

Paper ID: 03119304

ENT

Time: 2 Hours 40 Minutes

**Max Marks: 30**

**Note:** Attempt all questions. Draw proper diagrams to support your answer.

### Part 'B'

1. Enumerate the differential diagnosis of conductive hearing loss. Discuss the clinical features and management of Otosclerosis. (5)
2. What are the indications of tonsillectomy? Describe the steps of tonsillectomy. (5)
3. Write short notes on: (2+3)
  - a) Brain Stem Evoked Response Audiometry
  - b) Malignant Otitis Externa

### Part 'C'

1. Enumerate the differential diagnosis of Stridor. Discuss the Post-operative care and complications of tracheostomy. (7)
2. Discuss briefly: (4+4)
  - a) Premalignant lesions of oral cavity
  - b) Ludwig's angina

**MBBS III (Third) Professional Part-1 Examination 2019-20**

**Roll No.**

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Student's Signature \_\_\_\_\_

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**Student's Name**

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**Invigilator's Signature**

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**Course Code:MBS303**

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### Part 'A'

**Time:** 20 Minutes

**Max Marks: 10**

**Note:** 1. Attempt all questions and return this part of the question paper to the invigilator after 20 Minutes.  
2. Please tick (✓) correct one only. Cutting, overwriting or any other marking are not allowed.  
3. For answering please use Ball- pen only.

- Q.2 Which of the following is not a typical feature of malignant otitis externa:
- Caused by *Pseudomonas aeruginosa*
  - Patients are usually old
  - Mitotic figures are high
  - Patient is immune compromised
- Q.3 All are true for Gradenigo's syndrome except:
- It is associated with sensorineural hearing loss
  - It is caused by abscess in the petrous apex
  - It leads to involvement of the cranial nerves V & VI
  - It is characterized by retro-orbital pain
- Q.4 Treatment of dry traumatic rupture of tympanic membrane is:
- Antibiotic ear drops
  - Myringoplasty
  - Protection of ear against water
  - Ear pack soaked with antibiotic
- Q.5 Schwartz's sign is:
- Swelling over the mastoid
  - Reddish hue seen in the hypotympanum behind an intact tympanic membrane
  - Improved hearing in noisy surroundings
  - Reddish hue seen over the promontory
- Q.6 Most common cause for bilateral conductive deafness:
- Otosclerosis
  - Otitis media with effusion (OME)
  - Acute otitis media
  - Congenital cholesteatoma
- Q.7 All of the following are associated with Kartagener syndrome (immotile cilia syndrome) except:
- Bronchiectasis
  - Sterility
  - Chronic sinusitis
  - Cleft palate
- Q.8 All of the following are associated with Kartagener syndrome except:
- Clubfoot
  - Hydrocephalus
  - Polycystic kidney disease
  - Cricothyroid
- Q.16 Treatment of choice for stage I cancer larynx is:
- Radical surgery
  - Chemotherapy
  - Radiotherapy
  - Surgery followed by radiotherapy
- Q.17 Hoarseness is the earliest symptoms of carcinoma of:
- Glottis
  - Subglottis
  - Supraglottis
  - All of the above
- Q.18 During laser removal of a benign laryngeal tumour, ignition of the endotracheal tube is seen. Your immediate response should be:
- To immediately remove the tube
  - To stop oxygen
  - To flood the area with saline to extinguish fire and later continue surgery
  - To remove the tube, do bronchoscopy and re-establish the airway
- Q.19 Decreased bone conduction in an audiogram is indicative of:
- Tympanic membrane perforation
  - Ossicular dislocation
  - Ossicular fixation
  - Damage to cochlea
- Q.20 Which of the following conditions will give maximum conductive hearing loss:
- Complete obstruction of ear canal
  - Disruption of ossicular chain with intact tympanic membrane
  - Disruption of ossicular chain with perforation of tympanic membrane
  - Perforation of tympanic membrane with intact ossicular chain

- Q.9 Complications following septal abscess:
- Severe epistaxis
  - Depression of nasal bridge
  - Meningitis
  - Cavernous sinus thrombophlebitis
- Q.10 'Bleeding polyp' of the nose is another name for:
- Antrochoanal polyp
  - Juvenile angiofibroma
  - Haemangioma of nasal septum
  - Rhinosporeidiosis
- Q.11 Squamous cell carcinoma of maxilla -T<sub>3</sub>N<sub>0</sub>M<sub>0</sub> staging:
- Radiotherapy
  - Maxillectomy
  - Radiotherapy and maxillectomy
  - Maxillectomy and chemotherapy
- Q.12 Antral (Holman-Miller) sign is a feature of:
- Acoustic neuroma
  - Glomus tumour
  - Nasopharyngeal angiofibroma
  - Coalescent mastoiditis
- Q.13 In which of the following locations (spaces), there is collection of pus in quinsy:
- Peritonsillar space
  - Parapharyngeal space
  - Retropharyngeal space
  - Within tonsil
- Q.14 Fordyce's (spots) granules in oral cavity arise from:
- Mucous glands
  - Sebaceous glands
  - Taste buds
  - Minor salivary glands
- Q.15 Paralysis of recurrent laryngeal nerve does not affect function of:
- Thyroarytenoid
  - Lateral cricoarytenoid
  - Vocalis
  - Cricothyroid