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RADIODIAGNOSIS PAPER-III

TIME: 3 HOURS MAX. MARKS: 100 RDG/D/19/40/III

IMPORTANT INSTRUCTIONS

- This question paper consists of 10 questions divided into Part "A" and part "B", each part containing 5 questions.
- Answers to questions of part A and part B are to be strictly attempted in separate answer sheet(s) and the main + supplementary answer sheet(s) used for each part must be tagged separately.
- Answers to question(s) of Part A attempted in answer sheet(s) of part B or Vice versa shall not be evaluated.
- Answer sheets of Part A and Part B are not to be tagged together.
- Part A and Part B should be mentioned only on the covering page of the respective answer sheets.
- Attempt all questions in order.
- Each question carries 10 marks.
- Read the question carefully and answer to the point neatly and legibly.
- Do not leave any blank pages between two answers.
- Indicate the question number correctly for the answer in the margin space.
- Answer all the parts of a single question together.
- Start the answer to a question on a fresh page or leave adequate space between two answers.
- Draw table/diagrams/flowcharts wherever appropriate.

Write Short notes on:

PART A

a) Describe the anatomy of retroperitoneum on imaging. 1. 4+6 b) Describe the radiological findings of 2 common non-tumour conditions occurring in the retroperitoneum. 2. a) Name the diseases associated with H.pylori infection. 4+6 b) Briefly discuss Barium meal features of benign and malignant gastric ulcers supported by a suitable diagram. 3. a) Mention the various interventional techniques used in the 4+6 management of hepatocellular carcinoma (HCC). b) Briefly describe the guidelines outlining the criteria of response assessment of hepatocellular carcinoma. 4. a) What are the causes of vesico-ureteric reflux? 5+5 b) Describe the imaging in vesico-ureteric reflux along with its grade with well labelled diagrams. a) Enumerate causes of Gastroduodenal artery bleed. 3+3+4 Mention current imaging techniques for its diagnosis. c) Describe Interventional Radiology techniques used its in management.

P.T.O