

NECK&HEAD&TRD

Sites close to midline often drain bilaterally second station nodes include(except one)

- a) Parotid
- b) Jugular
- c) Supraclavicular
- d) Upper and lower posterior cervical nodes

What kind of thyroid cancer is radically treated by radiotherapy

- 1) Follicular cancer
- 2) Squamous cell cancer
- 3) Papillary cancer
- 4) Medullary thyroid cancer

What of mentioned process is facultative (4) and what obligate precancerous forms?

- 1) Bowen tumor
- 2) Skin horn
- 3) Senile skin atrophy
- 4) Xeroderma pigmentosum
- 5) Atheroma

What is the most common risk factor of oral cavity cancer?

- 1) Ionizing irradiation exposure
- 2) Cigarette smoking
- 3) Acromegaly and Barrets esophagus
- 4) Non of the above

The prognosis in thyroid cancer is less favorable in

- 1) Papillary carcinoma
- 2) Follicular carcinoma
- 3) Medullary thyroid cancer
- 4) Hurthle cell carcinoma
- 5) Anaplastic thyroid cancer

The next histological types of cancer happen in thyroid tumors except one:

- 1) Papillary carcinoma
- 2) Basalioma
- 3) Follicular carcinoma
- 4) Hurthle cell carcinoma
- 5) Medullary carcinoma

The most common cutaneous malignancy of the face in humans is

- 1) Squamous cell carcinoma
- 2) Mixed carcinoma
- 3) Metatypic carcinoma
- 4) Basal cell carcinoma
- 5) Papillary carcinoma

What benign skin tumors belong to the epithelial one

- 1) Mixoma
- 2) Lipoma
- 3) Adenoma
- 4) Fibroma

Risk of melanoma is strongly related to exposure to UV irradiation and to susceptible host phenotype

- 1) Yes
- 2) No

What of named skin tumors belongs to stage II

- 1) T1 N0 M0
- 2) T2 N0 M0
- 3) T2 N1 M0
- 4) T3 N1 M0

Squamous cell carcinoma is treated

- 1) Wide ablation of the tumor with the healthy skin area around it
- 2) Radiotherapy
- 3) Chemotherapy
- 4) Simplex excision

What kind of neck tumor must be carefully distinguished from lymphoma

- 1) Medullary thyroid cancer
- 2) Hurthle cell carcinoma
- 3) Small cell anaplastic thyroid carcinoma
- 4) Large cell anaplastic thyroid carcinoma

13 the greatest number of skin cancer-related deaths world wide is associated with

- 1) Melanoma
- 2) Basal cell carcinoma
- 3) Squamous cell carcinoma
- 4) Kaposi's sarcoma

Squamous cell carcinomas metastasise by extension

- 1) Direct
- 2) Lymphatic system blood stream
- 3) All of the above

Basal cell carcinoma occurs predominantly in skin exposed to

- 1) Dust
- 2) Humidity
- 3) UV radiation
- 4) Cold

M-113

What histological type is the most common in thyroid gland

- 1) Papillary carcinoma
- 2) Follicular carcinoma
- 3) Medullary carcinoma
- 4) Anaplastic carcinoma
- 5) Primary thyroid lymphoma
- 6) Primary thyroid sarcoma

What stage of medullary thyroid cancer in a 50 year old man with a clinical goiter T2 N0 M0 may you diagnose

- 1) I st
- 2) II st
- 3) III st
- 4) IV st

A shave biopsy in melanomas is

- 1) Indicated
- 2) Strongly indicated
- 3) Compulsory procedure
- 4) Contraindicated

What of named skin tumors belongs to stage II

- 1) T1 No Mo
- 2) T2 N1 Mo
- 3) T1 N1 Mo
- 4) T3 No Mo
- 5) T4 No Mo
- 6) T1 No M1

To the skin tumors belong the next (except two)

- 1) Fibrosarcoma and dermatosarcoma
- 2) Leukemoid infiltration(Darrie)
- 3) Liposarcoma
- 4) Miosarcoma
- 5) Angiosarcoma
- 6) Kaposi's sarcoma
- 7) Undifferentiated sarcoma
- 8) Malignant melanoma

The most common site for oral cancer is :

- 1) Lower lip and lateral margin of tongue
- 2) Upper lip and lateral margin of tongue
- 3) Distal margin of tongue
- 4) Tongue

What of named tumors belongs to stage III

- 1) T1 No Mo
- 2) T1 N1 Mo
- 3) T3 N1 M1
- 4) T1 N1 M1

The incidence of melanoma has risen dramatically over the past few decades

- 1) Yes
- 2) No

The most common cutaneous malignancy in humans is

- 1) Squamous cell carcinoma
- 2) Mixed carcinoma
- 3) Metatypic carcinoma
- 4) Basal cell carcinoma

- 1) High insolation

- 2) Long-term contact with chemical cancerogens
- 3) Ionizing radiation
- 4) Hormonal stimulation constant skin injuries

A: all statements are correct

B: what statements is wrong?

In what countries the skin caners are more often:

- 1) GB
- 2) Greece
- 3) Sweden
- 4) Italy
- 5) Israel
- 6) Arabian countries

The early diagnosis of asymptomatic oral and oropharyngeal squamous cancer is based on

- 1) Objective symptoms (ulcer, bleeding, tumor mass etc)
- 2) A patient's complaints
- 3) Presence of regional lymph node metastases
- 4) Regular self-observation and periodically medical inspection

Oral cancers are mostly

- a) Adenocarcinoma
- b) Small-cell carcinoma
- c) Squamous cell carcinoma
- d) Soft tissue sarcoma
- e) Malignant mixed tumors

Plummer-Vinson syndrome

Includes:

- 1) a. vomiting
b. obstipation
c. pain
- 2) a. dysphagia
b. iron-deficiency anemia
c. glossitis
- 3) a. diarrhea
b. haematemesis
c. cardiac ulcer

- 1) many primary melanomas display typical features of border irregularity and variegated pigmentation (yes or no)
- 2) some melanomas may be recognized by a patient's report of a change in the size or color of a pigmented lesion or by a report of itching or bleeding from a skin lesion (yes or no)
- 3) other primary melanomas may lack these features and therefore, may be more difficult to recognize (yes or no)

The right answer is:

1. squamous cell carcinoma of the oral cavity and oropharynx are not difficult to diagnose once they have become symptomatic

2. a patients complains of pain , bleeding , ulceration , a mass , otalgic a. dysphagic are typical for the early oral cavity CA
3. in the intial stages of oral cavity and oropharynx CA to mostly used method of treatment is surgery
4. the regional or distant metastases are very rare in oral cavity and oropharyngeal CA
5. the are not principal differences in clinic between early and late oral cancer.

The right answer is:

- 1) Early and advanced oral cancers do not differ in their clinical presentation, course and outcame
- 2) The usual method of treating advanced (II-III stages) of oropharyngeal cancer is surgery
- 3) The combination of surgery, radiotherapy and chemotherapy show a high rate 5-year survival for late stages of oral cavity CA
- 4) Early asymptomatic oral and oropharyngeal cancer do not markedly differ from , advanced cancers in their clinical presentation , course and outcame
- 5) Nearly 100% of patients of patients with CA of oral cavity a pharynx demonstrate regional or distant metastases.

The right answer is:

- 1) Squamons cell carcinomas of the oral cavity and oropharynx are difficult to diagnose once they have become symptomatic
- 2) A patients complaints of pain , bleeding , ulceration , a mass , otalgia , and /or dysphagia usually will be typical for the early stage of oral cavity CA
- 3) Only 1% of patients with CA of oral cavity a pharynx demonstrate regional or distant metastases
- 4) The combination of surgery , radiotherapy a chemotherapy show a high rate five year survival for late stages of oral cavity CA
- 5) Early asympfomatic oral and oropharyngeal cancer differ markedly from advanced cancers in their clinical presentation , course and outcame.

- A. Incidence of tongue cancer consistently is found to be higher in black compared to whites
 "yes"-a
 "no"-b
- B. Females are affected more frequently than males "yes"-c "no"-d
- C. Oral cancer predominathly is a disease found in older persons "yes"-e "no"-f

The adverse factors in thyroid cancer prognosis:

(except one) indicate it

1. Follicular histology
2. Primary tumor > 4 cm
3. Extratyroid extention
4. Age younger then 45 years.

What benign tumors belong to the epithelial one :

- 1) Mixoma
- 2) Lipoma
- 3) Adenoma
- 4) Fibroma

What populations suffers after from skin CA

- 1) Rural citizens
- 2) City inhibitors

To the oral cavity belongs the next structures except one (choose the correct answer)

1. lip
2. anterior 2/3 of tongue
3. root of the tongue
4. buccal mucosa
5. floor of mouth
6. lower gingiva
7. retromolar trigone
8. upper gingive

What are the most important pathologic features of the primary melonome ?

- 1) Thickness (in mm) – yes – no
- 2) Presence of histologic ulceration – yes – no
- 3) Mitotic rate – yes – no
- 4) Size (in cm) – yes – no

Basal cell carcinoma is treated with next methods (except one)

- 1) Electroexcision
- 2) Clously focused radiotherapy
- 3) Excision
- 4) Wide excision
- 5) Cryotherapy

What kind of thyroid cancer is found more often

- a) follicular CA
- b) squamous cell CA
- c) papillary CA
- d) medullary thyroid cancer

What is the most common risk factor of thyroid cancer ?

- a) ionizing irradiation exposure
- b) sun exposure
- c) low dietary iodine intake
- d) inherently associated

What of above mentioned methods is obligatory for skin CA diagnostics :

- 1) Examination
- 2) Palpation
- 3) Dermatoscopy
- 4) Cytological analyses of the scrape
- 5) Cytological analyses of the swear
- 6) Incisional biopsy
- 7) Sonography (for regional MTS)
- 8) Inspection of the distant MTS (radiography , US)

The next factors (except one) plays significant role in ethiology of thyroid cancer
Indicate it.

1. History of radiation administrated in infancy and childhood
2. History of goiter
3. Neck organon infections in childhood
4. Infence immunostaining for wascular endothelial growth factor

Choose the correct option

Approximately 90% of all oral cancers are :

- 1) Basal cell cancers
- 2) Squamous cell CA
- 3) Adenocarcinoma
- 4) Mucoepidermoidal cancer

What is the difference between

- 1) Incisional biopsy
- 2) Excisional biopsy
- 3) Cytology of scrape
- 4) Cytology of smears

What method is most exactly ?

For the detection of metastatic disease in thyroid cancer patients we do not use :

- 1) Neck ultrasound scan
- 2) Chest radiograph
- 3) Sputum cytology
- 4) Isotope bone scan

What kind of tumor usually secretes calcitonin , a hormonal marker for the tumor

- 1) Papillary carcinoma
- 2) Follicular carcinoma
- 3) Hurthle cell carcinoma
- 4) Medullary carcinoma
- 5) Anaplastic carcinoma
- 6) Small cell carcinoma
- 7) Giant cell carcinoma

What belongs to susceptible host phenotype for melanoma

- 1) Fair hair and skin
- 2) Curly hair , dark skin
- 3) A tendency to burn
- 4) Numerous benign or atypical nevi
- 5) Bald – headed

Oral cavity carcinoma is most common in

- a) England
- b) Russia
- c) Ukraine
- d) USA
- e) India
- f) Iceland

Choose the correct option

What kind of thyroid cancer is radically treated by radiotherapy

- a) follicular cancer
- b) squamous cell cancer
- c) papillary cancer
- d) medullary thyroid carcinoma

Squamous cell carcinomas metastasize by extension

- 1) Direct
- 2) Lymphatic system
- 3) Blood stream
- 4) All of the above

What of mentioned pathologic changes can be a obligate precancer ?

- 1) Keratosis
- 2) Papiloma
- 3) Bouen tumor

What of mentioned pathologic processes is a obligate precancer ?

- 1) Leyomioma
- 2) Deep skin mycosis
- 3) Xeroderma pigmentosum
- 4) Papilloma

What stage of thyroid cancer may you diagnose in a man 30 years with follicular cancer
T1 N1 M1 (bone methastases)

- 1) I st
- 2) II st
- 3) III st
- 4) IV st

Oral cancer mostly is seen in :

- 1) Pregnant women
- 2) Young girl
- 3) Older men
- 4) Young boys
- 5) Older women

What named tumors belongs to stage IV

- 1) T1 N0 M1
- 2) T2 N0 M1
- 3) T3 N0 M1
- 4) T4 N0 M1
- 5) T1 N1 M0
- 6) T4 N0 M0
- 7) T2 N1 M1

The greatest number of skin cancer-related deaths worldwide is associated with

- 1) melanoma
- 2) basal cell carcinoma
- 3) squamous cell carcinoma
- 4) Kaposi's sarcoma

The overall incidence of cancer in a “ cold nodule” on the neck (goiter) is

- 1) Less then 10%
- 2) 12-15%
- 3) More then 20%

Hurthle carcinoma is a variant of with a similar prognosis

- 1) Follicular carcinoma
- 2) Medullary carcinoma
- 3) Anaplast thyroid cancer
- 4) Papillary cancer
- 5) Small cell carcinoma
- 6) Giant cell carcinoma

History of radiation for benign condition or as a result of excidant (Chornobyl) plays a significant role in thyroid cancer ethiology

- 1) mostly in children
- 2) in adult person
- 3) in the old age
- 4) it plays no role

What of named tumors belongs to stage III(skin cancer)

- 1) Tis N0 M0
- 2) T1 N0 M0
- 3) T4 N0 M0
- 4) T3 N0 M0
- 5) T1 N0 M1

What kind of thyroid tumor has the worse prognosis

- 1) Papillary cancer
- 2) Undifferentiated / anaplastic cancer
- 3) Follicular cancer
- 4) Medullary cancer

The surgery is mostly indicated in patients with

- 1) Anaplastic thyroid cancer
- 2) Medullary thyroid cancer
- 3) Papillary thyroid cancer

(choose two)

What is it very important to differ anaplastic thyroid cancer from lymphomas

- 1) For the correct staging
- 2) For the correct amount of fissue removal during operation
- 3) For the indication for chemotherapy
- 4) For the use of immunotherapy

In the thyroid CA (papillary adenocarcinomas) the multilocal sites of tumor throughtout the gland are :

- 1) Very rare (less then 1%)
- 2) As many as 50%
- 3) In all cases
- 4) As on exception

Is a family and personal history of skin cancers also important risk – factor toward melanoma ?

- 1) YES
- 2) NO

Differential diagnostics for skin cancer is necessary with (except one)

- 1) Red Lupus
- 2) Scarlet fever
- 3) Tuberculosis
- 4) Syphilitic gumma
- 5) Actinomycosis
- 6) Melanoma

What is basal cell carcinoma (BCC) , its causes , common sites , clinical sites?

The typical oral cavity carcinoma is located typically

- 1) on the upper lip
 - 2) on the down lip
 - 3) on the radix of the tongue
 - 4) on the lateral part of the tongue
- (choose two)

What stage of papillary cancer may you diagnose in a man of 40 year with a tumor T4 N2 M1

- 1) I st
- 2) II st
- 3) III st
- 4) IV st

What of the next pathological situation can be a precancer

- 1) Skin horn
- 2) Keratosis
- 3) Liproma
- 4) Senile skin atrophy
- 5) Atheroma
- 6) Deep skin mycosis
- 7) Keratoacentoma
- 8) Papiloma

Peak incidence of thyroid cancer occurs in

- 1) 28 years
- 2) 60 years
- 3) The fourth decade of life
- 4) The thirdand fourth decade of life

The 20- year survival rate for hight-risk thyroid cancer patients is :

- 1) Less then 20%
- 2) More then 75%
- 3) Nearly 50%
- 4) 98%

What is the most common risk factor of thyroid gland cancer?

- 1) ionizing irradiation exposure
- 2) sun exposure
- 3) low dietary iodine intake
- 4) inherently associated

The most important prognostic factor in thyroid cancer is

- 1) Female gender

- 2) Age
- 3) Lymph node status
- 4) An elevated serum thyroglobulin level

What is the radical treatment for non-follicular thyroid cancer ?

- 1) Chemotherapy
- 2) Surgery
- 3) Radiotherapy
- 4) Iodine 131

What stage of undifferentiated thyroid cancer in a man 35 year with clinical T2 N1 M0 may you diagnose :

- 1) I st
- 2) II st
- 3) III st
- 4) IV st

Peak incidence of thyroid cancer occurs in

- 1) 28 years
- 2) The fourth decade of life
- 3) 60 years
- 4) The third and fourth decade of life

What type of investigation is not used in diagnosis of thyroid cancer ?

- 1) clinical evaluation
- 2) US – imaging
- 3) X – ray
- 4) C-T scan
- 5) BR – CA – 1 estimation
- 6) Isotope scan
- 7) Biopsy
- 8) Detection of metastatic disease

To the man – malign skin tumors belongs the next (except two)

- 1) Soft fibroma
- 2) Dermalofibroma
- 3) Kaposi tumor
- 4) Hard fibroma
- 5) Adenocarcinoma
- 6) Lipoma
- 7) Angioma
- 8) Neurofibroma

What is the target organ for ultraviolet radiation

- 1) Haemopoetic tissue
- 2) Lung
- 3) Skin
- 4) Larynx

What histological types of tumors occure on the skin

- 1) Basal cell (basalioma)
- 2) Squamous cell carcinoma

- 3) Adenocarcinoma
1. none
 2. all
 3. 1
 4. 2
 5. 3

A shave biopsy in melanomas is

- 1) indicated
- 2) strongly indicated
- 3) compulsory procedure
- 4) contraindicated

What kind of thyroid cancer is found more often

- 1) follicular cancer
- 2) squamous cell cancer
- 3) papillary cancer
- 4) medullary thyroid cancer

In what age the overall incidence of cancer in a cold nodule is higher ?

- 1) Younger than 40 years
- 2) Nearly 50 years
- 3) Elder than 40 years

In thyroid cancer age appears to be the single most important prognostic factor.

The prognosis is worse in age .

- 1) < 45 year
- 2) > 45 year

What race suffer after from skin CA ?

- 1) White
- 2) Black

Basal cell carcinoma occurs predominantly in skin exposed to

- 1) Dust
- 2) Humidity
- 3) UV radiation
- 4) Cold

In what type of cancer radioactive iodine has no place in the treatment of thyroid tumor.

- 1) Papillary cancer
- 2) Follicular cancer
- 3) Medullary cancer

Choose the correct option.

- 1) Approximately 90% of all oral cancers are :
 - a) Basal cell cancer
 - b) Squamous cell carcinoma
 - c) Adenocarcinoma
 - d) Mucoepidermoidal cancer

What stage of follicular thyroid carcinoma in a 20 year girl would you diagnose in a clinical goiter

T4 N1 M0

- 1) I st
- 2) II st
- 3) III st
- 4) IV st

What type of thyroid cancer has the best 10 –year overall survival rate :

- 1) Papillary cancer
- 2) Follicular cancer
- 3) Medullary cancer
- 4) Anaplastic cancer

In what countries the skin cancers are more often :

- 1) GB
- 2) Greece
- 3) Sweden
- 4) Italy
- 5) Israel
- 6) Arabian countries .