

# National Board of Examinations

**Question Paper Name :** DrNB CLINICAL HAEMATOLOGY Paper2  
**Subject Name :** DrNB CLINICAL HAEMATOLOGY Paper2  
**Duration :** 180  
**Total Marks :** 100  
**Display Marks:** No

**Maximum Instruction Time :** 0

**Question Number : 1 Question Id : 32718741255 Consider As Subjective : Yes**

**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. CAR-T cell therapy is now available to many conditions.

- Discuss the presentation and timing of ICANS? [3]
- How do you assess? What is the scoring system? [4]
- How do you treat? [3]

**Question Number : 2 Question Id : 32718741256 Consider As Subjective : Yes**

Cardiac amyloidosis is a serious and not uncommon issue.

- Discuss when to suspect cardiac amyloidosis in a patient with heart failure. [3]
- In AL cardiac amyloidosis, what are the current effective regimens? [4]
- How do we monitor patients? [3]

**Question Number : 3 Question Id : 32718741257 Consider As Subjective : Yes**

An elderly patient with primary myelofibrosis has been on JAK2 inhibitor (ruxolitinib). However, he continues to have cytopenia and splenomegaly.

- a) When do we consider it failure of first line JAK2 inhibitor? [3]
- b) What are the newer agents available? [3]
- c) What is MPN-10? Briefly list. [4]

**Question Number : 4 Question Id : 32718741258 Consider As Subjective : Yes**

Irradiation of blood products is a key intervention in ensuring safe blood transfusion in hematology patients.

- a) Discuss the relevance, dose and methods of blood product irradiation. [4]
- b) Name the various clinical situations in hematology where irradiated blood products are mandatory. [3]
- c) Discuss the cost benefit of universal blood product irradiation. [3]

**Question Number : 5 Question Id : 32718741259 Consider As Subjective : Yes**

Teclistamab:

- a) What type of drug is this product? [3]
- b) Briefly describe its mechanism of action and indications. [4]
- c) List the common side effects and precautions to be taken when using this. [3]

**Question Number : 6 Question Id : 32718741260 Consider As Subjective : Yes**

A 65-year-old lady with CLL has been on follow up for the last 4 years. On routine OPD visit, she continues to be asymptomatic but her CBC shows an Hb of 9.5 gm/dl and platelet counts of 90,000/uL and a TLC of 285,000/uL.

- a) Discuss the indications of initiating therapy versus wait and watch in CLL. [3]
- b) Discuss time limited therapies in CLL based on current clinical trial data. [4]
- c) How will you manage immune cytopenias in CLL? [3]

**Question Number : 7 Question Id : 32718741261 Consider As Subjective : Yes**

A 63-year-old male presents with complaints of fatigue of 6 months duration. Clinically, he has pallor and hepatosplenomegaly. CBC shows TLC of 15500/uL and PBS shows 56% neutrophils, 22% lymphocytes, and 14% monocytes, with no blasts. His bone marrow is hypercellular with myeloid lineage dysplasia.

- a) Discuss approach to monocytosis. [3]
- b) Discuss the WHO diagnostic criteria of 2022 of CMML. [4]
- c) Discuss the therapeutic options in the above patient. [3]

**Question Number : 8 Question Id : 32718741262 Consider As Subjective : Yes**

A patient comes with recurrent oral bleeding and increased bleeding from trauma. He had a hemarthroses as a child after a minor fall. He has mild anemia, normal platelet count. Now he is planned for a major surgical procedure.

- a) What further history and investigations are needed? [3]
- b) What is the most likely diagnosis from the above vignette? [3]
- c) How will you manage surgery if he has a severe form of the condition? [4]

**Question Number : 9 Question Id : 32718741263 Consider As Subjective : Yes**

Allo-immunization is a complication that can occur in patients post multiple transfusions.

- a) What are the factors that can lead to allo-immunization? [3]
- b) What is the common presentation? How do we evaluate such patients? [3]
- c) A pregnant woman presents in second trimester with allo-immunization. She is a known patient of sickle cell disease. She has multiple allo-antibodies and blood bank is unable to help with matched packed RBC unit. Her hemoglobin is 5 g/dl, she has mildly elevated iron stores. How will you manage her? [4]

**Question Number : 10 Question Id : 32718741264 Consider As Subjective : Yes**

A patient of ALL is undergoing haploidentical stem cell transplant. The donor and the patient are CMV IgG positive.

- a) Discuss the effects of positive CMV serology in donor and recipient on allogenic HSCT. [3]
- b) Discuss CMV prophylaxis in HSCT settings. [3]
- c) Discuss therapeutic options in CMV disease in HSCT settings. [4]