

1. Most common site of rhabdomyosarcoma is?

a) Orbit

b) Nasopharynx

c) Extremities

d) Hypopharynx

Correct Answer - A

Orbit REF: Sabiston 18th ed chapter 71

The most common primary sites for RMS are the head and neck (parameningeal, orbit, pharyngeal), the genitourinary tract, and the extremities

Rhabdomyosarcoma is the most frequent soft tissue sarcoma in the pediatric population and is the most common sarcoma occurring in the head and neck. Excluding the orbit, the most common site in the head and neck is the nasopharynx.

2. All are true about Paget disease EXCEPT:

a) 97% associated with underlying Invasive Carcinoma of breast

b) 50% are hormone receptor positive

c) Wedge or punch is biopsy taken from nipple for diagnosis

d) Underlying tumor lying within 2cm for the nipple

Correct Answer - B

50% are hormone receptor positive REF:

<http://emedicine.medscape.com/article/1101235-overview#showall>

- Nearly 98% of mammary Paget disease cases are associated with an underlying carcinoma, either in situ (intraductal, 10%) or infiltrating cancer (90%)
- Scrape cytology has been suggested as a noninvasive and reliable, rapid diagnostic screening method for mammary Paget disease.
- Punch, wedge, or excisional biopsy of the lesional skin of the nipple-areola complex to include the dermal and subcutaneous tissue for detailed microscopic examination provides an adequate sample for the accurate diagnosis of mammary Paget disease
- In cases of positive estrogen and progesterone receptors in an underlying breast carcinoma, the overlying Paget disease is negative for these receptors.

3. Felon is an infection of:

a) Scalp

b) Face

c) Finger

d) Scrotum

Correct Answer - C

A felon is a closed-space, purulent infection of the fingertip pulp.

Ref: Schwartz's principle of surgery 9th edition, chapter 44.

4. The earliest manifestation of increased intracranial pressure following head injury is:

a) Ipsilateral pupillary dilatation

b) Contralateral pupillary dilatation

c) Altered mental status

d) Hemiparesis

Correct Answer - C

Early signs of elevated iCP include drowsiness and a diminished level of consciousness (altered mental status).

Coma and unilateral papillary changes are late signs and require immediate intervention.

Ref: Harrison's Internal Medicine, 16th Edition, Page 1633; Clinical Hepatology: Principles and Practice of Hepatobiliary Diseases By Henryk Dancygier, Scott L. (FRW) Friedman, H. D. (CON) Allescher, U. (CON) Beuers, Volume 2, 2010, Page 938

5. True about gastroschisis is all, EXCEPT:

a) Results from fibrosis of the sternocleidomastoid muscle

b) Lesion is characterized by the deposition of collagen

c) Surgical transection of the sternocleidomastoid muscle may be indicated

d) None of the above

Correct Answer - D

The presence of a lateral neck mass in infancy in association with rotation of the head toward the opposite side of the mass indicates the presence of congenital torticollis.

This lesion results from fibrosis of the sternocleidomastoid muscle.

The mass may be palpated in the affected muscle in approximately two thirds of cases.

Histologically, the lesion is characterized by the deposition of collagen and fibroblasts around atrophied muscle cells.

In the overwhelming majority of cases, physical therapy based on passive stretching of the affected muscle is of benefit. Rarely, surgical transection of the sternocleidomastoid muscle may be indicated.

Ref: Schwartz's principle of surgery 9th edition, chapter 39.

6. Which of the following develops from an unerupted tooth?

a) Dental cyst

b) Dentigerous cyst

c) Both of the above

d) None of the above

Correct Answer - B

Dentigerous (follicular) cysts are epithelial-lined, developmental, odontogenic cysts.

Fifteen to eighteen percent of jaws cysts are dentigerous, surround the crowns, and attach at the cemento-enamel junction of unerupted teeth.

The lower third molars and the upper canines are the most commonly involved teeth.

The cyst develops subsequent to an accumulation of fluid between the remnants of the enamel organ and the contiguous tooth crown.

Ref: Smith R.A. (2012). Chapter 25. Jaw Cysts. In A.K. Lalwani (Ed), *CURRENT Diagnosis & Treatment in Otolaryngology—Head & Neck Surgery*, 3e.

7 Treatment of choice of a 2cm thyroid nodule in a 50 year old man with FNAC revealing it to be a papillary carcinoma:

a) Hemithyroidectomy

b) Subtotal thyroidectomy with modified neck dissection

c) Near total thyroidectomy with modified neck dissection

d) Hemithyroidectomy with modified neck dissection

Correct Answer - C

Surgery, either near-total or total thyroidectomy, is the initial treatment of choice for patients with papillary carcinoma.

Near-total thyroidectomy is performed for extensive unilateral tumors with local metastases.

Total thyroidectomy is performed for patients with extensive multifocal disease with metastases to the cervical lymph nodes, contiguous neck structures, or distant sites.

Ref: Current Medical Diagnosis and Treatment, 2012, Chapter 26; Hazzard's Geriatric Medicine and Gerontology, 6th Edition, Chapter 108

8. All of the following are risk factors for malignant change in a gall bladder polyp, except:

a) Age > 60 years

b) Rapid increase in size of polyp

c) Size of polyp > 5 mm

d) Associated Gall stones

Correct Answer - C

Risk factors for malignant change in an asymptomatic patient with a gall bladder polyp are: polyp size greater than 10mm, age >50years, and presence of gallstones.

There is greater risk of malignancy in polyps in patients with primary sclerosing cholangitis. Endoscopic ultrasound helps in differentiating cholesterol polyps from malignant polyps.

Ref: Sherlock's Diseases of The Liver and Biliary System By James S. Dooley, Page 277;
Diseases of The Gallbladder and Bile Ducts: Diagnosis and Treatment By Pierre-Alain Clavien, John Baillie, John Baillie (FRCP (Glasg.)), Page 49

9. What is the best treatment for a five year old child presenting with ballooning of prepuce following micturation?

a) Adhesiolysis & dilatation

b) Circumcision

c) Dorsal slit

d) Conservative management

Correct Answer - B

'Ballooning of foreskin that persists after micturation is a sign of obstruction requiring circumcision'

Ref: Undergraduate Surgery By A.K. Nan, Page 677; Jones' Clinical Pediatric Surgery: Diagnosis & Management (Blackwell publishing) 6th Edition, Page 180; Bailey & Love 25th Edition, Page 1371; Handbook of Urological Diseases in Children By Ricardo González, Barbara M. Ludwikowski, Page 135

10. Dumping syndrome occurs least with ?

a) Selective vagotomy

b) Truncal vagotomy

c) Highly selective vagotomy

d) Syndrome occurs with all of the above commonly

Correct Answer - C

Ans. is 'c' i.e., Highly selective vagotomy

It is least seen with highly selective vagotomy because the motility of the stomach is least affected in highly selective vagotomy and is most common with gastrectomy.

11. Duodenal blow out following Billroth gastrectomy most commonly occurs on which day ?

a) 2nd day

b) 4th day

c) 6th day

d) 12th day

Correct Answer - B

Ans. is b i.e., 4th day

- *Duodenal blow out is massive leakage from duodenal stump following Billroth II gastrectomy.*

- Clinical features: ?

It usually occurs on 2nd to 7th postoperative days. (In Bailey 22nd/e on page 689. it is specifically written that it occurs on 4th day).

It usually presents as: ?

- *Sudden intense thoracoabdominal pain*
- *Sudden elevation in pulse and temperature*
- *General deterioration of condition*

Adequate drainage must be instituted immediately which is done by putting a catheter through an incision below the right costal margin.

Total parenteral nutrition should be instituted and attention should be directed towards fluid and electrolyte therapy.

Fistula closure can be anticipated within 2-3 weeks.

12. A patient comes with hematemesis and malena. On the upper GI endoscopy there was no significant finding. 2-days later the patient rebleeds. Next line of investigation is

a) Emergency angiography

b) Repeat upper GI endoscopy

c) Enteroscopy

d) Laprotomy

Correct Answer - D

Ans. is 'd' i.e. Laprotomy

CSDT writes - *"Regardless of the cause, if bleeding recurs after it has once stopped the chances of success without operation are low.*

Most patients who rebleed in the hospital should have surgery.

In 85% of patients, bleeding stops within a few hours of admission.

About 25% of patients rebleed once bleeding has stopped.

Rebleeding episodes are concentrated with the first 2 days of hospitalization, and if the patient has had no further bleeding for a period of 5 days, the chances of rebleeding is only 2%.

Rebleeding is most common in patients with varices, peptic ulcer, anemia or shock.

About 10% of patients require surgery to control bleeding, and most of these patients have bleeding ulcers, or less commonly, esophageal varices. The death rate is 30% among pts who rebleed and 3% among those who do not. The mortality rate is also high in the elderly and in patients who are already hospitalized at the onset

of bleeding. Analysis of large series of patients suggests that a number of those who died would not have done so if operations had been performed earlier and more often."

13. All are false except one in case of hypertrophic pyloric stenosis -

a) Symptomatic within one week

b) Lump is always clinically palpable

c) T/t of choice is Finney's pyloroplasty

d) Ultrasonography is diagnostic test

Correct Answer - D

Ans is 'd' ie Ultrasonography is diagnostic test

Hypertrophic Pyloric Stenosis (HPS)

- The musculature of the pylorus and adjacent antrum is grossly hypertrophied, the hypertrophy being maximum in the pylorus itself.
- It occurs in approximately 3 in 1000 live birth and is the *most common surgical cause of vomiting in infancy*.
- M > F (4 : 1)*
- Characteristically the first born male child is affected.
- The condition is *most commonly seen at 4 wks after birth* ranging from the 3rd wk to on rare occasion, the 7th. However, 20% of infants are symptomatic from birth, and most are symptomatic within the first 2 months after birth.
- Non-bilious vomiting, becoming increasingly projectile, occurs over several days to weeks. Eventually the infant will develop a nearly complete obstruction by the second to fourth week of life and will not be able to hold down even clear liquids. This invariably proceeds to severe dehydration if not t/t.
- These infants develop a metabolic alkalosis with severe depletion of potassium and chloride ions.
- " *The diagnosis of pyloric stenosis usually can be made on physical examination by palpation of the typical 'olive' in the right upper*

quadrant and the presence of visible gastric waves on the abdomen.

- *When the olive cannot be palpated, ultrasound in experienced hands will diagnose the condition accurately in 95 percent of pts." - Schwartz.*
- *Treatment*
 - *Pyloric stenosis is never a surgical emergency although dehydration and electrolyte abnormalities may present a medical emergency*
Fluid resuscitation and correction of electrolyte abnormalities and metabolic alkalosis is essential before surgery.
 - *Surgery : Fredet-Ramstedt pyloromyotomy. (In it the pyloric mass is split without cutting the mucosa)*
- *Also know*
- *Administration of erythromycin in early infancy has been linked to the subsequent development of HPS.*
- *Jaundice may be seen in HPS, although cause is not clear.*

14. True of early gastric carcinoma -

a) Invasion of mucosa and sub-mucosa with neighbouring lymphnode

b) Invasion of mucosa and submucosa irrespective to L.N. spread

c) Radical Gastrectomy preferred

d) b and c

Correct Answer - D

Answer 'b' i.e. Invasion of mucosa and submucosa irrespective to lymph node spread. ; 'c' i.e. Radical gastrectomy preferred

- As already explained before, *Early gastric cancer* is carcinoma limited to the mucosa and submucosa of the stomach *regardless of the lymphnode status*
- Radical subtotal gastrectomy is the *standard operation* for gastric cancers.
- Endoscopic Resection
- It has been demonstrated that some patients with early gastric cancer can be adequately treated by an *endoscopic mucosal resection*.
- Currently endoscopic mucosal resection is limited to :*early gastric cancers, confined to mucosa, < 2 cm in size, with no node involvement*

15. Most common benign tumour of the stomach is ?

a) Adenoma

b) Lipoma

c) Hamartoma

d) Leiomyoma

Correct Answer - D

Ans. is 'a' i.e., Adenoma

E intestinal polyps are the most *common benign* tumor of the stomach. They are of 5 types:

- a) Hyperplastic (regenerative) *most common type (75%), with low malignant potential*
- b) Adenomatous *second most common, with **high malignant potential** (should be removed when diagnosed)*
- c) Hamartomatous
- d) Inflammatory *with negligible malignant potential*
- e) Heterotopic

Polyps that are symptomatic, > 2 cm, or adenomatous should be removed, usually by endoscopic snare polypectomy.

16. Pringle maneuver to arrest hemorrhage is:

- a) Clamping of portal vein
- b) Clamping of hepatic artery
- c) Clamping of hepatic vein
- d) Clamping of hepatoduodenal ligament

Correct Answer - D

Ans is 'd' i.e. Clamping of hepatoduodenal ligament

Pringle maneuver is clamping of the hepatoduodenal ligament by atraumatic clamp across the foramen of Winslow to temporarily stop complete vascular inflow to the liver. The hepatoduodenal ligament contains the hepatic artery, portal vein and the CBD.

Although the Pringle maneuver was initially described (*by James Hogarth Pringle*) for controlling bleeding due to traumatic liver injury, it is commonly used during elective hepatic resections.

17. Normal portal vein pressure is -

a) < 3 mm Hg

b) 3-5 mm Hg

c) 5-10 mm Hg

d) 10 to 12 mm of Hg

Correct Answer - C

Ans. is 'c' i.e., 5-10 mm Hg

18. Not true about choledochal cyst is:

- a) Associated with anomalous junction of the pancreatic and biliary duct
- b) Type 2 is most common
- c) Surgical removal is the treatment of choice
- d) If ruptures can cause biliary peritonitis

Correct Answer - B
Ans is b i.e. Type 2 is most common

19. True about screening mammography -

a) Indicated in 50-70 years of age

b) Mortality reduced by 30%

c) Radiation due to mammography can cause carcinoma

d) All

Correct Answer - D

Ans. is (a) Indicated in 50-70yrs of age; (b) Mortality reduced by 30%; (c) Radiation due to mammography can cause carcinoma

- **Mammography**

is **X-ray imaging** of breasts to detect tumors or other abnormalities. it is of **2 types** -

i) Screening mammography is used to detect breast changes in women who have no signs or symptoms of any breast abnormality. The goal is to detect cancer before any clinical signs are noticeable. This usually requires at least **2 mammograms** from different angles of each breast - a) the **cranio-caudal (cc) view** and b) the **mediolateral-oblique (MLO) view**.

ii Diagnostic mammography is used to investigate suspicious breast changes such as a breast lump, breast pain, an unusual skin change, nipple discharge. It is also used to evaluate abnormal findings on a screening mammogram.

- **Age for mammography**

Current guidelines from the **U.S.** Department of Health and Human Services (**HHS**), the American Cancer Society (**ACS**), the American Medical Association (**AMA**) and the American College of Radiology (**ACR**) recommend

-screening mammography every year for women, beginning at age 40.

The American Cancer Society recommends these screening

The American Cancer Society recommends these screening guidelines

Yearly mammograms are recommended starting at age 40 and continuing for as long as a woman is in good health

- Clinical breast exam (CBE) about every 3 years for women in their 20s and 30s and every year for women 40 and over
- Breast self-examination starting in their 20s..
- The American Cancer Society recommends that those with high risk for breast cancer -- because of their family history, a genetic tendency, or certain other factors -- be screened with MRI in addition to mammograms.
- But many societies are against screening mammography in *women aged below 50 years*. there is also controversy regarding the *frequency of mammogram* and utility of mammogram *above 70 yrs of age*.
- But one thing is certain - its utility in 50-70 yrs age group, about which there is no controversy. Randomized clinical trials have demonstrated **a 30% reduction in breast cancer mortality in women 50-69 years** who are screened annually or biennially with mammograms. The data on women under age 50 are less clear likewise data are sparse regarding efficacy of screening mammograms in women older than age 69" - American College of Preventive Medicine
CSDT 13/e writes- "The beneficial effect of screening in women aged 50-69 years is undisputed and has been confirmed by all clinical trials."
- **Radiation risk (Risk of carcinoma)**
no doubt that ionizing radiation (X rays) can itself cause breast cancer, but the dose used in mammography is so small (**less than 0.2 rads or 0.2 cGy per exposure utilizing** film-screen mammographic technique) that it is hardly of any significance.
"There has never been any direct evidence that the doses required for modern mammography have any effect on the breast particularly among women over the age of 40 in whom screening is beneficial. There is no scientific evidence that any one ever has or ever will develop breast cancer as the result of a mammogram." - Kopan's *Breast imaging*

But still **there is a theoretical risk of breast Ca** (although very small) associated with mammography.

- About option 'd' & 'e'

CSDT (13/e p285) writes?

"Mammography is the most reliable means of detecting breast cancer before a mass can be palpated. Slowly growing cancers can be identified by mammography at least 2 years before reaching a size detectable by palpation.

MRI and ultrasound may be useful screening modalities in women who are at high risk for breast cancer but not for the general population. The sensitivity of MRI is much higher than mammography; however, the specificity is significantly lower, which results in multiple unnecessary biopsies. The increased sensitivity despite decreased specificity may be considered a reasonable trade-off for those at increased risk for developing breast cancer but not for normal-risk population."

- But remember that generally mammography is not helpful in young women (< 35 years). This is because of dense breast. **hi** young women, ultrasound may be more useful than mammography.

About ultrasound Bailey and Love (25/e p828) writes?

"Ultrasound is particularly useful in young women with dense breasts in whom mammograms are difficult to interpret, and in distinguishing cysts from solid lesions. It can also be used to localize impalpable areas of breast pathology. It is not useful as screening tool and remains operator dependent. Increasingly, ultrasound of the axillary tissue is performed when a cancer is diagnosed and guided percutaneous biopsy of any suspicious glands may be performed."

About MR Bailey and Love (25/e p829) writes?

Magnetic resonance imaging (MRI) is of increasing interest to breast surgeons in a number of settings:

- It can be useful to distinguish scar from recurrence in women who have had previous breast conservation therapy for cancer (although it is not accurate within 9 months of radiotherapy because of abnormal enhancement).

It is the best imaging modality for the breasts of women with implants.

It has proven to be useful as a screening tool in a high-risk women

(because of family history).

- It is less useful than ultrasound in the management of the axilla in both primary breast cancer and recurrent disease.

Also remember

- for maximum yield in screening programs, mammography is combined with physical examination since about 35-50% of early breast cancers can be discovered only by mammography and another 40% can be detected only by palpation.

The two standard mammographic projections are:

A mediolateral oblique (MLO) view and a craniocaudal (CC) view.

The MLO is taken with the X-ray beam directed from superomedial to inferolateral, usually at an angle of 30-60°. *The MLO projection is the only projection in which all the breast tissue can be demonstrated on a single image.*

In CC view, the X-ray beam travels from superior to inferior.

Positioning is achieved by pulling the breast up and forward away from the chest wall, with compression applied from above.

20. Use of tamoxifen in carcinoma of breast patients does not lead to the following side effects ?

a) Thromboembolic events

b) Endometrial Carcinoma

c) Cataract

d) Cancer in opposite breast

Correct Answer - D

Ans is 'd' i.e. Cancer in opposite breast

Adverse effects of Tamoxifen: ?

1. Hot flushes, nausea vomiting (most common side effects)*
2. Menstrual irregularities, vaginal bleeding, discharge, pruritis vulvae & dermatitis
3. Endometrial cancer
4. Thromboembolism
5. Cataracts
6. Retinal deposits & decreased visual acuity

Benefits of Tamoxifen: ?

1. Estrogen receptor positive breast cancer: used in both pre and postmenopausal women.
2. it appears to increase bone density (slows the development of osteoporosis in postmenopausal women) favourably affect lipid and lipoprotein profiles.

Anastrozole medication is also used to treat breast cancer in women whose breast cancer has worsened after taking tamoxifen (Nolvadex).

Anastrozole is in a class of medications called nonsteroidal aromatase inhibitors.
It works by decreasing the amount of estrogen the body makes.

21. Cystosarcoma phylloides is treated by ?

a) Simple mastectomy

b) Radical mastectomy

c) Modified radical mastectomy

d) Antibiotic with conservative treatment

Correct Answer - A

Ans. is 'a' i.e., Simple mastectomy

- Treatment of cystosarcoma phylloides ?

a) T/T of small phyllodes tumour ---> *It should be locally excised with an obvious 1cm of normal breast tissue* After excision, when the diagnosis of a phyllodes tumor with suspicious malignant elements is made, re-excision of the biopsy site to ensure complete excision of a tumour with a 1 cm margin of normal-appearing breast-tissue is indicated.

b) T/T of large phyllodes tumour --> *simple mastectomy*

- Remember, *cystosarcoma phylloides does not metastasize by lymphatic route, so axillary dissection is not needed.*
- Cystosarcoma phylloides metastasize *exclusively by blood borne route.*

Other questions on cystosarcoma phylloides

Pathologically it is similar to fibroadenoma i.e., proliferation of both duct and stroma is seen.

- The tumor displays a range of behaviour from benign like fibroadenoma to frankly malignant

Mammographic evidence of calcifications and morphologic evidence of necrosis do not distinguish between benign, borderline, and malignant phyllodes tumors. Consequently, it is difficult to differentiate benign phyllodes tumors from the malignant variant and from fibroadenomas

FROM FIBROADENOMAS.

Peak incidence is in the fifth decade, exceedingly rare in adolescents.

The excised specimen is firm and rubbery and may separate into leaflike structures therefore the term (phyllodes means leaf like)

They usually present as a large growth which is mobile and commonly there is a history of rapid growth.

22. Mondor's disease is ?

a) Thrombophlebitis of the Superficial veins of Breast

b) Carcinoma of the breast

c) Premalignant condition of the breast

d) Filariasis of the breast

Correct Answer - A

Ans is 'a' i.e., Thrombophlebitis of Superficial veins of Breast

- Mondor's disease
- is thrombophlebitis of the superficial veins of anterior chest wall and breast although it has also been seen in the arm.
- frequently involved veins are lateral thoracic vein, thoracoepigastric vein and superficial epigastric veins.
- aetiology is unknown
- also known as 'string phlebitis', it presents as a tender cord-like structure.
- The women may present with acute pain in the lateral aspect of breast or the anterior chest wall. A tender cord-like superficial thrombosed vein is formed and when the skin over the breast is stretched by raising the arm, a narrow shallow subcutaneous groove alongside the cord becomes apparent.
- rarely it may be bilateral.
- Management
 - it's a benign self-limited disorder
 - The differential diagnosis is lymphatic permeation from an occult carcinoma of breast
 - When the diagnosis is uncertain or a mass is present near the cord, a biopsy may be done. Treatment
 - antiinflammatory drugs and warm compresses

- restricted arm movements as well as brassiere support of breast
- it usually resolves within 4 to 6 weeks. When symptoms persists or are refractory to treatment, the involved vein segment may be excised.

23. Characteristic feature of pagets cells is-

a) Eosinophilic cytoplasm

b) Abundant clear cytoplasm

c) Glycogen mass

d) Multinucleated giant cell

Correct Answer - B

Ans. is 'b' i.e. Abundant clear cytoplasm

24. In Radical mastectomy, which is spared-

a) Pectorialis major

b) Pectoralis minor

c) Axillary lymph nodes

d) Supraclavicular lymph nodes

Correct Answer - D

Ans. is 'd' i.e. Supraclavicular lymph nodes

25. Flap commonly used in breast reconstruction is?

a) Serratus anterior

b) TRAM

c) Flap from arm

d) Delto pectoral flap

Correct Answer - B
Ans. is 'b' i.e. TRAM

26. Surgery for periductal mastitis -

a) Hadfield's operation

b) Patey's mastectomy

c) Modified radical mastectomy

d) None of the above

Correct Answer - A

Ans. is 'a' i.e., Hadfield's operation

27. The most common histologic type of thyroid cancer is

a) Medullary type

b) Follicular type

c) Papillary type

d) Anaplastic type

Correct Answer - A

Ans. is 'c' i.e., Papillary

- *"Papillary carcinoma accounts for 80% of all thyroid malignancies in iodine-sufficient areas and is the predominant thyroid cancer in children and individuals exposed to external radiation." - Schwartz*
Incidence of primary malignant tumors of thyroid gland (*Harrison 17/e*)

<i>Type of thyroid carcinoma</i>	<i>Approximate Prevalence</i>
Papillary Carcinoma	80-90%
Follicular Carcinoma	5-10%
Medullary Carcinoma	10%
Anaplastic Carcinoma	Rare
Lymphomas	1-2%

Also remember

- *Thyroid carcinoma is the most common malignancy of the endocrine system*

28. Most probable malignancy that develops in a case of long-standing goiter is -

a) Follicular Ca

b) Anaplastic Ca

c) Papillary Ca

d) Medullary Ca

Correct Answer - A

Ans is 'a' i.e., Follicular carcinoma

"An increased incidence of cancer (usually follicular) has been reported from endemic areas. Dominant or rapidly growing nodules in longstanding goiters should always be subjected to aspiration cytology." - Bailey & Love

- About Follicular Carcinoma (FTC)
- FTC are second most common thyroid malignancies, more common in iodine-deficient areas.
- More common in women (Female : Male ratio of 3:1)
- Mean age of presentation is later than papillary Ca (— 50 yrs)
- Multiple foci are rarely seen and lymph node involvement is much less common than in papillary carcinoma.
- Blood borne metastasis is common with spread to bone, lungs, liver and elsewhere.
- In less than 1% of cases, follicular cancers may be *hyperfunctioning (warm nodule on scintiscan)*, leading to symptom of thyrotoxicosis.
- Histopathology

Follicular carcinomas are usually solitary lesions, the majority of which are encapsulated.

Microscopically most follicular carcinomas are composed of fairly uniform cells forming small follicles containing colloid (quite like

normal thyroid). In other cases follicular differentiation may be less apparent, and there may be nests or sheets of cells without colloid. the nuclei lack the typical features of papillary Ca.

29. Complications of total thyroidectomy include all except:

a) Hoarseness

b) Airway obstruction

c) Hemorrhage

d) Hypercalcaemia

Correct Answer - D

Ans. is 'd ' i.e. hypercalcemia

- *Hypocalcemia*, not hypercalcemia is a complication of thyroidectomy.

- Complications of thyroidectomy include

1) *Haemorrhage*

Is usually due to slipping of ligature on the superior thyroid art.

Hematomas may cause *airway compromise and must be evacuated immediately*.

Hematomas may occur immediately or later on. An immediate bleed occurs after or shortly before extubation when the pt. lightens from anaesthesia and may begin to cough, causing a vessel to open. Delayed hemorrhage may develop slowly and therefore may not be recognized at first.

2) *Respiratory obstruction*

Causes includes

Tension hematoma.

Laryngeal oedema (by anesthetic intubation)

Bilateral recurrent laryngeal nerve paralysis.

3) *Recurrent laryngeal nerve paralysis*

- May be unilateral or bilateral, transient or permanent.

- Bilateral causes respiratory obstruction – Dyspnea, stridor.

4) Injury to other nerves

- External branches of superior laryngeal nerve
- Cervical sympathetic trunk - may cause Homer's syndrome.

5) Parathyroid insufficiency.

- Is due to removal of the parathyroid glands or infarction due to vascular injury.

Vascular injury is more important.

- Cases usually present 2-5 days after operation with symptoms of hypocalcemia (*circumoral and fingertip numbness and tingling tetany, carpopedal spasm and laryngeal stridor.*)

*Treatment with oral calcium and vitamin **D** supplements.*

IV calcium gluconate may be required in severe cases.

6) Thyroid insufficiency.

7) Thyrotoxic crisis

- Occurs if the thyrotoxic patient has been inadequately prepared for thyroidectomy.

30. Which of the following will not lead to respiratory distress after Thyroid Surgery

-

a) Laryngomalacia

b) Bilateral recurrent laryngeal nerve injury

c) Hypocalcemia

d) None

Correct Answer - D

Ans is None

- All the given conditions are able to cause resp. distress.
- Endocrine surgery of Head & Neck writes
- *"The reason for airway compromise include :
bilateral recurrent laryngeal nerve injury
tracheal malacia from longstanding tracheal compression caused by a large thyroid mass
subglottic edema from laryngeal involvement with tumor,
tracheal invasion by tumor
post-op hemorrhage or hematoma."*
Hypocalcemia can also cause stridor by causing laryngeal spasm

31. Replacement dose of thyroxine is

a) 0.1 - 0.2 mg

b) 0.3 - 0.4 mg

c) 1 - 2 mg

d) 3 - 4 mg

Correct Answer - A

Ans. is 'a' i.e. 0.1 - 0.2 mg

- *Harrison 16/e writes ?*

"If there is no residual thyroid function, the daily replacement dose of levothyroxine is usually 1.6 µg/kg body wt. (typically 100-150 µg)"

- *Endocrine surgery of the Head & Neck writes ?*

"Hypothyroidism is an expected sequelae of total thyroidectomy or radioiodine therapy. In patients in whom hypothyroidism is expected to be permanent, thyroid hormone therapy is appropriate and L-thyroxine (1.6 µg/kg body wt.) should be given once a day.

If it is desirable to suppress TSH (as in patients with papillary or follicular carcinoma) a dose of 2.7 µg/kg of body weight should be given."

32. Thyroglossal cyst may occasionally give rise tocarcinoma ?

a) Papillary

b) Medullary

c) Anaplastic

d) Follicular

Correct Answer - A
Ans. is 'a' i.e. Papillary

33. Barrett's esophagus is commonly associated with one of the following:

a) Adenocarcinoma

b) Squamous cell carcinoma

c) Sarcoma

d) Gastrointestinal stromal tumor

Correct Answer - A
Ans. is 'a' i.e. Adenocarcinoma

34. 3rd constriction of the oesophagus is at the level of?

a) Left bronchus crossing the aorta

b) Where it pierces the diaphragm

c) Junction of the oesophagus and stomach

d) Cricopharynx

Correct Answer - B

Ans. is 'b' i.e., Where it pierces the diaphragm

35. Most useful investigation in sliding hernia in female

a) Fluoroscopy

b) Barium-meal

c) Palpation method

d) Ultrasound

Correct Answer - B

Ans. is 'b' i.e., Barium meal

36. Most common type of cancer gall bladder in a patient with gallstone-

a) Adenocarcinoma

b) Squamous carcinoma

c) Sarcoma

d) None

Correct Answer - A
Ans. is 'a' i.e., Adenocarcinoma

37. All are features seen in Chronic Pancreatitis except ?

a) Chronic persistent pain

b) Diarrhoea, Steatorrhoea

c) Calcification

d) Paralytic ileus

Correct Answer - D
Ans. is 'd' i.e., Paralytic ileus

38. Acute mesenteric lymphadenitis is caused by -

a) E. coli

b) a-hemolytic streptococci

c) Hemophilus

d) Yersinia

Correct Answer - D

Ans. is 'd' i.e., Yersinia

Acute mesenteric lymphadenitis is the diagnosis usually given when enlarged, slightly reddened lymphnodes are encountered at the root of mesentery along with normal appendix, when a pt. suspected of appendicitis is opened. *"Whether this is a single, discrete entity is unclear, since the causative factor is not known. Some of these patients have infection with Y. pseudotuberculosis or Y. enterocolytica, in which case the diagnosis can be established by culture of the mesenteric nodes or by serologic titres. Children seem to be affected more frequently than men."*

39. The commonest organism seen in peritonitis is -

a) Escherichia coli

b) Clostridium welchii

c) Staphylococci

d) Klebsiella

Correct Answer - A
Ans. is 'a' i.e., Escherichia coli

40. All are true about Pseudomyxoma peritonei except ?

a) Common in male

b) Associated with ovary tumours

c) Yellow jelly collection of fluid

d) Appendiceal adeno carcinoma

Correct Answer - A
Ans. is 'a' i.e., Common in male

41. Not true regarding hirschsprung disease is ?

a) Autosomal dominant

b) Absent ganglionic cells in myentric plexus

c) Absent ganglionic cells in submucous plexus

d) Rectal biopsy is diagnostic

Correct Answer - A

Ans is 'a' ie Autosomal dominant

- *Hirschsprungs ds or Aganglionic megacolon or Congenital megacolon*
- is a congenital disorder d/t absence of ganglion cells in the neural plexus ie both myentric (Aurebach's) and submucosal (Meissner's) plexus of the intestinal wall.
- There *is* accompanying hypertrophy of the nerve trunks.
- MC site is *rectosigmoid colon*.* (or *Rectum*, more specifically)*
- The Clinical picture varies from acute intestinal obstruction in neonates to chronic constipation in later life.
- *One imp feature which distinguishes Hirschsprungs disease from other types of constipation is that fecal soiling is not a feature of HD.*
- M: F ratio is 4: 1
- Diagnosis:
- Barium enema: The *initial diagnostic step* in a newborn with radiographic evidence of a distal bowel obstruction is a barium enema. In a normal barium enema study, the rectum is wider than the sigmoid colon. In patients with Hirschsprung's disease, this relationship is reversed.
- Rectal biopsy ?
 - *Diagnosis can be confirmed by full thickness rectal biopsy. Rectal biopsy is the gold standard for the diagnosis of Hirschsprung's*

disease.

The histopathologic features of Hirschsprung's disease are:

Absent ganglia,
hypertrophied nerve trunks, and
increased acetylcholinesterase staining

- Anorectal manometry ?
 - is a useful screening test in constipated young child or adult who is otherwise fit.
- Treatment of choice
 - *' is pull-through procedure in which normally innervated colon is anastomosed to the distal rectum just above the internal sphincter, thus bypassing the contracted aganglionic segment and restoring normal defecation.*
- *Option a*

Most of the cases are *sporadic*, Familial cases also occur but their inheritance pattern is not clear.

42. Colonic diverticulosis is best diagnosed by

a) Colonoscopy

b) Nuclear scan

c) Barium enema

d) CT scan

Correct Answer - C

Ans. is 'c' i.e. Barium enema

"Diverticula are best seen on barium enema. Colonoscopy is a less sensitive means of detecting diverticula."

- CMTD 2007

- Diverticulosis refers to presence of multiple diverticula
 - Diverticulitis refers to inflammation and infection associated with a diverticulum.
- Best investigation for*
Diverticulosis - Barium enema
Diverticulitis - CT scan
- On barium enema diverticulosis shows characteristic '*saw tooth*' appearance

43. Which one of the following statements is *incorrect* regarding Meckel's diverticulum?

a) Is found on the anti-mesenteric border of the small intestine

b) Consists of mucosa without a muscle coat

c) Heterotopic gastric mucosa can ulcerate and cause a brisk gastrointestinal bleed

d) A fibrous band between the apex and umbilicus can cause intestinal obstruction

Correct Answer - B

Ans. is 'b' i.e. Consists of mucosa without a muscle coat

A diverticulum consisting of mucosa without a muscle coat is a feature of *false* or *acquired* diverticulum, whereas Meckel's diverticulum is a *true* diverticulum and consists of all the 3 layers of the gut - the *mucosa*, the *muscularis* & outer *scrosa*.

44. Meckel's diverticulum, true are A/E :

a) Has three layers with artery

b) Heterotopic epithelium in 50-60% cases

c) Always gastric epithelium

d) May present with hemorrhage

Correct Answer - C

Ans. is 'c' i.e. Always gastric epithelium

45. Which polyp has maximum malignant potential ?

a) Sessile

b) Pedunculated

c) Superficial spreading

d) Any of the above

Correct Answer - A

Ans. is 'a' i.e., Sessile

- *Polyp* → *Polyp is a grossly visible protrusion from the mucosal surface and it is classified pathologically as.*
 - a) *Adenomatous polyp*
 - b) *Juvenile polyp (hamartomatous polyps)*
 - c) *Inflammatory polyp*
 - d) *Hyper plastic polyp (hyperplastic mucosal proliferation)*
- **Adenomatous polyps**
These are *pre-malignant* lesions. The risk of malignant degeneration is related to both the size and type of polyp. Majority of colorectal carcinomas evolve from adenomatous polyps; this sequence of events is the *adenoma–carcinoma sequence*.
- **Hamartomatous Polyps (Juvenile Polyps)**
In contrast to adenomatous polyps, hamartomatous polyps (juvenile polyps) are *not usually pre-malignant*. These lesions are the characteristic *polyps of childhood* but may occur at any age.
- **Inflammatory Polyps (Pseudopolyps)**
Inflammatory polyps occur most commonly in the context of inflammatory bowel disease, but may also occur after amebic colitis, ischemic colitis, and schistosomal colitis.
These lesions are *not pre-malignant*.

- **Hyperplastic Polyps**
Hyperplastic polyps are the most common colonic polyps, but they are usually quite small (Ninety percent of these polyps are less than 3 mm in size)
These lesions are *not premalignant*.
- *Adenomatous polyps have special clinical significance because only adenomatous polyps are clearly premalignant, and only a minority of these adenomatous lesions ever develop into a cancer.*
Clinically, the probability of an adenomatous polyp becoming a cancer depends on three factors
 - 1) Gross appearance of the lesion → on gross appearance polyps are of two types
 - a) Pedunculated (stalked)
 - b) Sessile (flat based)Cancer develops more frequently in sessile polyps.
 - 2) Histologically → Histologically polyps are of 3 types
 - a) Tubular
 - b) Villous (papillary)
 - c) TubulovillousOut of these histological types villous adenomas which are usually sessile become malignant more than 3 times as often as tubular adenomas.

46. What is the most commonly involved in carcinoma colon -

a) Caecum

b) Rectosigmoid colon

c) Transverse colon

d) Ascending colon

Correct Answer - B
Ans. is `b' Rectosigmoid colon

47. Thumb printing is characteristic of -

a) Crohn's disease

b) Ischemic colitis

c) LGV

d) Ulcerative colitis

Correct Answer - B
Ans. is 'b' i.e., Ischemic colitis

48. Which of the following organisms produces signs and symptoms that mimic acute appendicitis?

a) Enteropathic *Escherichia coli*

b) *Enterobius vermicularis*

c) *Trichomonas hominis*

d) *Yersinia enterocolitica*

Correct Answer - D

Ans. is 'd' i.e., *Yersinia enterocolitica*

49. A 10 month old infant presents with acute intestinal obstruction. Contrast enema X-ray shows the intussusceptions, Likely cause is

a) Payers patch hypertrophy

b) Mekel's diverticulum

c) Mucosal polyp

d) Duplication cyst

Correct Answer - A

Ans. is 'a' i.e., Peyer's Patch Hypertrophy

- Bailey writes - *"The condition is encountered most commonly in children, in whom it occurs in an idiopathic form, with a peak incidence at 3-9 months. Between 70% and 90% cases are classed as idiopathic, and an associated illness such as gastroenteritis or urinary tract infection is found in 30%. It is believed that hyperplasia of Peyer's patches in the terminal ileum may be the initiating event. This may occur secondary to weaning. In light of the seasonal variation, with peak incidence in spring and summer, it may be related to upper respiratory tract infection pathogens such as adenovirus or rotavirus."*
- Intussusception associated with a known pathologic lead point is seen in older children. The *most common* lead point is *Meckel's diverticulum*.
- This patient is 10 months old, so most likely the cause should be hypertrophy of Peyer's patches.

50. True about Ogilvie's syndrome are all except:

a) It is caused by mechanical obstruction of the colon

b) It involves entire / part of the large colon

c) It occurs after previous surgery

d) It occurs commonly after narcotic use

Correct Answer - A

Ans is 'a' ie. It is caused by mechanical obstruction of the colon

Ogilvie syndrome, or acute colonic pseudo-obstruction (ACPO), is a clinical disorder with the signs, symptoms, and radiographic appearance of an acute large bowel obstruction *with no evidence of actual physical cause of the obstruction*. The colon may become massively dilated; if not decompressed, the patient risks perforation, peritonitis, and death.

Pseudo-obstruction most commonly occurs in *hospitalized patients* and is associated with the use of *narcotics*, bed rest, and co-morbid disease.

Pseudo obstruction may present in acute or chronic forms. Acute form (the *Ogilvie's syndrome*) usually involves only the colon whereas chronic or recurrent form affects other parts of GIT as well. Chronic form usually presents as bouts of sub acute and partial intestinal obstruction, and tends to periodically recur.

Etiology

- Exact pathogenesis of the syndrome is unknown and it has been assoc. with a heterogenous group of cond.
- Primary pseudo-obstruction is a *motility disorder*
 - *Familial visceral myopathy*

- *Sporadic visceral myopathy*
- Secondary pseudo obstruction
 - *is more common* associated with following conditions.

Diagnosis

- *Acute colonic pseudoobstruction should be suspected when a medically ill patient suddenly develops abd. distention. The abdomen is tympanic and usually non-tender, and bowel sounds are usually present. Symptoms of true obstruction may appear late. Plain x-rays of the abdomen show marked gaseous distention of the colon. Right and transverse segments tend to be most dramatically affected with a cutoff at the hepatic or splenic flexure.*
- The most useful investigation is a *water-soluble contrast enema* that can reliably differentiate between mechanical obstruction and pseudo-obstruction.

Treatment

- Initial treatment consists of nasogastric decompression, replacement of extra cellular fluid deficits, and correction of electrolyte abnormalities. All medications that inhibit bowel motility, such as opiates, anticholinergics, are discontinued. Most patients respond to this conservative treatment.
- In patients who fail to improve, *Neostigmine*, a parasympathomimetic agent is highly effective.
- *Colonoscopic decompression* can be tried if an expert is available as it carries the risk of perforation. Recurrence rate is also high.
- In comparison neostigmine has a low recurrence rate, but may produce profound bradycardia and should be avoided in patients with cardiopulmonary disease.

51. The commonest cause of intestinal obstruction in a 30 yr. old Indian female

a) TB stricture

b) Crohn's ds.

c) Post op. adhesions

d) Adenocarcioma

Correct Answer - C
Ans. is 'c' i.e. Post op. adhesions

52. Most common neoplasm of appendix is -

a) Lymphoma

b) Adenocarcinoma

c) Leiomyosarcoma

d) Argentaffinoma

Correct Answer - B

Ans. is 'b' i.e. Adenocarcinoma

Recent editions of both Sabiston and Schwartz write that now Carcinoid tumor (i.e. Argentaffinoma) is not the most common tumor of the appendix. Mucinous adenocarcinoma is the most common tumor of the appendix.

Read below:

Sabiston writes- "Although it was previously believed that carcinoid tumors were the most common appendiceal neoplasms, analysis of the Surveillance, Epidemiology, and End Results (SEER) database indicates that mucinous tumors of the appendix are more common."

Schwartz writes- "Data from the SEER program identified mucinous adenocarcinoma as the most frequent histologic diagnosis (38% of total reported cases), followed by adenocarcinoma (26%), carcinoid (17%), goblet cell carcinoma (15%), and signet-ring cell carcinoma (4%)"

Remember these important points about Carcinoid tumor of appendix

- Carcinoid tumours are neuroendocrine tumors arising in the argentaffin tissue (Kulchitsky cells of crypts of Lieberkuhn)
- They frequently contain sustentacular cells that express S-100
- These tumours can occur in any part of the appendix but most common site is distal third i.e. tip of appendix.

- Unlike carcinoid tumours arising in other parts of the G.I.T., *it rarely gives rise to metastasis.*

53. True statement (s) about indirect inguinal hernia ?

a) 25% is bilateral

b) In children, if inguinal (indirect) hernia is present in one side, then processus vaginalis is intact on other side

c) In Bubonocoele, sac lies in the inguinal canal

d) b and c

Correct Answer - D

Ans. is 'b' i.e. In children, if inguinal (indirect) hernia is present in one side, then processus vaginalis is intact on the other side; 'c' In bubonocoele, sac lies in the inguinal canal

Important points about Indirect Inguinal hernia

- In Indirect inguinal hernia the contents of the abdomen *enter the deep inguinal ring* and traverse the whole length of the inguinal canal to come out through the *superficial inguinal ring*.
- It is the *most common* of all forms of hernia.
- It is most common in the young (cf. *a direct hernia is most common in the old*)
- More common in males (*-20 times*)
- It is more common on the right side.
- It is bilateral in *12% of cases*.
- Indirect inguinal hernia usually occurs when there is a *partially or completely patent processus vaginalis* (although *multiple other factors* are responsible for formation of indirect inguinal hernia, patent processus vaginalis seems to be the prime factor)
- *"If both sides are explored in an infant presenting with one hernia, the incidence of a patent processus vaginalis on the other side is 60%" - Bailey & Love*

- *Indirect Inguinal hernias are classified into 3 types*
 - a) *Bubonocele: in this case the hernia is limited in the inguinal canal.*
 - b) *Funicular : here the processus vaginalis is closed at its lower end just above the epididymis. The contents of the hernial sac can be felt separately from the testis which lies below the hernia.*
 - c) *Complete (or Vaginal): here the processus vaginalis is patent throughout. The hernial sac is continuous with the tunica vaginalis of the testis. The hernia descends down to the bottom of scrotum and it is difficult to differentiate the testis from the hernia.*
- *Surgery is the treatment of choice*

54.

A pt. operated for direct inguinal hernia developed anesthesia at the root of the penis and adjacent part of the scrotum the nerve likely to be injured is ?

a) Genital br. of genitofemoral nerve (supply dartos muscle)

b) Femoral br. of genitofemoral nerve

c) Iliohypogastric nerve

d) Ilioinguinal nerve

Correct Answer - D

Ans. is 'd' i.e. ilioinguinal nerve

- All the three nerves ie genitofemoral, ilioinguinal & iliohypogastric are branches of the lumbar plexus and all may be injured in op. for hernia.
 - Ilioinguinal-Nerve enters the inguinal canal by piercing the internal oblique muscle (not through the deep ring)*
 - it then emerges from the superficial inguinal ring to supply skin of
 - *proximomedial skin of the thigh*
 - *skin over the penile root.*
 - *upper part of the scrotum*
 - Iliohypogastric nerves
 - divides into two branches - lateral cutaneous and anterior cutaneous.
 - lateral cutaneous supplies - *posterolateral gluteal skin*
 - Anterior cutaneous supplies - *suprapubic skin*
- Genitofemoral nerve**
divides into two branches

- *Genital and*
- *Femoral*
Genital br of Genitofemoral nerve - enters the inguinal canal at its deep ring and supplies
 - *the Cremaster**
 - *the scrotal skin**Femoral br of genitofemoral nerve
 - passes behind the inguinal ligament, enters the femoral sheath lateral to femoral artery*, pierces the ant layer of the femoral sheath and fascia lata and supplies the skin *anterior to the upper part of femoral triangle.*
- From these descriptions it is obvious that the nerve likely to be injured is ilioinguinal nerve.

55. Umbilical hernia in a child - indication for surgery is/are

a) Failure to disappear by 3 years

b) > 2 cm size

c) Symptomatic

d) All of the above

Correct Answer - D

Ans. is 'd' i.e., All of the above

- Umbilical hernia is d/t fascial defect at the umbilicus
- Treatment
- Most hernias close spontaneously by 1 yr of age. Even larger hernias are known to disappear spontaneously by 5-6 yrs of age
- Surgery is advised for hernias
 - *persisting beyond 4-5 yrs*
 - *causing symptoms*
 - *becoming strangulated*
 - *defect exceeding 2 cm*
 - *progressively enlarging hernia after the age of 1-2 yrs.*
- Strapping is ineffective

56. The most sensitive imaging modality to detect early renal tuberculosis is ?

a) Intravenous urography

b) Computed tomography

c) Ultrasound

d) Magnetic Resonance Imaging

Correct Answer - A

Ans. is 'a' i.e. Intravenous urography

- In early renal tuberculosis, the only radiological abnormality may be *irregularity or destruction of one or more papillae* and the most sensitive modality to detect it is IUV as it can show detailed calyceal anatomy.
- Advanced changes are :?
 - a) Calcification - this may occur in any part of genitourinary tract, most commonly in kidney, next in ureter.
 - b) Cavities
 - c) Fibrosis leading to obstruction
 - fibrotic strictures of the pelvis or ureters lead to hydronephrosis
 - strictures of the calyceal neck leads to hydrocalyces (or hydrocalicosis)
 - d) Bladder changes
 - bladder wall may appear thickened and trabeculated and bladder may be small, contracted. - in later stages VUR may develop
- Computed tomography shows advanced changes well, but is less sensitive in early stages as it cannot show detailed calyceal anatomy.



57. The recommended treatment for preputial adhesions producing ballooning of prepuce during micturition in a 2-year-old boy is -

a) Wait and watch policy

b) Circumcision

c) Dorsal slit

d) Preputial adhesions release and dilatation

Correct Answer - B

Ans is 'b' circumcision

- Ballooning of prepuce during micturition is suggestive of phimosis.

Phimosis

- When the opening of the prepuce is so small that it cannot be retracted over the glans penis, the condition is called phimosis.

- Phimosis is of two types

(1) Congenital

(2) Acquired - It usually presents late in life and is associated with:

?

(a) *Inflammation**

(c) *Balanitis xerotica obliterans*

(b) *Trauma**

(d) *Cancer*

- Clinical features
- Difficulty in micturition : It is the main symptom. In a case of typically congenital phimosis the mother complains that when the child micturates *the prepuce balloons out* and the urine comes out in thin stream.
- In old cases patient presents with
 - (i) recurrent balanitis (inflammation of glans) causing pain and

purulent discharge

(ii) paraphimosis (the tight foreskin gets retracted and stuck behind the glans penis)

- Complications

(a) *Balanoposthitis* — (inflammation of glans and prepuce) (d) *Hydroureter, hydronephrosis*

(b) *Prepuccial stones or calculus*

(e) *Carcinoma*

(c) *Paraphimosis*

- Treatment- the treatment is circumcision * Note — *If phimosis is associated with considerable infection dorsal slit is performed.*

58. All of the following can be done in a case of pelvic fracture with pelvic hematoma and had not passed urine since trauma EXCEPT -

a) Pass indwelling urethral catheter

b) IV fluid infusion

c) IV pyelography

d) Digital per rectal examination

Correct Answer - A

Ans is A ie. Pass indwelling Urethral catheter

59. First line t/t for keloid is-

a) Intralesional injection of steroid

b) Local steroid

c) Radiotherapy

d) Wide excision

Correct Answer - A

Ans. is a' i.e. Intralesional injection of steroid

- Intralesional injection of steroid (Triamcinolone acetate) is now recommended as the first line of t/t for keloids [Ref Schwartz 9/e p226 (8/e p241)]
- Intralesional injection of Triamcinolone is also the t/t of choice for intractable hypertrophic scars. Success is enhanced when it is combined with surgical excision [Ref CSDTI 3/e p1105 (11/e, p1243)]
- Other modalities of t/t used for keloids are:
 - a) Surgery**
 - surgical excision alone leads to a high recurrence rate.
 - there are fewer recurrences when surgical excision is combined with other modalities such as intralesional corticosteroid injection, topical application of silicone sheets or the use of radiation or pressure.
 - surgery is recommended for debulking large lesions.
 - b) Radiation therapy**
 - it may produce unpredictable results and has obvious potential side effects including neoplastic degeneration; and has high recurrence rate when used alone.
- .. Silicone sheet application
- ?. Pressure application
- }. Topical retinoids

60. C.V.P. (Central Venous Pressure) and pulmonary wedge pressure give an accurate assessment of all the following except -

a) Tissue perfusion

b) Volume depletion

c) Volume overload

d) Myocardial function

Correct Answer - A
Ans. is 'a' i.e., Tissue perfusion

61. Which of the following graft is known as wolf's graft

a) Split thickness graft

b) Full thickness graft

c) Partial thickness graft

d) Myocutaneous graft

Correct Answer - B

Ans is 'b' ie Full thickness graft

- Wolfes graft —) Full thickness graft
- Thiersche graft --> Partial thickness graft

62. In hand injury first structure to be repaired should be?

a) Skin

b) Nerve

c) Muscle

d) Bone

Correct Answer - D

Ans is 'd' i.e. Bone

CSDT 13/e p1149 writes -"Bone must first be stabilized with K wires or metal plates before vascular repairs are performed. Arterial and venous repairs are done with microscopic magnification, and the ischemic tissue is reperfused."

Sabiston 18/e p1995 writes-"Although control of active hemorrhage is always a top priority, reconstruction of injured vessels must be carefully orchestrated with the management of bone and soft tissue injuries. It is preferable to achieve bone alignment before vascular reconstruction because orthopedic manipulation and reconstruction takes time and may disrupt the vascular repair. Thus, if the limb is not grossly ischemic, reduction and fixation of fractures is performed first. If the limb is ischemic, a temporary intraluminal shunt is inserted to maintain distal perfusion during the orthopedic procedure."

63. The term universal tumour refers to -

a) Adenoma

b) Papilloma

c) Fibroma

d) Lipoma

Correct Answer - D
Ans. is 'd' i.e., Lipoma

64. Commonest site for rodent ulcer is -

a) Inner canthus

b) Outer canthus

c) Angle of mouth

d) Cheek

Correct Answer - A
Ans. is 'a' i.e., Inner canthus

65. All are true statement about malignant melanoma except -

a) Clark's classification used for prognosis

b) Women have better prognosis

c) Acral lentigenous have better prognosis

d) Limb perfusion is used for local treatment

Correct Answer - C

Ans. is 'c' i.e., Acral lentigenous have better prognosis

66. Moh's micrographic excision for basal cell carcinoma is used for all of the following except -

a) Recurrent Tumour

b) Tumor less than 2 cm in diameter

c) Tumors with aggressive histology

d) Tumors with perineural invasion

Correct Answer - B

Ans. is 'b' i.e., Tumor less than 2 cm in diameter

Moh's micrographic surgery is indicated for tumors in areas (eg. eyelids or nose) where minimal amounts of tissue removal is important. Moh's surgery involves checking the base and edges under a *microscope* before the surgical repair of the site.

In Mohs micrographically controlled surgery, the clinically apparent tumor is often removed by curettage or excision. The surgeon then removes a *thin layer of tissue*, usually less than 1 mm in thickness, of surrounding epidermis and either dermis or subcutis, which then is examined under the microscope. The tumor is removed and processed to allow for localization of any tumor that might persist. This process allows the surgeon to take additional section (stages) from the location where the tumor persists.

- Advantages: Mohs micrographically controlled surgery has the highest cure rate of any treatment modality (99% for primary BCC, 90-95% for recurrent BCC), spares as much uninvolved skin as possible.
- Disadvantages: Mohs micrographic surgery is time consuming, and patients might require additional anesthesia before each stage. Indications for this technique include the following:

indications for this technique include the following.

a tumor of aggressive histopathology (infiltrative);

a large tumor (more than 2 cm in diameter and located on the face, more than 4 cm in diameter in other locations); a tumor in high-risk location (e.g., central face);

a tumor for which conservation of tissue or vital structures is necessary;

a radiation-induced tumor

If indicated Moh's micrographic surgery is the *treatment of choice* for basal cell carcinoma.

67. Most common site of peripheral aneurysm

a) Femoral artery

b) Radial artery

c) Popliteal artery

d) Brachial artery

Correct Answer - C

Ans is c i.e. Popliteal artery

- Popliteal artery aneurysm accounts for 70% of all peripheral aneurysms; two-thirds are bilateral.
- Almost all patients (97%) with popliteal artery aneurysms are male.
- Open surgical reconstruction with a *saphenous vein bypass* is the current gold standard for repair.

68. Surgery in varicose veins is NOT attempted in presence of -

a) Deep vein thrombosis

b) Multiple incompetent perforators

c) Varicose veins with leg ulcer

d) All of the above

Correct Answer - A

Ans. is 'a' i.e., Deep vein thrombosis

Deep vein thrombosis is a contraindication for tA of varicose veins. Varicose vein surgery should never be attempted in a case where deep vein thrombosis exists along with varicose veins, because in these cases superficial veins are the only valved venous pathway and excising them will only aggravate the condition.

69. MC abdominal organ injured in blunt trauma abdomen is -

a) Spleen

b) Liver

c) Pancreas

d) Stomach

Correct Answer - A

Answer is 'a' i.e. Spleen

"The spleen is the intra-abdominal organ most frequently injured in blunt trauma." - Sabiston 18/e

Blunt trauma : In blunt trauma the organs most commonly injured are the solid organs:

- *Spleen (MC)*
- *Liver*
- *Kidney*
- In addition to spleen, liver and kidney, extreme blunt force to the upper abdomen may fracture the Pancreas, which is susceptible to injury because of its position overlaying the rigid vertebral column.

Also know

- Deceleration injuries
- Commonly result from high speed motor vehicle accident and fall from considerable heights.
- the mechanism of injury is the *shearing of pedicled organs from their points of attachments to the retroperitoneum.*
- Pedicled organs in the abdomen are the intestines (Small and large) and the Kidney.

70. All are true about Flail chest, except:

a) Fracture of atleast 3 ribs

b) If overlapping of fractured ribs with severe displacement is seen then patients are treated surgically with open reduction and fixation

c) PaO₂60 treated with intubation and PEEP

d) Paradoxical movement may not be seen in conscious patients

Correct Answer - D

Ans is 'd' i.e. Paradoxical movement may not be seen in conscious patients

- Flail chest is simply when a portion of the bony chest wall loses its continuity from the remainder of the thorax due to multiple fractures. By definition, a flail chest occurs in the presence of two or more fractures in three or more consecutive ribs (*either on one side of the chest or either side of the sternum*) and causes instability of the chest wall: however, it can also occur after costochondral separation.
- Flail chest is characterized by *paradoxical motion* of the chest wall (inward with inspiration and outward with expiration). The chance of having an intrathoracic injury in this situation increases severalfold. The paradoxical motion increases the work of breathing, and the most important consequence of flail chest is respiratory failure.
- Until recently it was believed that ineffective air movement between both lungs caused by paradoxical motion of the chest wall was the main cause of the respiratory distress in patients with flail chest. It is now understood that underlying pulmonary contusion and pain during inspiration are the most important components in the pathophysiology of the respiratory failure.

Management:

Patients without evidence of respiratory distress can be managed with *only analgesia*. Pain control can be provided by an intercostal nerve block or more adequately by epidural anesthesia.

- If respiratory distress develops, endotracheal intubation and mechanical ventilation with peak end-expiratory pressure are usually indicated, provided that pain control is adequate.
 - Sequential arterial blood gas determination may gauge the severity of an injury and is useful to predict which patients will require ventilatory support. The ratio of arterial oxygen tension to the fraction of inspired oxygen (PaO₂:FiO₂ ratio) yields an estimate of the extent of intrapulmonary shunt and may be used as a parameter to determine the need for mechanical ventilation.
 - Schwartz 7/e p689 writes- "*Intubation is delayed until clear evidence of a need of ventilator support develops: a respiratory rate of 40/min, a falling PaCO₂ (evidence of excessive work of breathing) or a PaO₂ below 60 Corr on inspired O₂ fraction of over 0.5*"
 - General Thoracic Surgery By Thomas W. Shields 7/e p894 writes- "*Suggested parameters for instituting ventilator support are respiratory rate >30 breaths per minute, PaO₂ 45mm Hg.*"
- Open reduction plus internal fixation of sternal or rib fractures is rarely needed. [I could not get any text on indications of surgery in flail chest]

71. FAST is used for:

- a) Fast assessment of major visceral injuries
- b) To look for free intraperitoneal fluid at specific sites
- c) Fast assessment by CT scan to detect intraabdominal injuries
- d) Quick clinical assessment to decide about laparotomy

Correct Answer - B

Ans is 'b' i.e. To look for free intraperitoneal fluid at specific sites
Focused assessment with sonography for trauma (FAST) is the preferred triage method for determining the *presence of hemoperitoneum in blunt trauma patients or cardiac tamponade* in blunt and penetrating trauma patients. The presence of hemoperitoneum in an unstable patient on FAST may be an indication for exploratory laparotomy.

The goal of the FAST examination is the identification of abnormal collections of blood or fluid. In this regard, it obviates the need for diagnostic peritoneal lavage. The primary focus is on the peritoneal cavity, but attention is directed also to the pericardium and to the pleural space.

In the standard FAST examination, four areas are scanned: the right upper quadrant, the subxiphoid area, the left upper quadrant, and the pelvis.

72. Abbreviated laparotomy done for:

a) Coagulopathy

b) Hypotension

c) Early wound healing

d) Early ambulation

Correct Answer - A

Ans is a i.e. Coagulopathy

In critically injured patients, triad of *hypothermia*, *acidosis*, and *coagulopathy* is a vicious cycle that if uninterrupted, is rapidly fatal.

Abbreviated laparotomy is utilized to quickly achieve hemostasis.

Patients are then transported to the surgical ICU for vigorous correction of metabolic derangements and coagulopathies.

73. A person has been brought in casualty with history of road accident. He had lost consciousness transiently and gained consciousness but again became unconscious. Most likely, he is having brain hemorrhage of

a) Intracerebral

b) Subarachnoid

c) Subdural

d) Extradural

Correct Answer - D
Ans. is 'd' i.e. Extradural

74. Following are the features of raised intracranial tension except -

a) Altered sensorium

b) Papilloedema

c) Convulsions

d) Tachycardia

Correct Answer - D
Ans. is 'd' i.e., Tachycardia

75. Le Forte II facial fracture implies -

- a) Fracture running through alveolar ridge
- b) Fracture running through midline of the palate and zygomatico maxillary suture
- c) Fracture running through zygomatic process of the maxilla, floor of orbit, root of nose on one side only
- d) Similar to C but on both sides

Correct Answer - D

Ans. is 'd' i.e., Similar to C but on both sides

Le Fort Classification of Mid-face #s

- Le Fort I (transverse fracture)
the # line runs above & parallel to the palate and effectively separates the alveolus and palate from the facial skeleton above. it crosses the lower part of the nasal septum, maxillary antra and the pterygoid plates.
- Le Fort II fracture
it is pyramidal in shape and passes through the root of nose, lacrimal bone, floor of orbit, upper part of maxillary sinus and pterygoid plates. the orbital floor is always involved
- Le Fort III fracture (craniofacial dysjunction) there is complete separation of facial bones from the cranial bones.
the # line runs high through the nasal bridge, septum and ethmoids, and through the bones of orbit to the frontozygomatic suture. The zygomatic arch fractures and the facial skeleton is separated from the bones above at a high level through the lateral wall of maxillary sinus and the pterygoid plates.

76. The pre-malignant condition with the highest probability of progression to malignancy is

a) Dysplasia

b) Hyperplasia

c) Leuoplakia

d) Erythroplakia

Correct Answer - D

Ans. is 'd' i.e., Erythroplakia

Incidence of malignant change in erythroplakia is 17- fold higher than in leukoplakia.

77. The commonest pre-malignant condition of oral cancer is -

a) Leukoplakia

b) Aphthous ulcer

c) Lichen planus

d) Erythro-leukoplakia

Correct Answer - A

Ans. is 'a' i.e., Leukoplakia

Leukoplakia is the most common (-85%) of the premalignant lesions of the oral cavity.

78. In which one of the following conditions the sialography is contraindicated

a) Ductal calculus

b) Chronic parotitis

c) Acute parotitis

d) Recurrent sialadenitis

Correct Answer - C

Ans. is 'c' i.e. Acute parotitis

"Sialography is contraindicated in acute sialadenitis (includes parotitis) for fear of exacerbating the condition." -Sutton

79. True of carotid body tumor is ?

a) Non-chromaffin paraganglioma

b) Good prognosis

c) Rarely metastasises

d) All

Correct Answer - D

Answer is 'a' i.e. Non-chromaffin Paraganglioma; 'b' i.e. Good Prognosis; 'c' i.e. Rarely metastasises

80. The best treatment for cystic hygroma is -

a) Surgical excision

b) Radiotherapy

c) Sclerotherapy

d) Chemotherapy

Correct Answer - A

Ans. is 'a' i.e., Surgical Excision

Definitive treatment is complete excision of the cyst at an early age.

81. A known patient with renal stone disease developed pathological fractures along with abdominal pain and certain psychiatric symptoms. He should be investigated for ?

a) Polycystic kidney

b) Renal tubular acidosis

c) Hyperparathyroidism

d) Paget's disease of bone

Correct Answer - C

Ans. is 'c' i.e., Hyperparathyroidism

82. M. C. anterior mediastinum tumor is -

a) Thymoma

b) Neurogenic Fibroma

c) Lymphoma

d) Meningocele

Correct Answer - A
Ans is 'a' ie Thymoma

83. All are elaborated by small cell carcinoma lung, except

a) ADH

b) ACTH

c) 5-HT

d) Noradrenaline

Correct Answer - D
Answer is 'd' i.e. Noradrenaline

84. Structures pierced during pleural tapping are a/e

a) endothoracic fascia

b) pulmonary pleura

c) skin

d) intercostal muscle

Correct Answer - B

Ans is 'b' i.e. pulmonary pleura

Pleural space lies between the parietal pleura and the visceral (pulmonary) pleura. Parietal pleura lines the inner surface of the chest wall; visceral pleura is invested on the surface of the lung. Thus to reach the pleural space for pleural fluid tapping, parietal pleura is pierced and not the visceral pleura.

The usual location for pleural tapping is mid axillary line sixth, seventh or eighth intercostal space.

The structures pierced by the needle during pleural tapping in the mid axillary line are (in order):

1. Skin
2. Superficial fascia
3. Muscles
 - *Serratus anterior*
 - *External intercostal or Intercostales externi* - *Internal intercostal or Intercostales interni*
 - *Innermost intercostal or Intercostales intimi*
4. Endothoracic fascia
5. Parietal pleura

85. Commonest posterior mediastinal tumour is -

a) Lung cyst

b) Neurofibroma

c) Dermoid

d) Thyroid

Correct Answer - B
Ans. is 'b' i.e., Neurofibroma

86. All are seen in Thoracic outlet syndrome except ?

a) Mass in the Neck

b) Wasting of forearm muscles

c) Adson's test positive

d) Pallor

Correct Answer - B

Ans. is 'b' i.e., Wasting of forearm muscle

87. TRUE regarding management of traumatic pneumothorax is -

a) Immediate ICD tube insertion

b) CT-scan should be done to confirm pulmonary leak

c) Intermittent needle aspiration

d) Sealed

Correct Answer - A

Ans. is 'a' i.e., Immediate ICD tube insertion.

88. The most common benign tumor of the lung is ?

a) Hamartoma

b) Alveolar adenoma

c) Teratoma

d) Fibroma

Correct Answer - A
Ans. is 'a' i.e., Hamartoma

89. Glomus tumor is seen in

a) Liver

b) Adrenals

c) Pituitary

d) Finger

Correct Answer - D

Ans is d i.e. Finger

- The glomus tumor is a rare and benign vascular neoplasm that arises from the neuroarterial structure called a glomus body. The normal glomus body is located in the dermis throughout the body, but is more concentrated in the digits. They are believed to function in *thermal regulation*.
- The most common site of glomus tumors is *subungual* and 75% of the lesions occur in the hand.
- The lesions present most frequently during the fourth and fifth decade of life although they can be found in any age and at any site.
- The subungual tumors affect women three times more commonly than men.
- The lesions are usually solitary but multifocal tumors are also seen.
- Clinically, glomus tumors are characterized by a triad of
 - sensitivity to cold,
 - localized tenderness and
 - severe intermittent pain.The pain can be excruciating and is described as a burning or bursting.
- Grossly, the tumors are usually less than one cm. in size, and appear as small red-blue nodules. The lesion appears as a localized dark red or blue lesion beneath the finger nail, but the subungual

lesions can be difficult to detect on clinical examination.

- Two useful tests for diagnosing glomus tumors, particularly solitary painful glomus tumors (especially those under a nail) are the following:
 - disappearance of pain after application of a tourniquet proximally on the arm
 - eliciting pain by applying pressure to a precise area with the tip of a pencil
 - Treatment of glomus tumors consists of *surgical excision*.

90. False regarding Bochdalek hernia is -

a) Spleen and kidney can herniate

b) Occurs posterolaterally

c) Always occurs on right side

d) Hernia may or may not have sac

Correct Answer - C

Ans. is 'c' i.e., Always occur on the right side

- Bochdalek hernia occurs mostly on left side (80%)
- I have no idea about option 'd'

91. Air embolism in neural surgery maximum in which position:

a) Sitting

b) Supine

c) Trendelenburg

d) Left lateral

Correct Answer - A
Ans is 'a' i.e. Sitting

92. All of the following operations for morbid obesity are restrictive, Except:

a) Vertical banded gastroplasty

b) Adjustable gastric banding

c) Roux-en-Y gastric bypass

d) Duodenal switch

Correct Answer - D
Ans is 'd' i.e Duodenal switch

93. Fogarty's catheter is used for?

a) urethral catheterization

b) removal of blood clots from the arteries

c) bladder drainage

d) TPN

Correct Answer - B

Ans is b i.e. removal of blood clots from the arteries

Fogarty's catheter is arterial embolectomy catheter.

It is used for removal of fresh, soft emboli and thrombi from arteries.

It is named after its inventor- Dr. Thomas J. Fogarty.

94. Duret haemorrhage is seen in:

a) Lung

b) Endocardium

c) Middle ear

d) Brain

Correct Answer - D

Ans is `d' i.e. Brain

Duret haemorrhages are small brainstem hemorrhages secondary to descending transtentorial herniation and brainstem compression caused due to increased ICT.

95. Ramsted's operation is for -

a) Duodenal atresia

b) Volvulus of small intestine

c) Anorectal malformation

d) Congenital pyloric stenosis

Correct Answer - D

Ans. is 'd' i.e., Congenital pyloric stenosis

96. No man's land in palm corresponds to -

a) Zone I

b) Zone II

c) Zone III

d) Zone IV

Correct Answer - B
Ans. is 'b' i.e., Zone II

97. Which is the baseline investigation in the case of an acute abdomen in this high - tech era -

a) Abdomen CT

b) Abdomen X - Ray

c) USG

d) Colonoscopy

Correct Answer - B
Ans. is 'b' i.e., Abdomen X-Ray

98. A 60 year old lady underwent abdominal surgery and on the 4th post - operative day she was diagnosed to have Systemic Inflammatory Response Syndrome (SIRS). What are the features of SIRS ?

a) Normal body temperature and normal respiratory rate

b) WBC > $12 \times 10^9/L$ or < $4 \times 10^9/L$

c) Respiratory rate > 24 breaths/minute and heart rate > 90 beats/minute

d) b and c

Correct Answer - D

Ans. Two options are correct i.e. ' b & c'

Two or more of the following conditions define SIRS :

- (1) fever (oral temperature $>38^\circ\text{C}$) or hypothermia ($<36^\circ\text{C}$);
- (2) tachypnea (>24 breaths/min);
- (3) tachycardia (heart rate >90 beats/min);
- (4) leukocytosis ($>12,000/\text{micro L}$), leukopenia ($<4,000/\text{micro L}$), or $>10\%$ bands

99. T1 and T2 images are a feature of which diagnostic test-

a) Ultrasound

b) C.T. scan

c) Duplex scan

d) MRI scan

Correct Answer - D
Ans. is 'd' i.e., MRI scan

100. MC late complication of central venous line:

March 2013 (f)

a) Air embolism

b) Thromboembolism

c) Cardiac arrhythmias

d) Sepsis

Correct Answer - D

Ans. D i.e. Sepsis

Central venous lines (CVLs)

- They are routinely used for monitoring and the administration of total parenteral nutrition (TPN) and medications in almost all critical / intensive care units (CCUs).
- Central venous access is normally obtained by cannulation of the internal jugular, the subclavian, or the femoral veins.
- Central venous access may also be obtained from more distal sites, typically the basilic and brachial veins, using a peripherally inserted central catheter (PICC).
- However, intravascular catheters are often associated with serious complications, such as catheter-related bloodstream infection.

101. All of the following can be used to predict severe acute pancreatitis EXCEPT:
September 2012

a) Glasgow score 3

b) APACHE II score 9

c) CT severity score 6

d) C-reactive protein < 100

Correct Answer - D

Ans. D i.e. C-reactive protein < 100

Acute pancreatitis

- MC cause: Gallstones
- Investigation which can cause acute pancreatitis: ERCP
- Grey turner sign: Blue-red-purple or green-brown discoloration due to catabolism of hemoglobin
- Diagnosis: Fecal fat estimation,
- CT scan is the diagnostic modality
- Best prognosis: Gall stone pancreatitis
- Recurrent pancreatitis occurs in: Methyl malonic acidemia
- Conditions with raised serum amylase:
 - Pancreatitis,
 - Renal failure,
 - Ruptured ectopic pregnancy etc.

102. Charcot's triad is defined by all of the following except:

September 2007, March 2009

a) Fever

b) Gall stones

c) Jaundice

d) Pain

Correct Answer - B

Ans. **B:** Gall stones

Cholangitis is due to partial or complete obstruction of the biliary tree with resulting bile stasis and secondary bacterial or microbial infection of the biliary tree

Causes ?

- Common bile duct stones
- Benign biliary stricture (primary sclerosing cholangitis)
- Malignancy (head of pancreas adenocarcinoma, ampulla of Vater, bile duct tumors)
- Chronic pancreatitis
- Prosthesis or stents in the common bile duct

Features:

- Charcot's triad - right upper quadrant pain, fever, jaundice
- Reynolds' pentad - right upper quadrant pain, fever, jaundice, hypotension, and mental status changes (delirium, anxiety, and coma)
- Nausea and/or vomiting
- Right upper quadrant tenderness (mild to moderate)

**103. Which of the following describes
Richter's hernia:
September 2009**

- a) The strangulated loop of 'W' lies within the abdomen
- b) Hernia occurring at the level of arcuae line
- c) Involves only a portion of the circumference of the bowel.
- d) Hernia occurring through the linea alba

Correct Answer - C

Ans. C: Involves only a portion of the circumference of the bowel. The Richter hernia occurs when only the antimesenteric border of the bowel herniates through the fascial defect. The Richter hernia involves only a portion of the circumference of the bowel.

As such, the bowel may not be obstructed, even if the hernia is incarcerated or strangulated, and the patient may not present with vomiting.

The Richter hernia can occur with any of the various abdominal hernias and is particularly dangerous, as a portion of strangulated bowel may be reduced unknowingly into the abdominal cavity, leading to perforation and peritonitis. The strangulated loop of 'W' lies within the abdomen, so that local tenderness over the hernia is not marked is a feature of Maydl's hernia.

104. Prostatic carcinoma commonly arises from:
March 2012

a) Central zone

b) Peripheral zone

c) Transitional zone

d) None of the above

Correct Answer - B

Ans: B i.e. Peripheral zone

Zones of prostate & clinical importance

- Central zone (CZ) lies posterior to the urethral lumen & above the ejaculatory ducts.
- Peripheral zone (PZ) lies posteriorly & from this, most carcinoma arises
- There is a periurethral transitional zone (TZ), from which most benign prostatic hyperplasia (BPH) arises.

**105. False statement regarding fibroadenoma:
*March 2011***

a) Painless

b) Unilateral

c) Responds well to hormone

d) Firm

Correct Answer - C

Ans. C: Responds well to hormone

106. Raised Intra cranial Pressure will cause:
March 2007

a) Tachycardia

b) Hypotension

c) Papilloedema

d) Normal looking anterior fontanelle in infants

Correct Answer - C

Ans. C: Papilloedema

ICP at rest is normally 7-15 mmHg for a supine adult, and becomes negative (averaging "10 mmHg) in the vertical position. Increased ICP

One of the most damaging aspects of brain trauma and other conditions, directly correlated with poor outcome, is an elevated intracranial pressure.

The body's response to a decrease in CPP is to raise blood pressure and dilate blood vessels in the brain.

This results in increased cerebral blood volume, which increases ICP, lowering CPP further and causing a vicious cycle. Neurologic changes seen in increased ICP are mostly due to hypoxia and hypercapnea and are as follows: decreased LOC, Cheyne-Stokes respirations, hyperventilation, sluggish dilated pupils and widened pulse pressure.

Signs and symptoms of increased ICP

In general, symptoms and signs that suggest a rise in ICP including headache, nausea, vomiting, ocular palsies, altered level of consciousness, and papilledema.

If papilledema is protracted, it may lead to visual disturbances, optic atrophy, and eventually blindness.

In addition to the above, if mass effect is present with resulting displacement of brain tissue, additional signs may include pupillary dilatation, abducens (CrN VI) palsies, and the Cushing's triad. Cushing's triad involves an increased systolic blood pressure, a widened pulse pressure, bradycardia, and an abnormal respiratory pattern.

In children, a slow heart rate is especially suggestive of high ICP. Irregular respirations occur when injury to parts of the brain interfere with the respiratory drive.

In infants and small children, the effects of ICP differ because their cranial sutures have not closed. In infants, the fontanelles, or soft spots on the head where the skull bones have not yet fused, bulge when ICP gets too high.

107. Surgery of choice for pleomorphic adenoma is:

September 2007, 2010

a) Total parotidectomy

b) Superficial parotidectomy

c) Total parotidectomy with lymph node dissection

d) Radical parotidectomy

Correct Answer - B

Ans. B: Superficial parotidectomy

The pleomorphic adenoma is by far the most common benign salivary gland tumor, accounting for as many as 80% of all such tumors.

Although almost one half of tumors found in the minor salivary glands are malignant, the pleomorphic adenoma is still the most common tumor in these glands.

The current standard is that all pleomorphic adenomas should be surgically removed because the risk of malignancy is 25% if the tumors are left untreated.

All the tumours of the superficial lobe of the parotid gland should be managed by superficial parotidectomy (Superficial parotidectomy is the commonest procedure done for parotid gland pathology)

Radical parotidectomy is done when there is clear histological evidence of a high grade malignant tumour.

108. True about flail chest are all except:
March 2007

a) Ultimately leads to respiratory failure

b) Paradoxical respiration

c) Fracture of 3-4 ribs

d) Mediastinal shift

Correct Answer - D

Ans. D: Mediastinal shift

A flail chest occurs when multiple adjacent ribs are broken in multiple places, i.e. three or more ribs fractured in two or more places, separating a segment, so a part of the chest wall moves independently.

Flail chest is invariably accompanied by pulmonary contusion, that can interfere with blood oxygenation. Often, it is the contusion, not the flail segment, that is the main cause of respiratory failure.

The characteristic paradoxical motion of the flail segment occurs due to pressure changes associated with respiration that the rib cage normally resists:

During normal inspiration, the diaphragm contracts and intercostal muscles push the rib cage out. Pressure in the thorax decreases below atmospheric pressure, and air rushes in through the trachea. However, a flail segment will not resist the decreased pressure and will appear to push in while the rest of the rib cage expands.

During normal expiration, the diaphragm and intercostal muscles relax, allowing the abdominal organs to push air upwards and out of the thorax. However, a flail segment will also be pushed out while the rest of the rib cage contracts. The constant motion of the ribs in the flail segment at the site of the fracture is incredibly painful, and,

untreated, the sharp broken edges of the ribs are likely to eventually puncture the pleural sac and lung, possibly causing a pneumothorax.

109. False statements about carcinoma esophagus are all of the following except:
March 2007

a) Most common in lower third

b) Histologically, adenocarcinoma only

c) Unrelated to tobacco chewing

d) It is more common in females

Correct Answer - A

Ans. A: Most common in lower third

There are a number of risk factors for esophageal cancer:

- Age-Most patients are over 60.
- Gender-It is more common in men.
- Heredity-It is more likely in people who have close relatives with cancer.
- Tobacco smoking and heavy alcohol use increase the risk. Gastroesophageal reflux disease (GERD) and its resultant Barrett's esophagus increase esophageal cancer risk due to the chronic irritation of the mucosal lining (adenocarcinoma is more common in this condition, while all other risk factors predispose more for squamous cell carcinoma).
- Human papillomavirus (HPV)
- Particular dietary substances, such as nitrosamine.
- Plummer-Vinson syndrome (anemia and esophageal webbing)
- Tylosis and Howel-Evans syndrome (hereditary thickening of the skin of the palms and soles).
- Radiation therapy for other conditions in the mediastinum.

- Celiac disease predisposes towards squamous cell carcinoma.
- Carcinoma may develop at the achalasia segment due to persistent retention esophagitis as a result of fermentation of food residues. The location of the tumor is generally measured by the distance from the teeth.

The esophagus (25 cm or 10 inches long) is commonly divided into three parts for purposes of determining the location.

Adenocarcinomas tend to occur distally and squamous cell carcinomas proximally, but the converse may also be the case.

Worldwide squamous cell carcinoma is most common whereas adenocarcinomas predominates in the west.

Squamous cell carcinomas are similar to head and neck cancer in their appearance and association with tobacco and alcohol consumption.

Adenocarcinomas are often associated with a history of gastroesophageal reflux disease and Barrett's esophagus.

Endoscopy is the first line investigation for most patients.

110. Cystic hygroma may be associated with:
March 2005

a) Turner's syndrome

b) Klinefelter's syndrome

c) Down's syndrome

d) All of the above

Correct Answer - D

Ans. D: All of the above

Karyotypic abnormalities are present in 25-70% of children with Cystic Hygroma.

CH has been noted to be more common in persons with:

- Turner's syndrome
- Klinefelter's syndrome
- Down's syndrome

In addition, several nonchromosomal disorders, including Noonan syndrome, Fryns syndrome, multiple pterygium syndrome, and achondroplasia, are associated with an increased incidence of CH. Intrauterine alcohol exposure has been associated with the development of lymphangiomas. Dissolution of bone caused by either lymphangiomas or hemangiomas is termed Gorham-Stout syndrome

111.

Radical neck dissection involves all except ?

a) Sternocleidomastoid muscle

b) Internal jugular vein

c) Vagus nerve

d) Spinal Accessory nerve

Correct Answer - C

Radical neck dissection

During radical neck dissection, **following are removed.**

Lymph nodes of submental, submandibular, upper, middle and lower jugular, and lateral (posterior) triangle regions, i.e. Level I to V along with its fibrofatty tissue.

- Sternomastoid muscle.
- Internal jugular vein.
- Spinal accessory nerve.
- Submandibular salivary gland.
- Tail of the parotid.
- Omohyoid muscle.
- **Following structures are saved ?**

.. Carotid artery

?. Brachial plexus, phrenic nerve, vagus nerve, cervical sympathetic chain, marginal mandibular branch of facial, lingual and hypoglossal nerve.

Modified neck dissection

- It is similar to radical neck dissection but with preservation of one or more following structures ?

.. Spinal accessory nerve

?. Internal jugular vein

3. Sternocleidomastoid muscle

- Thus, both radical neck dissection and modified radical neck dissection remove level I to V neck nodes.

112. Which of the following is not seen in tuberous sclerosis?

a) Giant cell astrocytoma

b) Subependymal nodule

c) White matter lesion

d) Ependymoma

Correct Answer - D

Ans. d. Ependymoma

Ependymoma is typically a feature of neurofibromatosis 2, but it can be seen in tuberous sclerosis as well, though it is much less common.

Seizures

- Seizures are the MC presenting symptom
- Infantile spasms may be the presenting feature during infancy

Mental Retardation

Mental Retardation occurs in up to 50% of patients referred to tertiary care

Characteristic brain lesion is a cortical 'Tuber'.

MC neurological manifestations: Seizures, cognitive impairment and behavioral abnormalities including autism.

Patients with seizures are more prone to mental retardation

Subependymal nodules which may calcify

Hydrocephalus

113. During resuscitation, fractured ribs most commonly involve:

a) 2nd–4th ribs

b) 3rd–5th ribs

c) 4th–6th ribs

d) 5th–7th ribs

Correct Answer - C

Ans. c. 4th — 6th ribs

Reasonable conclusions to be drawn from the literature in relation to rib fractures in adults

- Rib fractures following CPR in adults are quite common - 30 to 60% of prospective post-mortem studies.
- Post-CPR rib fractures are often bilateral.
- The site of rib fracture is dependent on: the position of the hands; force used; and method of chest compression (manual or device-assisted).
- *The vast majority (90%+) of fractures occur in ribs 2 to 7; fractures in the bony parts of rib numbers 1 and 8 to 10 are possible but probably very rare; it is difficult to see how fractures can occur in rib numbers 11 and 12 following standard manual CPR.*
- The vast majority of fractures (90%+) occur in the anterior third of the bony part of the rib, some occur in the middle third but - following standard manual CPR - none in the posterior third of the bony part of the rib.
- Posterior rib fractures occur following automated band-type CPR.
- Lateral fractures i.e. those occurring between the anterior and posterior axillary lines, do occur after standard CPR. If a fracture is

noted in rib numbers 10 to 12 or in the posterior third of the bony part of a rib, then non-resuscitation trauma should be suspected.

- Chest x-ray is unreliable as a diagnostic tool for detecting rib fractures.
- CT is better than x-ray and may complement the post-mortem detection of rib fractures.

Fractures are more common

- On the left side of the chest
- With increasing age of the patient
- In females
- With increasing length of time of resuscitation attempts Following the involvement of untrained persons
- With the use of ACD-CPR

114. Most common indication for liver transplant in children-

a) Biliary atresia

b) Cirrhosis

c) Hepatitis

d) Drug reactions

Correct Answer - A

Answer- A (Biliary atresia)

Explanation-

Indications for liver transplantation in infants and children include acute liver failure (ALF), chronic liver failure with pruritus, complications of cholestasis and failure to thrive. In young children, the most common liver disease leading to transplantation is biliary atresia

115. An 8 years old child has left sided flank pain and mental retardation. On ultrasound, a hyperechoic lesion in the right kidney and multiple lesions in the liver are noted. CT examination of the abdomen revealed -50 to -80 HU density of these lesions. The most probable diagnosis is:

a) Tuberous sclerosis

b) Hereditary hemangioblastoma

c) Autosomal recessive polycystic kidney disease

d) von Hippel-Lindau syndrome

Correct Answer - A

Answer- A (Tuberous sclerosis)

- AML is a benign clonal neoplasm consisting of varying amounts of mature adipose tissue, smooth muscle and thick-walled vessels.

116. Which is not true regarding the basis of functional divisions of Liver?

a) Based on portal vein and hepatic vein

b) Divided into 8 segments

c) There are three major and three minor fissures

d) 4 sectors

Correct Answer - B

Ans: B. Divided into 8 segments

(Ref Gray's 40/e p1165, 1166,1178; Sabiston 20/e p1484, 19/e p/1413-1417; Schwartz 10/e p1265, 9/e p1095; Bailey 27/e p1154, 26/e p1065-1067; Blumgart 5/e p31-37; Shackelford 7/e p1426-1430)

Most preferred option:

- Liver is divided into 8 segments.
- Segment IX - Acent subdivision of segment I.
- Describes segment posterior to segment VIII.

Functional anatomy of liver:

- Based on Couinaud's division of liver (Coninaud 1957).
- Divided into eight (subsequently nine) functional segments.
- This is based upon distribution of portal venous branches & hepatic veins location in parenchyma.

Sectors & segments of liver:

Sectors of liver:

- Between one & three segments:
- Right lateral sector = Segments VI & VII.
- Right medial sector = Segments V & VIII.
- Left medial sector = Segments III & IV (and part of I).
- Left lateral sector = Segment II.

Segments of liver:

- Numbered in an ante-clockwise spiral centered on portal vein with liver viewed from beneath.
- Starting with segment I up to segment VI à then back clockwise for most cranial two segments VII & VIII.

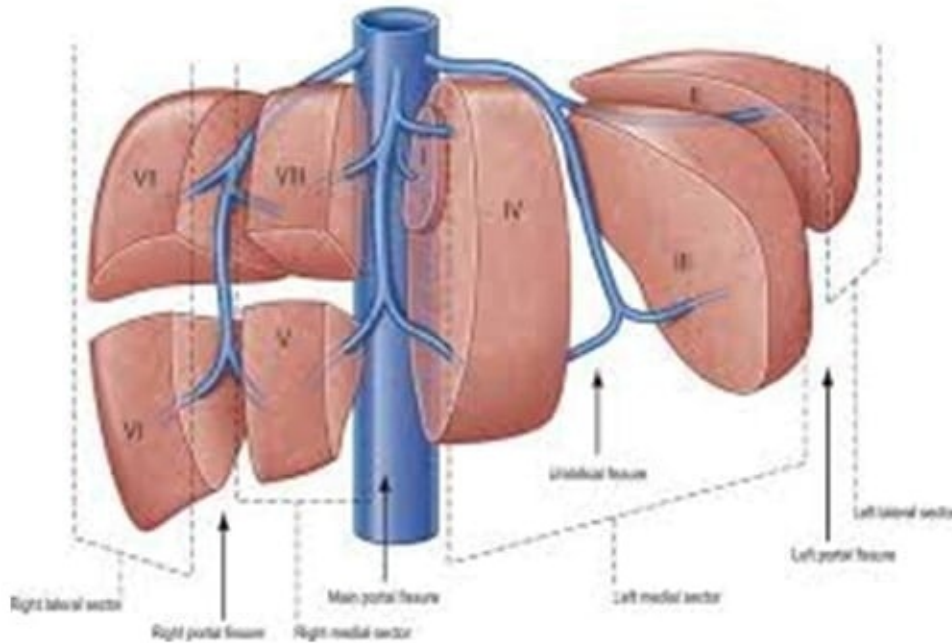


Fig 1: The fissures and sectors of the liver. (Right lateral = right posterior; right medial = right anterior)

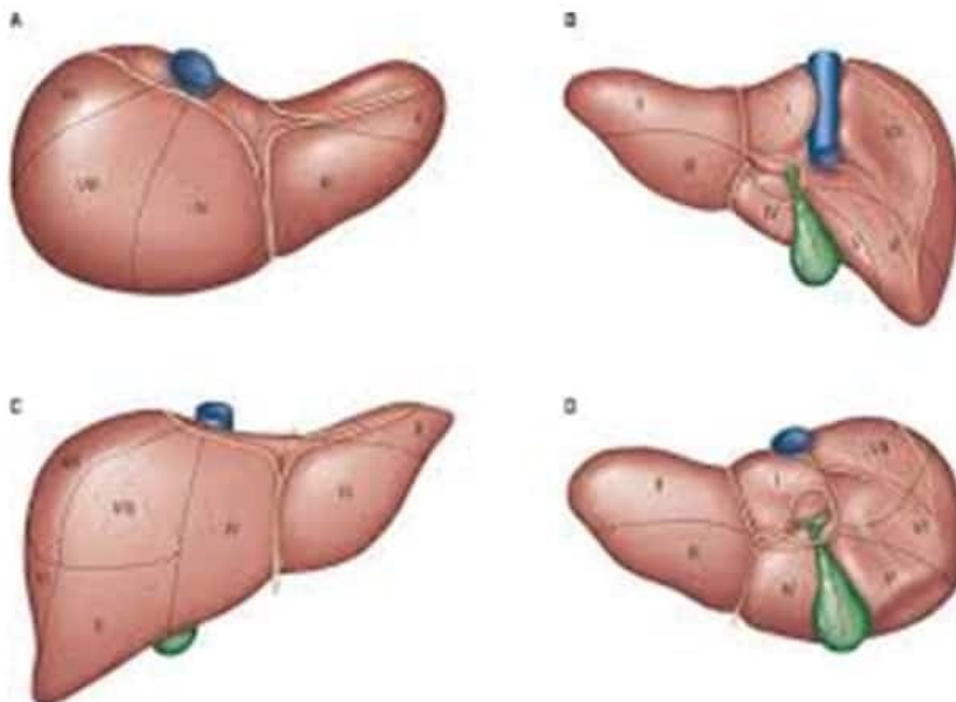


Fig 2: Segments of the liver (after Couinaud). (A) superior view; (B) posterior view; (C) anterior view; (D) inferior view.

117. Which of the following is not elevated in a child presenting with jaundice, icterus, pruritus and clay-colored stools?

a) 5' nucleotidase

b) Alkaline phosphatase

c) Glutamate dehydrogenase

d) Gamma glutamyl transpeptidase

Correct Answer - C

Ans. C. Glutamate dehydrogenase

(Ref: HARRISON 19/E PG-1997, 18/E, P2530)

Glutamate dehydrogenase is not elevated in obstructive jaundice. Liver diseases in which necrosis of hepatocytes is the predominant event, such as toxic liver damage or hypoxic liver disease, are characterized by high serum GLDH levels. GLDH is important for distinguishing between acute viral hepatitis and acute toxic liver necrosis or acute hypoxic liver disease, particularly.

Gamma glutamyl transpeptidase is important to differentiate between neonatal hepatitis and biliary atresia in infant with jaundice

118. Scoring system used for inflammation of the structure indicated by black line in the given figure (Also see colour pages)-

a) Ranson's

b) Alvarado

c) APACHE

d) Balthazar

Correct Answer - B

Answer- B. Alvarado

- The given image is showing appendix. Thus examiner is asking about scoring system for appendicitis'

Alvarado scoring system

- The diagnosis of appendicitis is based primarily on clinical history and physical examination assisted by blood counts. A number of clinical and laboratory based scoring systems have been devised to assist diagnosis. The most widely used scoring system is Alvarado score.

The sum of all the scores are calculated for each patient and based on the results patients can be divided into three groups.

- Aggregate score 7-10 : Strongly predictive of appendicitis
- Aggregate score 5-6 : Equivocal
- Aggregate score 1-4 : Appendicitis can be ruled out.

Symptoms	Score
Migratory right iliac fossa Pain	1
Anorexia	1
Nausea/Vomiting	1

Signs

Tenderness in right iliac fossa	2
---------------------------------	---

Rebound tenderness	1
--------------------	---

Elevated temperature	1
----------------------	---

Laboratory Findings

Leucocytosis	2
--------------	---

Shift to the left of neutrophils	1
----------------------------------	---

Total score	10
--------------------	-----------

119. Cholecysto-caval line separates

a) Gall bladder & IVC

b) Porta hepatis & IVC

c) Right & left lobe

d) Quadrate & Caudate lobe of liver

Correct Answer - C

Answer-C. Right & left lobe

- Cholecystocaval or cholecysto-vena caval line divides liver into right and left physiological lobes.
- Physiological right and left lobes are equally divided by an imaginary line (cholecysto-vena caval line) running from fossa for gall bladder to the groove for IVC. The physiological right and left lobes have separate biliary drainage and vascular supply, i.e. they are supplied respectively by right and left branches of portal vein and hepatic artery and bile is conveyed by the corresponding hepatic ducts (bile ducts).

120. A patient is complaining of "lump in the throat" without any difficulty in deglutition. The muscle involved in the given condition

a) Cricopharyngeal muscle

b) Thyropharyngeus muscle

c) Stylopharyngeus muscle

d) None

Correct Answer - A

Answer- A. Cricopharyngeal muscle

- The sensation of difficulty in swallowing (medically called dysphagia) in the absence of any apparent physical abnormality is often commonly described as having "lump in the throat".
- The most common cause of such a sensation is due to tightening of the cricopharyngeal muscle surrounding the esophagus, it is called Globus Pharyngeus or Globus Hystericus.

121. Thrombophlebitis extending from thigh to involve iliofemoral vein [retrograde iliofemoral thrombophlebitis] causes

a) Red leg

b) Blue leg

c) Purple leg

d) White leg

Correct Answer - D

Answer- D. White leg

- White leg (Phlegmasia alba dolens) → seen in iliofemoral thrombophlebitis.
- Phlegmasia alba dolens (white leg): This is characterised by arterial spasm resulting in pale, cold leg with diminished pulses, with blanching of the limb, more often seen in iliofemoral thrombophlebitis and is called milk leg of pregnancy.

122. 'N3' in Head & Neck cancer TNM staging refers to

- a) Ipsilateral lymph node 3-6 cm
- b) Contralateral lymph node 3-6 cm
- c) Bilateral lymph nodes 3-6 cm
- d) Contralateral lymph node > 6 cm

Correct Answer - D

Answer- D. Contralateral lymph node > 6 cm

N3- Metastasis in a lymph node > 6 cm in greatest dimension

123. Locally aggressive odontogenic cysts with high chance of recurrence

a) Periapical cyst

b) Dentigerous cyst

c) Odontogenic keratocysts

d) Eruption cyst

Correct Answer - C

Answer-C. Odontogenic keratocysts

Jaw cysts can be classified on the basis of origin of the cyst epithelium:

- Odontogenic cysts develop from redundant epithelium left behind in the jaws as a result of tooth development.
- Developmental cysts arise at lines of fusion
- Pseudocysts are nonepithelial and lined only by connective tissue
- Keratocysts have aggressive biologic behavior and a high incidence of recurrence

Odontogenic cysts

- Radicular cysts - most common type of jaw cyst
- Dentigerous cyst - 2nd most common type of jaw cyst

Eruption cyst

- Odontogenic keratocysts
- Gingival (Alveolar) cyst of newborn
- Lateral Periodontal cysts
- Botryoid odontogenic cyst
- Glandular odontogenic cyst
- Calcifying odontogenic cysts (Gorlin cysts)

124. Which of the following helps in diagnosis of Laryngopharyngeal reflux

- a) Lower esophageal pH monitoring
- b) Lower esophageal & pharyngeal pH monitoring
- c) Endoscopic examination of esophagus
- d) X-ray pharynx

Correct Answer - B

Answer- B. Lower esophageal & pharyngeal pH monitoring

- laryngopharyngeal reflux (LPR) is defined as the retrograde flow of stomach content to the larynx and pharynx whereby this material comes in contact with the upper aerodigestive tract. In contrast, gastroesophageal reflux disease (GERD) is the flow of stomach acids back into the esophagus.
- Multichannel intraluminal impedance and pH-monitoring studies are most useful in confirming LPR and assessing the magnitude of the problem. Demonstration of reflux events is best achieved with ambulatory multichannel intraluminal impedance (MCI) and pH-monitoring studies.
- 24 hour dual probe pH monitoring (simultaneous esophageal and pharyngeal pH) is used more often.

125. Gold standard investigation for Gastro-esophageal reflux disease is

- a) Lower esophageal pH monitoring
- b) Lower esophageal & pharyngeal pH monitoring
- c) Endoscopic examination of esophagus
- d) X-ray pharynx

Correct Answer - A

Answer- A. Lower esophageal pH monitoring

- 24 Hour pH monitoring for reflux esophagitis
- 24 hour pH monitoring (pH probe study), is the most sensitive test for diagnosis of gastroesophageal reflux. The test is performed by placing a catheter with a microelectrode that measures pH in the distal esophageal lumen for a duration of 24 hours. An episode of acid reflux usually is defined as an esophageal pH <4, for a duration greater than 15 - 20 seconds.

126. A newborn child is presenting with regurgitation of all feeds and, develops coughing and cyanosis with feeding. Most probable diagnosis is

a) CHPS

b) Esophageal atresia

c) Hirschsprug disease

d) Achalasia

Correct Answer - B

Answer-B. Esophageal atresia

- Esophageal atresia is the most common congenital anomaly of the esophagus. More than 90% are associated with tracheo esophageal fistula.
- The most common variety is the one where upper part of esophagus ends blindly and the lower part is connected to trachea by a fistula, TEF should be suspected in all cases of hydroamnion.
- There may be associated anomalies + VACTERL (vertebral, anorectal, cardiac, tracheal, esophageal, renal, radial, limb) syndrome.

127. A male patient had blunt trauma to left side abdomen. How would you assess for the kidney injury if patient is hemodynamically stable

a) USG

b) CT scan

c) X-ray

d) MRI

Correct Answer - B

Answer- B. CT scan

Stable patient

- Computed tomography has replaced intravenous urography as the primary modality for the assessment of suspected renal injuries. The investigation of choice is the multiphase, double - or triple-contrast CT scan, but this can misgrade the renal injury.
- More commonly, however, it does allow grading of renal injuries, and forms the basis for non-operative treatment, possibly up to, and inclusive of, non-vascular grade IV injuries and blunt renal artery thrombosis.

128. A female patient is presenting with BP of 90/60 and pulse rate 150/minutes after blunt abdominal trauma. How would you assess the patient

a) USG

b) CT scan

c) X-ray

d) MRI

Correct Answer - A

Answer- A. USG

The diagnosis of abdominal injury by clinical examination is unreliable. Blunt abdominal trauma requires desisive investigation and management:

1. If patient is hemodynamically stable and can be shifted → CT scan is the best.
2. If patient is hemodynamically unstable (cannot be shifted) → USG is the investigation of choice.

129. Drug used for HER-2/neu positive breast cancer

a) Imatinib

b) Trastuzumab

c) Erlotinib

d) Cetuximab

Correct Answer - B

Answer- B. Trastuzumab

Herceptin (Trastuzumab)

- Herceptin is a humanized antibody and is used in breast cancers which are HER2 positive.
- HER2 stands for - human epidermal growth factor receptor.
- HER2 gene produces HER2 protein also called HER2 receptor.
- In HER2 (+ve) breast cancer the cancer cell have abnormally high number of HER2 genes per cell when this happens too much HER2 protein appears on the surface of these cancer cells.
- Currently transtuzumab is approved for HER2/neu overexpressing metastatic breast cancer in combination with paclitaxel as initial treatment or as monotherapy following chemotherapy.

130. BIRAD-4 means the breast lump is

a) Benign

b) Probably benign

c) Suspicious of malignancy

d) Malignant

Correct Answer - C

Answer-C. Suspicious of malignancy

To assist in risk stratification, the American College of Radiology has developed a Breast Imaging Reporting and Data System (BIRADS) to standardize the criteria by which mamographic abnormalities are graded.

The BIRADS score is provided to guide the surgeon toward the likelihood of malignancy. Scores of 4 or 5 warrant biopsy.

131. POEM [Per-oral endoscopic myotomy] is done for which of the following disease

a) Achalasia cardia

b) Hiatus hernia

c) Diffuse esophageal spasm

d) Esophageal carcinoma

Correct Answer - A

Answer- A. Achalasia cardia

Treatment of achalasia cardia

- The aim of treatment is to be relieve the functional obstruction at the cardia
- The two main methods to achieve this are
 1. Forceful dilatation or
 2. Esophageal myotomy (Heller's myotomy) with or without an antireflux procedure
 3. Per-oral endoscopic myotomy (POEM)
- It is now the preferred method by some surgeones.
- It is an endoscopic procedure in which myotomy is done under guidance of endoscope introduced by oral route.

132. Which of the following disease causes Achalasia

a) Kala azar

b) Chaga's disease

c) KFD

d) Schistosomiasis

Correct Answer - B

Answer- B. Chaga's disease

- Achalasia cardia is a motor disorder of the esophageal smooth muscle.
- Classical clinical symptom is progressive dysphagia for both solids and liquids. Dysphagia is worsened by emotional stress and hurried eating.
- Regurgitation and pulmonary aspiration occur because of retention of large volumes of saliva and ingested food in the esophagus.
- Esophagitis with ulceration may occur with chronic retention of food.
- Pain is infrequent in classical achlasia but a variant called vigorous achlasic is characterized by chest pain and esophageal spasms that generate non-propulsive high-pressure waves in the body of the esophagus.

133. A 60 years old male alcoholic presents with acute upper GI bleeding following bouts of vigorous vomiting. Most probable diagnosis is

a) Acute gastritis

b) Boerhaave's syndrome

c) Mucosal and submucosal tear at cardiac orifice of stomach

d) Esophageal carcinoma

Correct Answer - C

Answer- C. Mucosal and submucosal tear at cardiac orifice of stomach

Mallory - Weiss syndrome

- Is characterized by mucosal tear at the gastroesophageal junction following a bout of forceful retching (or vomiting, coughing or straining).
- The clinical picture consists of acute upper gastrointestinal bleeding following bouts of retching or vomiting.

Other frequent associations with Mallory-Weiss tears are

- Hiatal hernia
- NSAIDs abuse
- Disease related bleeding diathesis.

134. Not classified as untidy wound is

a) Burn wound

b) Incised wound

c) Crush wound

d) Lacerated wound

Correct Answer - B

Answer- B. Incised wound

- Usually involves crushing and tearing and contain devitalized tissues.
- Needs conversion to tidy wound before closure is considered.
- These wounds result from crushing, avulsion or burns. Fractures are common and may be multifragmentary.
- Treatment - Once the untidy wound is converted to a tidy one by wound excision, it can be safely closed or allowed to heal by second intention.

135. Which of the following is used to differentiate between hypercalcemia of malignancy from primary hyperparathyroidism?

a) Hydrocortisone suppression test

b) Glucose challenge test

c) 24 hour urine calcium measurement

d) Percentage of ionized calcium

Correct Answer - A

Answer- A. Hydrocortisone suppression test

If doubt exists, hydrocortisone suppression test is of value.

- If the test is performed as originally described, (120 mg hydrocortisone per day for 10 days, correcting the serum calcium for haemodilution), it provides an excellent discrimination, since significant suppression of serum calcium does not occur in primary hyperparathyroidism, whereas malignant hypercalcemia is usually completely alleviated.

136. Which of the following is not a hard sign of arterial injury?

a) Expanding or pulsatile hematoma

b) Arterial bleeding

c) Shock

d) Bruit

Correct Answer - C

Answer- C. Shock

Hard signs

Distal circulatory deficit

- Ischaemia
- Absent or diminished pulses
- Bruit
- Expanding or pulsatile hematoma
- Arterial bleeding

137. Treatment of stage I bladder cancer is

a) Radical cystectomy

b) Endoscopic removal with intravesical chemotherapy

c) Chemotherapy

d) Radiotherapy

Correct Answer - B

Answer- B. Endoscopic removal with intravesical chemotherapy

138. Most Common congenital GI Tract anomaly is

a) Meckels diverticulum

b) Patent rachus

c) Ileal atresia

d) Jejunal aplasia

Correct Answer - A

Answer- A. Meckels diverticulum

- Meckel's diverticulum is a true diverticulum as it has all the 3 layers of the intestine.
- It's the most common congenital anomaly of the gastrointestinal tract

**139. 35 years male presents with a swelling in scrotum that is non tender and separate from testes and on transillumination, chinese lantern pattern is seen
diagnosis**

a) Vaginal hydrocele

b) Inguinal hernia

c) Epididymal cyst

d) Varicocele

Correct Answer - C

Answer- C. Epididymal cyst

- Cysts of the epididymis (multiloculated epididymal cyst, spermatocele) are not surrounded by fluid and for this reason are felt as swellings above, behind the testis, which is also easily palpable in this situation.
- Because of the septation, multiloculated epididymal cysts have a characteristic 'Chinese lantern' appearance on transillumination.

140. Most reliable sign of injury to intrathoracic aorta is

a) Presence of apical cap of pleural fluid

b) Depression of left main stem bronchus

c) Obliteration of aortic knob contour

d) Funny looking mediastenum

Correct Answer - C

Answer- C. Obliteration of aortic knob contour

- The most reliable of these signs for the blunt aortic injury is loss of the aortic knob contour.

141. Which of the following is extended criteria donor [ECD] for kidney transplantation?

a) Donors with extremes of age

b) Donors with excess alcohol intake

c) Donors having cerebrovascular accident

d) All the above

Correct Answer - D

Answer- D. All the above

- With the limited number of organs available for transplantation, donors who would previously been declined are now being accepted.
- Criteria include extremes of age, death for intracranial hemorrhage, organ specific diseases such as excess alcohol intake or hepatitis, general co morbidities such as diabetes, cerebrovascular accident or cardiovascular instability.
- The long-term outcomes of the transplants performed from ECD are poorer than standard criteria donors, and the potential risks to the recipients must be weighed against the benefits. There is an increased risk of delayed graft function.

142. 16 F foleys is used in

a) Acute urinary retention

b) CA penis

c) Pyonephrosis

d) None

Correct Answer - A

Answer- A. Acute urinary retention

16F and 18F foleys are mainly used for adults

- 8F and 10F are mainly used for children
- Acute urinary retention is an indication for catheterization

143. Most common site of injury to aorta in patients who manage to reach the hospital for medical care is

a) Ascending aorta

b) Aortic isthmus

c) Descending thoracic aorta

d) Abdominal aorta

Correct Answer - B

Answer- B. Aortic isthmus

- Trauma can result in aortic transection or disruption.
- Traumatic injuries to the aorta are rapidly fatal with most victims dying at the scene of injury.
- Post traumatic aneurysms to the aorta are distinctive by their location.
- The two most common sites are proximal ascending aorta and aortic isthmus, the site of insertion of ligamentum arteriosum.
- Among patients who survive traumatic aortic injury and reach medical care, about 95% have injury to aortic isthmus.

144. Yoyo reflux

a) Duplication of ureter

b) Polycystic Kidney

c) Mellutary sponge Kidney

d) Pseudo kidney

Correct Answer - A

Answer- A. Duplication of ureter

- Reflux of the urine from one limb of the collecting system to the other limb, rather than down towards the bladder is called yo-yo reflux (saddle reflux)
- Cause : Duplication of ureters, partial duplication of ureters, duplicate renal pelvis

145. 80 kg male with bilateral upper limb, right lower limb with perineum burns 3rd degree, amount of fluid required in first 8 hours is

a) 3920 ml

b) 4920 ml

c) 5920 ml

d) 6560 ml

Correct Answer - D

Answer- D. 6560 ml

- The amount of fluid required for the above patient = $4\text{ml} \times 80 \times 41 = 13120\text{ ml}$.
- Half of the calculated fluid is given in first 8 hrs and half in next 76 hrs.
- So the amount of fluid to be given in the first hrs = total fluid required / 2 = $13120 / 2 = 6560\text{ml}$

146. Pain in region of penis in acute urethritis is typically experienced

a) Before micturition

b) After micturition

c) During micturition

d) Irrespective micturition

Correct Answer - C

Answer- C. During micturition

Causes of pain in the penis experienced during micturition

Disease of the urethra

- Acute inflammation, gonorrhoeal/non-specific urethritis (NSU) chemical or other
- The passage or impaction of a calculus
- Stricture of the urethra
- Injury to the urethra
- Foreign body in the urethra

Disease of the prostate

- Acute prostatitis
- Prostatic abscess
- Prostatic carcinoma
- Diseases of the bladder
- Acute cystitis
- Bladder calculus
- Pedunculated bladder carcinoma

147. Which of the following predisposes to testicular germ cell tumors?

a) Klinefelter syndrome

b) Testicular carcinoma in sibling

c) Cryptorchidism

d) All the above

Correct Answer - D

Answer- D. All the above

- Cryptorchidism
- Testicular feminization syndrome
- GCT of one testis is a risk factor for the other testis
- Testicular Ca in a sibling
- Klinefelter syndrome - is associated with mediastinal GCT

148. Best fluid for resuscitation of burns patient

a) Hartmann solution

b) Colloid

c) Normal saline

d) 5% Dextrose

Correct Answer - A

Answer- A. Hartmann solution

Fluid resuscitation begins with an isotonic crystalloid solution - Ringer's lactate solution (RL)(Hartman's solution) k the preferred solution (Normal saline should be avoided as the volumes required for resuscitation may lead to hyperchloremic metabolic acidosis).

149. Maylard incision involves a trasverse cut through which of the following muscles?

a) Rectus abdominis

b) Serratus anterior

c) Pectoralis major

d) Psoas major

Correct Answer - A

Answer- A. Rectus abdominis

- Mayland Incision is a surgical incision in which a transverse cut is made on rectus abdominis muscle to allow wider access to the pelvic cavity. It is also called Mackenrodt incision.

150.

The possibility of liver lobe resection is considered in patients with carcinoma of gall bladder from/ beyond which stage of gall bladder carcinoma?

a) IA

b) IIA

c) III

d) IV

Correct Answer - B

Answer- B. IIA

- Radical en-bloc resections which may include segmental or extended hepatectomy, bile duct resection and regional lymphadenectomy should be considered in selected patients. The aim is to remove the tumour entirely and achieve negative histopathological margins. This option can be considered in the operable patients with carcinoma of gall bladder, who come under stage IIA of gall bladder carcinoma and beyond.

151. Longitudinal incision with Z plasty closure is used in which of the following

a) Hand surgery

b) Breast surgery

c) Thyroid surgery

d) Hernia surgery

Correct Answer - A

Answer- A. Hand surgery

- Z-plasty is a versatile plastic surgery technique that is used to improve the functional and cosmetic appearance of scars. It can elongate a contracted scar or rotate the scar tension line.
- Longitudinal incision with Z plasty closure is used in the management of Dupuytren's contracture of hand.

152. Courvoiser's law exception

a) Double impaction

b) Portal lymphadenopathy

c) Periapillary CA

d) None

Correct Answer - A

Answer- A. Double impaction

Courvoisier's law states that in the presence of an enlarged gall bladder which is nontender and accompanied with jaundice the cause is unlikely to be gallstones. This is because gall stones are formed over a longer period of time, and this results in a shrunken, fibrotic gall bladder which does not distend easily.

Exception to Courvoisier's law:

1. Double impaction
2. Pancreatic calculus obstruction ampulla
3. Oriental cholangio hepatic
4. Mirizzi syndrome

153. Stewart-Treves syndrome is used to described development of

a) Lymphangiosarcoma

b) Rhabdomyoma

c) Angiosarcoma

d) Mesothelioma

Correct Answer - A

Answer- A. Lymphangiosarcoma

Stewart-Treves' syndrome:

- Ulceration, non-healing bruises and raised purple-red nodules in patients with lymphatic disorders, should lead to suspicion of malignancy.
- Lymphangiosarcoma was originally described in postmastectomy oedema (Stewart-Treves'syndrome)

154. A patient presents with severe pain in right upper quadrant associated with nausea and vomiting, exacerbation during inspiration and tenderness on palpation. Which of the following is the imaging modality of choice for the above patient?

a) Ultrasonography

b) CT Scan

c) MRI

d) X ray

Correct Answer - A

Answer- A. Ultrasonography

- Patient with severe pain in right upper quadrant associated with nausea and vomiting, exacerbation during inspiration and tenderness on palpation is suggestive of probable case of acute cholecystitis with positive murphys sign. Ultrasonography is the modality of choice for the diagnosis of this condition.

155. Child presents after trauma to head with hyponatremia, volume depletion and increased excretion of urinary Na [>150 mmol/L]. What is the probable diagnosis?

a) Cerebral salt wasting syndrome

b) SIADH

c) Adrenal hemorrhage

d) Autonomic failure

Correct Answer - A

Answer- A. Cerebral salt wasting syndrome

- Electrolyte imbalance is common in traumatic brain injury (TBI), and contributes to brain swelling and to causing seizures.
- Cerebral salt wasting, a poorly understood form of excretory dysregulation in association with brain insult, leads to volume depletion and hyponatraemia.

156. Pyuria found in all except

a) Appendicular abscess

b) CA bladder

c) Renal tuberculosis

d) Vaginosis

Correct Answer - A

Answer- A. Appendicular abscess

Causes of Pyuria

- Urinary tract infections
- STDs like chlamydiae or gonorrhoea or vaginitis
- Genitourinary tuberculosis (Sterile Pyuria)
- Stones in Bladder and ureter
- Pregnancy
- Cystitis or bladder infections
- Viral infections
- Benign and malignant tumours of the urinary system
- Mechanical Trauma
- Parasites like Trichomonas Vaginalis, Giardia Lamblia etc

157. Preferred shunt procedure in patient with portal hypertension having acceptable operative risk and adequate liver function is

a) End to side portocaval shunt

b) End to end portocaval shunt

c) Mesocaval shunt

d) Distal splenorenal shunt

Correct Answer - D

Answer- D. Distal splenorenal shunt

- Portosystemic shunt procedures such as splenorenal shunt and mesocaval shunt, may be indicated in patients with complication of portal hypertension.
- Given the early occlusion rate and the need for constant surveillance, it is generally advised that TIPS should be reserved for Child C classification of cirrhosis, whereas a distal splenorenal shunt is safe, durable, preferred and effective treatment in patients with acceptable operative risk and still good liver function.

158. Prehn sign is positive in

a) Acute epididymo-orchitis

b) Chronic orchitis

c) Testicular torsion

d) None

Correct Answer - A

Answer- A. Acute epididymo-orchitis

On elevation of testis the-

- Pain is not relieved in torsion (test is negative)
- Pain relieved in epididymo-orchitis (test is positive)

159. Most common variety of mesenteric cyst is?

a) Enterogenous

b) Chylolymphatic

c) Dermoid

d) Urogenital remnant

Correct Answer - B

Answer- B. Chylolymphatic

- Chylolymphatic is the most common variety , probably arising in the congenitally misplaced lymphatic tissue that has no eferent communication with the lymphatic system (most frequently in mesentery of ileum)."

160. Laparoscopy - pressure in the abdomen of children

a) 2 - 6 mm Hg

b) 8 - 12 mm Hg

c) 14 - 18 mm Hg

d) 20 - 24 mm Hg

Correct Answer - B

Answer- B. 8 - 12 mm Hg

- The optimal intrabdominal pressure for laparoscopy in children has been established to be between 8 - 12 mm Hg, with neonates tolerating lower pressures than elders.

161.

Definitive surgery is a part of which stage of damage control surgery?

a) I

b) II

c) III

d) IV

Correct Answer - D

Answer- D. IV

- Following major injury, protracted surgery in the physiologically unstable patient with the 'deadly triad' - the combination of hypothermia, acidosis and coagulopathy
- 'Damage control' or 'damage limitation surgery' is a concept that originated from naval architecture, whereby a ship was designed to have areas sealed off in the case of damage, to limit flooding.

Stages-

1. Patient selection
2. Control of haemorrhage and control of contamination
3. Resuscitation continued in the intensive care unit
4. Definitive surgery
5. Abdominal closure

162. Everted edge seen in ulcer due to which of the following?

a) Tuberculosis

b) Epithelioma

c) Syphilis

d) Basal cell carcinoma

Correct Answer - B

Answer- B. Epithelioma

characteristic shapes of the edges of ulcers.

1. None-specific ulcer: note the shelving edge.
2. Tuberculous ulcer: note the undermined edge
3. Basal cell carcinoma (rodent ulcer): note the rolled edge, which may exhibit small blood vessels.
4. Epithelioma: note the heaped-up everted edge and irregular thickened base.
5. Syphilis

163. During splenectomy, splenic vessels are ligated at which level

a) Near splenic hilum

b) Superior border of pancreas

c) Inferior border of pancreas

d) Midway between the splenic hilum and superior border of pancreas

Correct Answer - B

Answer- B. Superior border of pancreas

- Most surgeons use a midline or transverse left subcostal incision for open splenectomy.
- In elective splenectomy, the gastrosplenic ligament is opened up, and the short gastric vessels are divided.
- The splenic vessels at the superior border of the pancreas are suture ligated

**164. Management of stage 2 pressure sore,
clean ulcer without cellulitis is**

a) Protective dressing

b) Moist dressing

c) Absorbent dressing

d) Topical antibiotics

Correct Answer - B

Answer- B. Moist dressing

165. Splenectomy is not indicated in which of the following pathologies?

a) Sarcoidosis

b) Trauma

c) ITP

d) Hereditary spherocytosis

Correct Answer - A

Answer- A. Sarcoidosis

- General indications for splenectomy include symptomatic splenomegaly, hypersplenism, hemolytic anemia, thrombocytopenia and other cytopenias.

166. For vascular anastomosis sutures of choice

a) Polypropylene

b) Chromic catgut

c) Silk

d) Nylon

Correct Answer - A

Answer- A. Polypropylene

- Vascular anastomoses require an extremely accurate closure as they must be immediately watertight at the end of the operation when the vascular clamps are removed.
- In many cases, some form of prosthetic material or graft may be used which will never be integrated into the body tissues and so the integrity of the suture line needs to be permanent.
- For this reason, polypropylene is one of the best sutures as it is not biodegradable. It is used in its monofilament form, mounted on an atraumatic, curved, round bodied needle.

167. Position of internal hemorrhoid in anus is especially common in

a) 4 O' clock position

b) 11 O' clock position

c) 8 O' clock position

d) 9 O' clock position

Correct Answer - B

Answer- B. 11 O' clock position

- Internal hemorrhoids characteristically lie in 3, 7 and 11 o'clock positions.

168. Treatment surgery for fissure in ano

a) Lateral sphinterotomy

b) Fissurectrny

c) Seton

d) None

Correct Answer - A

Answer- A. Lateral sphinterotomy

Conservative t/t

- Stool bulking agents and stool softners
- Nitric oxide or Glyceryl tinitrate
- Dilatation of the sphincter under GA
- laterd anal sphincterotomy - the intetnal sphincter is divided away from the rtssure itself - usually either in the riglth or the left lateral position
- Anal advancement flap

169. Which of the following is true about venous thrombosis?

a) It affects only the deep venous system

b) Most important factor for development of deep venous thrombosis is hospital admission

c) Coralline thrombus is platelet aggregate surrounded by white blood cells

d) Lung infarction is a common complication of deep venous thrombosis

Correct Answer - B

Answer- B. Most important factor for development of deep venous thrombosis is hospital admission

- Venous thrombosis is the formation of a semi-solid coagulum within the venous system and may occur in the superficial system.
- Patients are at risk of developing a post-thrombotic limb and venous ulceration

Virchow triad-

1. Changes in the vessel wall (endothelial damage)
 2. Stasis, which is diminished blood flow through the veins
 3. Coagulability of blood (thrombophilia)
- The most important factor is a hospital admission for the treatment of a medical or surgical condition.
 - The coralline thrombus then progresses as a propagated loose red fibrin clot, containing many red cells.

170. Duhamel procedure is done for

a) Hirschsprung's disease

b) HPSS

c) Meckels diverticulum

d) Volvulus

Correct Answer - A

Answer- A. Hirschsprung's disease

- Surgery in Hirschsprung's disease aims to remove the aganglionic segment and 'pull-through' ganglionic bowel to the anus (e.g. Swenson, Duhamel, Soave and transanal procedures) and can be done in a single stage or in several stages after first establishing a proximal stoma in normally innervated bowel.

171. Which of the following conditions shows susceptibility to squamous cell carcinoma in skin?

a) Epidermodysplasia verruciformis

b) Actinic keratosis

c) Xeroderma pigmentosum

d) All the above

Correct Answer - D

Answer- D. All the above

- Squamous cell carcinoma is the second most common tumor arising on sunexposed sites in older people, exceeded only by basal cell carcinoma.
- The most important cause of cutaneous squamous cell carcinoma is DNA damage induced by exposure to UV light.
- Immunosuppression may contribute to carcinogenesis by reducing host surveillance and increasing the susceptibility of keratinocytes to infection and transformation by oncogenic viruses, particularly human papilloma virus (HPV) subtypes.
- Other risk factors for squamous cell carcinoma include industrial carcinogens (tars and oils), chronic ulcers and draining osteomyelitis, old burn scars, ingestion of arsenicals, ionizing radiation, and (in the oral cavity) tobacco and betel nut chewing.

172. Leriche syndrome is characterized by presence of arterial insufficiency in

a) Aorto- iliac artery

b) Superficial femoral artery

c) Temporal artery

d) Brachial artery

Correct Answer - A

Answer- A. Aorto- iliac artery

- 1. Brought on by walking
- 2. Not present on taking the first step (unlike osteoarthritis)
- 3. Relieved by standing still
- The pain of claudication is usually felt in the calf because the superficial femoral artery is the most commonly affected.
- Aortoiliac disease (30 per cent of cases) may cause thigh or buttock claudication.
- Buttock claudication in association with sexual impotence resulting from arterial insufficiency is eponymously called Leriche's syndrome. It is very rare.

173. 5 year old Boy with something coming out of the anus with pedicle attached to rectal/ anal wall and bright red bleeding- most common diagnosis

a) Juvenile rectal Polyp

b) Pedicle pile

c) Fissure

d) CA Colon

Correct Answer - A

Answer- A. Juvenile rectal Polyp

- Juvenile polyps are the most common type of childhood polyp, occurring in up to 1% of preschool children. They are usually solitary polyps found in the rectum which most commonly present with rectal bleeding.
- These are hamartomatous polyps, which are usually pedunculated but can be sessile.

174. Patient is on autocoids for 1 year complains of severe pain epigasrium relieved iv antacids now complains of pain in right iliac fossa and epigastrium with fever and loss of liver dullness diagnosis

a) Duodenal perforation

b) Diverticulitis

c) Gastroenteritis

d) Enteric perforation

Correct Answer - A

Answer- A. Duodenal perforation

Long term therapy with autocoids led to an ulcer that eventually perforated and now the patient has presented early signs of peritonitis.

Clinical features of perfontion of duodenal ulcer

- Perforated duodenal ulcer is characterized by sever constant onset epogastric pain
- Patient looks ill and lies unusually still
- Tachycardia
- Shallow respiration
- Tender with intense guarding and rigidity
- If the air has escaped into peritoneal cavity then liver dullness may be absent
- Peptic ulcer perforation leads to chemical peritonitis initially.

**175. Pain in left hypochondrium vomiting,
diarrhea, malena, weight loss diagnosis**

a) Cholangitis

b) Enterocolitis

c) Zollinger Ellison syndrome

d) Amebiasis

Correct Answer - C

Answer- C. Zollinger Ellison syndrome

- Peptic ulceration is the most common manifestation of Zollinger Ellison syndrome leading to left hypochondriac pain, vomiting and weight loss and ulcers refractory to medical therapy.
- A bleeding ulcer gives rise to malena.

176. A 50 years labourer, smoker presented with repeated episodes of epigastric pain, associated with occasional vomiting and weight loss. What is the diagnosis

a) Hiatus hernia

b) Gastric ulcer

c) Gastric volvulus

d) Barret's esophagus

Correct Answer - B

Answer- B. Gastric ulcer

- Smoking with epigastric pain and vomiting with weight loss is strongly suggestive of gastric ulcer.

177. Most common cause of bleeding for massive hemothorax in blunt trauma to chest is from

a) Intercostal vessels

b) Bronchial vessels

c) Pulmonary vessels

d) Internal mammary artery

Correct Answer - A

Answer- A. Intercostal vessels

- The most common cause of massive haemothorax in blunt injury to chest is continuing bleeding from torn intercostal vessels or occasionally from the internal mammary artery.

178. Hinchey classification is used for perforations of colon secondary to

a) Trauma

b) Carcinoma

c) Diverticulitis

d) Inflammatory enteropathy

Correct Answer - C

Answer-C. Diverticulitis

Hinchey Classification is used to describe perforations of the colon due to diverticulitis.

- Hinchey I - localised abscess (para-colonic)
- Hinchey II - pelvic abscess
- Hinchey III - purulent peritonitis (the presence of pus in the abdominal cavity)
- Hinchey IV - feculent peritonitis. (Intestinal perforation allowing feces into abdominal cavity)

179. Esophageal carcinoma what is the most important prognostic indicator?

a) Length of involvement

b) Depth of invasion

c) Histological grading

d) Immunohistochemistry

Correct Answer - B

Answer- B. Depth of invasion

- The depth of invasion of the tumor through the wall of esophagus, is the most important prognostic indicator, with considerable independent prognostic significance.

180. A patient developed wound infection post laparotomy for pyoperitoneum, was treated conservatively. Now, granulation tissue is seen in the wound. Next step in management is

a) Daily dressing

b) Mesh repair

c) Incision and drainage

d) Resuturing with interrupted stitches

Correct Answer - D

Answer- D. Resuturing with interrupted stitches

- Presence of granulation tissue indicates that the wound is healthy and angiogenesis is occurring at the edges and base of the wound.
- This is an indication that the wound can now be safely closed with interrupted sutures without any risk of complications.

181. Which of the following is true about gastrointestinal carcinoid tumor?

a) Alcohol has no effect on the flushing attacks

b) Occur most commonly in jejunum

c) Tumors most commonly produce histamine

d) Preoperative octreotide scanning can detect extent of the disease

Correct Answer - D

Answer- D. Preoperative octreotide scanning can detect extent of the disease

- These neuroendocrine tumours occur throughout the gastrointestinal tract, most commonly in the appendix, ileum and rectum in decreasing order of frequency. Appendicular carcinoid tumours are most commonly noted as an incidental finding at appendicectomy.
- Carcinoid tumours arise from Kulchitsky cells at the base of intestinal crypts (of Lieberkuhn)
- The tumours can produce a number of vasoactive peptides, most commonly 5-hydroxytryptamine (serotonin), but also histamine, prostaglandins and kallikrein.
- Classically, the flushing attacks are induced by alcohol.
- The extent of disease can be assessed preoperatively using octreotide scanning, which may detect otherwise clinically apparent primary and secondary tumour.

182. Hunt Hess scale is used to grade manifestations of

a) Subarachnoid hemorrhage

b) Meningioma

c) Hydrocephalus

d) Tuberculous meningitis

Correct Answer - A

Answer-A. Subarachnoid hemorrhage

- The initial clinical manifestations of SAH are graded using the Hunt-Hess or World Federation of Neurosurgical Societies classification schemes.
- A grading system has therefore been developed to document the severity of patient's disease in order to guide therapy and prognostication.

183. Which of the following is associated with destruction of myenteric plexus?

a) Hirschsprung disease

b) Secondary Achalasia

c) HPSS

d) GIST

Correct Answer - B

Answer- B. Secondary Achalasia

- Secondary achalasia may arise in Chagas disease, in which *Trypanosoma cruzi* infection causes destruction of the myenteric plexus, failure of peristalsis, and esophageal dilatation.

184. Ligament of Cooper, used in the surgery for femoral hernia repair, is formed by which of the extensions of inguinal ligament?

a) Lacunar ligament

b) Pectineal ligament

c) Ilioinguinal ligament

d) Reflected part of inguinal ligament

Correct Answer - A

Answer-A. Lacunar ligament

It is also called Gimbernat's ligament.

- From the medial end, deep fibres curve horizontally backward to the medial side of pectin pubis forming lacunar ligament.
- This ligament is triangular in shape, with the apex attached to the pubic tubercle.
- Its sharp lateral edge forms the medial boundary of the femoral canal, which is the site of production of femoral hernia.

185. Maximum score of APACHE

a) 41

b) 51

c) 61

d) 71

Correct Answer - D

Answer- D. 71

- APACHE II ('Acute Physiology and Chronic Health Evaluation II') is a severity-of-disease classification system.
- The APACHE II system is the most commonly used SOI scoring system in North America.
- APACHE IV uses a modified statistical model of logistic regression; it is the most recently released version of this scoring system.
- It is applied within 24 hours of admission of a patient to an intensive care unit (ICU): an integer score from 0 (minimum) to 71 (maximum) is computed based on several measurements; higher scores correspond to more severe disease and a higher risk of death.

186. Which of the following is not true about Boerhaave syndrome?

- a) Perforation of the esophagus due to barotrauma
- b) Most common site is left posteromedial aspect 3 - 5 cms above the gastroesophageal junction
- c) Pain is the principal early manifestation
- d) Most cases follow a bout of heavy eating or drinking

Correct Answer - B

Answer- B. Most common site is left posteromedial aspect 3 - 5 cms above the gastroesophageal junction

- Boerhaave's syndrome is spontaneous perforation of the esophagus, occurring usually due to severe barotrauma when a person vomits against a closed glottis.
- Most common location of perforation is in the left posterolateral aspect 3-5 cm above the gastroesophageal junction. Second most common site of perforation is at the midthoracic esophagus on the right side.
- The principal early manifestation is pain felt in the chest and upper abdomen.

187. 26 yr old female came for the first time in OPD with lump in breast first investigation

a) USG

b) Mammogram

c) MRI

d) PET scan

Correct Answer - B

Answer- B. Mammogram

- Radiological investigations for the initial assessment for breast lump are either USG or Mammography.
- Since the patient given in the question is a young female. Ultrasonography is a preferred first investigation for evaluation of breast lump.
- ultrasound is particularly useful in young women with dense breasts in whom mammograms are difficult to interpret, and in distinguishing cysts from solid lesions.

188. What permanent deleterious effects are seen, if 25% of the small intestine is resected?

a) Nothing Diarrhea

b) Fat malabsorption syndrome

c) Intestinal failure

d) None

Correct Answer - A

Answer- A. Nothing Diarrhea

- Up to 50 per cent of the small intestine can be surgically removed or bypassed without permanent deleterious effects.

189. Which muscle is irritated by inflamed retrocaecal appendix

a) Psoas major

b) Gluteus maximus

c) Quadratus femoris

d) Obturator internus

Correct Answer - A

Answer- A. Psoas major

- In children with abdominal pain, who hold their right hip in a flexed position to obtain relief from the pain, one should suspect retrocaecal appendicitis causing irritation of the psoas muscle.

190. Which appendix pain is referred to suprapubic region with pain on internal rotation of hip

a) Pre ileal

b) Pelvic

c) Post ileal

d) Paracolic

Correct Answer - B

Answer- B. Pelvic

Pelvic appendicitis can present with

- Absence of abdominal wall rigidity and tenderness
- Tenderness in retrovesical pouch
- Hypogastric or suprapubic pain
- Obturator sign: pain on internal rotation of the hip

191. Fixity of the breast tissue in carcinoma of breast indicates infiltration of

a) Suspensory ligaments

b) Lymphatics

c) Pectoralis muscle and fascia

d) Internal mammary artery

Correct Answer - C

Answer- C. Pectoralis muscle and fascia

- Fixity of the breast tissue is tested by asking the patient to press the hand against the hip forcibly to contract Pectoralis major muscle & moves the breast over the pectoralis fascia in the direction of muscle fibres of the pectoralis major muscle.
- Loss of normal mobility or fixity of the breast tissue indicates spread of cancer cells to underlying pectoralis muscle and fascia.

192. Alvarado score is used for

a) Acute cholecystitis

b) Acute appendicitis

c) Acute apncreatitis

d) Acute epididymitis

Correct Answer - B

Answer- B. Acute appendicitis

Scoring system for Acute Appendicitis: Alvarado Score:

- The diagnosis of appendicitis is based primarily on clinical history and physical examination assisted by blood counts. A number of clinical and laboratory based scoring systems have been devised to assist diagnosis. The most widely used scoring system is Alvarado score.

193. Nipple retraction in Ca breast due to infiltration of

a) Suspensory ligaments

b) Lactiferous ducts

c) Lymphatics

d) Pectoralis fascia

Correct Answer - B

Answer- B. Lactiferous ducts

- It is seen in breast carcinoma due to infiltration of the lactiferous ducts by carcinoma.
- It is due to extension of the growth along the lactiferous ducts and subsequent fibrosis.
- Nipple retraction is circumferential in carcinoma and slit like in periductal mastitis.

194. Reduction of size and vascularity prior to thyroidectomy is done by

a) Iodides

b) Propylthiouracil

c) Radioiodine

d) Propranolol

Correct Answer - A

Answer- A. Iodides

Effects of iodide/ Lugol's iodine on thyroid:

1. Decrease rate of blood flow to the thyroid
2. Decreased vascularity of the thyroid
3. Decreased intraoperative blood loss during surgery

195. Surgery for ductal ectasia

a) Microdocheotomy

b) Radical duct excision

c) Radiation

d) Chemotherapy

Correct Answer - B

Answer- B. Radical duct excision

- Duct ectasia of the breast or mammary duct ectasia or plasma cell mastitis is a condition in which the lactiferous
- duct becomes blocked or clogged. This is the most common cause of greenish discharge.

Clinical features

- Nipple discharge of any colour, abscess, mammary duct fistula, subareolar mass and nipple retraction.

Treatment

- Antibiotic therapy may be tried but surgery is mostly required to cure this notoriously difficult condition. Surgery consists of excision of all the major ducts (Hadfield's operation)

196. Hilton method is best used in

a) Breast abscess

b) Axillary abscess

c) Paronychia

d) Pulp abscess

Correct Answer - B

Answer- B. Axillary abscess

- Hilton's method of abscess drainage is chosen when there are plenty of important structures like nerves and vessels around the abscess cavity, like axilla. In this method incision is made only through the skin and subcutaneous tissue. The deep fascia is not incised.

197. Lady with recent delivery engorged shiny mass on breast under nipple fever

a) Breast abscess

b) Fibroadenosis

c) Sebaceous cyst

d) Fibroadenoma

Correct Answer - A

Answer- A. Breast abscess

Features favouring breast abscess :

- Lactating woman
- Tender swelling
- Pyreia
- Tense shiny overlying skin

198. A 44 year old female has history of blunt trauma to the abdomen the best investigation is -

a) USG

b) CT Scan

c) Complete Hemogram

d) Abdominal X-ray

Correct Answer - A

Answer- A. USG

- If patient is hemodynamically stable and can be shifted → CT scan is the best.
- If patient is hemodynamically unstable (cannot be shifted) → USG is the investigation of choice.

199. A 70 year old male chronic smoker is diagnosed of having cancer of the urinary bladder. It is confined to the trigone and extension is upto the submucosa. The management would be

a) Complete transurethral resection

b) Complete transurethral resection with intravesical chemotherapy

c) Palliative radiotherapy

d) Radical cystectomy

Correct Answer - B

Answer- B. Complete transurethral resection with intravesical chemotherapy

Treatment-

T1

- Complete TUR followed by intravesical chemo- or immunotherapy or radical cystectomy

200. All of the following can lead to increased Intra cranial pressure except -

a) Meningitis

b) Subarachnoid Hemorrhage

c) Subdural hemorrhage

d) Migraine

Correct Answer - D

Answer-D. Migraine

Common causes include-

- Aneurysm rupture and subarachnoid hemorrhage
- Brain tumor
- Encephalitis
- Head injury
- Hydrocephalus (increased fluid around the brain)
- Hypertensive brain hemorrhage
- Intraventricular hemorrhage
- Meningitis
- Subdural hematoma
- Status epilepticus
- Stroke

201. A 70 year old male chronic smoker is having carcinoma in situ of urinary bladder. TUR is done. Now there is a recurrence with the tumour extending into the muscle treatment would be

a) Intravesical BCG

b) Intravesical chemotherapy

c) Palliative Radiotherapy

d) Radical Cystectomy

Correct Answer - D

Answer- D. Radical Cystectomy

Tumor extending into muscle is stage T2 → Radical cystectomy is advised.

Treatment-

- T2- T4
- Radical cystectomy
- Neoadjuvant chemotherapy followed by radical cystectomy
- followed by adjuvant chemotherapy
- Concomitant chemotherapy and irradiation

202. Transplantation of an organ at site other than its original location is called -

a) Orthotopic graft

b) Allograft

c) Isograft

d) Heterotopic graft

Correct Answer - D

Answer- D. Heterotopic graft

- Heterotopic graft : A transplant placed in a site different from where the organ is normally located.

203. All of the following are treatment modalities in malignant mesothelioma except

a) Talc Pleurodesis

b) Extrapleural pneumonectomy

c) Combination therapy with surgery, chemotherapy and radiotherapy

d) Exclusive Radiotherapy

Correct Answer - D

Answer- D. Exclusive Radiotherapy

- Treatment options include supportive care only, surgical resection, and multimodality approaches (using a combination of surgery, chemotherapy, and radiation therapy).

204. All of the following are true about small bowel lymphoma except

- a) Treatment is resection of involved segment with chemoradiotherapy
- b) AIDS and Celiac disease are predisposing conditions
- c) It is a very uncommon tumour amongst small bowel malignancies
- d) It may present with hemorrhage and perforation

Correct Answer - C

Answer- C. It is a very uncommon tumour amongst small bowel malignancies

Small bowel lymphoma

- Lymphoma of the small bowel is the most common small bowel malignancy, accounting accounts for -25% of all primary small bowel malignancies.
- **Predisposing conditions includes-**
 - AIDS
 - Coeliac disease
 - Clinical presentation
 - Gastrointestinal haemorrhage
 - perforation
 - Small bowel obstruction (uncommon)

205. What is the significance of hepatorenal pouch of Morrison -

a) It is the most dependent space in the abdomen and fluid from ascites first accumulates here

b) Pancreatic pseudocyst formation occurs here

c) It is the area where greater omentum originates

d) It is the point of access through which liver biopsy is taken

Correct Answer - A

Answer- A. It is the most dependent space in the abdomen and fluid from ascites first accumulates here

- The posterior right subhepatic space (also known as the hepatorenal fossa or Morrison pouch) separates the liver from the right kidney.

206. Which is true about esophageal leiomyoma?

- a) Common in proximal third of esophagus
- b) Appears like an ovoid intramural mass with smooth outline on CT
- c) It is mass of skeletal muscle overgrowth
- d) Prognosis is generally poor

Correct Answer - B

Answer- B. Appears like an ovoid intramural mass with smooth outline on CT

- Oesophageal leiomyoma is a benign smooth-muscle neoplasm of the oesophagus. It is the most common benign tumour of the oesophagus.
- On CT scan it appear ovoid intramural solitary mars with a smooth surface. Presence of calcification is pathognomonic.

207. Bright red blood in stools is suggestive of all except

a) Hemorrhoids

b) Gastric Ulcer

c) Fistula in Ano

d) Rectal cancer

Correct Answer - B

Answer- B. Gastric Ulcer

Causes of lower gi bleed (bright red blood)

- Diverticulosis
- CA Colon/Rectum
- Anal Fissure
- Angiodysplasia
- Hemorrhoids
- Colonic Polyp
- Fistula in ano

208. What is the treatment of Barrett's Esophagus

a) Endoscopy and biopsy at regular intervals

b) Ivor-Lewis Surgery for resection of esophagus

c) Radiotherapy

d) Laser Excision

Correct Answer - A

Answer- A. Endoscopy and biopsy at regular intervals

- Treatment of Barrett's esophagus is same as for reflux esophagitis Conservative (antacids, H₂ blocking agents, elevation of the head of bed, and avoidance of smoking and alcohol etc.) and Anti-reflux surgery (Nissen's fundoplication is anti-reflux procedure of choice).

209. Which of the following is most common and malignant neuroendocrine tumour of pancreas?

a) Gastrinoma

b) Glucagonoma

c) Insulinoma

d) VIPoma

Correct Answer - C

Answer- C. Insulinoma

- Insulinomas are the most common pancreatic neuroendocrine tumor, but only 10% are malignant.
- Gastrin-producing tumor (gastrinoma) are the most common malignant pancreatic neuroendocrine tumor.

210. A 55 year old sexually active male with stage T1b prostate cancer must be offered -

a) Radical Prostatectomy

b) Orchidectomy

c) Hormone Ablation

d) TURP

Correct Answer - A

Answer- A. Radical Prostatectomy

T1b, T1c & T2 disease

- Management depends on patient's age, life expectancy, performance status, and patient's preferences.
- In younger, fitter men (
- Watchful waiting is an option for elderly with low life expectancy (
- **Advanced ds (T3, T4 or any metastasis)**
- Only Palliative t/t is the option
- l) Androgen Ablation is the first line therapy
- It can be achieved by-**
- 1. Orchiectomy or
- 2) Palliative Radiotherapy

211. Endoscopic ultrasound is extremely useful in staging which tumour?

a) CA Colon

b) CA Esophagus

c) CA Stomach

d) CA Head of pancreas

Correct Answer - B

Answer- B. CA Esophagus

Investigations for staging:

- CECT abdomen
- Endoscopic ultrasound: investigation of choice to assess the T stage of tumor and Lymph node metastasis.

212. Which is the treatment of choice for CA head of pancreas

a) Radiotherapy

b) Chemotherapy+ Radiotherapy

c) Whipple's Surgery

d) Resection of the entire pancreas with adjuvant chemotherapy

Correct Answer - C

Answer- C. Whipple's Surgery

- Whipples operation (Pancreaticoduodenectomy) is the most commonly performed operation for carcinoma of head of Pancreas.

213. 78 year old male, known case of prostate cancer with multiple painful vertebral metastasis. Ideal management plan would be -

a) Androgen ablation with Orchidectomy

b) Palliative Chemotherapy

c) Radical prostatectomy

d) TURP

Correct Answer - A

Answer- A. Androgen ablation with Orchidectomy

Only Palliative t/t is the option

1) Androgen Ablation is the first line therapy

It can be achieved by-

.. Orchiectomy or

2. Drugs (medical castration)

2) Palliative Radiotherapy

214. All of the following are indications for bariatric surgery except -

a) BMI > 40 kg/m²

b) BMI > 35 kg/m² with at least one comorbidity

c) BMI > 30 with long standing diabetes

d) Failure of other methods of weight loss

Correct Answer - C

Answer- C. BMI > 30 with long standing diabetes

Indications for bariatric surgery

- BMI > 40 kg/m²
- BMI > 35 kg/m² with at least one comorbidity
- Patient at high risk of obesity associated morbidity and mortality
- Failure of other methods of weight loss

215. A 40 year old woman undergoing laproscopic cholecystectomy is found to have a mass suspicious of cancer of gall bladder. It appears to have permeated through the entire thickness but there is no involvement of overlying serosa. The next surgical step would be

a) Continue simple cholecystectomy

b) Extended cholecystectomy

c) Palliative radiotherapy

d) Radiofrequency Ablation

Correct Answer - B

Answer- B. Extended cholecystectomy

- The tumor described is in stage T2- Extended cholecystectomy is advised.

216. Recurrent infection leads to which calculi -

a) Struvite

b) Calcium Oxalate

c) Calcium Phosphate

d) Cysteine

Correct Answer - A

Answer- A. Struvite

- Struvite stone tends to grow in alkaline urine.

217. During renal transplantation the renal vein is connected to -

a) IVC

b) External Iliac vein

c) Internal iliac vein

d) Gonadal Vein

Correct Answer - B

Answer- B. External Iliac vein

- The renal artery of the new kidney, previously branching from the abdominal aorta in the donor, is often connected to the external iliac artery in the recipient.

218. All of the following are features of SVC Syndrome except -

a) Facial swelling

b) Dilatation and congestion of neck veins

c) Headache

d) Hoarseness of voice

Correct Answer - D

Answer- D. Hoarseness of voice

- Superior vena cava syndrome (SVCS), is a group of symptoms caused by obstruction of the superior vena cava.
- Shortness of breath is the most common symptom, followed by face or ium swelling.

Following are frequent spnptoms:

- Diftculty breathing
- Headache
- Facial swelling
- Venous distention in the neck and distended veins in the upper chest and arms
- Upperlimb edema
- Lightheadedness
- Cough
- Edema (swelling) of the neck called the collar of Stokes

219. A case of hepatocellular carcinoma involving segment IV and VI without any metastasis in a 62 year old alcoholic may be treated by all of the following except

a) Total hepatectomy and liver transplant

b) Radiation therapy

c) Chemoembolization

d) Cryotherapy

Correct Answer - D

Answer- D. Cryotherapy

Surgical

- Resection
- Orthotopic liver transplant

Ablative

- Percutaneous ethanol injection
- Percutaneous acetic acid injection
- Thermal ablation (cryotherapy, radiofrequency ablation, microwave)

Transarterial

- Embolization
- Chemoembolization
- Radiotherapy

Combination transarterial/ablative

External beam radiation

Systemic

- Chemotherapy
- Hormonal therapy
- Immunotherapy

220. Rotterdam criteria are used to evaluate -

a) CA Breast

b) Aberrations in normal development and involution

c) PCOS

d) CA Cervix

Correct Answer - C

Answer- C. PCOS

Rotterdam criteria

Two of the following three criteria are required :

- Oligo/anovulation
- Hyperandrogenism
- Clinical (hirsutism or less commonly male pattern alopecia) or
- Biochemical (raised FAI or free testosterone)
- Polycystic ovaries on ultrasound

221. Hyperextension of hip producing pain in acute appendicitis is due to which muscle?

a) Gluteus maximus

b) Obdurator Externus

c) Psoas Major

d) Quadratus lumborum

Correct Answer - C

Answer- C. Psoas Major

- In retrocecal appendicitis, inflammed appendix is in contact with psoas muscle causing flexion of the hip joint. Hyperextension of the hip joint may induce abdominal pain. This is known as 'iliopsoas sign'and is typical of retrocecal appendicitis

222. The complications of irrigating fluid used in TURP are all except -

a) Water intoxication

b) Hyperammonemia

c) Hyperthermia

d) Hyperglycemia

Correct Answer - C

Answer- C. Hyperthermia

Feature of TURP Syndrome-

- Water intoxication
- Hyponatremia
- Hypothermia
- DIC (late stages)
- Hyperammonemia
- Hyperglycemia

223. All of the following are true about brown pigment gall stones except

- a) They may occur due to infection with E Coli
- b) More common in Western countries
- c) May be associated with clonorchis sinensis infestation
- d) They are composed of calcium salts of unconjugated bilirubin with varying amounts of cholesterol and protein

Correct Answer - B

Answer- B. More common in Western countries

Brown stones

- Are composed of calcium salts of unconjugated bilirubin with varying amounts of cholesterol and protein (eg. Calcium bilirubinate, calcium palmitate and calcium stearate).
- Are typically found in Asia.
- Brown stones are rare in gallbladder. They form in bile duct and are related to bile stasis and infected bile.
- Gram-negative bacteria (particularly E. coli) secretes β -glucuronidase which deconjugates the soluble conjugated bilirubin. The free unconjugated bilirubin precipitates and combines with calcium and bile to form brown pigment stones. They form whenever static foreign bodies are present in the bile duct, for example 'stents' or parasites such as Clonorchis sinensis and Ascaris lumbricoides.

224. A 19 year old girl sustained blunt abdominal trauma. She was diagnosed of having splenic rupture. Her pulse is 110/min and BP is normal. She is tachypnoes with respiratory rate of 22/min and she is anxious. Her approximate blood loss is -

a) < 750 ml

b) 750 - 1500ml

c) 1500 - 2000ml

d) > 2000ml

Correct Answer - B

Answer- B. 750 - 1500ml

Blood loss- 750- 1500 ml

225. What does priapism in a polytrauma patient signify -

a) Penile injury

b) Spinal Injury

c) Significant head injury

d) Pelvic injury

Correct Answer - B

Answer- B. Spinal Injury

- Priapism may be a feature of spinal cord injury.

226. All of the following are true about prostate specific antigen except -

a) Normal level is 10-14 ng/ml

b) It may be elevated in BPH and Ca Prostate

c) It is produced by prostate

d) It is a glycoprotein

Correct Answer - A

Answer- A. Normal level is 10-14 ng/ml

- It is a glycoprotein produced only in the prostatic cells (both benign & malignant).
- Normal serum level → less than 4 ng/ ml
- 4- 10 ng/ml > this range is common for both BHP and Ca.
- More than 10 ng/ml → approx 75% will have cancer.

227. Best investigation for prostate cancer is -

a) Prostate Specific Antigen

b) Acid Phosphatase

c) PSA velocity

d) Alkaline phosphatase

Correct Answer - C

Answer- C. PSA velocity

- For men with a PSA above 4, PSA velocity of more than .75 ng/ml year is suggestive of Ca.
- While for those with lower PSA levels, rates above 0.5 ng/ml per year should be used to advise biopsy.

228. An infected pancreatic necrosis is treated with

a) iv Antibiotics

b) Laprotomy and surgical debridement

c) Ultrasound guided drainage

d) TPN

Correct Answer - B

Answer- B. Laprotomy and surgical debridement

Treatment

- An infected pancreatic necrosis is managed by laparotomy and surgical debridement of the necrotic tissue.
- Whereas pancreatic abscess are t/t by external drainage.
- Sterile necrotic pancreatitis is managed conservatively

229. Midline caecum results from which of the following abnormality?

a) Malrotation

b) Mixed rotation

c) Reverse rotation

d) Non rotation

Correct Answer - B

Answer- B. Mixed rotation

- Mixed (incomplete) rotation : The intestine does not rotate as it re enters the abdomen after physiological hernia caecum just lies inferior to the pylorus in the midline.

230. Not used for intravascular volume maintenance is

a) Hydroxy ethyl starch

b) Dextran

c) Erythropoetin

d) Gelatin

Correct Answer - C

Answer- C. Erythropoetin

Erythropoetin Injections

- Erythropoietins available for use as therapeutic agents are produced by recombinant DNA technology in cell culture, They are used in treating anemia resulting from chronic kidney disease, chemotherapy induced anemia in patients with cancer, inflammatory bowel disease (Crohn's disease and ulcerative colitis).

231. Nerves of Latarjet are spared in -

a) Highly selective vagotomy

b) Vagotomy and antrectomy

c) Vagotomy and Drainage

d) Truncal Vagotomy

Correct Answer - A

Answer- A. Highly selective vagotomy

Types of vagotomy:

1. 1) Highly selective vagotomy (HSV)
 2. 2) Vagotomy and drainage (V+D)
 3. 3) Vagotomy and antrectomy (V+A)
- In Highly selective vagotomy (also known as parietal cell vagotomy or Proximal gastric vagotomy) the vagal innervation to the antrum and pylorus (nerves of Latarjet) are preserved, only the vagal supply to the proximal two-thirds of stomach (where essentially all the parietal cells are located) is cut. This preserves gastric motility.

232. Water intoxication occurs in all of the following except

a) TURP syndrome

b) Enema for colonic wash

c) Gastric lavage

d) Heroin Abuse

Correct Answer - D

Answer- D. Heroin Abuse

- Transurethral Resection of Prostate (TURP) Syndrome
- Enema
- Gastric lavage
- Syndrome of Inappropriate ADH Secretion (SIADH)
- Ecstasy (MDMA) or Amphetamine use
- Intravenous Infusion of Hypotonic Fluids
- Beer Potomania
- Psychogenic Polydipsia
- Attempt to Hide Drug Abuse

233. All of the following are true about pancreatic injury except

a) Penetrating injuries are common

b) Commonly isolated injuries occur

c) Serum amylase is raised

d) Peritoneal lavage is not helpful for diagnosis

Correct Answer - B

Answer- B. Commonly isolated injuries occur

- In blunt injuries which are usually the result of midline upper abdominal trauma (eg. car seat belt, cycle handle), junction of the neck and body of the pancreas are most commonly injured as they are pressed against the vertebral column.
- Major abdominal vascular injuries are present in more than 75% of cases of penetrating trauma.
- Pancreas being a retroperitoneal structure, peitoneal lavage is not helpful in making the diagnosis of pancreatic injury.
- CT xan is the best diagnostic procedure, apart from an exploratory laprotomy

234. All of the following are principles of tendon transfers except

a) There should be no contracture at the joint

b) The line of pull must be straight

c) One tendon must do one function only

d) A muscle power less than 3 can also be used

Correct Answer - B

Answer- B. The line of pull must be straight

Adequate strength

- The tendon chosen as a donor for transfer must be strong enough to perform its new function in its altered position.
- Selecting an appropriate motor is important because a muscle will lose one grade of strength following transfer. Do not transfer muscle that has been reinnervated or muscle that was paralyzed and has returned to function.

235. All of the following nerves are commonly used for grafting except -

a) Medial antebrachial Cutaneous nerve

b) Dorsal sensory branch of vagal nerve

c) Musculocutaneous nerve

d) Sural nerve

Correct Answer - C

Answer- C. Musculocutaneous nerve

Most common nerves used for grafting:

1. Medial antebrachial Cutaneous nerve
2. Dorsal sensory branch of vagal nerve
3. Greater Auricular
4. Sural nerve

236. Central line may be inserted in all of the following veins except -

a) Internal Jugular vein

b) Femoral Vein

c) Subclavian Vein

d) Common iliac vein

Correct Answer - D

Answer- D. Common iliac vein

Common sites of central line insertion

1. Internal jugular vein
2. Subclavian vein
3. Axillary vein
4. Femoral vein

237. Immediately after kidney donation what happens to the creatinine level in the donors

a) Remains Same

b) Increases

c) Decreases

d) Level is independent of the donation

Correct Answer - B

Answer- B. Increases

- After kidney donation both the serum creatinine and creatinine clearance increase.

238. All of the following are true about mammography except -

a) It can detect microcalcifications

b) It is a screening tool in breast cancer

c) It is basically X ray imaging of the breast

d) It has a significant radiation risk

Correct Answer - D

Answer- D. It has a significant radiation risk

Mammography

- Is X-ray imaging of breasts to detect tumors or other abnormalities.
- Mammography is the screening modality of choice for breast cancer as it can detect microcalcifications which is often the only early manifestation of ductal ca in situ.

It is of two types -

1. Screening mammography is used to detect breast changes in women who have no signs or symptoms of any breast abnormality. This usually requires at least 2 mammograms from different angles of each breast - a) the cranio-caudal (cc) view and b) the mediolateral-oblique (MLO) view.
 2. Diagnostic mammography- used to evaluate abnormal findings on a screening mammogram.
- Radiation risk (Risk of carcinoma)- No doubt that ionizing radiation (X rays) can itself cause breast cancer.

239. A 57 year old male suffering from acute pancreatitis develops sudden onset breathlessness with a CVP < 18mmHg. The chest xray shows bilateral infiltrates. The possible diagnosis is

a) ARDS

b) Myocardial infarction

c) Congestive left heart failure

d) Pulmonary embolism

Correct Answer - A

Answer- A. ARDS

ARDS Criteria

- Acute, meaning onset over 1 week or less.
- Bilateral opacities consistent with pulmonary edema must be present and may be detected on CT or chest radiograph.
- PF ratio < 300 mmHg with a minimum of 5 cmH₂O PEEP (or CPAP).
- CVP < 18 mmHg.

240. What may be mistaken as carcinoma breast on appearance -

a) Breast abscess

b) Nodular mucinosis

c) Cystosarcoma Phylloids

d) Fibroadenosis

Correct Answer - B

Answer- B. Nodular mucinosis

- Nodular mucinosis may be mistaken for mucinous carcinoma of breast on clinical and imaging examinations, and should be included in the differential diagnosis in cases of mucinous lesions occurring near the nipple in a young women.

241. The standard of care in splenectomy patients involves use of all the above vaccines except

a) H Influenzae type b

b) Meningococcal vaccine

c) Pneumococcal vaccine

d) Typhoid vaccine

Correct Answer - D

Answer- D. Typhoid vaccine

The standard of care for postsplenectomy patients includes immunization within 2 weeks of splenectomy with:

- Polyvalent pneumococcal vaccine (PPV23),
- H. influenzae type b conjugate, and
- Meningococcal polysaccharide vaccine

242. Breast cancer mainly spreads to the vertebrae via

a) Arterial route

b) Direct Invasion

c) Batsons venous plexus

d) Via Axillary lymph nodes

Correct Answer - C

Answer- C. Batsons venous plexus

- Metastasis of breast cancer to bone, and especially to thoracic vertebrae, is common due to the direct connection between the intercostal veins draining the breast and the internal vertebral plexus aka known as Batson's plexus.

243. Triple negative breast cancer- What is true -

a) It has good prognosis

b) There are no receptors positive for ER, PR and HER2 NEU

c) It is a cancer that cannot be diagnosed by triple assessment

d) Three Radiologic investigations ie CT scan, MRI and USG are needed for diagnosis

Correct Answer - B

Answer- B. There are no receptors positive for ER, PR and HER2 NEU

- Triple-negative breast cancer refers to any breast cancer that does not express the genes for estrogen receptor (ER), progesterone receptor (PR) or Her2/neu.

244. BIRAD's Score is designed to

- a) Maintain uniformity in the reporting of imaging findings of various breast diseases
- b) Prognosticate CA Breast
- c) Evaluate the effect of brachial artery thrombosis
- d) Clinicoradiological association of breast malignancy

Correct Answer - A

Answer- A. Maintain uniformity in the reporting of imaging findings of various breast diseases

- BIRADS stands for Breast Imaging-Reporting and Data System. It's a quality assurance tool developed by American college of Radiology.
- The system is designed to standardize both the reporting of imaging findings and the recommendations for further management.

245. Management of subclavian artery injury due to inadvertent central catheter insertion include all of the following except

a) Closure device

b) Mechanical Compression

c) Covering stent

d) Tract embolization

Correct Answer - B

Answer- B. Mechanical Compression

- Use of arterial closure devices can be attempted, especially when the distance from the skin to the artery tract is less than 5 cm and access to the artery is still available. Tract embolization with Gelfoam can be employed.

246. Which of the following is a triple negative breast cancer -

a) Colloid Cancer

b) Secretory cell cancer

c) Acinic Cell Carcinoma

d) Mucinous Carcinoma

Correct Answer - B

Answer- B. Secretory cell cancer

- Upon histologic examination, triple-negative breast tumors mostly fall into the categories of secretory cell carcinoma or adenoid cystic types (both considered less aggressive); medullary cancer and grade 3 invasive ductal carcinomas with no specific subtype; and highly aggressive metastatic cancer.

247. What is the most common immunosuppressant regimen used in renal transplant for maintenance?

a) Calcineurin inhibitors + Purine antagonists + Glucocorticoids

b) Cyclophosphamide + Purine antagonists + Glucocorticoids

c) Glucocorticoids + Cyclophosphamide

d) Calcineurin inhibitors + Purine antagonists + Basliximab

Correct Answer - A

Answer- A. Calcineurin inhibitors + Purine antagonists + Glucocorticoids

- Maintenance immunosuppression for renal transplantation typically consists of 3 types of drugs in combination: a glucocorticosteroid, purine antagonist (azathioprine or mycophenolate mofetil), and calcineurin inhibitor (cyclosporine or tacrolimus).

248. Inflammatory Carcinoma of breast is classified under -

a) T4b

b) T4c

c) T4d

d) T3

Correct Answer - C

Answer- C. T4d

- Inflammatory breast carcinoma is one of the most malignant form of breast cancer.
- It has been specifically assigned a special T code, T4d (which falls under stage IIIb disease).

249. Which of the following conditions needs emergency endotracheal intubation?

a) GCS < 7

b) Tension pneumothorax

c) Cardiac tamponade

d) Bleeding gastric ulcer

Correct Answer - A
Answer- A. GCS < 7

250. When does a burns patient need to be intubated -

a) Deep facial burns with singed nasal hair

b) Superficial facial burns

c) Pulse rate > 100/min

d) Crepitations on auscultation

Correct Answer - A

Answer- A. Deep facial burns with singed nasal hair

Indications for intubation in burns patients

- Persistent cough, stridor, or wheezing
- Hoarseness
- Deep facial or circumferential neck burns
- Nares with inflammation or singed hair
- Carbonaceous sputum or burnt matter in the mouth or nose
- Blistering or edema of the oropharynx
- Depressed mental status, including evidence of drug or alcohol use
- Respiratory distress
- Hypoxia or hypercapnia
- Elevated carbon monoxide and/or cyanide levels.

251. All of the following are absolute indications for intubation except

a) Depressed level of consciousness

b) Bleeding into the airway

c) Falling O₂ Saturation

d) Maxillofacial fractures

Correct Answer - D

Answer- D. Maxillofacial fractures

Basic indications for emergency endotracheal intubation :

1. Airway blockage

- Severe blunt or penetrating injury to the face or neck may be accompanied by swelling and an expanding hematoma, or injury to the larynx, trachea or bronchi.

2. Hypoxemia-

- Examples of such conditions include cervical spine injury, multiple rib fractures, severe pneumonia, acute respiratory distress syndrome (ARDS), or near-drowning.

3. Depressed level of consciousness-

- The most common indication for tracheal intubation is for the placement of a conduit through which nitrous oxide or volatile anesthetics may be administered.

252. Which intubation is preferred in case of bilateral mandibular fractures ?

a) Orotracheal intubation

b) Naso tracheal intubation

c) Cricothyrotomy

d) Submental intubation

Correct Answer - B

Answer- B. Naso tracheal intubation

- Time of surgery should be carefully planned allowing reduction of tissue edema and avoiding development of malunion. Nasal intubation is the choice of intubation by surgeon, providing them with free access to operating field. Blind awake nasal intubation is safe and simple with some experience in difficult airway.

253. All of the following are important precautions to prevent infections associated with arterial catheterizations except -

a) Education of health personnel

b) Hand hygiene

c) Use sterile semi permeable dressing

d) Use of femoral artery more than radial artery

Correct Answer - D

Answer- D. Use of femoral artery more than radial artery

- Educate healthcare personnel regarding the indications for intravascular catheter use, proper precautions for insertion and maintenance of intravascular catheters, and appropriate infection control measures to prevent catheter-related infections.
- Insertion technique Hand hygiene is to be performed before insertion or manipulation of arterial catheter.
- Maximum sterile barrier precautions should be used for axillary or femoral arterial catheter placement.
- Site selection Radial, dorsalis pedis and brachial sites are to be used preferentially over femoral site.

254. What is the treatment for Cardiac tamponade -

a) Immediate anticoagulation

b) Emergency subxiphoid percutaneous drainage

c) Transesophageal pericardiocentesis

d) Stabilize and observe

Correct Answer - B

Answer- B. Emergency subxiphoid percutaneous drainage

Emergency subxiphoid percutaneous drainage -

- This is a life-saving bedside procedure. The subxiphoid approach is extrapleural; hence, it is the safest for blind pericardiocentesis. A 16- or 18-gauge needle is inserted at an angle of 30-45 degree to the skin, near the left xiphocostal angle, aiming towards the left shoulder. When performed emergently, this procedure is associated with a reported mortality rate of approximately 4% and a complication rate of 17%.

255. A 4 year old child presents with shock and circulatory collapse. It is not possible to get iv access. Then What must be done next -

a) Intraosseus cannulation

b) Intracardiac Infusion

c) Thoracotomy

d) CPR

Correct Answer - A

Answer- A. Intraosseus cannulation

- An intraosseous line is as efficient as an intravenous route and can be inserted quickly, even in the most poorly perfused patients.
- Intraosseous (IO) insertion was typically recommended for use in children younger than 6 years; however, it is now recognized to be both safe and effective in older children and adults.

256. The intercostal drainage tube is inserted in the

a) 5th intercostal space in the midaxillary line

b) 3rd intercostal space in the midaxillary line

c) 4th intercostal space in the anterior axillary line

d) 9th intercostal space in the midclavicular line

Correct Answer - A

Answer- A. 5th intercostal space in the midaxillary line

Safe triangle of icd insertion

- Anterior border of latissimus dorsi.
- Lateral border of pectoralis major.
- Horizontal line superior to the nipple.
- Horizontal line inferior to axilla.
- More specifically, the tube is inserted into the 4th or 5th intercostal space slightly anterior to the mid axillary line

257. What is extrapleural pneumonectomy -

a) Removal one lobe of lung

b) Removal of a complete lung

c) Removal of pleura of one lung

d) Removal of an affected lung with its pleura and part of diaphragm

Correct Answer - D

Answer- D. Removal of an affected lung with its pleura and part of diaphragm

- Extrapleural pneumonectomy (EPP): removal of the affected lung, plus part of the diaphragm, the parietal pleura (lining of the chest) and the pericardium (lining of the heart) on that side.
- The linings are replaced by Gore-Tex in this radical and painful surgery that is used primarily for treatment of malignant mesothelioma.

258. Indications for emergency thoracotomy are all of the following except

a) Major tracheobronchial injuries

b) Cardiac tamponade

c) Penetrating injuries to anterior chest

d) Tension Pneumothorax

Correct Answer - D

Answer- D. Tension Pneumothorax

Emergency thoracotomy is indicated after chest trauma in following conditions :

- Cardiac arrest (resuscitative thoracotomy)
- Massive hemothorax (>1500 mL of blood through the chest tube acutely or > 200-300 ml/hr after initial drainage.
- Penetrating injuries of the anterior aspect of the chest with cardiac tamponade.
- Large open wounds of the thoracic cage.
- Major thoracic vascular injuries in the presence of hemodynamic instability

259. Polytrauma in paediatric age group most common feature is

a) Hypothermia

b) Hypovolemic shock

c) Hypotension

d) Hypoxemia

Correct Answer - B

Answer- B. Hypovolemic shock

- Due to the greater physiological capacity and ability of children to compensate for fluid loss, hypotension is a very late and ominous sign of hypovolaemic shock.

260. Advantage of minimally invasive surgery over open surgery are all except

a) Wide/better field of vision

b) Less operative time

c) Less post - operative pain

d) Less post operative morbidity

Correct Answer - B

Answer- B. Less operative time

Decrease in wound size

- Reduction in wound infection, dehiscence, bleeding, herniation and nerve entrapment
- Decrease in wound pain
- Improved mobility
- Decreased wound trauma
- Decreased heat loss
- Improved vision

261. In pylorus, Pancreatoduodenectomy preserving following is not resected

a) Pyloric antrum

b) CBD

c) Duodenum

d) None

Correct Answer - A

Answer- A. Pyloric antrum

- The standard resection for a tumour of the pancreatic head or the ampulla is a pylorus-preserving pancreatoduodenectomy (PPPD).

262. Green coloured i.v. cannula, the size is

a) 18

b) 20

c) 22

d) 24

Correct Answer - A

Answer- A. 18

- Green- 18
- Pink- 20
- Blue- 22
- Yellow/lime- 24

263. As per trimodal distribution, in major trauma immediate deaths occurs in % of all deaths

a) 30%

b) 40%

c) 45%

d) 35%

Correct Answer - C

Answer- C. 45%

- Approx half of trauma deaths occur immediately after trauma, second mortality peak occurs within hours of injury and accounts for about 30% of deaths.

264. AKT 1 amplification seen in

a) CA bladder

b) CA colon

c) Breast cancer

d) Gastric cancer

Correct Answer - D

Answer- D. Gastric cancer

- AKT 1 amplification- Glioblastoma, gliosarcoma, gastric cancer, lung cancer.

265. BIRADS stage 5 is

a) Negative

b) Probably benign

c) Suspicious abnormality

d) Highly suggestive of malignancy

Correct Answer - D

Answer- D. Highly suggestive of malignancy

266. Ca prostate most common metastasis to

a) Skull

b) Femur

c) Lumbar spine

d) Sacrum

Correct Answer - C

Answer- C. Lumbar spine

Most common metastatic sites of prostate carcinoma are lymph nodes & bones.

- Lymphatic metastasis occurs most commonly to → obturator lymph nodes.
- Most common site of bony metastasis is lumbar spine.

267. Which cancer develops in chronic ulcer

a) Malignant melanoma

b) Basal cell CA

c) Squamous cell CA

d) Kaposi sarcoma

Correct Answer - C

Answer- C. Squamous cell CA

- Chronic ulcer can cause squamous cell carcinoma.

268. Initial treatment of keloid

a) Topical steroid

b) Intralesional steroid

c) Excision

d) Radiotherapy

Correct Answer - B

Answer- B. Intralesional steroid

- Intralesional injection of steroid (Triamcinolone acetate) is now recommended as the first line of t/t for keloid.

269. In FAST what is not assessed

a) Right upper quadrant

b) Left upper quadrant

c) Hypogastrium

d) Subxiphoid area

Correct Answer - C

Answer- C. Hypogastrium

270. FAST USG focuses on all of the following areas except

a) Splenic

b) Hepatic

c) Pleura

d) Pelvic

Correct Answer - C

Answer- C. Pleura

FAST focus only on four areas : -

- Subxiphoid area (pericardium)
- Right upper quadrant (liver)
- Left upper quadrant (spleen)
- Pelvis

271. A patient came with lower chest trauma with pain in abdomen. His BP is 60/40 pulse 120 next best investigation

a) CT abdomen

b) USG FAST

c) MR Angiography

d) X-ray abdomen

Correct Answer - B

Answer- B. USG FAST

- USG is the investigation of choice in both stable as well as unstable patients.
- "Blunt abdominal trauma initially is evaluated by FAST examination in most major trauma centers"

272. Duodenal blow out which is done

a) Transcutaneous peritoneal drainage

b) Secondary closure

c) Re-exploration

d) None

Correct Answer - A

Answer- A. Transcutaneous peritoneal drainage

Duodenal blow out is massive leakage from duodenal stump following Bilroth II gastrectomy.

Clinical features

- It usually occurs on 2nd to 7th postoperative days.

It usually presents as: -

- Sudden intense thoracoabdominal pain
- Sudden elevation in pulse and temperature
- General deterioration of condition

Treatment-

- Total parenteral nutrition
- Fistula closure can be anticipated within 2-3 weeks.
- Adequate drainage

273. In surgical procedure NOTES entry point is through

a) Anus

b) Umbilicus

c) Mouth

d) None

Correct Answer - C

Answer- C. Mouth

- Scarless surgery, also known as Natural Orifice Transluminal Endoscopic Surgery (NOTES), involves passing surgical instruments through a natural orifice, such as mouth and vagina

274. Paradoxical respiration seen in

a) Diaphragm rupture

b) Hemoperitoneum

c) Flail chest

d) Pneumothorax

Correct Answer - C
Answer- C. Flail chest

275. Most serious injury is at

a) open pneumothorax

b) diaphragmatic injury

c) Flail chest

d) Single rib fracture

Correct Answer - A

Answer- A. open pneumothorax

- This is a large open defect in the chest (> 3 cm), leading to equilibration between intrathoracic and atmospheric pressure.
- Air accumulates in the hemithorax (rather than in the lung) with each inspiration, leading to profound hypoventilation on the affected side and hypoxia.

276. Orichidopexy done at

a) 2 months

b) 6 months

c) 12 months

d) 24 months

Correct Answer - B

Answer- B. 6 months

- Orichidopexy should be done at 6 months, because spontaneous descend of the testis will not occur after 4 months of age.
- Best time of orichidopexy is around 6 months.

277. In cryptorchism histological changes appear in testis

a) 4 months

b) 6 months

c) 8 months

d) 1 year

Correct Answer - B
Answer- B. 6 months

278. Most common cause of pseudoaneurysm

a) iv drug abuse

b) Trauma

c) Congenital

d) None

Correct Answer - B

Answer- B. Trauma

- When wall, is ruptured and there is collection of blood outside the vessel wall (extravascular hematoma) that is freely
- communicating with vessel wall → false aneurysm (Pseudoaneurysm). Most common cause of false aneurysm is Trauma.

279. Polytrauma patient back examination

a) log roll

b) Barrel role

c) Chin lift

d) None

Correct Answer - A

Answer- A. log roll

- Once the patient has been evaluated anteriorly a log roll should be performed to inspect the back.
- One member of the team is responsible for maintaining in-line spinal stabilisation.

280. Penile carcinoma upto urethra stage -

a) T1

b) T3

c) T4

d) T2

Correct Answer - B

Answer- B. T3

- T3 → Invades urethra or prostate

281.

Which of the following is not a contraindication for resection of head of pancreas

a) Liver metastasis

b) Ascites

c) Retroperitoneal seedings

d) Involvement of major artery

Correct Answer - B

Answer- B. Ascites

Signs of unresectability in CA pancreas

- Encasement/invasion/occlusion of portal vein, sup. mesentric artery or vein.
- Extension beyond pancreatic capsule.
- Extension into retroperitoneum.
- Involvement of nerves/nodes around celiac axis or sup. mesentric artery.
- Extension beyond hepatoduodenal ligament

282. Dimpling in carcinoma breast is due to

a) Edema

b) Contraction of cooper's ligaments

c) Subdermal lymphangitis

d) Scaring

Correct Answer - C

Answer- C. Subdermal lymphangitis

- Peaud's orange is produced due to obstruction of superficial lymph vessels by cancer cell.
- This causes edema of the skin giving rise to an appearance like that of the skin of an orange (Peau'd orange appearance).

283. First step in management of raised intracranial pressure

a) Airway maintainance

b) Breathing

c) iv mannitol

d) Loading dose of epsolin

Correct Answer - A

Answer- A. Airway maintainance

- ABC is followed i.e. Airway Breathing then Circulation is evaluated in order.

284. Most common cause of upper GI bleed

a) Gastric cancer

b) Oesophageal varices

c) Duodenal ulcers

d) Gastric ulcers

Correct Answer - C

Answer- C. Duodenal ulcers

Causes of upper GI bleeding (in descending order)

- Peptic ulcer → Duodenal ulcer → gastric ulcer
- Oesophageal varices
- Gastritis erosions
- Mallory-Weiss tears
- Uncommon causes → Gastric carcinoma, esophagitis, pancreatitis.

285. For pancreatic injury true is

a) Most are iatrogenic

b) Blunt trauma most common

c) Urine amylase is diagnostic

d) HRCT is investigation of choice

Correct Answer - D

Answer- D. HRCT is investigation of choice

- Pancreatic injuries are mostly due to penetrating injuries.
- Moderate injuries usually require operative exploration, debridement, and the placement of external drains.

286. GCS minimum value

a) 3

b) 6

c) 0

d) 4

Correct Answer - A

Answer- A. 3

- Glasgow coma scale is used to determine the conscious level of the patient.
- Ranges from 3 to 15.

287. 75% Lymph from breast goes to

a) Axillary L.N.

b) Subclavicular L.N.

c) Internal mammary L.N.

d) Cephalic L.N.

Correct Answer - A

Answer- A. Axillary L.N.

Lymphatic drainage of Breast is as follows : -

- Axillary nodes (75%)
- Internal mammary or Paresternal nodes (20%)
- Posterior intercostal lymph nodes (5%)

288. Slit shaped nipple seen in

a) Duct ectasia

b) Duct pappiloma

c) Paget's disease

d) CA breast

Correct Answer - A

Answer- A. Duct ectasia

- Duct ectasia is dilatation of lactiferous ducts associated with periductal inflammation.
- Chronic inflammation and scarring will lead to indrawing and slit-shaped inversion of the nipple.
- If secondary infection supervenes, a mammary duct fistula can also develop.

289. A female undergone surgery for left breast cancer 3 yrs back now developed blue nodule on same side

a) Lymphangiosarcoma

b) Recurrence

c) Hemangioma

d) Cellulitis

Correct Answer - A

Answer- A. Lymphangiosarcoma

- Angiosarcoma is a vascular tumor which may arise de novo in the breast or as a complication of the radiation therapy.

290. Female with 10 weeks of pregnancy having a breast lump lateral to areola 3x1 cm, Usg breast Normal, what is the next level of management

a) FNAC

b) Lumpectomy

c) MRI

d) Mammogram

Correct Answer - A

Answer- A. FNAC

- First investigation is- FNAC

**291. Bismuth classification for
cholangiocarcinoma, type IV is**

a) Common hepatic duct

b) Bifurcation only

c) Bifurcation and B/L secondary intrahepatic ducts

d) Bifurcation and B/L right secondary intrahepatic ducts

Correct Answer - C

Answer- C. Bifurcation and B/L secondary intrahepatic ducts

292. Mirrizi syndrome

a) Cyst present in CBD

b) Stone in cystic duct compressing CBD

c) Obstruction of pancreatic duct

d) Stone in Rt hepatic duct

Correct Answer - B

Answer- B. Stone in cystic duct compressing CBD

- It comprises obstructive jaundice due to stone impacted in the neck of gall bladder, which compresses the common hepatic duct and eventually ulcerates into common hepatic duct causing cholecysto-choledochal fistula

293. Yellow nodules over palm diagnosis

a) implantation dermoid

b) sebaceous cysts

c) Corn

d) Melanoma

Correct Answer - C

Answer- C. Corn

- A corn is a localized keratosis of the skin. Histologically a corn is composed of keratin masse with intact basal layer.
- It usually occurs at the sites of frictional pressure on the sole, foot and toes. This often occurs due to ill fitting or tight shoes.
- Corn is thicker than callosity and causes more cofloent to the patient.

294. 6 weeks post burns, now patient is posted for surgery increased is intraop is due to

a) Succinyl choline

b) Anesthetic negligence

c) Post burn state

d) None

Correct Answer - A

Answer- A. Succinyl choline

- Succinylcholine can cause dangerous hyperkalemia in burn patients.

295. Thimble bladder is seen in

a) Tuberculosis

b) Pyelonephritis

c) Radiation cystitis

d) Chemical cystitis

Correct Answer - A

Answer- A. Tuberculosis

- Bladder tuberculosis is almost always secondary to renal tuberculosis.
- Tiny white translucent tubercles develop all over.
- These tubercles tend 'cobblestone' appearance on cystoscopy.
- There is considerable submucous fibrosis which causes diminished capacity of bladder. Scanned & fibrosed, small capacity bladder is called thimble bladder.

296. Renal TB mode of infection

a) Direct from bowel

b) Ascending

c) Hematogenous

d) Lymphatic

Correct Answer - C

Answer- C. Hematogenous

- Genitourinary tuberculosis is always secondary to pulmonary infection, though in many cases, the primary focus has healed or is quiescent.
- Infection occurs via the hematogenous route

297. MERCEDES BENZ sign seen in

a) Volvulus

b) Gall stone

c) Struvite calculus

d) Intussuception

Correct Answer - B

Answer- B. Gall stone

- Mercedes benz sign (Also known as fack stone sign)
- On xray → Gall stones

298. Cholangiocarcinoma most commonly metastases to-

a) Liver

b) Bones

c) Lung

d) Pancreas

Correct Answer - A

Answer- A. Liver

- Most, patients present with abnormal liver function tests or frank jaundice
- Diagnosis by ultrasound, MDR-CT or MRCP scanning
- Most common site of metastasis is liver.

299. Piles occurs at-

a) Superior rectal vein

b) Inferior rectal vein

c) Superior Hemorrhoidal artery

d) None

Correct Answer - A

Answer- A. Superior rectal vein

- Internal hemorrhoids in association with superior rectal vessels are located at 3, 7 and 11 O'clock positions corresponding to left, right posterior and right anterior branches of these vessels.

300. Risk factor for bladder carcinoma is

a) Clonorchis sinensis

b) Schistosoma hematobium

c) Plasmodium

d) None

Correct Answer - B

Answer- B. Schistosoma hematobium

- Cigarette smoking is the main etiological factor.
- Occupational exposures to chemicals
- Schistosoma haematobium
- Drugs such as phenacetin & chlornaphazine
- Cyclophosphamidetherapy
- Pelvic radiation

301. Surgical treatment of parotid tumor involving the deep lobe is

a) Total parotidectomy with facial nerve preservation

b) Total parotidectomy with facial nerve sacrifice

c) Sub total parotidectomy

d) Subtotal parotidectomy with facial nerve sacrifice

Correct Answer - A

Answer- A. Total parotidectomy with facial nerve preservation

- The primary treatment of salivary malignancies is surgical excision.
- For parotid tumors that arise in the lateral lobe, superficial parotidectomy with preservation of CN VII is indicated

302. Open biopsy is done for salivary gland tumors unless they are arising from

a) Palate

b) Buccal

c) Sublingual

d) Parotid

Correct Answer - D

Answer- D. Parotid

- Open biopsy of the parotid or submandibular gland is not advised as it risks minor seeding and may complicate the indicated surgery.

303. True about follicular carcinoma of thyroid

a) More common in endemic area

b) Non-encapsulated

c) Mean age 40 years

d) Histopathology differentiates adenoma from carcinoma easily

Correct Answer - A

Answer- A. More common in endemic area

- An increased incidence of cancer (usually follicular) has been reported from endemic areas. Dominant or rapidly growing nodules in longstanding goiters should always be subjected to aspiration cytology.

304. Most common Cause of pseudaneurysm of aorta is

a) Smoking

b) Trauma

c) Marfans Syndrome

d) Age related degeneration

Correct Answer - B

Answer- B. Trauma

- Aortic pseudoaneurysms are contained ruptures of the aorta in which the majority of the aortic wall has been breached, and luminal blood is held in only by a thin rim of the remaining wall or adventitia. **They typically occur from focal aortic transection-**
 - .. penetrating trauma
 - .. Blunt trauma

305. Most common site of aortic aneurysm rupture is

a) Descending thoracic aorta

b) Arch of aorta

c) Aortic Root

d) Infraarenal aorta

Correct Answer - D

Answer- D. Infraarenal aorta

- Ruptured aneurysm is the most common cause of aortic rupture and they are most common in the abdomen.

306. Most common site of traumatic aortic rupture is

a) Descending thoracic aorta

b) Descending thoracic aorta

c) Arch of aorta

d) Aortic Root

Correct Answer - A

Answer- A. Descending thoracic aorta

- The proximal descending aorta, where the relatively mobile aortic arch can move against the fixed descending aorta (ligamentum arteriosum), is at greatest risk from the shearing forces of sudden deceleration. Thus the aorta is at greatest risk in frontal or side impacts, and falls from heights.

307. Structure arising from the apex of infected non vital tooth is

a) Dentigerous Cyst

b) Odontogenic Keratocysts

c) Radicular Cyst

d) Gorlin Cysts

Correct Answer - C

Answer- C. Radicular Cyst

Is the most common type of jaw cyst.

- Radicular cyst develops at the apex of an infected, nonvital tooth.
- If the tooth is removed and the cyst persists, it is called a residual cyst
- There is a bimodal incidence within the third and sixth decades of life and they are rarely seen in the primary dentition.
- Usually presents as a radiolucent lesion around the apex of a tooth root.

308. A lady with a long stading thyroid nodule is planned for a subtotoal thyroidectomy. Before the surgery the surgeon must check/ do

a) Serum Calcium levels

b) Serum PTH assay

c) Indirect Larngoscopy

d) Iodine 131 scan

Correct Answer - C

Answer- C. Indirect Larngoscopy

- Nerve Damage to recurrent / superior laryngeal nerve is a known complication of thyroidectomy.
- Hence it is important to document the state ofthe vocal cords before surgery to prevent litigation liability.

309. Smoking is a risk factor for which of the following conditions

a) Periductal mastitis

b) CA Breast

c) Mondor's Disease

d) Fibroadenoma

Correct Answer - A

Answer- A. Periductal mastitis

- Zuska's disease, also called recurrent periductal mastitis, is a condition of recurrent retroareolar infections and abscesses.
- Smoking has been implicated as a risk factor for this condition.
- This syndrome is managed symptomatically by antibiotics coupled with incision and drainage as necessary

310. Phytobezoars are composed of

a) Hair

b) Vegetable Matter

c) Undigested food

d) Desquamated epithelial cells

Correct Answer - B

Answer- B. Vegetable Matter

- Phytobezoars are composed of vegetable matter and, are usually seen in association with gastroparesis or gastric outlet obstruction.

311. All of thre following are causes of death in burn patients except -

a) ARDS

b) Shock

c) Sepsis

d) Hyperkalemia

Correct Answer - D

Answer- D. Hyperkalemia

- Shock
- Hypothermia
- Sepsis
- ARDS
- Multiple organ failure

312. All of the following are poor prognostic markers of CA Breast except

a) PCNA Positivity

b) ER positivity

c) Her 2 neu positivity

d) p53 over expression

Correct Answer - B

Answer- B. ER positivity

- Patients with hormone receptor positive tumor show good response to hormone therapy.
- Tumors positive for estrogen or progesterone receptors have a higher response rate to endocrine therapy than tumors that do not express estrogen or progesterone receptors.
- Tumors positive for one receptor and not the other have an intermediate response rate.

313. Which is the investigation of choice for retroperitoneal soft tissue sarcomas

a) MRI

b) CT Scan

c) USG

d) PET scan

Correct Answer - B

Answer- B. CT Scan

- CT is the investigation of choice for retroperitoneal soft tissue sarcomas.

314. Spermatoceles are most commonly found at

a) The Head of epididymis

b) Testis

c) Prostate

d) Seminal Vesicles

Correct Answer - A

Answer- A. The Head of epididymis

- Spermatoceles typically arise from the caput (head) of the epididymis, which is located on the superior aspect of the testicle.

315. Testing of recipient cells against donor serum is

a) Major Cross Matching

b) Minor Crossmatching

c) Direct Coomb's Test

d) Rh Group Matching

Correct Answer - B

Answer- B. Minor Crossmatching

- Minor cross-match: Recipient red cells are tested against donor serum to detect donor antibodies directed against a patient's antigens.
- This is no longer required. It is assumed that the small amount of donor serum and antibodies left in a unit of packed cells will be diluted in a recipient

316. Long term complication of live kidney donors are

a) Hypertension

b) HPV Infection

c) Renal Carcinoma

d) Pyelonephritis

Correct Answer - A

Answer- A. Hypertension

Hypertention

- Cardiovascular risks
- **Preteinuria**
- End stage renal disease

317. The benefits of stopping smoking before surgery are all except

a) Better wound healing

b) Better mucociliary clearance

c) Better bone healing

d) Less risk of malignancies associated with smoking

Correct Answer - D

Answer- D. Less risk of malignancies associated with smoking

Acute smoking has been associated with increased ST depression during anesthesia.

- Decreased risk of graft failure.
- Decreased wound related complications such as dehiscence and infection.
- Increased rate of bone healing.
- Reduced length of admission.
- Permanent smoking cessation reduces the risk of heart disease, stroke, cancer and premature death

318. Which suture is absorbed in 180 days

a) Polydioxanone

b) Catgut

c) Chromic Catgut

d) Nylon

Correct Answer - A

Answer- A. Polydioxanone

- Polydioxanone suture provides wound support for longer period as compared to other synthetic absorbable sutures.
- Polydioxanone suture also offers far superior tensile strength. Polydioxanone suture is made from polymerizing para dioxanone monomer.

319. Which of the following is true about grade 4 burns

a) Involves all layers of the skin

b) Involves the whole skin along with subcutaneous tissue

c) Includes electric burns

d) Involves the dermis partially

Correct Answer - B

Answer- B. Involves the whole skin along with subcutaneous tissue

320. Hernia occurring in a potential space posterior to gastrojejunostomy is called

a) Bochdalek's Hernia

b) Peterson's Hernia

c) Littre's Hernia

d) Richter's Hernia

Correct Answer - B

Answer- B. Peterson's Hernia

- Petersen hernias are a type of internal hernia which occurs in the potential space posterior to a gastrojejunostomy.
- This hernia is caused by the herniation of intestinal loops through the defect between the small bowel limbs, the transverse mesocolon and the retroperitoneum, after any type of gastrojejunostomy.

321. Circumcision cannot be used in management of

a) Phimosis

b) Severe balanitis xerotica

c) Paraphimosis

d) Penile Cancer

Correct Answer - D

Answer- D. Penile Cancer

- Phimosis
- Balanitis
- Posthitis
- Paraphimosis
- Severe UTIs

322. Most common cancer in men is

a) Bladder cancer

b) Colorectal cancer

c) Prostate cancer

d) Oral cancer

Correct Answer - C

Answer- C. Prostate cancer

- Cancers in males in India: Lip / oralcavity > Prostate > Colorectum > Pharynx (other than nssopharynx) > Larytx

323. All of the following are contraindications for breast conserving surgery except

a) Tumours more than 4cm in size

b) Multicentricity

c) Centrally located tumour

d) Prior neoadjuvant chemotherapy

Correct Answer - D

Answer- D. Prior neoadjuvant chemotherapy

- Involves resection of the primary breast cancer with a margin of normal-appearing breast tissue, adjuvant radiation therapy with or without assessment of axillary lymph node status.

324. All of the following are symptoms of VIPomas except

a) Watery Diarrhoea

b) Hypokalemia

c) Flushing

d) Thromboembolism

Correct Answer - D

Answer- D. Thromboembolism

- VIPomas are endocrine tumors that secrete excessive amounts of vasoactive intestinal peptide (VIP).
- Excessive VIP causes a distinct syndrome characterized by large-volume diarrhea, hypokalemia, and dehydration.
- This syndrome also is called Verner-Morrison syndrome, pancreatic cholera and WDHA syndrome for watery diarrhea, hypokalemia, and achlorhydria.

325. Total gastrectomy is preferred for which type of gastric cancers

a) Proximal Cancer

b) Distal Cancer

c) Ulcerating cancer in the body

d) Polypoidal cancer in the antrum

Correct Answer - A

Answer- A. Proximal Cancer

For proximal gastric carcinoma

- For extensive tumors (eg. Linitis plastica)
- To obtain negative margins for distal gastric carcinoma

326. All of the following are true about Asiatic cholangitis except -

a) Clonorchis sinensis is a causative factor

b) Increased risk of cholangiocarcinoma

c) Also known as oriental cholangitis

d) Does not cause jaundice

Correct Answer - D

Answer- D. Does not cause jaundice

- Oriental cholangiohepatitis (or recurrent pyogenic cholangiohepatitis) is a condition essentially found in Southeast Asia and is characterised by intra- and extrahepatic bile duct strictures and dilatation with intraductal pigmented stone formation.

Clinical presentation

- The common clinical presentation is that of recurrent RUQ pain, fever and jaundice. Leukocytosis with elevated alkaline phosphatase and bilirubin are seen.

Pathology

- The exact aetiology is not well understood but strongly association with hepatobiliary infestation with Clonorchis sinensis (liver fluke) or ascaris lumbricoides have been implicated.

327. Cause of congestive splenomegaly is

a) Visceral Leishmaniasis

b) Budd Chiari Syndrome

c) Gaucher's Disease

d) Hodgkin's Lymphoma

Correct Answer - B

Answer- B. Budd Chiari Syndrome

Causes of congestive splenomegaly

- Budd Chiari Syndrome
- Hepatic vein obstruction
- Portal vein obstruction

328. The water shed area in the marginal artery of Drummond is at

a) Junction of proximal 2/3rd and distal 1/3' of transverse colon

b) Junction of Ascending and transverse colon

c) Splenic flexure

d) At rectosigmoid junction

Correct Answer - C

Answer- C. Splenic flexure

- The blood supply of colon is derived from the marginal artery of Drummond.
- It is a paracolic anastomotic artery formed by anastomosis between colic branches of superior mesenteric artery (ileocolic, right colic, middle colic) and colic branches of inferior mesenteric artery (left colic and sigmoidal arteries),

329. Which of the following is true about varioliform gastritis

a) It is a type of acute gastritis

b) It is characterized by nodules, thickened folds and erosions

c) Diagnosis is difficult to make on endoscopy

d) It is a common form of gastritis

Correct Answer - B

Answer- B. It is characterized by nodules, thickened folds and erosions

- Varioliform gastritis is currently recognized as a special kind of chronic gastritis characterized by nodules, thickened fugal folds and erosions.
- These features appear to be unusual and different from those seen in chronic gastritis.

330. A 23 year old lady presents with acute right sided lower abdominal pain since 4 hours. There is tenderness at McBurney's point. Which investigation is best suited to confirm the diagnosis of appendicitis

a) CT Scan

b) Plain Xray

c) Serum ESR

d) MRI Abdomen

Correct Answer - A

Answer- A. CT Scan

Clinical feature are suggestive of appendicitis.

- Right lower quadrant pain is a common clinical presentation. Because of low cost and easy availability, USG is sometimes preferred, but it is often inconclusive.
- Spiral CT is the imaging modality of choice in patients presenting with right lower quadrant pain as it helps make a definitive diagnosis in the majority of cases

331. Investigation of choice in appendicitis in adults

a) CT Scan

b) USG

c) Serum ESR

d) MRI Abdomen

Correct Answer - A
Answer- A. CT Scan

332. All of the following structures are removed in right hemicolectomy except

a) Caecum

b) Ascending Colon

c) Transverse colon

d) Hepatic Flexure

Correct Answer - C

Answer- C. Transverse colon

Structures removed in right hemicolectomy:

- Caecum with appendix
- Ascending colon
- Hepatic flexure
- Proximal transverse colon
- Part of terminal ileum
- Fat and lymphnodes

333. A 50 year old male known case of ulcerative colitis presents with distention of the abdomen of acute onset with vomiting. The next investigation would be

a) Abdominal X ray

b) USG

c) CT scan

d) MRI abdomen

Correct Answer - A

Answer- A. Abdominal X ray

- Toxic megacolon is defined as a transverse colon with a diameter of more than 5.0 to 6.0 cm with loss of haustration.
- Although usually associated with ulcerative colitis, toxic megacolon can also be seen in Crohn's disease.
- Plain abdominal radiographs are essential for the diagnosis and management of toxic megacolon (toxic colitis)

334. Which investigation is used to assess the resectability of CA Pancreas?

a) Contrast enhanced CT Scan

b) MRI abdomen

c) USG

d) ERCP

Correct Answer - A

Answer- A. Contrast enhanced CT Scan

Investigations done in pancreatic cancer

- USG
- CT scan
- ERCP
- Endoscopic U/S
- Angiography
- Barium studies - barium meal & hypotonic duodenography
- Contrast enhanced CT scan is the investigation of choice

335. Colonic Diverticulosis and diverticulitis is maximally seen in

a) Sigmoid colon

b) Rectum

c) Transverse colon

d) Ascending colon

Correct Answer - A

Answer- A. Sigmoid colon

- The sigmoid colon is the segment of large bowel with the highest incidence of diverticula, and it is by far the most frequent site for involvement with Diverticulitis.

336. Which of the following is TRUE about Zenker's diverticulum

a) It is asymptomatic

b) Occurs in the mid-esophagus

c) Treatment is simple excision

d) It occurs in children

Correct Answer - C

Answer- C. Treatment is simple excision

- Zenker's diverticula are mucosal outpouchings occurring through the triangular bare area (Killian's triangle") between the
- upper oblique fibres and lower horizontal fibres of the inferior constrictor muscle, in lower part of pharynx.
- Zenker's diverticulum is a pulsion diverticulum.
- Zenker's is the most common esophageal diverticula.
- Zenker's diverticula are rarely seen below 30 yrs of age, most patients are over 50.
- The diverticula arises posteriorly in the midline of neck.

Treatment-

- Treatment is excision of pouch and cricopharyngeal myotomy
- Dohlman's procedure
- Endoscopic laser treatment

337. All of the following may lead to pigment gall stones except -

a) Chronic Hemolysis

b) Hepatocellular Carcinoma

c) Alcoholic Cirrhosis

d) Biliary tract infection

Correct Answer - B

Answer- B. Hepatocellular Carcinoma

- Demographic/genetic factors: Asia, rural setting
- Chronic hemolysis
- Alcoholic cirrhosis
- Pernicious anemia
- Chronic biliary tract infection, parasite infections (Escherichia coli, Ascaris lumbricoides, Clonorchis sinensis)
- Increasing age
- Ileal disease, ileal resection or bypass
- Cystic fibrosis

338. Which of the following are hardest renal stones

a) Calcium Oxalate

b) Struvite

c) Xanthine

d) Cysteine

Correct Answer - A

Answer- A. Calcium Oxalate

- Pure calcium phosphate stones and calcium monohydrate stones are the densest per volume of stone.
- Among the given options calcium oxalate stones are densest (hardest).

339. Which of the following is true about medullary CA of thyroid

a) Associated with MET oncogene

b) Elevated levels of Serum calcitonin

c) Seen in MEN I syndrome

d) Most common thyroid cancer

Correct Answer - B

Answer- B. Elevated levels of Serum calcitonin

- In Medullary carcinoma serum calcitonin is increased, whose function is to lower serum calcium levels.
- So hypocalcemia maybe found associated with MTC.
- **Seen in MEN II A and B**
- Associated with RET Protooncogene

340. A 58 year old male presents with hematuria. He s diagnosed of having bladder cancer which extends muscle deep. The best treatment is

a) Intravesical Chemotherapy

b) Neoadjuvant chemotherapy followed by radical cystectomy

c) Radiotherapy

d) Tranurethral resection

Correct Answer - B

Answer- B. Neoadjuvant chemotherapy followed by radical cystectomy

341. The Histological subtype of renal cell carcinoma having worst prognosis is

a) Clear cell carcinoma

b) Chromophobe type RCC

c) Collecting duct RCC

d) Papillary Rcc

Correct Answer - C

Answer- C. Collecting duct RCC

- Collecting duct & Medullary- poor prognosis

342. Left Kidney is preferred for transplantation because

a) Longer renal vein

b) Higher location

c) Ease of surgery due to anatomical relations

d) To prevent damage to liver

Correct Answer - A

Answer- A. Longer renal vein

- The left kidney is preferred because of implantation advantages associated with a longer renal vein making anastomosis easier.

343. A 70 year old male known case of a certain malignancy presents with elevated erythropoietin levels and PCV of 52%. Most likely tumour is

a) Renal Cell Carcinoma

b) Medullary thyroid carcinoma

c) Gastric Carcinoma

d) Colorectal CA

Correct Answer - A

Answer- A. Renal Cell Carcinoma

Erythrocytosis (d/t secretion of erythropoietin by RCC) (but anemia is a more common finding)

- .. Hypertension
- 2. Abnormal liver function (Stauffers syndrome ie non metastatic hepatic dysfunction)
- 3. Hypercalcemia
- 4. Neuromyopathy
- 5. Amyloidosis
- 6. Increased ESR (MC paraneoplastic syndrome)
- 7. Dysfibrinogenemia
- 8. Galactorrhoea
- 9. Feminization and masculinization

344. Most common brain tumour is

a) Astrocytoma

b) Meningioma

c) Metastasis

d) Oligodendroma

Correct Answer - C

Answer- C. Metastasis

- MC brain tumors → Metastases
- MC primary brain tumor → Glioma
- MC Glioma → Astrocytomas
- MC Astrocytomas → Glioblastoma multiforme

345. A 43 year old male presented with a mass in the submandibular region. After USG and Biopsy he was diagnosed of having acinic cell carcinoma. After staging excision was attempted. Following the surgery he found that his tongue deviated to the affected side. Which of the following nerves could be damaged

a) Lingual nerve

b) Auriculotemporal nerve

c) Hypoglossal nerve

d) Facial Nerve

Correct Answer - C

Answer- C. Hypoglossal nerve

- Injury to hypoglossal (12th) nerve paralyzes ipsilateral half of the tongue.
- When tongue is protruded, its tip deviates towards the paralyzed side because of unopposed action of genioglossus muscle on the normal side of tongue.

346. A sublingual cancer in a 65 year old tobacco chewer has involved the mandible. The commando surgery has been planned. All of the following in removed in commando operation except

a) Involved mandible

b) Oral cancer

c) Accessory nerve

d) Neck lymphnodes

Correct Answer - C

Answer- C. Accessory nerve

Commando operation

- Commando operation is done for oral cancers which have involvement of mandible

347. With regards to the anorectal angle, what is true

a) It distributes intraabdominal forces onto the pelvic floor and plays an important role in continence mechanism

b) It is due to the pull of the external sphincter

c) It is around 30 degrees at rest

d) The angle increases at the time of defecation

Correct Answer - A

Answer- A. It distributes intraabdominal forces onto the pelvic floor and plays an important role in continence mechanism

- At rest the puborectalis muscle creates a 'sling' around the distal rectum, forming a relatively acute angle (Anorectal angle).
- It is 90 to 100 degrees at rest.
- Both the internal and external sphincters are innervated by pudendal nerve.

348.

Catgut suture is derived from which part of the sheep

a) Stomach

b) Intestine

c) Muscle

d) Ligaments

Correct Answer - C

Answer- C. Muscle

- Catgut suture is prepared from the submucosa of the first one-third of the small intestine of sheep or cow.
- Chromic catgut is made by treating catgut with chromic acid salt.

349. A Pre pharyngeal abscess diagnosed as tuberculosis is seen in 44 year old lady with difficulties in deglutition management would be

a) Urgent Drainage

b) Starting of AKT

c) Wait and Eatch

d) Get an MR1 of the cervical Spine

Correct Answer - A

Answer- A. Urgent Drainage

Development of new neurodeficit or its worsening on AKT

- Reappearance of previous neurodeficit on AKT
- No improvement in neurodeficit for 4-6 weeks
- Difficulty in deglutition due to a prepharyngeal abscess

350. Which of the following metabolic anomaly is seen in hemorrhagic shock

a) Metabolic Acidosis

b) Respiratory Acidosis

c) Respiratory Alkalosis

d) Metabolic Alkalosis

Correct Answer - A

Answer- A. Metabolic Acidosis

- Hemorrhagic shock is characterized by lactic acid accumulation causing lactic acidosis/metabolic acidosis.

351. A 24 year old male suffered a RTA with multiple abdominal injuries and femur fracture. He has lost 10% of his blood. The initial fluid of choice is

a) Crystalloid

b) Colloid

c) Packed RBCs

d) Whole Blood

Correct Answer - A

Answer- A. Crystalloid

- This is grade I shock choice of fluid is crystalloid

352. Clinical features of congenital edema are all except

a) Bilateral

b) Involvement of face

c) Onset before 2 years of age

d) Limb involvement

Correct Answer - C

Answer- C. Onset before 2 years of age

Congenital lymphedema

- Has onset before the 1st year of life (according to Schwartz and Bailey onset is <2 years)
- congenital lymphedema can involve a single lower extremity, multiple limbs, the genitalia or the face.
- The familial version of congenital lymphedema is called Milroy's disease.

353. Soldier injured in combat presenting with edema, crepitus, brown exudate

a) Gas gangrene

b) Crush syndrome

c) Long bone fracture

d) None

Correct Answer - A

Answer- A. Gas gangrene

- Crepitus in soft tissue is characteristic of gas gangrene.
- Edema, crepitus and brown exudate after injury suggest the diagnosis of gas gangrene.

354. 80 % of gall stones contain

a) Bile pigments

b) Cholesterol

c) Calcium salts

d) Phospolipids

Correct Answer - B

Answer- B. Cholesterol

Types of gall stones-

1. Cholesterol

- Pure cholesterol (10%)
 - Mixed (70%)
2. Pigment
- Black pigment stones
 - Brown pigment stones

355. Clinical scenario with bag of worms

a) Varicocele

b) Hydrocele

c) Torsion of testis

d) Congenital hernia

Correct Answer - A

Answer- A. Varicocele

- A varicocele is a varicose (tortuous) dilatation of the vein draining the testis.
- C/F
- On palpation, testicles may feel like a bag of worms
- varicocele is painless and the only complaint of the patient is swelling.

356. Not true about rodent ulcer -

a) Radiosensitive

b) Lymphnode not involved

c) Facial lesion

d) Blood spread is rare

Correct Answer - A

Answer- A. Radiosensitive

- Basal cell carcinoma is moderately radiosensitive.
- Basal cell ca usually spreads by local invasion
- Lymphatic spread is not seen
- basal cell carcinomas are seen in the face.

357. Swelling in testes, investigation of choice -

a) FNAC

b) CECT

c) USG

d) MRI

Correct Answer - C

Answer- C. USG

- USG scrotum is done for any suspected testicular tumor.
- If a testicular mass found on USG then high inguinal orchiectomy done to remove the primary as well as know about the histology of the tumor.

**358. Man comes with head injury
investigation of choice**

a) CECT

b) X - ray

c) MRI

d) Plain CT

Correct Answer - D

Answer- D. Plain CT

- Investigation of choice for head trauma patient is CT scan.

359. Complications of chronic duodenal ulcer are all except -

a) Bleeding

b) Stricture

c) Malignancy

d) Perforation

Correct Answer - C

Answer- C. Malignancy

- 1. Gastrointestinal bleeding
- 2. Perforation
- 3. Gastric outlet obstruction
- 4. Malignancy

360. Which weight loss regime decreases risk of gall bladder stone

a) 2 -3 Lt water per day

b) 2 - 3 Kg wt loss / month

c) Very low calorie diet

d) High fat diet

Correct Answer - B

Answer- B. 2 - 3 Kg wt loss / month

- Risk of gall stone formation in obese persons during active weight loss seems to increase in an exponential fashion.
- The data suggest that rates of weight loss should not exceed an average of 7.5 kg per week

361. Duodenal ulcer, true statement is -

a) Never Malignant

b) Most-common site is IInd part

c) Common in blood group AB

d) GI bleed not seen

Correct Answer - A

Answer- A. Never Malignant

- Duodenal ulcer is more common in persons with blood group 'O', i.e., containing no AB antigens with blood group 'O' i.e. containing no AB antigens.
- Bleeding is more common in duodenal ulcer than in gastric ulcer.

362. Pt with complains of dysphagia can take liquid only and history of smoking and weight loss

a) Achalasia cardia

b) Barrets esophagus

c) Carcinoma esophagus

d) None

Correct Answer - C

Answer- C. Carcinoma esophagus

History of smoking → A risk factor for esophageal carcinoma.

Dysphagia for solid food (as patient can take only liquid) → Symptom of carcinoma esophagus

Dysphagia more for solid than liquids occurs in :

- .. carcinoma esophagus
- ?. Strictures and webs

363. TURP fluid used -

a) NS

b) Glycine

c) Hemaccel

d) Methylcellulose

Correct Answer - B

Answer- B. Glycine

- TUR is performed with a nonelectrolytic fluid such as 1.5% glycine. Saline cannot be used because electrolytes in the irrigation fluid will dissipate the electric current used to resect the prostate.

364. Red current jelly stools seen in -

a) Intestinal obstruction

b) Amebiasis

c) Intussuception

d) Volvulus

Correct Answer - C

Answer- C. Intussuception

- Initially the Passage of stools may be normal while later on blood mixed with mucus is evacuated - red current jelly stool
- An abdominal mass may be palpated - a sausage shaped mass, which may increase in size and firmness during the paroxysms of pain.
- There may be an associated feeling of emptiness in the right iliac fossa (sign of Dance).

365.

Subarachnoid hemorrhage blood is collected mostly in which part of the skull -

a) Basal cistern

b) Around Falx cerebri

c) Near cerebellum

d) Tentorium

Correct Answer - A

Answer- A. Basal cistern

causative factor-

- Exclude underlying aneurysmal rupture

Typical location-

- Basal cisterns
- Clinical profile
- Headache,
- meningismus
- delayed manifestations,
- vasospasm

366. Upper GI endoscopy is indicated in all except

a) Peptic ulceration

b) Achalasia cardia

c) Barrett's esophagus and Stricture esophagus

d) None

Correct Answer - D

Answer-D. None

Upper abdominal symptoms that fulfill any of the following criteria :

- New-onset symptoms in a patient greater than 50 years of age
- Dysphagia
- Odynophagia
- Persistent or recurrent esophageal reflux despite therapy
- Persistent vomiting of unknown cause
- Active or recent upper GI bleeding
- Presumed chronic blood loss and iron deficiency anaemia if any of the following are present-
 - .. There is clinical suspicion of an upper GI source
 - ?. Colonoscopy is negative
- Lesion seen on upper GI tract imaging
- Acute caustic ingestion
- When sampling of tissue or fluid is indicated
- Evaluation of diarrhea in a patient suspected of having small bowel disease (eg. celiac disease)
- Intraoperative evaluation of anatomic reconstructions

367. Burger disease is -

a) Migratory thrombophlebitis

b) Thrombangitis obliterans

c) Superficial thrombophlebitis

d) Causalgia

Correct Answer - B

Answer- B. Thrombangitis obliterans

- Buerger's disease is also known as thrombangitis obliterans.
- Buerger's disease is characterized by occlusive disease of the small and medium sized arteries.

**368. 18 yr female with itchy erythema,
swelling of toes every winter season
seen due to**

a) Raynauds disease

b) Raynauds phenomenon

c) Chilblains

d) Frost bite

Correct Answer - C

Answer- C. Chilblains

- Also known as pernio, It is an inflammatory skin condition presenting after exposure to cold as pruritic and/or painful erythematous to violaceous acral lesions.
- It may be idiopathic or secondary to an underlying disease.

369. Intraop cholangiography is done in -

a) Cholangitis

b) Periampullary carcinoma

c) High lipase level

d) Large gall stones

Correct Answer - C

Answer- C. High lipase level

1. Clinical H/o jaundice/ pancreatitis
2. Elevated bilirubin level
3. Abnormal LFT
4. Increased amylase
5. High lipase level
6. Dilated CBD on preop USG

370. A 16 years old female patient has abdominal lump that is movable and painless, upon exploratory laparotomy a cystic lump is found arising from mesentery, diagnosis is

a) Enterocele

b) Mesenteric cyst

c) Choledochal cyst

d) Pancreatic pseudocyst

Correct Answer - B

Answer- B. Mesenteric cyst

Mesentric cyst present as

- A painless abdominal swelling
- The swelling moves freely in a plane at right angles to the attachment of the mesentry.
- Recurrent attacks of abdominal pain with or without vomiting due to obstructive symptoms.

371. 60 yrs old, air in biliary tree, colicky abdominal pain hyper-peristaltic abdominal sounds diagnosis -

a) Gall stone ileus

b) Hemobilia

c) Cholangitis

d) Pneumobilia

Correct Answer - A

Answer- A. Gall stone ileus

- Presence in air in biliary tract along with sign of intestinal obstruction is characteristic of gall stone ileus.

372. Van Nuys grading system is used for?

a) LCIS

b) DCIS

c) Inflammatory carcinoma breast

d) Medullary carcinoma breast

Correct Answer - B

Answer- B. DCIS

- Van Nuys prognostic index is widely used to classify ductal carcinoma in situ (DCIS) into dissimilar risk categories that may be treated accordingly.

373. TNM staging of breast carcinoma with positive bilateral supraclavicular lymph nodes is?

a) N3a

b) N3b

c) N3c

d) M1

Correct Answer - D

Answer- D. M1

374. Nipple inversion occurs due to involvement of?

a) Cooper's ligament

b) Subareolar duct

c) Parenchyma of breast

d) Subdermal lymphatics

Correct Answer - B

Answer- B. Subareolar duct

- Inversion of nipple is due to fibrosis in and around subareolar duct.

375. Most common age group affected in thoracic outlet obstruction syndrome?

a) 10-25 years

b) 25-45 years

c) 45-65 years

d) > 65 years

Correct Answer - B

Answer- B. 25-45 years

- It constitutes compression of subclavian vessels and/or brachial plexus between scalene muscles and first rib.
- Important causes are cervical rib and fibrous band from C, spinous process to first rib.
- Most common age group involved is 25-50 years females are more affected.

376. Which of these is not true about cardio esophageal sphincter?

a) An anatomic sphincter can be found

b) Located at 40 cm from incisors

c) It has a pinch cock like mechanism

d) It has a flap valve mechanism

Correct Answer - A

Answer- A. An anatomic sphincter can be found

- LES is a physiological sphincter with high pressure zone, but is difficult to identify anatomically.
- It is behind 7th costal cartilage at the level of T11

377. Most common type of shock in surgical practice is?

a) Cardiogenic shock

b) Hypovolemic shock

c) Neurogenic shock

d) Septic shock

Correct Answer - B

Answer- B. Hypovolemic shock

378. In a RTA patient sustained trauma to left side of chest and abdomen. Fluid in the peritoneum & sign of hypotension was found on physical examination. Most probable diagnosis is?

a) Splenic injury

b) Diaphragmatic injury

c) Rib fracture

d) Renal injury

Correct Answer - A

Answer- A. Splenic injury

- Tachycardia and hypotension after blunt trauma to left abdomen should alert the clinician to the potential for splenic injury

379. Bisgaard regimen is used in treatment of?

a) Trophic ulcer

b) Malignant ulcer

c) Ischaemic ulcer

d) Varicose ulcer

Correct Answer - D

Answer- D. Varicose ulcer

Bisgaard's regimen of varicose ulcer :

- Education : Patient education of ulcer dressing and care, ulcer care by regular cleaning by with povidone iodine, H₂O₂, Dressing with EUSOL.
- Elevation: Limb elevation to reduce edema, increase venous drainage, to promote ulcer healing.
- Exercise : Massage, active and passive exercises
- Elastic compression : Pressure bandage (crepe bandage), four layered high pressure compression bandage.
- Evaluation

380. Epulis is -

a) Benign

b) Malignant

c) Reactive process

d) Precancerous

Correct Answer - B

Answer- B. Malignant

Epulis represents a family of benign tumors of gingiva. The classification include :

1. Granulomatous epulis, pyogenic granuloma
2. Giant cell epulis (myeloid epulis)
3. Fibrous epulis (most common)

381. Risk factor for malignant melanoma all the following are risk factors for malignant melanoma except

a) Giant congenital nevi

b) Family history melanoma

c) Exposure to UV light

d) HPV infection

Correct Answer - D

Answer- D. HPV infection

risk factor for malignant melanoma is exposure to (UV radiation)

1. Dysplastic nevus (DN) syndrome; 5-10% risk of forming superficial spreading melanoma.
2. Xeroderma pigmentosum
3. History of non-melanoma skin cancer (NMSC)
4. Family history of melanoma (high risk)
5. Congenital nevi

382.

A nerve injured in radical neck dissection leads to loss of sensation in medial side of the arm, nerve injured is?

a) Long thoracic nerve

b) Thoracodorsal nerve

c) Dorsal scapular nerve

d) Medial cutaneous nerve of arm

Correct Answer - D

Answer- D. Medial cutaneous nerve of arm

- The medial cutaneous nerve of the arm is the smallest and most medial branch of the brachial plexus, and arises from the medial cord.
- It pierces the deep fascia at the midpoint of the upper arm to supply the skin over the medial aspect of the distal third of the upper arm.

383. Unilateral cleft lip is repaired at what age?

a) 1-3 months

b) 3-6 months

c) 6-9 months

d) 9-12 months

Correct Answer - B
Answer= B. 3-6 months

384. Radiation exposure can leads to which thyroid carcinoma?

a) Lymphoma

b) Papillary carcinoma

c) Medullary carcinoma

d) Follicular carcinoma

Correct Answer - C

Answer- C. Medullary carcinoma

- Thyroid carcinomas arising after radiation or in thyroglossal cyst are papillary type.

385. Which is the investigation of choice to differentiate between benign and malignant thyroid nodule?

a) USG

b) FNAC

c) Scintigraphy

d) Biopsy

Correct Answer - B

Answer- B. FNAC

- FNAC is the investigation of choice to differentiate between benign or malignant solitary thyroid nodules.

386. First clinical feature of cerebello-pontine angle tumor is ?

a) Reduced lacrimation

b) Loss of corneal reflex

c) Hoarseness of voice

d) Exaggerated tendon reflexes

Correct Answer - B

Answer- B. Loss of corneal reflex

- Absent corneal reflex is the earliest sign of cerebellopontine (CP) angle tumors like acoustic neuroma.

387. Triple H therapy for subarachnoid hemorrhage consists of all except -

a) Hypertension

b) Hypervolaemia

c) Hemodilution

d) Hypothermia

Correct Answer - D

Answer- D. Hypothermia

Triple H therapy of subarachnoid hemorrhage used to ameliorate cerebral perfusion, consists of :

1. Hypervolaemia
2. Hypertension
3. Haemodilution

388. Monro kellie doctrine used in?

a) Aortic injury

b) Cervical injury

c) Head injury

d) Pelvic injury

Correct Answer - C

Answer- C. Head injury

- Monro Kellie doctrine states that the cranial vault is a rigid structure, and therefore, the total volume of the contents determines ICP.
- The three normal contents of the cranial vault are brain tissue, blood, and CSF.

389. Fleischner sign on barium study is seen in?

a) Ileocecal TB

b) Crohn's disease

c) Small bowel carcinoid

d) Typhoid

Correct Answer - A

Answer- A. Ileocecal TB

- Early involvement of the ileocaecal region manifesting as spasm and edema of the ileocecal valve.
- Thickening of the lips of the ileocecal valve and/or wide gaping of the valve with narrowing of the terminal ileum ('Fleishner" or 'inverted umbrella sign') are characteristic.

390. Normal intra abdominal pressure is?

a) 5 mm Hg

b) 10 mm Hg

c) 15 mm Hg

d) 20 mm Hg

Correct Answer - A

Answer- A. 5 mm Hg

- Normal intrabdominal pressure is around 5 mm Hg (0.2-16.2 mm Hg).

391. Investigation of choice for esophageal rupture is?

a) Dynamic MRI

b) Rigid esophagoscopy

c) Barium contrast swallow

d) Water soluble low molecular weight contrast swallow

Correct Answer - D

Answer-D. Water soluble low molecular weight contrast swallow

- Non-ionic water soluble contrast medium (instead of barium) is warranted when there is any risk of esophageal leak.

392. First to recover from post-operative ileus is?

a) Small intestine

b) Stomach

c) Colon

d) None

Correct Answer - A

Answer- A. Small intestine

- First recover → Small intestine
- Last recover → Colon (largeintestine)

393. Percentage of burn in children is best assessed by?

a) Rule of 9

b) Rule of palm = 1%

c) Lund and Browder chart

d) Wallace rule

Correct Answer - C

Answer- C. Lund and Browder chart

Area of body	In children (Lund and Browder chart)			In Adults (Rule of nine: Wallace's formula)
	1-4 years	5-9 years	10-14 years	Adult
Head and Neck	19	15	13	9
Trunk (front)	16	16	16	18 (Front of chest + abdomen)
Trunk back	16	16	16	18 (Back of chest + abdomen)
Upper limbs	19	19	19	18 (Right+left upper limbs)
Lower limbs	30	34	35	36 (Front + back of right and left lower limbs)
Genitals	0	0	1	1

394. Most common electrolyte imbalance that causes Paralytic ileus is?

a) Hyponatremia

b) Hypernatremia

c) Hypokalemia

d) Hyperkalemia

Correct Answer - C

Answer- C. Hypokalemia

- Causes of Paralytic ileus
- Infection
- Electrolyte abnormalities
- Medication
- Retroperitoneal hemorrhage
- Myocardialinfarction
- Mesenteric ischemia
- Hypothyrodism
- Ureteric colic

395. Wallace rule is better known as?

a) Rule of 10% in pheochromocytoma

b) Rule of 90% in pheochromocytoma

c) Rule of 9 in burn assessment

d) None

Correct Answer - C

Ans. C. Rule of 9 in burn assessment

Area of body	In children (Lund and Browder chart)			In Adults (Rule of nine: Wallace's formula)
	1-4 years	5-9 years	10-14 years	Adult
Head and Neck	19	15	13	9
Trunk (front)	16	16	16	18 (Front of chest + abdomen)
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Upper limbs	19	19	19	18 (Right+left upper limbs)
Lower limbs	30	34	35	36 (Front + back of right and left lower limbs)
Genitals	0	0	1	1

396. Gold standard investigation for chronic pancreatitis?

a) MRI

b) ERCP

c) Pancreatic function tests

d) Fecal fat estimation

Correct Answer - B

Answer- B. ERCP

- ERCP has been considered the most sensitive radiologic test for the diagnosis of chronic pancreatitis, with specific ERCP findings that are highly correlative with the degree or stage of chronic disease.

397. Bipedicule flap is used for reconstruction of?

a) Nose

b) Fingertip

c) Eyelid

d) Breast

Correct Answer - C

Answer- C. Eyelid

- Bipedicled flap is a bucket handle flap supplied by both the ends. It is used for lower eyelid repair and rarely anywhere else.

398. Reconstruction of tip of nose after excision of basal cell carcinoma is done by?

a) Bipedicled flap

b) Bilobed flap

c) Full thickness skin graft

d) Split skin graft

Correct Answer - B

Answer- B. Bilobed flap

- Bilobed flap is used to cover a convex defect as on tip of nose.
- The bilobed flap is widely used for small nasal defects because it allows one to distribute tensions further from the primary defect, thus controlling the degree of tension along the alar margin.

399. Diarrhoea with ulcer responding to PPI is seen in :

a) MEN 1 syndrome

b) Zollinger ellison syndrome

c) H.pylori infection

d) VIPoma

Correct Answer - B

Answer- B. Zollinger ellison syndrome

- ZE syndrome presents with secretory diarrhoea and gastric ulcer which responds well to PPI.
- MEN I is also associated with ZE syndrome, but there are other major components also like parathyroid hyperplasia and prolactinoma.
- H. pylori infection, does not usually cause diarrhoea and VIPoma does not usually cause peptic ulcer.

400. All are seen in cystitis except

a) Fever

b) Hematuria

c) Dysuria

d) Nocturia

Correct Answer - A

Answer- A. Fever

- Patients with acute cystitis present with irritative voiding symptoms such as dysuria, frequency, Nocturia and urgency.
- Low back and suprapubic pain, hematuria, and cloudy/foul smelling urine are also common symptoms.
- Fever and systemic symptoms are rare.