

Testicular Cancer – QUESTIONS

Clinical Case Conference
UCSD Radiation Oncology
SA-CME

1. Which of the following is recommended in workup of a suspicious testicular mass?
 - A) Fine needle aspiration biopsy.
 - B) Core needle biopsy.
 - C) Orchiectomy with scrotal incision.
 - D) Radical inguinal orchiectomy.
2. Which of the following is true of spermatocytic seminoma?
 - A) Typical age at presentation is approximately 30 years.
 - B) More commonly unilateral than other seminoma subtypes.
 - C) Favorable histological subtype – may be safe to skip adjuvant therapy.
 - D) Favorable histological subtype – may be safe to skip orchiectomy.
3. What is the stage of a 2 cm tumor (seminoma) in the right testis with lymphatic invasion but no spermatic cord invasion?
 - A) T1.
 - B) T2.
 - C) T3.
 - D) T4.
4. Which of the following serum tumor markers can be elevated in pure seminoma?
 - A) CA 19-9.
 - B) HCG.
 - C) AFP.
 - D) CEA.
5. Which of the following is NOT a recommended strategy for management of stage IIA pure testicular seminoma (after radical inguinal orchiectomy), per NCCN guidelines?
 - A) Radiation therapy to para-aortic and ipsilateral iliac lymph nodes.
 - B) Radiation therapy to para-aortic and bilateral iliac lymph nodes.
 - C) Chemotherapy (EP) for 4 cycles.
 - D) Chemotherapy (BEP) for 3 cycles.