

QP Code: 102521

Reg. No:

**M.Ch (Gynaecological Oncology) Degree Supplementary
Examinations June 2024**

**Paper II – Gynaecologic Oncology Part I (Surgical Aspects in Gynaecologic
Oncology)**

Time: 3 hrs

Max marks: 100

- *Answer all questions to the point neatly and legibly • Do not leave any blank pages between answers • Indicate the question number correctly for the answer in the margin space*
- *Answer all parts of a single question together • Leave sufficient space between answers*
- *Draw table/diagrams/flow charts wherever necessary*

Essay: (20)

1. Enumerate the patient activity and dietary recommendations of prehabilitation and postoperative care as per ERAS protocol. Justify implementation of ERAS protocol in gynaecological cancer surgery. (12+8)

Short essays: (8x10=80)

2. What precautions do you take while inserting the ports in laparoscopic surgery. Describe Hasson's technique of laparoscopic port insertion. (5+5)
3. A patient who has undergone rectosigmoid resection anastomosis for ovarian cancer surgery is found to have abdominal distension on the fifth postoperative day. How will you evaluate and manage this patient.
4. Discuss the role of lymph node dissection in surgery for advanced ovarian cancer.
5. What are the possible complications from ileostomy performed after major cytoreductive surgery. How will you manage them. (5+5)
6. What is PCI score. Describe how should you systematically evaluate PCI score in a woman undergoing primary cytoreductive surgery for advanced epithelial ovarian cancer. (3+7)
7. How will you work up a 55 years old postmenopausal woman complaining of vaginal bleeding and an ultrasound scan diagnosis of endometrial thickness of 8 mm. How is endometrial cancer staged. (4+6)
8. How will you select women for treatment with ablative or excision techniques in high grade squamous intraepithelial lesions of the cervix. What is the role of LASER in the treatment of lower genital tract lesions in women. (7+3)
9. Describe the ligaments supporting the liver. How will you systematically mobilise the liver during peritoneal stripping of the right dome of the diaphragm. (4+6)
