

**Madhya Pradesh Medical Science University, Jabalpur**  
**MBBS Final Part-I Examination - Jan-2023**  
**Paper Code: 23BM0000100441**  
**Subject: Otorhinolaryngology**

**Instructions:**

- a) All questions are compulsory
- b) Draw diagrams wherever necessary
- c) Answers of Questions and Sub-questions must be written strictly according to the serial order of the question paper
- d) MCQs have to be answered in the theory answer book
- e) Please write MCQ answers neatly and in serial order with black or blue pen in brackets for example: 1. (a)  
2. (b)
- f) MCQs have to be answered only once; any repetition, cutting, erasing, or use of whitener will be considered malpractice. Such answers will not be counted and action will be taken as per UFM rules of the University

**Time: 3:00 Hours****Maximum Marks: 40****Q.1 Total MCQs: 20    20 x 1/2 = 10**

1. Eagle's Syndrome is related to which bone?
  - a) Hyoid bone
  - b) Cricoid bone
  - c) Styloid process
  - d) Maxillary bone
2. Nasolacrimal duct opens in
  - a) Inferior meatus
  - b) Middle meatus
  - c) Ethmoidal recess
  - d) Superior meatus
3. Tympanic membrane develops from
  - a) Ectoderm
  - b) Mesoderm
  - c) Endoderm
  - d) All of the above
4. Posterior crico-arytenoid muscle is supplied by
  - a) Superior laryngeal nerve
  - b) Recurrent laryngeal nerve
  - c) Ansa cervicalis
  - d) None of the above
5. Which of the following tests is an objective test of hearing
  - a) BERA
  - b) Speech audiometry
  - c) Pure tone audiometry
  - d) Tuning fork test
6. Following statement is true for dangerous area of face
  - a) Include upper lip philtrum tip of box
  - b) Communicate with cavernous sinus through veins without valve
  - c) All of Above

- d) None of Above
7. A person suffering from unsafe CSOM has Pickett fence fever with rigor suggestive of
- Gradenigo Syndrome
  - Cerebellar Abscess
  - Extradural Abscess
  - Sigmoid Sinus Thrombophlebitis
8. Vestibular Schwannoma most commonly arise at
- CP angle
  - Fossa of Rosenmuller
  - Retropharyngeal space
  - None
9. Pneumothorax is most commonly seen with
- High Tracheostomy
  - Mid Tracheostomy
  - Low Tracheostomy
  - None of Above
10. Rat tail appearance in Barium Swallow is a feature of
- CEA Oesophagus
  - Oesophageal Stricture
  - Barrett's Oesophagus
  - LPR
11. Facial artery is a branch of
- External carotid artery
  - Maxillary artery
  - Occipital artery
  - Lingual artery
12. Stapes footplate covers
- Round window
  - Sinus tympani
  - Pyramid
  - Oval window
13. In left cochlear pathology Weber's test will be
- Central
  - Lateralised to left
  - Lateralised to right
  - None of the above
14. Carhart's notch is seen in which disease
- Meniere's disease
  - Serous otitis media
  - Vestibular labyrinthitis
  - Otosclerosis
15. Commonest aetiology of facial palsy is
- Bell's palsy
  - Trauma
  - Iatrogenic
  - CSOM
16. Biopsy from granulomatous lesion of nose revealed Mickulicz's cells and eosinophilic intracellular bodies; likely diagnosis is
- Mucormycosis
  - Rhinoscleroma
  - Rhinosporidiosis

- d) Inverted papilloma
17. Which drug is associated with rhinitis medicamentosa
- Ipratropium bromide
  - Cocaine
  - Xylometazoline
  - Lignocaine
18. Which drug has a role in treatment of otosclerosis
- Meclizine
  - Phenylephrine
  - Sodium Fluoride
  - Hyoscine
19. Merciful anosmia is a feature of which disease
- Rhinosporidiosis
  - Atrophic rhinitis
  - Rhinoscleroma
  - Allergic rhinitis
20. Stapedotomy is indicated in
- Unsafe type ear
  - Central perforation
  - Secretory otitis media
  - Otosclerosis

**Q.2 Long Answer Questions (2 x 5 = 10)**

- Describe briefly Juvenile Nasopharyngeal Angiofibroma: its etiology, site of origin, clinical features, diagnosis, and management.
- Define otosclerosis and discuss its etiopathogenesis, types, clinical features, differential diagnosis, medical and surgical management.

**Q.3 Short Answer Questions (10 x 2 = 20)**

- Ototoxic drugs
- Indications of tonsillectomy
- Ludwig's angina
- Little's area
- Glue ear
- Caloric test
- Rhinoscleroma
- Waldeyer's ring
- Tracheostomy decanulation
- Retropharyngeal abscess

\*\*\*