

**2306000104020202**  
**Examination January – February – 2024**  
**THIRD MBBS PART-II**  
**GENERAL SURGERY (PAPER - II) LEVEL - 2**

[Time: Three Hours]

[Max. Marks: 100]

**Instructions:**

1. Fill up strictly the following details on your answer book
  - a. Name of the Examination: **M.B.B.S (Third Year)**
  - b. Name of the Subject: **General Surgery (Paper-II)**
  - c. Subject Code No: **2306000104020202**
2. Sketch neat and labelled diagram wherever necessary.
3. Figures to the right indicate full marks of the question.
4. All questions are compulsory.

Seat No:

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Student's Signature

**Section -I**

- Q.1** Give answers in brief: (Any two out of three) **20 marks**
- a. A 65yr old lady presents with a lump in right lower abdomen, intermittent dark coloured stools, anemia. On Examination, there is around 5 cms mass palpated in right iliac fossa. **2 marks**
- i. What is the most likely diagnosis? **3 marks**
- ii. Which investigations will you advise to reach to a complete diagnosis? **5 marks**
- iii. What treatment options are available? Write about her long term management.
- b. A 40 yr mother of three, overweight, with complain of pain in upper abdomen and vomiting comes to emergency. **2 marks**
- iv. What are the common differential diagnosis? **3 marks**
- v. What investigations may be needed to confirm the diagnosis? **5 marks**
- vi. Write about the treatment plan of this patient, in brief.
- c. A 35yr male farm labourer, chronic alcoholic, presents in emergency with abdominal distension and significant blood in vomiting.
- vii. What is the most likely diagnosis? **2 marks**
- viii. Enumerate management steps in emergency room to treat this patient. **3 marks**

ix. Long term management plan of this patient. **5 marks**

**Q.2** Write Short notes (Any three out of Four) **12 marks**

- i. Clinical features and management of pancreatic Pseudocyst
- ii. Causes of paralytic ileus and management principles of the same in post-operative patient
- iii. Criteria for certifying brain death
- iv. Prescription techniques advised by NMC

**Q.3** Write in brief (Nine out of ten) **18 marks**

- (i) Treatment options for acute fistula in ano
- (ii) List complications of colostomy in children
- (iii) Herniotomy
- (iv) Enumerate causes of neonatal intestinal obstruction
- (v) Cork screw esophagus
- (vi) Hypertrophic pyloric stenosis of newborn
- (vii) Goodsall's rule
- (viii) Scoring systems for appendicitis
- (ix) Patient's right to refuse suggested treatment
- (x) Enumerate Likely Complications of Laparoscopic surgery

**Section -2**

**Q.4** Write notes on: [any 2] **14 marks**

- a. Define Osteomyelitis (2 marks). Describe the clinical features (2 marks) and management (3 marks) of Acute Osteomyelitis of Distal femur in a child of 3 years.
- b. Classify Intracapsular fractures of Neck femur (2 marks). Describe the management (3 marks) and complications (2 marks) of Fracture neck Femur in a 70 year old woman.
- c. Define dislocation (2 marks). What are the clinical features (2 marks) and methods of reduction of Shoulder dislocation (3 marks)?

**Q.5** Write short notes on: [any 3] **12 marks**

- a. Fracture clavicle
- b. Foot drop
- c. Gout
- d. De Quervain's synovitis

- Q.6** Write short notes on [any 3] **12 marks**
- a. Complications of spinal anaesthesia
  - b. Intravenous urography
  - c. Mention radiation hazards. Enlist radiation protection measures in imaging.
  - d. Compare propofol and ketamine as anaesthetic induction agent
- Q.4** Write in brief: (Any six) **12 marks**
- a. Ludwig's angina
  - b. Dentigerous cyst
  - c. Radiological findings in Rickets
  - d. Importance of documentation of communication in health care
  - e. Stages of general anaesthesia
  - f. Advantages of teleradiology
  - g. Uses of Lignocaine