Dr. Omar lectures past papers (head & neck masses/tumors)

3. An old man presented with nasal obstruction & decreased hearing, what is the most likely diagnosis among these?

- a. Oropharyngeal carcinoma
- b. Nasopharyngeal carcinoma
- c. Chronic rhinosinusitis
- d. Meniere's diseases
- e. Allergic rhinitis

Answer: B

12. A 66-year-old man presents with a 2-month history of neck swelling in the right posterior triangle. On further questioning, he tells you that his hearing has also declined in the right ear. What is the likely diagnosis?

- a. Parotid tumour
- b. Lymphoma
- c. Metastatic lymph node from a nasopharyngeal carcinoma
- d. Metastatic lymph node from a oropharyngeal carcinoma
- e. Lipoma

Answer: C

2. The most common congenital neck mass is:

- a. Second branchial cleft cyst
- b. Dermoid
- c. Hemangioma
- d. Delphian lymph node
- e. Thyro-glossal duct cyst

Answer: E

7. The most common site of nasopharyngeal carcinoma is:

- a. Rosenmuller fossa
- b. Torus tuberus
- c. Eustachian tube
- d. Posterior nasal septum
- e. Inferior turbinate

Answer: A

8. Swelling of the midline of the neck could be due to all of the following except:

- a. Lymph node enlargement
- b. Thyroglossal cyst
- c. Thyroid gland enlargement
- d. Branchial cyst
- e. Dermoid cyst

Answer: D

9. Which of the following is true about dermoid cyst?

- a. Tender on palpation
- b. Rapidly progressive
- c. Rubbery in consistency
- d. FNA is essential for diagnosis
- e. Movable from side to side

Answer: E

3. Unilateral OME in adults raises suspicion of which of the following?

- a. Parotid gland tumour
- b. Oropharyngeal carcinoma
- c. Acoustic neuroma
- d. Nasopharyngeal carcinoma
- e. Hypopharyngeal cancer

Answer: D

16. A patient presented with dysphagia & referred otalgia, laryngoscopy is done to rule out which of the following conditions?

- a. Hypopharyngeal tumour
- b. Nasopharyngeal carcinoma
- c. Oropharyngeal carcinoma
- d. Vocal cord paralysis
- e. Laryngitis

Answer: A

18. What is the most common presentation of glottic tumours?

- a. Dysphagia
- b. Odynophagia
- c. Hemoptysis
- d. Hoarseness
- e. Stridor

Answer-D

3. What is the first presentation of nasopharyngeal carcinoma?

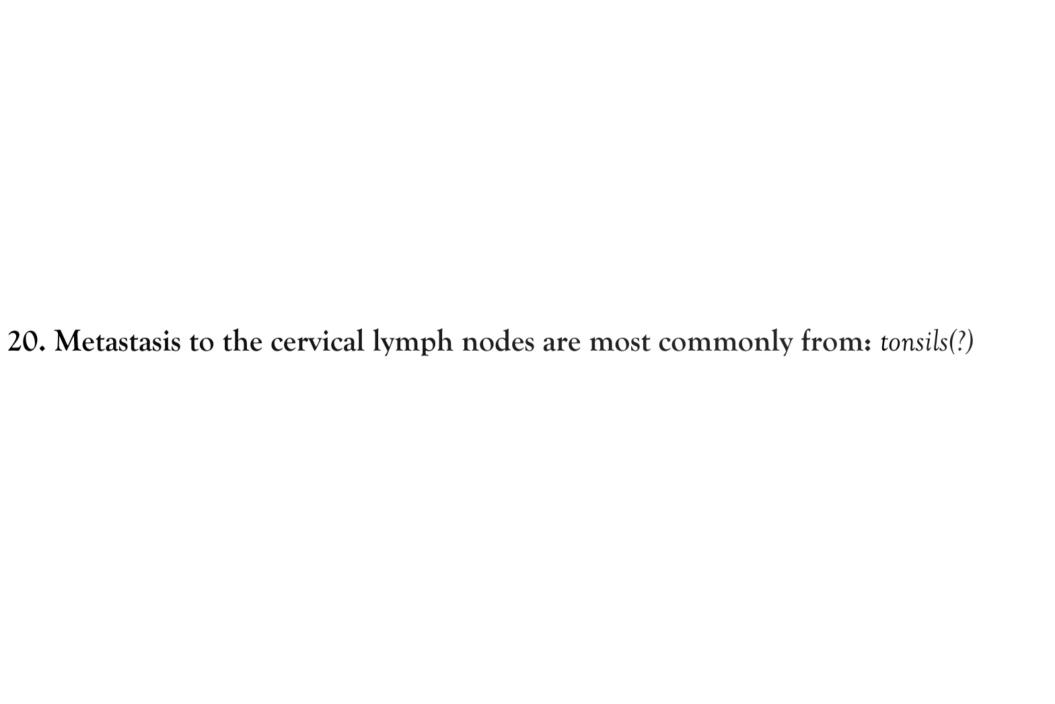
- a. Epistaxis
- b. Rhinorrhea
- c. Headache
- d. Neck mass
- e. Hearing loss

Answer: D

6. The most common primary malignant tumor of the neck is:

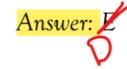
- a. Adenocarcinoma
- b. Sarcoma
- c. Squamous cell carcinoma
- d. Lymphoma
- e. Melanoma

Answer: C



2. What is the most common presenting symptom of nasopharyngeal carcinoma?

- a. Epistaxis
- b. Trismus
- c. Dysphagia
- d. Neck mass or cervical lymphadenopathy
- e. Otitis media with effusion



3. Rosenmullar fossa is the most common site for which of following?

- a. Parotid gland tumour
- b. Oropharyngeal carcinoma
- c. Acoustic neuroma
- d. Nasopharyngeal carcinoma
- e. Hypopharyngeal cancer

Answer: D

13. All of the following tumors could remain silent except:

- a. Vocal cord tumours
- b. Piriform fossa tumours
- c. Esophageal tumours

Answer: A

16. Best prognosis tumour: vocal cord tumours

- 4- T2 Glottic tumor is equivalent to:
- a. Tumor confined to one vocal cord only
- b. Tumor extending to subglottic or epiglottic area
- c. Tumor involving bilateral fixed cord

19- Which tumor is most likely to present early:

a. Voleculae

b. Vocal cord

c. Fossa of rosenmuller

5- what is the most common symptom in nasopharynx tumors?

a. secretory otitis media * *

b. nasal obstruction

c. epistaxis

24- True about pharyngeal tumors:

a. 2

nd most common is lymphoma

b. Usual treatment is radiotherapy

SCC - The most common

27- The earliest sign of supraglottic tumors:

a. Neck mass

b. Cough

c. Lymph nodes

d. Dysphagia

e. Hoarseness

33- most common cancer metastasize to cervical L.N: a- naso pharyngeal carcinoma

37- carotid body tumor wrong

a- highly vascular
b- we must do biopsy for dx

Biopsy is contraincheatel

41- most common oral cavity tumor

a-valuculum

b-tonsils

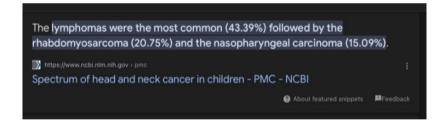
c- base of tongue

47- most common head and neck tumors in children

a-hemangioma

b- lymphoma

c- thyroglossal cyst d- brachia



3) Early tumor of pyrifonn fossa will give rise to:		
a- Hoarsness of voice		
b- Aspiration		
c- Neckpain		
d- Referred otalgia		
e- Dysphagia		
4) The earliest manifestation of nasopharyngeal carcinoma is:		
a- Deafhess		
b- Nasal obstruction		
c- Facial pain		
d- L.N. enlargement		
5) One of the following will cause bilateral vocal cord paralysis:		
a- Ca left bronchus		
b- Cardiac enlargment		
c-Ca upper esophagus		
d- Nasopharyngeal Ca		
e- Ca lung		

10) The treatment of choice for angiofibroma:

a- Embolisation

b- Chemptherapy

c- Surgery d- Radiotherapy

19) The treatment of choice for a patient with cancer of the superior part of the maxillary sinus is:

a- Total maxillectomy

b- Radiotherapy

e- Total maxillatomy and removal of the orbit

d-B+C

- 23) A male of 50 years old presented with a hard mass in the left side of the neck, left bloody nasal discharge with gradual left nasal obstruction and blockage of the left ear, the diagnosis could be:
- a. Acute left maxillary sinusitis
- b. Infected nasal polyposis
- c. Carcinoma of the post nasal space = Nosophany year concer
- d. Chordoma of the post nasal space
- e. Infected chordoma of the post nasal space

- 27) A cautionary measure in the management of a mass in the foramen caecum is:
- a. Obtain tomogram
- b. Request T3 and T4
- c. Inject iodized oil
- d. Perform tracheostomy
- e. Request thyroid scan

31) A patient who received radiation therapy to the nasopharynx and neck years ago may go on to develop:

a- Choanal polyp

b- Choanal atresia

c- Loss of taste

d-Thyroid carcinoma

e- Neurologic tumors

38) Which isn't true about laryngeal tumors:?????

a-Juvenile papilloma is the most common benign tumor in children

b- Diagnosis is by direct laryngoscopy

c- Presents with hoarseness

d-More in older smoker males

44) The 1st presentation of nasopharyngeal cancer could be:

a- Diplopia

b- Nasal obstruction

c-Secretory OM

d-Epistaxis

45) Glottis cancer stage T1b corresponds to:

a-Tumor restricted to anterior commissure

- b-Tumor restricted to arytenoids process
- c- Fixed vocal cords
- d-Tumor extending to subglottic area
- e-Tumor involving both vocal cords

T1	Limited to vocal cord(s) with normal mobility (may involve anterior or posterior commissures)
T1a	Limited to one vocal cord
T1b	Involves both vocal cords
T2	Extends to supraglottis and/or subglottis, and/or with impaired vocal cord mobility
Т3	Limited to larynx with vocal cord fixation and/or invasion of paraglottic space, and/or inner cortex of thyroid cartilage
T4	Moderately advanced or very advanced
T4a	Moderately advanced local disease. Invades through outer cortex of thyroid cartilage and/or invades tissues beyond larynx (e.g. trachea, soft tissues of neck including deep extrinsic muscle of tongue, strap muscles, thyroid or oesophagus)
T4b	Very advanced local disease. Invades prevertebral space, encases carotid artery, or invades mediastinal structures

49) Malignant parotid gland tumor with the best prognosis is: ????

a-SCC

b- Mixed malignant tumor

c- Mucoepidermoid

- 64) Laryngeal tumors all except:
- a- 45% of history of N tumors
- b-Glottis tumor first present with hoarseness of voice
- c-III vocal cord tumors it is very common to have deep cervical L.N
- d-Tobacco is one of the causes of laryngeal tumors
- 65) Nasopharyngeal cancer, all except:
- a- Earliest manifestation is L.N. enlargement in the neck
- b-Nasal blockage + epistaxis are of the earliest manifestations

- 73) T2 glottic tumor is equivalent to:
- a- Tumor confined to one vocal cord only
- b-Tumor extending to subglottic or epiglottic area
- c- Tumor involving bilateral fixed cord

T1	Limited to vocal cord(s) with normal mobility (may involve anterior or posterior commissures)
T1a	Limited to one vocal cord
T1b	Involves both vocal cords
T2	Extends to supraglottis and/or subglottis, and/or with impaired vocal cord mobility
Т3	Limited to larynx with vocal cord fixation and/or invasion of paraglottic space, and/or inner cortex of thyroid cartilage
T4	Moderately advanced or very advanced
T4a	Moderately advanced local disease. Invades through outer cortex of thyroid cartilage and/or invades tissues beyond larynx (e.g. trachea, soft tissues of neck including deep extrinsic muscle of tongue, strap muscles, thyroid or oesophagus)
T4b	Very advanced local disease. Invades prevertebral space, encases carotid artery, or invades mediastinal structures

11-The earliest manifestation of NPC:

- a. Nasal blockage & epistaxis
- b. SNHL
- c. Diplopia

- d. Unilateral/bilateral lymphadenopathy
- e. Facial pain

Answer: D

2-The most common cranial nerve palsy associated with NPC is:

La Nasopharyngoel Ca.

- a. Maxillary nerve
- b. Abducens nerve
- c. Hypoglossal nerve
- d. Accessory nerve
- e. Olfactory nerve

16. A patient presented with unilateral rhinorrhea and nasal obstruction, what is the most appropriate first step?

- a. Plan for surgery
- b. CT
- c. Allergic test
- d. Angiography

b or d – الإجابة مختلف عليها

