



Dr Matthew Strack

Dermatologist

Dunedin

Saturday, August 12, 2017

(Room 4)

14:00 - 14:55 WS #110: Skin Cancer Quiz - Case Studies

15:05 - 16:00 WS #121: Skin Cancer Quiz - Case Studies (Repeated)

Skin Cancer Quiz

Matthew Strack

2017

Question 1

- * The following are sub-types of Basal Cell Carcinoma (choose any)
- * A. Small Cell
- * B. Nodular
- * C. Multifocal
- * D. Well Differentiated
- * E. Sclerosing

Question 2

- * The following are risk factors for Basal Cell Carcinoma: (choose any)
- * A. Fair Skin
- * B. Ionizing radiation
- * C. Low Socioeconomic Status/Unemployment
- * D. Past history of Basal Cell Carcinoma
- * E. Past history of Squamous Cell Carcinoma

Question 3

- * Basal Cell Carcinomas do not metastasize:
- * True/False

Question 4

- * You cannot die from a basal cell carcinoma:
- * True/False

Question 5

- * 5 year Squamous Cell Carcinoma mortality
- * A. 28%
- * B. 15%
- * C. 5%
- * D. 1%
- * E. Unknown

Question 6

- * The relative risk for Squamous Cell Carcinoma in patients over the age of 75 is:
- * A. x 1.5
- * B. x 2
- * C. x 5
- * D. x 10
- * E. Unknown

Question 7

- * Squamous Cell Carcinoma – Probability of Metastasis:
- * A. 15%
- * B. 10%
- * C. 5%
- * D. 2%
- * E. Unknown

Question 8

- * Squamous Cell Carcinoma In-Situ, recommended treatments: (choose any)
- * A. Curettage and Electrocautery
- * B. Excision
- * C. 5 Fluorouracil Topically
- * D. Cryotherapy
- * E. Imiquimod

Question 9

- * Common (>5%) Reactions after Cryotherapy:
- * A. Swelling
- * B. Infection
- * C. Crusting
- * D. Blistering
- * E. Pain > 24 hrs

Question 10

- * Preferred Treatment for Squamous Cell Carcinoma is: (choose any)
- * A. Surgical Excision
- * B. Cryotherapy
- * C. Curetage
- * D. Mohs Surgery
- * E. Fractionated Laser

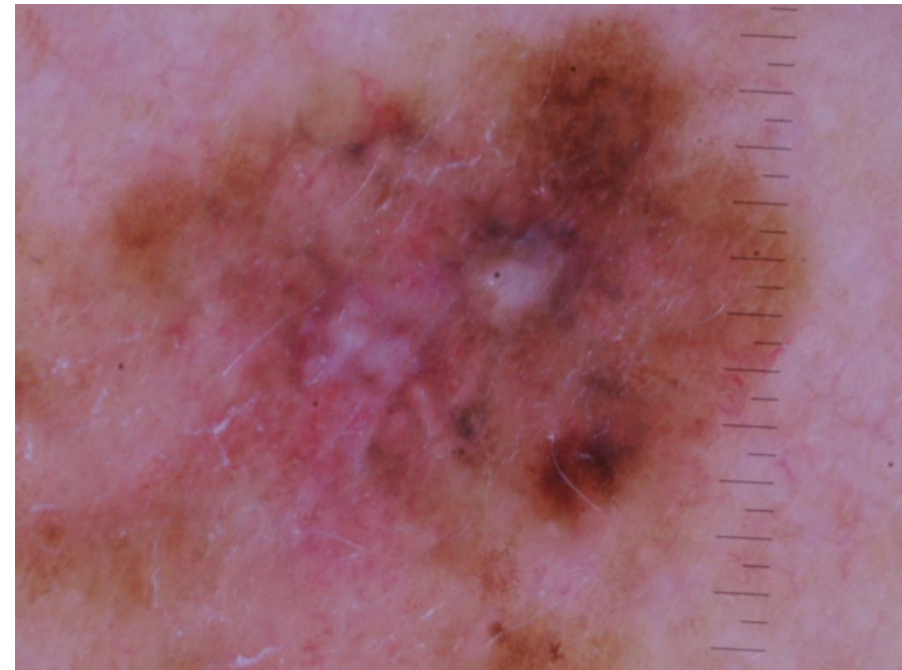
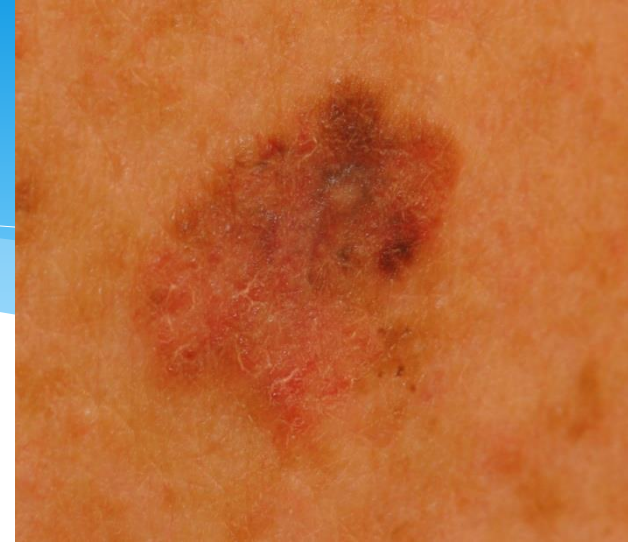
Question 11

- * Management for Disseminated Actinic Keratosis:
- * A. Cut out the ones that look like SCC
- * B. Baseline Photography and 6 monthly checks
- * C. Reduce sun exposure
- * D. Topical 5 Fluorouracil
- * E. Strong Cryotherapy

Question 12

* How Would you Treat:

- * A. Cryotherapy
- * B. Curettage
- * C. Imiquimod
- * D. Excision
- * E. Radiotherapy
- * F. All of the above



Question 13

- * How Would you Treat:
- * A. Cryotherapy
- * B. Curettage
- * C. Imiquimod
- * D. Excision
- * E. Radiotherapy
- * F. All of the above



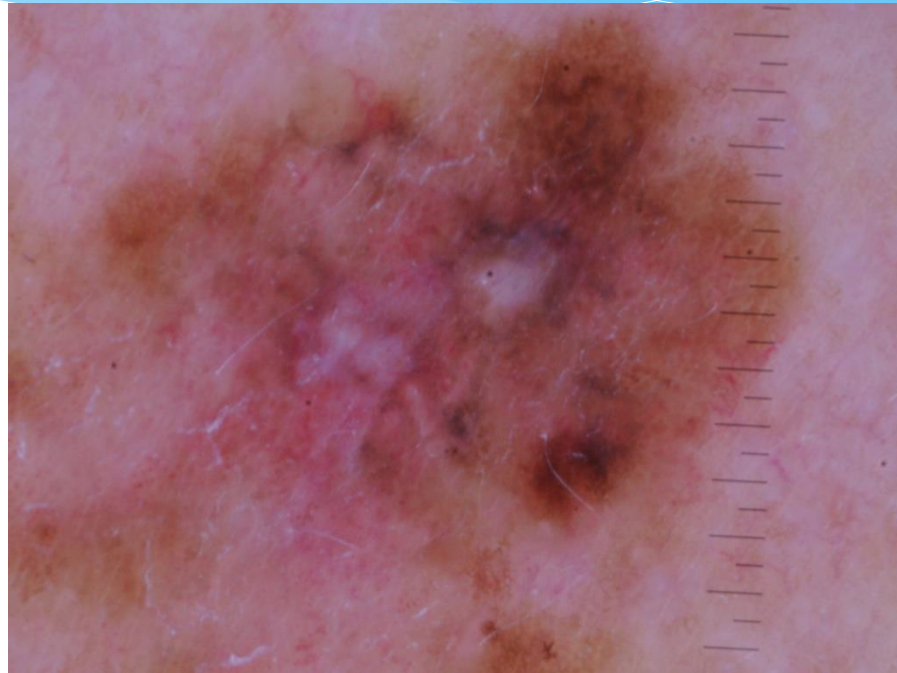
Question 14

- * How would you manage this:
- * A. Cryotherapy
- * B. Excision
- * C. Antibiotics
- * D. Do nothing
- * E. Analgesics



Question 15

- * What features do you see:
- * A. Blue White Veil
- * B. Regression
- * C. Pseudopods
- * D. Abnormal reticular network
- * E. Colour Variation
- * F. Asymmetry



Question 16

- * What is the Diagnosis?
- * A. Basal Cell carcinoma
- * B. Squamous Cell Carcinoma
- * C. Squamous Cell Carcinoma In-Situ
- * D. Amelanotic Melanoma
- * E. Seborrhoeic Keratosis



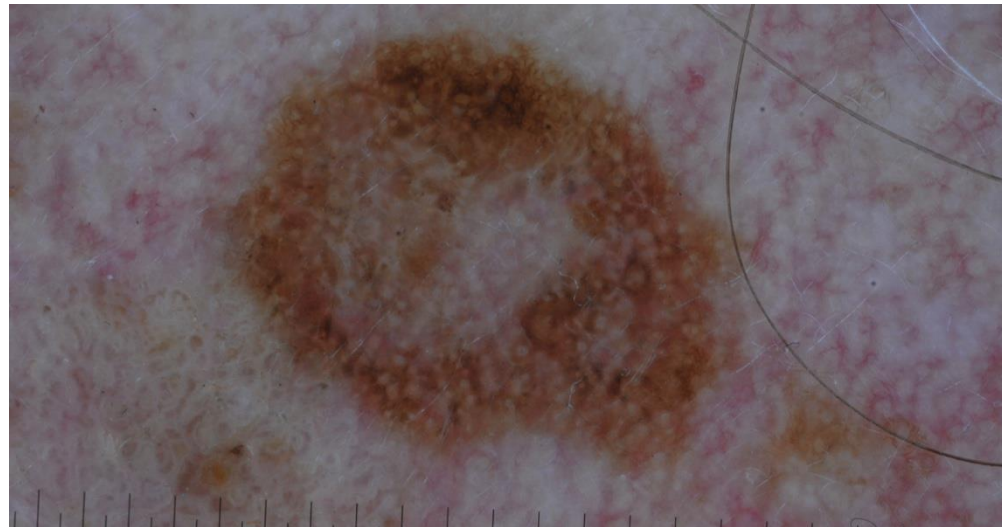
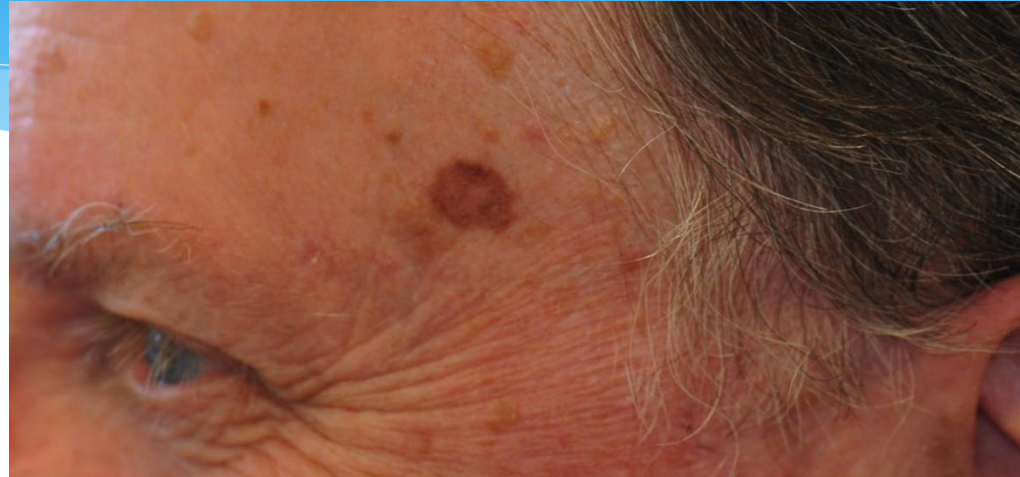
Question 17

- * How Would you Treat:
- * A. Cryotherapy
- * B. Curettage
- * C. Imiquimod
- * D. Excision
- * E. Radiotherapy
- * F. All of the above



Question 18

- * What features do you see:
- * A. Blue White Veil
- * B. Regression
- * C. Pseudopods
- * D. Normal reticular network
- * E. Colour Variation
- * F. Asymmetry



Question 19

* How Would you Treat:

- * A. Cryotherapy
- * B. Curettage
- * C. Imiquimod
- * D. Excision
- * E. Radiotherapy
- * F. None of the above



Question 20

- * What is optimal benign to melanoma ratio for excision:
- * A. 1:1
- * B. 3:1
- * C. 7:1
- * D. 20:1
- * E. Unknown

Question 1

- * The following are sub-types of Basal Cell Carcinoma (choose any)
- * A. Small Cell
- * B. Nodular
- * C. Multifocal
- * D. Well Differentiated
- * E. Sclerosing



Question 2

- * The following are risk factors for Basal Cell Carcinoma: (choose any)
- * A. Fair Skin
- * B. Ionizing radiation
- * C. Low Socioeconomic Status/Unemployment
- * D. Past history of Basal Cell Carcinoma
- * E. Past history of Squamous Cell Carcinoma

Question 3

- * Basal Cell Carcinomas do not metastasize:
- * True/False

Question 4

- * You cannot die from a basal cell carcinoma:
- * True/False

Question 5

- * 5 year Squamous Cell Carcinoma mortality
- * A. 28%
- * B. 15%
- * C. 5%
- * D. 1%
- * E. Unknown

Question 6

- * The relative risk for Squamous Cell Carcinoma in patients over the age of 75 is:
- * A. x 1.5
- * B. x 2
- * C. x 5
- * D. x 10
- * E. Unknown

Question 7

- * Squamous Cell Carcinoma – Probability of Metastasis:
- * 15%
- * 10%
- * 5%
- * 2%
- * Unknown

Squamous Cell Carcinoma Risk

- * Size
- * Subcutaneous Invasion
- * Perineural Invasion

- * Age
- * Immunosuppression
- * Recurrence

Mortality Risk From Squamous Cell
Skin Cancer

Gary L. Clayman, et al.

Journal of Clinical Oncology

2005;23:759-765.

Question 8

- * Squamous Cell Carcinoma In-Situ, recommended treatments: (choose any)
- * A. Curettage and Electrocautery
- * B. Excision
- * C. 5 Fluorouracil Topically
- * D. Cryotherapy
- * E. Imiquimod

Question 9

- * Common (>5%) Reactions after Cryotherapy:
- * A. Swelling
- * B. Infection
- * C. Crusting
- * D. Blistering
- * E. Pain > 24 hrs

Question 10

- * Preferred Treatment(s) for Squamous Cell Carcinoma is: (choose any)
- * A. Surgical Excision
- * B. Cryotherapy
- * C. Curetage
- * D. Mohs Surgery
- * E. Fractionated Laser

Question 11

- * Management for Disseminated Actinic Keratosis:
- * A. Cut out the ones that look like SCC
- * B. Baseline Photography and 6 monthly checks
- * C. Reduce sun exposure
- * D. Topical 5 Fluorouracil
- * E. Strong Cryotherapy

DSAP

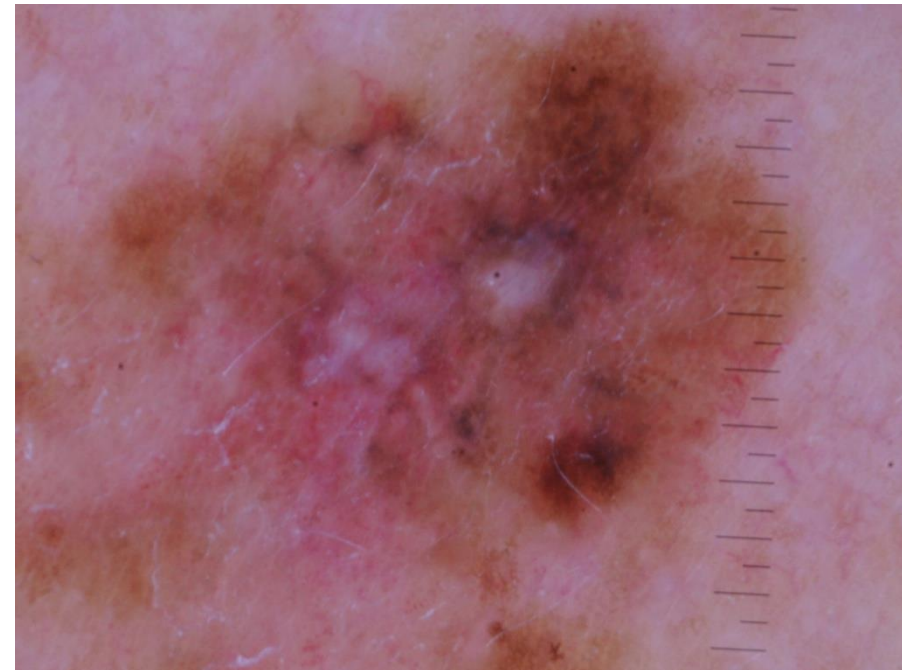
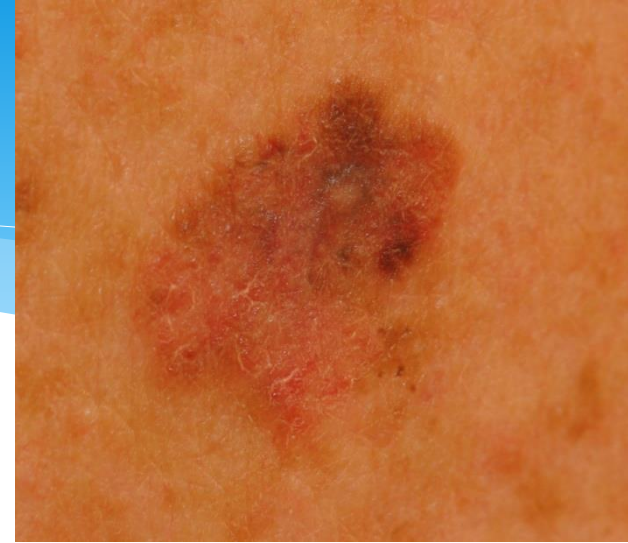
- * Genetic?
- * Often Legs
- * Risk: SCC
- * Treatment
 - * Cryotherapy
 - * 5FU
 - * Imiquimod
 - * Surgery



Question 12

* How Would you Treat:

- * A. Cryotherapy
- * B. Curettage
- * C. Imiquimod
- * D. Excision
- * E. Radiotherapy
- * F. All of the above



Question 13

- * How Would you Treat:
- * A. Cryotherapy
- * B. Curettage?
- * C. Imiquimod
- * D. Excision
- * E. Radiotherapy
- * F. All of the above?



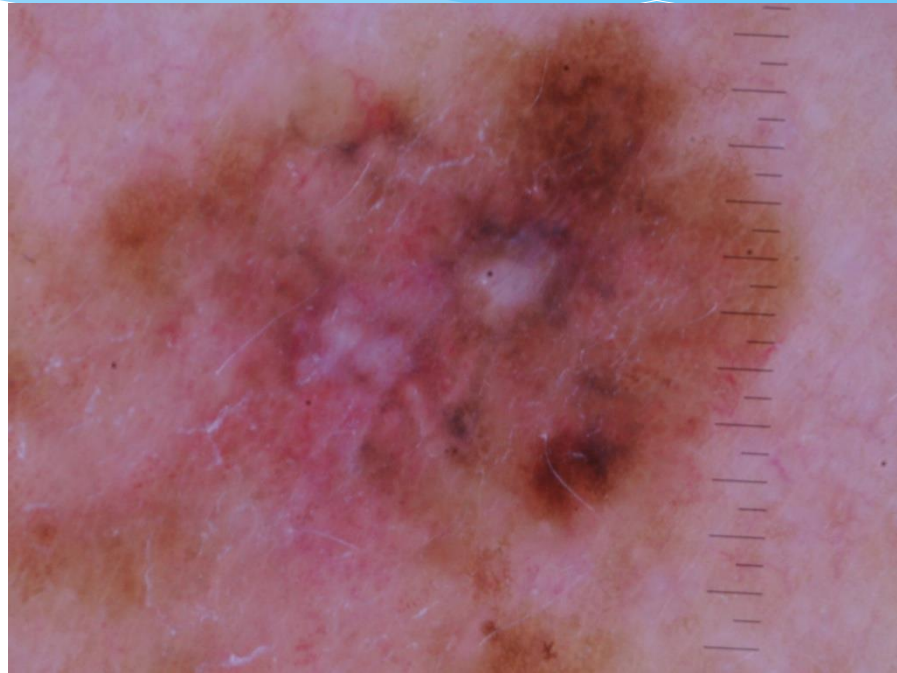
Question 14

- * How would you manage this:
- * A. Cryotherapy
- * B. Excision
- * C. Antibiotics
- * D. Do nothing
- * E. Analgesics

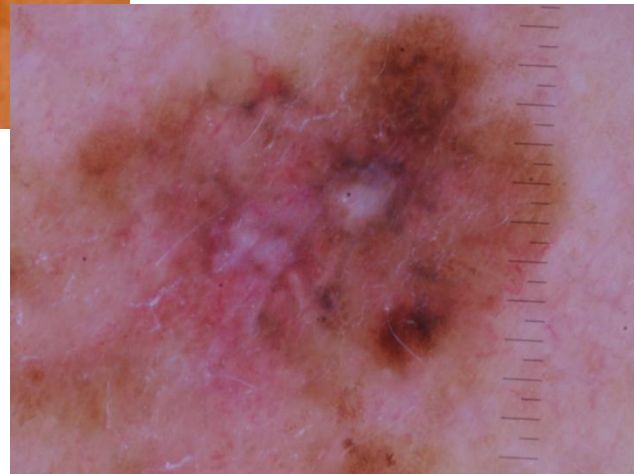
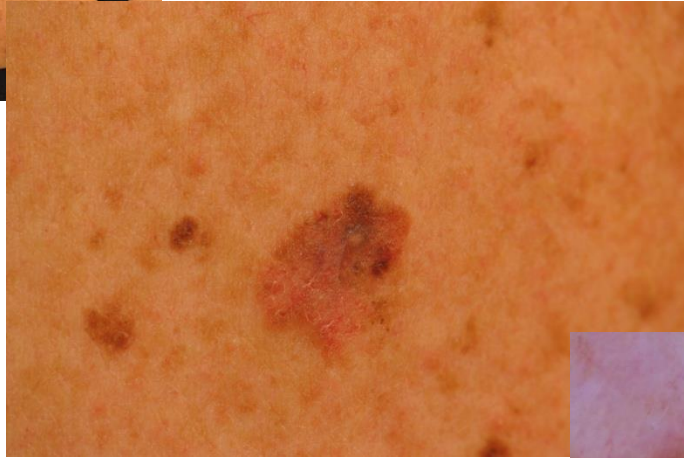


Question 15

- * What features do you see:
- * A. Blue White Veil
- * B. Regression
- * C. Pseudopods
- * D. Abnormal reticular network
- * E. Colour Variation
- * F. Asymmetry



Q15 contd.



Question 16

- * What is the Diagnosis?
- * A. Basal Cell carcinoma
- * B. Squamous Cell Carcinoma
- * C. Squamous Cell Carcinoma In-Situ
- * D. Amelanotic Melanoma
- * E. Seborrhoeic Keratosis



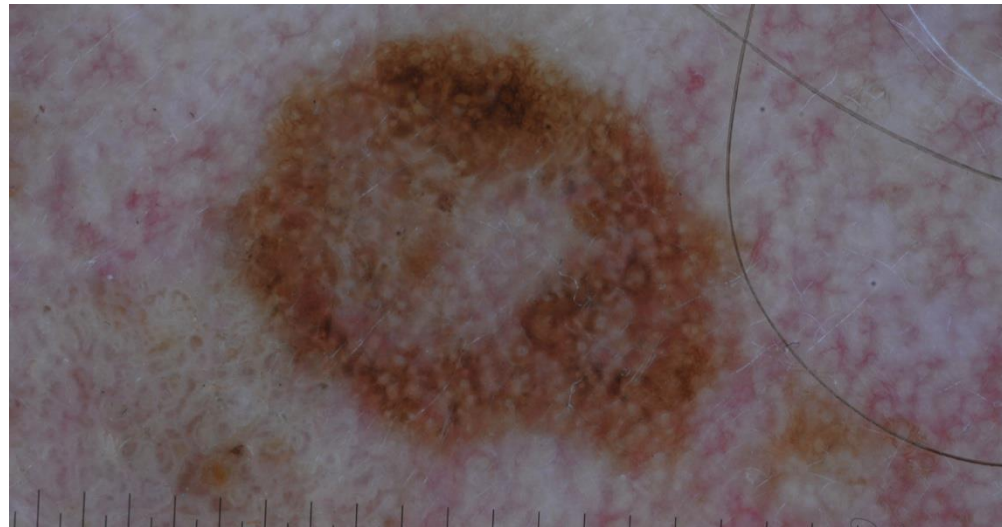
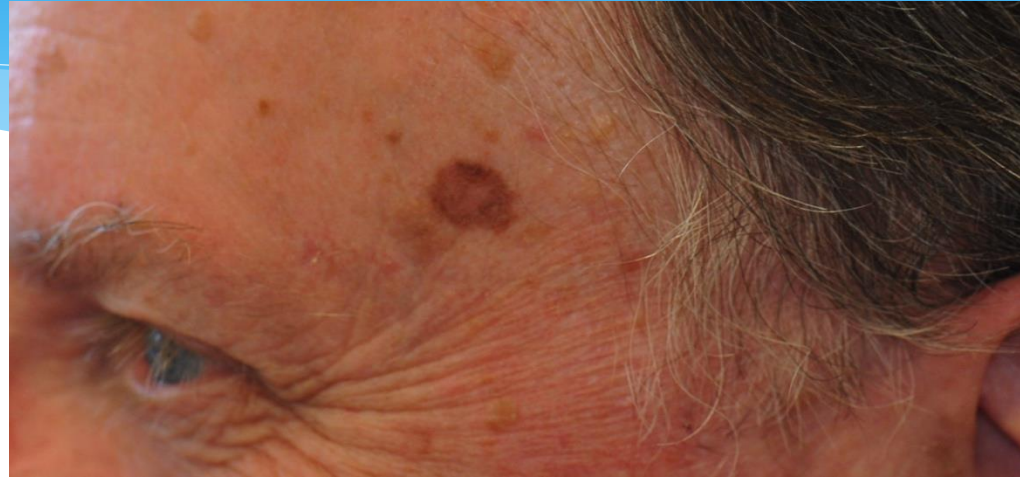
Question 17

- * How Would you Treat:
- * A. Cryotherapy
- * B. Curettage
- * C. Imiquimod
- * D. Excision
- * E. Radiotherapy
- * F. All of the above



Question 18

- * What features do you see:
- * A. Blue White Veil
- * B. Regression
- * C. Pseudopods
- * D. Normal reticular network
- * E. Colour Variation
- * F. Asymmetry



Question 19

* How Would you Treat:

- * A. Cryotherapy
- * B. Curettage
- * C. Imiquimod
- * D. Excision
- * E. Radiotherapy
- * F. None of the above



Question 20

- * What is optimal benign to melanoma ratio for excision:
- * A. 1:1
- * B. 3:1
- * C. 7:1
- * D. 20:1
- * E. Unknown