancer with metastatic disease is treated with first-line paclitaxel and has progressive disease while on letrozole and palbociclib. Which of the following would NOT be a reasonable choice of treatment for her?

A:-Fam-trastuzumab deruxtecan

B:-Adriamycin

C:-Vinorelbine

D:-Trastuzumab with abemaciclib

Correct Answer:- Option-D

Question45:-Regarding de-escalation of therapy in ER-positive, early breast cancer using gene profiling (Oncotype Dx), choose the TRUE statement.

A:-Postmenopausal women with scores of 10-25 need chemotherapy

B:-Premenopausal women with a score <10 need chemotherapy

C:-A menopausal woman with a score <10 does not need chemotherapy

D:-Even a node-positive pre-menopausal with a <10 scores wouldn't need chemotherapy

Correct Answer:- Option-C

Question46:-A 45-year-old male presents with 3 3 week history of cough and hemoptysis. He has a large lung lesion and multiple liver metastases. Bilirubin in 2.5 mg/dL. He has dyspnea. He has several bone lesions with pain. Biopsy is adenocarcinoma. The NGS panel is negative. PDL 1 is 50%. Which of the following is the most appropriate therapy?

A:-Pembrolizumab with pemetrexed carboplatin

B:-Pembrolizumab alone

C:-Pembrolizumab with any CTLA4 inhibitor

D:-Pemetrexed with carboplatin

Correct Answer:- Option-A

Question47:-Regarding the infusion of paclitaxel, choose the CORRECT statement.

A:-Castor oil-based solvent is used to reduce infusion reaction

B:-Phthalate-free infusion sets are preferred to reduce infusion reactions

C:-Premedication with steroids will reduce infusion reactions

D:-Should always be administered under continuous cardiac monitoring

Correct Answer:- Option-C

Question48:-Which of the following is an absolute contraindication for rechallenge with any form of L-L-asparaginase in a patient with Acute lymphoblastic leukemia?

A:-Cortical vein thrombosis

B:-Elevated liver enzymes

C:-Symptomatic pancreatitis

D:-Hypersensitivity reaction causing anaphylaxis

Correct Answer:- Option-C

Question49:-Regarding Daratumuab used in myeloma, please choose the CORRECT statement.

A:-Infusion reactions are uncommon and occur in only about 10% of the patients

B:-Reactions are less common with subcutaneous administration

C:-Premedication with steroids is not recommended unless there is a reaction in prior cycles

D:-For patients with myeloma kidney, it is recommended to use 50% doses

Correct Answer:- Option-D

Question50:-A 54-year-old male presents with hematuria. The evaluation shows a bladder tumor (biopsy : urothelial carcinoma) and PET CT shows bilateral lung

metastasis and retroperitoneal and pelvic lymphadenopathy. He is ECOG PS 1 and has normal renal and liver functions. The first line treatment of choice for him would be :

A:-Cisplatin Gemcitabine

B:-Pembrolizumab + Enfortumab vedotin

C:-Modified MVAC

D:-Carboplatin Gemcitabine

Correct Answer:- Option-B

Question51:-Which of the following is not correct about Superior Venacava Syndrome (SVCS)?

A:-Upto 60% patients presenting with SVCS have associated pleural effusion

B:-Adenocarcinoma Lung is the most common malignant cause of SVCS

C:-The symptoms and signs of SVCS may be aggravated by bending forward or stooping

D:-Percutaneous transluminal angioplasty and stenting can be considered as a treatment option of SVCS in severely symptomatic patients

Correct Answer:- Option-B

Question52:-Which of the following statement(s) is/are correct?

I. CAR T-cell therapy - diffuse cerebral edema

II. L-asparaginase - dural venous sinus thrombosis

III. ATRA - idiopathic intracranial hypertension

A:-Only I and III

B:-Only II and III

C:-Only III

D:-All of the above (I, II and III)

Correct Answer:- Option-D

Question53:-MNOP algorithm is used for the management of the following oncologic emergency

A:-Malignant spinal cord compression

B:-Superior venacaval syndrome

C:-Leptomeningeal metastasis

D:-Malignant ascites

Correct Answer:- Option-A

Question54:-Which of the following Laboratory abnormality is not seen in tumpor Lysis syndorme?

A:-Hyperuricemia

B:-Hyperkalemia

C:-Hyperphosphatemia

D:-Hypercalcemia

Correct Answer:- Option-D

Question55:-Which among the following is the most common etiology of hypercalcemia seen in cancer patients?

- A:-Local osteolytic hypercalcemia
- B:-Humoral hypercalcemia of malignancy
- C:-Vitamin-D secreting lymphoma
- D:-Ectopic Hyper parathyroidism

Correct Answer:- Option-B

Question56:-The most common type of classical Hodgkin Lymphoma is

- A:-Mixed cellularity CHL
- B:-Nodular sclerosis CHL
- C:-Lymphocyte rich CHL
- D:-Lymphocyte depleted CHL

Correct Answer:- Option-B

Question57:-According to EORTC criteria to stratify early stage Hodgkin Lymphoma, which among the following is not a risk factor?

- A:-Large mediastinal mass ($>1/3$)
- B:-Age 50 years and older
- C:-ESR > 50 mm/hr without B symptoms or > 30 mm/hr with B symptoms
- D:- ≥ 3 nodal areas

Correct Answer:- Option-D

Question58:-Which among the following statement(s) is/are correct?

- I. $t(11;14)$ is a characteristic chromosomal translocation found in Burkitt's lymphoma
- II. Plasma cell neoplasms usually express CD 138
- III. Phenytoin use is associated with increased risk of developing NHL

- A:-Only I and II are correct
- B:-Only II and III are correct
- C:-Only II is correct
- D:-All Three (I, II and III) are correct

Correct Answer:- Option-B

Question59:-Which among the following is not a FDA approved PIK-3 inhibitor for patients with relapsed and refractory follicular lymphoma?

- A:-Idelalisib
- B:-Copansilib
- C:-Alpelisib
- D:-Umbralisib

Correct Answer:- Option-C

Question60:-Which among the following statement is not true about HIV associated NHL?

- A:-DLBCL is the most common histologic subtype
- B:-EBV infection plays a major role in HIV associated NHL
- C:-Extranodal disease is very common
- D:-Plasmablastic Lymphoma is associated with HHV-8 infection

Correct Answer:- Option-D

Question61:-According to revised European Leukemia/Net classification system of AML, which among the following is an adverse risk category?

- A:-Mutated NPM-1 and FLT3-ITD
- B:-t(9;22) : BCR ABL-1
- C:-t(9;11) : MLL3 - KMT2A
- D:-Biallelic mutated CEBPA

Correct Answer:- Option-B

Question62:-Which among the following are FDA approved treatment options for primary refractory/relapsed adult ALL?

- I. Blinatumomab
- II. Inotuzumab ozogomycin
- III. Tisagenlecleucal

- A:-Only I and II
- B:-Only II and III
- C:-Only I and III
- D:-All Three (I, II and III)

Correct Answer:- Option-D

Question63:-Which among the following is not a Myeloma Defining Event (MDE) according to international myeloma working group revised diagnostic criteria?

- A:-Evidence of end organ damage attributable to underlying plasma cell disorder
- B:-40% or more clonal plasma cells in the marrow
- C:-Serum involved/uninvolved free light chain ratio ≥ 100 (with involved FLC level must be > 100 mg/L)
- D:- >1 focal lesion on MRI

Correct Answer:- Option-B

Question64:-Which among the following TKI is/are active in CML patients with T315I mutation?

- I. Ponatinib
- II. Bosutinib
- III. Nilotinib
- IV. Asciminib

A:-Only I and IV

B:-Only I

C:-Only I, II and III

D:-Only I and II

Correct Answer:- Option-A

Question65:-SEQUOIA trial is associated with which of the following agent?

A:-Ibrutinib

B:-Zanubrutinib

C:-Acalabrutinib

D:-Pirtobrutinib

Correct Answer:- Option-B

Question66:-_____ is defined as having smoked fewer than 100 cigarettes in a person's lifetime and no current cigarette use.

A:-Never smoking

B:-Former smoking

C:-Current smoking

D:-Recent smoking

Correct Answer:- Option-A

Question67:-The increased risk of malignancy associated with obesity is strongest in

A:-Breast cancer

B:-Colon cancer

C:-Endometrial cancer

D:-Lung cancer

Correct Answer:- Option-C

Question68:-Which among the following statements about nutrition and cancer risk are true?

I. Diet rich in calcium decreases colon cancer.

II. Diet high in glycemic load increases risk of endometrial cancer.

III. Coffee consumption associated with decreased risk of liver cancer.

A:-Only I and II

B:-Only II and III

C:-Only I and III

D:-All are true

Correct Answer:- Option-D

Question69:-According to 2017 AJCC staging of regional node involvement (non HPV associated oropharyngeal cancer) metastasis to a single ipsilateral node with extranodal extension is

A:-N2a

B:-N2b

C:-N3a

D:-N3b

Correct Answer:- Option-D

Question70:-Among the following, the most common mutation observed in adenocarcinoma lung is

A:-EGFR

B:-KRAS

C:-ERB-B2

D:-MET

Correct Answer:- Option-B

Question71:-Deficiency of the following micro nutrient in diet is associated with increased risk of esophageal squamous cell carcinoma

A:-Manganese

B:-Zinc

C:-Selenium

D:-Cobalt

Correct Answer:- Option-C

Question72:-Aflatoxin is associated with increased risk of

A:-Hepato cellular carcinoma

B:-Renal cell carcinoma

C:-Hodgkin lymphoma

D:-Germ cell tumor

Correct Answer:- Option-A

Question73:-Which among the following is not a preferred agent for breast cancer risk reduction in high risk post menopausal women?

A:-Tamoxifen

B:-Toremifine

C:-Raloxifeme

D:-Aromatase inhibitor

Correct Answer:- Option-B

Question74:-Which of the following is not a side effect of Tamoxifen?

A:-Hot flushes

B:-Thromboembolism

C:-Endometrial hyperplasia

D:-Increase in blood cholesterol levels

Correct Answer:- Option-D

Question75:-Which of the following is not associated with Small Cell Lung Carcinoma (SCLC)?

- A:-Most of the cases (>97%) are associated with tobacco exposure
- B:-SCLC usually located centrally
- C:-Screening CT scans can decrease cancer specific mortality in SCLC
- D:-Necrosis is universally present in the pathological specimens of SCLC

Correct Answer:- Option-C

Question76:-A 52 year old male, is diagnosed as a case of nasopharyngeal squamous cell carcinoma, moderately differentiated, with bilateral cervical lymph nodes and multiple lung metastasis.

Which agent along with chemotherapy in the first line has shown progression free survival and overall survival benefit in this setting as per the JUPITER 02 trial?

- A:-Cetuximab
- B:-Toripalimab
- C:-Zolbetuximab
- D:-Pembrolizumab

Correct Answer:- Option-B

Question77:-As per the TNM Staging System for Cervical Lymph Nodes and Unknown Primary Tumors of the Head and Neck (8th edition AJCC), a 48 year old lady is designated N2 U status. What does U stand for?

- A:-metastasis above the lower border of the cricoid
- B:-metastases below the lower border of the cricoid
- C:-metastasis above the upper border of the cricoid
- D:-metastases below the lower border of the cricoid

Correct Answer:- Option-A

Question78:-What is the first line recommended systemic treatment for metastatic triple negative breast cancer with PDL1 CPS<10 and no germline BRCA1/2 mutation?

- A:-TDXD
- B:-Systemic chemotherapy
- C:-Sacituzumab Govitecan
- D:-Pembrolizumab + chemotherapy

Correct Answer:- Option-B

Question79:-Name the genomic prognostic tool that was explored in the APT trial update.

- A:-HER2DX
- B:-Oncotype DX
- C:-PAM50
- D:-EndoPredict

Correct Answer:- Option-A

Question80:-Which is the bispecific T-cell engager (BiTE) agent which has demonstrated promising survival outcomes in advanced small cell lung cancer?

A:-Blinatumomab

B:-Amivantamab

C:-Tarlataamab

D:-Tebentafusp

Correct Answer:- Option-C

Question81:-56 Year old with metastatic adenocarcinoma of lung is on Trametinib. For which side effect, would you permanently discontinue the drug?

A:-Absolute decrease in Left Ventricular Ejection Fraction (LVEF) of 10% or greater from baseline and is below institutional Lower Limit of Normal (LLN) from pretreatment value

B:-Retinal pigment epithelial detachments

C:-Deep vein thrombosis

D:-Retinal vein occlusion

Correct Answer:- Option-D

Question82:-Which is the first oral selective ER degrader which is approved for ER positive, HER2 negative advanced breast cancer patients with ESR1 mutations following at least one prior line of endocrine therapy?

A:-Fulvestrant

B:-Elacestrant

C:-Anastrozole

D:-None of the above

Correct Answer:- Option-B

Question83:-Most common subtype of basal cell carcinoma is:

A:-Nodular basal cell carcinoma

B:-Superficial basal cell carcinoma

C:-Infiltrative basal cell carcinoma

D:-Fibroepithelioma of Pinkus

Correct Answer:- Option-A

Question84:-Tebentufusp-tebn is approved for the treatment of

A:-Metastatic breast carcinoma

B:-Metastatic periampullary carcinoma

C:-Metastatic rectal carcinoma

D:-Metastatic uveal melanoma

Correct Answer:- Option-D

Question85:-Adagrasib is approved for the systemic treatment of

A:-Colon cancer

B:-Gastrointestinal stromal tumor

C:-Non small cell lung cancer

D:-Carcinoma ovary

Correct Answer:- Option-C

Question86:-Along with chemotherapy, which of these agents are approved for the primary treatment of endometrial cancer?

A:-Dostarlimab

B:-Pembrolizumab

C:-Trastuzumab

D:-All of the above

Correct Answer:- Option-D

Question87:-What is the dose of IV Methotrexate in standard EMACO regimen?

A:-300 mg/m²

B:-400 mg/m²

C:-500 mg/m²

D:-750 mg/m²

Correct Answer:- Option-A

Question88:-What is the gold standard for identifying POLE mutation?

A:-Sequencing

B:-Immunohistochemistry

C:-FISH

D:-Enzyme analysis

Correct Answer:- Option-A

Question89:-What are the treatment groups compared in TIGER trial for relapsed testicular germ cell tumors?

A:-VIP vs TIP

B:-VIP vs TI-CE

C:-TIP vs TI-CE

D:-HD VIP vs VIP

Correct Answer:- Option-C

Question90:-Pemigatinib, a selective fibroblast growth factor receptor inhibitor is approved for the treatment of which of these malignancies?

A:-Breast carcinoma

B:-Ovarian carcinoma

C:-Non small cell lung carcinoma

D:-Cholangiocarcinoma

Correct Answer:- Option-D

Question91:-A 60 year old male is diagnosed with metastatic gastrointestinal stromal tumor with a platelet-derived growth factors receptor alpha (PDGFRA) exon 18 mutation - PDGFRA D842V. Which is your preferred systemic agent?

- A:-Ripretinib
- B:-Avapritinib
- C:-Nilotinib
- D:-Sunitinib

Correct Answer:- Option-B

Question92:-Which among the following is a high risk factor when adjuvant treatment for stage II carcinoma colon is considered?

- A:-Lymphovascular invasion
- B:-High tumor budding
- C:-Bowel obstruction
- D:-All of the above

Correct Answer:- Option-D

Question93:-What is N2b in the TNM staging for rectal cancer as per AJCC 8th edition?

- A:-Five or more regional lymph nodes are positive
- B:-Six or more regional lymph nodes are positive
- C:-Seven or more regional lymph nodes are positive
- D:-Eight or more regional lymph nodes are positive

Correct Answer:- Option-C

Question94:-Compadri regimen is used in the treatment of

- A:-Osteosarcoma
- B:-Liposarcoma
- C:-Leiomyosarcoma
- D:-Rhabdomyosarcoma

Correct Answer:- Option-A

Question95:-PAX3-FOXO1 molecular abnormality is mostly associated with

- A:-Embryonal rhabdomyosarcoma
- B:-Alveolar rhabdomyosarcoma
- C:-Synovial sarcoma
- D:-Desmoplastic small round cell tumor

Correct Answer:- Option-B

Question96:-Steinherz/Blayer algorithm is related to:

- A:-Central Nervous System leukemic status in acute lymphoblastic leukemia

B:-Bone marrow remission status in acute lymphoblastic leukemia

C:-Bone marrow transplantation in acute lymphoblastic leukemia

D:-Flow cytometry in acute lymphoblastic leukemia

Correct Answer:- Option-A

Question97:-'High risk sites' in Langerhans cell histiocytosis is all, except:

A:-Liver

B:-Pituitary gland

C:-Bone marrow

D:-Spleen

Correct Answer:- Option-B

Question98:-As per Modified Change staging system for posterior fossa medulloblastoma metastasis, what is the notation for gross nodular seeding in spinal subarachnoid space?

A:-M1

B:-M2

C:-M3

D:-M4

Correct Answer:- Option-C

Question99:-MaGIC risk stratification is related to :

A:-Pediatric germ cell tumors

B:-Pediatric gastric cancers

C:-Pediatric gastrointestinal stromal tumors

D:-Pediatric glioblastomas

Correct Answer:- Option-A

Question100:-What is the treatment of stage I Wilms' tumor, with focal anaplasia and no loss of heterozygosity 1p and 16q?

A:-AV×19 weeks, no RT

B:-AV×19 weeks, 10.8 Gy RT to flank

C:-AVD×25 weeks, no RT

D:-AVD×25 weeks, 10.8 Gy RT to flank

Correct Answer:- Option-D