

National Board of Examinations

Question Paper Name :	DrNB CLINICAL HAEMATOLOGY Paper1
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DrNB CLINICAL HAEMATOLOGY Paper1

Group Number :	1
Group Id :	3271872917
Group Maximum Duration :	0
Group Minimum Duration :	180
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DrNB CLINICAL HAEMATOLOGY Paper1

Section Id :	3271872920
Section Number :	1
Section type :	Offline
Mandatory or Optional :	Mandatory
Number of Questions :	10
Number of Questions to be attempted :	10
Section Marks :	100
Maximum Instruction Time :	0
Sub-Section Number :	1
Sub-Section Id :	3271872924
Question Shuffling Allowed :	No

Question Number : 1 Question Id : 32718736514 Question Type : SUBJECTIVE Consider As Subjective : Yes

Correct Marks : 10

Please write your answers in the answer booklet within the allotted pages as follows:-

Question Number	Answer to be attempted within	Question Number	Answer to be attempted within
Q. 1	Page 1-5	Q. 6	Page 26-30
Q. 2	Page 6-10	Q. 7	Page 31-35
Q. 3	Page 11-15	Q. 8	Page 36-40
Q. 4	Page 16-20	Q. 9	Page 41-45
Q. 5	Page 21-25	Q. 10	Page 46-50

1. a) What are the newer treatment options for upfront therapy of advanced stage classical Hodgkin's lymphoma (cHL). [4]
- b) Discuss newer evidence based management of relapsed and refractory cHL patients. [3]
- c) How will you manage patients of cHL who relapsed after autologous transplant? [3]

Question Number : 2 Question Id : 32718736515 Question Type : SUBJECTIVE Consider As Subjective : Yes

Correct Marks : 10

- a) How will you evaluate a young vegan male presenting with pallor, tiredness and memory lapses? [4]
- b) What tests are most sensitive for diagnosis in this patient? [3]
- c) What options for therapy are available for this patient? [3]

Question Number : 3 Question Id : 32718736516 Question Type : SUBJECTIVE Consider As Subjective : Yes

Correct Marks : 10

- a) Discuss the clinical presentation of pure red cell aplasia (PRCA) developing post-allogeneic HSCT. [3]
- b) Enumerate the various etiological causes of post-allogeneic transplant PRCA. [4]
- c) Describe management strategies of post-allogeneic transplant PRCA. [3]

Question Number : 4 Question Id : 32718736517 Question Type : SUBJECTIVE Consider As Subjective : Yes

Correct Marks : 10

- a) Describe briefly the various phases of clinical trials. [4]
- b) What is informed consent and why is it important? [3]
- c) What are the serious adverse events in a clinical trial, and when & how do they need to be reported? [3]

Question Number : 5 Question Id : 32718736518 Question Type : SUBJECTIVE Consider As Subjective : Yes

Correct Marks : 10

- a) Sickle cell disease patients may need blood transfusion support. What are the indications for exchange transfusions in sickle cell disease? [4]
- b) What are the indications of simple transfusions in sickle cell disease? [3]
- c) When should sickle cell disease patients be put on chronic transfusion program? What are the

risks of regular transfusion therapy in patients with sickle cell disease? [3]

Question Number : 6 Question Id : 32718736519 Question Type : SUBJECTIVE Consider As Subjective : Yes

Correct Marks : 10

- a) A young patient with chronic lymphocytic leukemia (CLL) presents to you. What are the 2018 International Workshop on CLL (iwCLL) criteria to initiate therapy? [3]
- b) This young patient wants limited-duration therapy for his CLL disease. Discuss the options. [4]
- c) What tests help in deciding therapy for CLL in current era? [3]

Question Number : 7 Question Id : 32718736520 Question Type : SUBJECTIVE Consider As Subjective : Yes

Correct Marks : 10

- a) A patient presents with transfusion-dependent anemia & hemolytic facies. How will you approach and investigate this patient? [4]
- b) What is the difference between hemoglobin HPLC and hemoglobin capillary zone electrophoresis? [3]
- c) Discuss briefly the role of next-generation sequencing (NGS) in diagnosis of hemolytic anemia. [3]

Question Number : 8 Question Id : 32718736521 Question Type : SUBJECTIVE Consider As Subjective : Yes

Correct Marks : 10

- a) Discuss the risk stratification for chronic myeloid leukemia (CML). [4]
- b) How will you treat CML patients with T315I mutation? [3]
- c) Discuss the dosing of asciminib in different situations in CML. [3]

Question Number : 9 Question Id : 32718736522 Question Type : SUBJECTIVE Consider As Subjective : Yes

Correct Marks : 10

- a) Discuss the management of anemia in a 50-year-old patient suffering from multiple myeloma & chronic kidney disease (CKD). [4]
- b) How can you choose agents in this patient? [3]
- c) Discuss the role of Prolyl Hydroxylase Inhibitors (PHIs) as treatment option in such a patient. [3]

Question Number : 10 Question Id : 32718736523 Question Type : SUBJECTIVE Consider As Subjective : Yes

Correct Marks : 10

- a) Briefly discuss the different intravenous (i.v.) iron preparations available in India. [4]
- b) Discuss the mechanism of hypo-phosphatemia associated with intravenous iron therapy and how will you manage it? [3]
- c) How do you calculate dose of intravenous iron in iron deficiency patients? [3]