**3.1 Tests (Test tasks)**

**Tumors of the skin, bones, soft tissues, head and neck**

1. Skin Cancer in the structure of the incidence of malignant tumors is:

A) About 1%

B) 2-3%

**C) 4-8%**

D) About 15%

E) About 20%

2. Optional precancer of the skin includes:

A) Cutaneous horn

B) Leukoplakia

C) Old keratom

D) Hemangioma

**E) Correctly A), B), C)**

3. Obligate precancer of the skin includes:

1) Bowen's Disease

2) Paget's Disease

3). Ceratophyllum

4). Trophic ulcer

5). Erythroplakia Keira's

6). Intradermal pigmented nevus

Correct answer:

A) 1, 2, 3

B) 4, 5, 6

**C) 1, 2, 5**

D) 3, 4, 6

E) 1, 5 , 6

4. Histological variants of skin cancer includes:

A) Basal cell carcinoma

B) Cell lung cancer

C) Squamous cell carcinoma

D) Clear cell cancer

**E) Correctly A) and C)**

5. Basal Cell skin cancer is:

A) 20 %

B) 40 %

**C) 70 %**

D) 90 %

E) 95 %

6. Frequency of localization of basal cell carcinoma on the skin is:

A) 50-55%

B) 60-70%

**C) 94-97%**

D) On the face is rare

E) 40 %

7. The group with the highest incidence of skin cancer observed:

A) Of the Negroid race

B) Among the people of the Mongolian race

**C) Among the whites in Africa and Australia**

D) In northern latitudes

E) All the answers are correct

8. Squamous Cell skin cancer most often develops:

**A) Against the background of chronic skin diseases**

B) On healthy skin (denovo)

C) With the same frequency in both cases

D) Against the background of melanoma

E) In areas of scarring of the skin

9. To intraepidermal cancer (cancer in situ) applies:

A) Bowen's Disease

B) Basal cell carcinoma

C) Erythroplasia Keira's

D) Papillomatous intradermal nevus

**E). Correct answers A and B**

10. Basal Cell skin cancer metastasizes more frequently:

A) Lymph nodes.

B) Into the liver

C) Into the lungs

D) In the kidneys

**E) Does not give metastases**

**Lung cancer**

11. Of all lung tumors are benign:

A) Less than 1-2%.

**B) 7-10%**

C) 25-30%

D) Up to 40%

E) Up to 50%

12. Most of the Central benign tumors of the lung are:

**A) Adenomas of the bronchus**

B) Papilloma of the bronchus

C) Vascular tumor

D) Teratomas

E) Cystomas

13. The majority of peripheral benign lung tumors are:

A) Fibroids

B) Teratomas

**C) Hamartomas**

D) Cystomas

E) Adenomas

14. Metastatic lung tumors can be diagnosed:

A) Before detecting the primary tumor

B) Simultaneously with the detection of the primary tumor

C) After detection of the primary tumor

**D) All the answers are correct**

E) There is no right answer

15. Most frequently metastases to the lung, detected simultaneously or to determine the localization of the primary tumor, take place:

A) In breast cancer

B) In stomach cancer

**C) In kidney cancer**

D) In lung cancer

E) In prostate cancer

16. Lung Cancer in the structure of morbidity (mortality) of the CIS population malignant neoplasms since 1985:

**A) First place**

B) Second place

C) Third place

D) 4-th place

E) 5-th place

17. Lung Cancer often get sick:

**A) Men**

B) Women

C) Equally often men and women

D) Men 25 times more often

E) There is no right answer

18. The Decisive role in increasing the incidence of lung cancer among the population belongs to:

A) Genetic factor

B) Occupational hazards

**C) Smoking**

D) Atmospheric pollution

E) Obesity

19. Persons constituting a group of high-risk lung cancer includes:

A) Long-term and heavy smokers

B) Patients with chronic bronchitis

C) Having contact with asbestos, chromium, Nickel (and their compounds)

**D) All the answers are correct**

E) The correct answers are A) and B)

20. Central cancer include tumors, the initial localization of which are the bronchi:

A) Main

B) Equity and segmental

C) Sub-segmental and 5-th order

**D) The correct answers are A) and B)**

E) The correct answers are B) and C)

21. The share of Central lung cancer has:

A) 20-30%

B) 40-50%

**C) 60-70%**

D) 80% or more

E) There is no right

**Tumors of the digestive tract**

22. In Russia, stomach cancer among malignant tumors takes place:

A) The first

**B) The second**

C) The third

D) The first three

E) There is no correct answer

23. Incidence of gastric cancer:

A) Grows

B) Stabilized

**C) Decreased**

D) Grows in men, women decrease

E) There are no statistics for recent years.

24. Cancer of the stomach most often occurs in the age of:

A) From 21 to 50 y.o.

B) From 51 to 70 y.o.

**C) Older than 70 y.o.**

D) The frequency is the same in all groups

E) Older than 80 y.o.

25. For the occurrence of stomach cancer matters:

**A) Bacterial infection**

B) Viral infection

C) Both answers are correct

D) A) and B) don’t matter

E) All answers are incorrect

26. The incidence of stomach cancer in men:

A) Higher than women in 5 times

**B) Higher than women in 2 times**

C) Below than women

D) Same for men and women

E) There is no correct answer

27. In which way does the content of nitrosamines and their precursors in food not increase?

A) Salting

B) Smoking

C) Freezing

**D) Canning**

E) The correct answers are B) and D)

28. Genetic features of the body play a role in the occurrence of:

**A) Diffusive form of stomach cancer**

B) The intestinal form of stomach cancer

C) Any forms of stomach cancer

D) Roles do not play

E) Correctly all the answers, except B) and D)

29. The nature of nutrition plays a decisive role in the occurrence of:

A) Diffusive Stomach Cancer

B) Intestinal cancer of the stomach

C) Any forms of stomach cancer

**D) Does not play a role**

E) The correct answer is everything except C) and D)

30. For the occurrence of stomach cancer does not matter:

A) Excessive intake of table salt

B) The amount of fiber

C) Infection of the stomach with a bacterial flora

**D) Features of cooking food**

E) Age

31. Regurgitation of bile from the duodenum to the stomach:

**A) Promotes the occurrence of stomach cancer**

B) Does not play a role in the occurrence of stomach cancer

C) Promotes the occurrence of stomach cancer in men

D) Promotes the occurrence of gastric cancer only in people over 60 years of age

E) Promotes the occurrence of stomach cancer in women

32. Incidence of colon cancer in the last 10 years:

A) Sharply decreases

B) Stabilized

**C) Increases**

D) Slowly Decreases

E) Laws do not exist

33. At what age is colon cancer most common?

A) 20-20 years old

B) 30-39 years old

C) 50-69 years

**D) Older than 70 years**

E) There is no correct answer

34. Cancer of the colon in the structure of oncology of the gastrointestinal tract takes:

A) 1-st place

**B) 2-3-d place**

C) 4-5-th places

D) Not included in the top of five

E) There is no correct answer

35. Who gets colon cancer more often?

A) Men's

**B) Women**

C) Children

D) Equally often men and women

E) Adults under the age of 30

36. The main factor contributing to the emergence of colon cancer is:

A) Ionizing radiation

B) Smoking

**C) Food composition**

D) Alcohol abuse

E) Obesity

37. What factors contribute to the emergence of colon cancer?

1) Food rich in fats

2) Spicy food

3) Hot food

4) Meat food

5) Food with a lot of coarse fiber

6) Dairy products

7) Purified carbohydrates

Right answers:

A) 1,2,3

B) 3,4,5

**C) 1.4.7**

D) 2,3,6

E) All answers are correct

38. Increased incidence of colon cancer is observed:

**A) In territories with a high level of economic development**

B) In territories with a low level of economic development

C) Equally often

D) There is no correct answer

E) In the villages

39. colon cancer does not include persons suffering from:

A) Nonspecific ulcerative colitis

B) Granulomatous colitis (Crohn's disease)

C) Adenomatous polyps

**D) Hyperplastic polyps**

E) Family diffuse polyposis

40. The premature precancer of the colon is:

A) Adenomatous polyps

**B) Diffuse family polyposis**

C) Hyperplastic polyps

D) Nonspecific ulcerative colitis

E) Crohn's disease

41. Which of the departments of the colon is most often affected by cancer?

A) Cecum

B) Ascending Colon

C) Transverse colon

D) Descending Colon

**E) Sigmoid colon**

**Tumors of the female reproductive system**

42. In the structure of morbidity in women, breast cancer ranks in Russia:

**A) 1-st place**

B) 2-nd place

C) 3-rd place

D) 4-th place

E) 5-th place

43. The incidence of breast cancer per 100 000 thousand of the female population in Russia is:

A) 25-35

B) 36-45

C) 46-55

**D) 56-65**

E) 66-75

44. Morbidity of breast cancer in the female population in Russia annually:

A) Decreased

B) Stabilized

**C) Increased**

D) Decreased sharply

E) Sharply increases

45. In the structure of mortality of the female population, breast cancer occupies:

**A) 1-st place**

B) 2-nd place

C) 3-rd place

D) 4-th place

E) 5-th place

46. For the mass diagnosis of breast pathology is applicable:

**A) Thermography**

B) Mammography

C) Fluorography

D) Puncture biopsy

E) Palpation

47. For the early diagnosis of breast cancer the most acceptable:

**A) Mammography**

B) Fluorography

C) Puncture biopsy

D) Sectoral resection

E) Palpation

48. The main method of diagnosis of breast cancer is:

A) Mammography

B) Palpation of the breast

C) Ultrasound of the breast

**D) Morphological**

E) Thermography

49. As an optional precancer of the breast, the most dangerous:

A) Mint's disease

B) Nodular form of mastopathy

C) Cystadenoma

**D) All of the above**

E) None of the above

50. Breast cancer develops from:

A) Lymph nodes

B) Blood vessels

C) Smooth or striated musculature

**D) Glandular duct epithelium**

E) Immature connective tissue

51. Breast cancer can metastasize only:

A) Hematogenous

B) Lymphogenous

C) Implantation

D) Hematogenous and lymphogenous

**E) All listed ways**

52. The most common clinical form of breast cancer is:

A) Mastitis-like

B) Armor

C) Rosy-like form

D) Paget's Cancer

**E) Nodal**

53. For the 2-nd stage of breast cancer, a combination of T and N is characteristic:

A) T0 and N1

B) T2 and N0

C) T3 and N0

D). Correctly A) and B)

**E). All answers are correct**

54. For the 3-d stage of breast cancer is characterized by a combination of T and N:

A) T3N0

B) T0N2

C) T4N any

D) Correctly A) and B)

**E) Correctly B) and C)**

55. The 4-th stage of breast cancer is characterized by a combination of:

A) T4N3

B) T1N2M1

C) T0N1M1

D) Any T, any NM1

**E) All answers are correct**

56. For distant metastases (M) in breast cancer, the affected lymph nodes are recognized:

1). Contralateral

2). Supraclavicular

3). Cervical

4). Frontal

5). Plug-in

Right answers:

**A) 1,2,3**

B) 2,3,4

C) 3,4,5

D) 1,3,5

E) All answers are correct

57. The histological forms of breast cancer include:

A). Adenocarcinoma

B). Medullary Cancer

C). Papillary Cancer

D). Mucus cancer

**E). All answers are correct**

58. Long-term metastases (M1) in breast cancer are metastases in:

1). Lungs

2). Liver

3). Vaginal lymph nodes

4). Supraclavicular lymph nodes

5). Bones

Right answers:

A) 1,2,3

B) 2,3,4

C) 2,4,5

D) 1.4.5

**E) Correctly C) and D)**

59. For breast cancer, metastases are not characteristic in:

A). Lungs

B). Liver

C). Brain

**D). Navel**

E). Bones

60. A positive König symptom in breast cancer is:

A). Symptom of wrinkled skin

B). Symptom of skin retraction

C). Disappearance of the tumor when the breast is squeezed by the palm to the chest wall

**D). Clear definition of the node when pressing the breast to the chest wall**

E). Displacement of the tumor behind the nipple while sipping for it

61. The symptom of Pribram in breast cancer is:

A). Site symptom

B). Symptom of Umbiliculation

**C). Displacement of the tumor behind the nipple while sipping it**

D). Clear definition of the node when pressing the breast to the chest wall

E). The appearance of transverse wrinkling when trying to take a skin fold

**Lymphoproliferative diseases**

62. Incidence of lymphogranulomatosis:

**A). Increases**

B). Decreased

C). Does not change

D). Increases in economically unfavorable countries

E). Increases in women

63. Lymphogranulomatosis is more common:

A). Women

**B). Men's**

C). Morbidity does not correlate with gender

D). Girls under 18 years old

E). Boys under 18 years old

64. With lymphogranulomatosis it is noted:

A). Lymphogenous metastasis

B). Hematogenous metastasis

**C). Both types of metastasis**

D). Implantation metastasis

E). It is true B) and D)

65. As the first manifestations of lymphogranulomatosis, the most frequently observed increase:

**A). Cervical-supraclavicular lymph nodes**

B). Mediastinal lymph nodes

C). Retroperitoneal lymph nodes

D). Inguinal lymph nodes

E). All groups of lymph nodes with the same frequency

66. For the initial manifestations of lymphogranulomatosis, the most common lesion is:

**A). Lymph nodes above the diaphragm**

B). Lymph nodes below the diaphragm

C). The incidence of lymph node involvement above and below the diaphragm is the same

D). Upper respiratory tract

E). Vascular injury of lower extremities

67. Injury of inguinal lymph nodes as the first manifestation of lymphogranulomatosis occurs:

**A). Rarely**

B). Mostly in all patients

C). Also often, as the damage of other groups of lymph nodes

D). More common in women

E). There is no correct answer

68. The involvement of the lymphatic system of the Pirogov-Valdeira ring with lymphogranulomatosis occurs:

**A). Rarely**

B). Often

C). In half of patients

D). Never found

E). More often in weakened patients

69. Of the extralymphatic lesions in the progression of lymphogranulomatosis, the most common lesion is:

**A). Pulmonary tissue, liver, bone marrow**

B). Skeleton, kidney

C). The liver

D). Bone marrow

E). Brain

70. When the lymph nodes are affected above the diaphragm and the spleen with lymphogranulomatosis should be delivered:

A). Stage I

B). II stage

**C). III stage**

D). IV stage

E). There is no correct answer

71. The defeat of the cervical lymph nodes on the right, mediastinal lymph nodes and axillary lymph nodes on the left means with lymphogranulomatosis:

A). I stage

**B). II stage**

C). III stage

D). IV stage

E). II a step

72. The defeat of peripheral lymph nodes above and below the diaphragm and spleen with lymphogranulomatosis means:

A). I stage

B). II stage

**C). III stage**

D). IV stage

E). There is no right answer

73. Isolated spleen involvement with lymphogranulomatosis means:

**A). I stage**

B). II stage

C). III stage

D). IV stage

E). III A step

74. Lymphogranulomatosis lesion of the lung tissue and mediastinal lymph nodes means the presence of:

A). Stage I

B). II stage

C). III stage

**D). IV stages**

E) stage IIB

75. Symptoms of intoxication with lymphogranulomatosis include:

A). Weight loss, hyperthermia (more than 380 C)

B). Weight loss, profuse sweating

C). Weight loss, hyperthermia (more than 380 C), profuse sweating

**D). Skin itching, weight loss, profuse sweating, hyperthermia (more than 380****C)**

E). All right

76. The most prognostically favorable morphological variants of lymphogranulomatosis are:

A). Lymphoid prevalence, lymphoid depletion

**B). Lymphoid predominance, nodular sclerosis**

C). Nodular sclerosis, mixed-cell variant

D). Mixed-cell variant, lymphoid depletion

E). All is true

77. The least favorable prognostic variants of lymphogranulomatosis are:

A). Lymphoid prevalence, mixed-cell variant

B). Nodular sclerosis, lymphoid depletion

**C). Mixed-cell variant, lymphoid depletion**

D). Lymphoid predominance, nodular sclerosis

E). More often A) and B)

78. In a patient with lymphogranulomatosis, an increase in cervical lymph nodes on both sides and profuse sweating. It corresponds:

A). I step

B). II step

**C). II b step**

D). III a step

E). III b step

79. In the presence of a patient with lymphogranulomatosis, lesions of the cervical lymph nodes on the one hand and mediastinal lymph nodes without symptoms of intoxication, one should speak of a prevalence corresponding to:

A). I step

**B). II a step**

C). III a step

D). III b step

E). II b step

80. The defeat of axillary lymph nodes on the one hand, mediastinal, paraaortic lymph nodes, spleen and the presence of fever (more than 380 C) with lymphogranulomatosis is regarded as:

A). IIa step

B). IIb step

C). IIIa stage

**D). IIIb step**

E). IV stage

81. Patients with lymphogranulomatosis have a lesion of all groups of lymph nodes above the diaphragm, liver and fever (more than 380 C).

It corresponds:

A). I step

B). II a step

C). III a step

D). III b step

**E). IV b step**

**Oncourology**

82. Kidney cancer most often metastasizes

A) in the pleura and liver

**B) in the bones and lungs**

C) in the liver and brain

D) into soft tissues and retroperitoneal lymph nodes

E) to retroperitoneal lymph nodes and ovaries

83. Kidney cancer refers to malignant tumors

A) adenoma

B) oncocytoma

C) leiomyoma

**D) hypernephroma**

E) angiologemioma

84. Stage T4 in kidney cancer implies

A) tumor more than 2.5 cm, bounded by the kidney

B) massive spread of the tumor in the renal vein

C) the tumor extends to the adrenal gland within the fascia

Gerooth

**D) the tumor extends beyond the fascia of Gerota**

E) the tumor extends to the hollow vein

85. Category N2 in kidney cancer implies

A) metastases in lymph nodes larger than 5 cm.

B) metastases in l/nodes up to 5 cm.

C) metastases in l/nodes up to 2 cm.

**D) multiple metastases in lymph nodes, regardless of their size**

E) a single metastasis in l/node

86. The term "oncocytoma" is used to denote

**A) eosinophilic granular cell carcinoma of the kidney parenchyma**

B) mixed adenoma

C) transitional cell papilloma

D) all mechsenchymal tumors

E) vascular kidney tumor

**Radiation therapy**

87. The main task of radical radiation therapy:

1. Summation of the maximum possible dose;

2. decreasing in biological activity of tumor cells;

3. calling the death of the most sensitive tumor cells;

4. achieving partial regression of the tumor;

**5. achieving complete regression.**

88. Palliative radiotherapy solves the following problems:

1. the maximum possible dose of radiation;

2. call the death of the most sensitive pool of tumor cells;

3. **obtaining inhibition of tumor growth;**

4. partial regression of the tumor;

5. correct answers 1 and 4.

89. The most resistant to radiation therapy is:

1. squamous nonkeratinized cancer;

2. Seminoma;

3. Ewing's tumor;

**4. osteogenic sarcoma;**

5. nephroblastoma.

90. Postoperative radiotherapy can be performed in the following cases:

1. if the transaction is not careless;

2. if regional metastases are detected during surgery;

3. when the operation is uneven;

4. answers 1 and 2 are correct;

**5. all the answers are correct.**

91. Radiosensitivity is affected by:

1. oxygen tension in the tumor;

2. differentiation of tumor cells;

3. hyperthermia of the tumor;

**4. all the answers are correct;**

5. correct answer 1 and 3.

92 The following factors are used to modify the radiosensitivity of the tumor:

1. local hyperthermia;

2. artificial hyperglycemia;

3. hyperbaric oxygenation;

4. artificial local hypoxia;

**5. all the answers are correct.**

93 The absolute contraindication to radiation treatment is:

1. The elderly age;

2. young age;

**3. active tuberculosis;**

4. all listed factors;

5. none of the listed factors.

94. Radiation therapy in the treatment of malignant tumors is used:

1. as an independent method;

2. in combination with the surgical method;

3. in combination with chemotherapy

4. **all the answers are correct.**

5. there is no correct answer.

95 Combined radiation therapy means:

**1. using of two methods of irradiation or two types of radiation;**

2. Splitting the course of radiation therapy;

3. irradiation with radio modifiers;