

MBBS III (Third) Professional Part-2 Examination 2014-15

Course Code: MBS404 Paper ID: 0314107

General Surgery - II

Time: 2 Hours 30 Minutes Max Marks: 45

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

Part 'B'

- What are the causes of lump in the write ilea fossa. Write 1. management of perforated appendix.
- Describe briefly about intraoperative and post operative diagnosis of bile duct injury, classification and management of bile duct injury.
- 3. Write short note on:

 - Post splenectomy complications Diagnosis and localization of insulinoma. b)
 - Clinical presentation and surgical management of Hirschprung's c) disease

Part 'C'

- 1.
- Write short notes on the following: (3x4=12)Breast reconstruction following mastectomy for carcinoma a)
- Epidural anaesthesia b)
- Indications for tube thoracostomy (chest drain)
- d) Uses of ultra sound in surgery.
- Describe briefly about clinical presentation and diagnosis of calculus disease of urinary tract? Describe different noninvasive 2. and minimally invasive treatment options for renal calculi. (4+4)

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(3x3=9)

Roll No.	Student's Name
Student's Signature	Invigilator's Signature
	X
Course Code: MBS404	Paper ID: 0314107
General Surgery - II	
	Part 'A'

Time: 30 Minutes Max Marks: 15

- Note: 1. Attempt all questions and return this part of the question paper to the invigilator after 30 Minutes.
 Please tick (√) correct one only. Cutting, overwriting or any other marking are not allowed.
 For answering please use Ball- pen only.

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FirstRanker:companic intestinal Firstrankelskochnoinection
b) Paralytic ileus
c) Mesenteric vascular obstruction 0.3 All of the following are potential sites for internal n, except: A hole in the transverse mesocolon Foramen of Winslow Paracaecal fossae d) In the recto-uterine pouch Which of the following statements is false about vermiform appendix:
a) The commonest position of the appendix is a) retrocaecal The position of the base of the appendix is b) constant
The appendicular artery arises from the right colic artery
Argentaffin cells are found in the base of the crypts c) d) Which of the following is not a common position for 0.5 orrhoidal cushi Right lateral b)
Right anterior d) Left lateral Right posterior Q.6 Amsterdam II criteria is proposed for screening for which of the following disease:
a) Familial adenomatous polyposis Peutz- Jeghers syndrome Lynch sy Juvenile polyposis syndrome Which of the following is not a characteristic of Q.7 pseudocyst of pancreas:
a) Unilocular thick walled with debris in EUS Communication with pancreatic duct may be present Low fluid amylase with high fluid CEA d) Fluid cytology reveals inflammatory cells Which of the following is not a feature of chronic liver O.8 Lethargy b) Jaundice Oliguria d) Spider naevi Which of the following is not a parameter to access the severity of acute pancreatitis in either Ranson or Q.9 Glassgow score: Serum Calcium Serum amylase Lactate dehydrogena d) Blood urea Which of the following statement is true regarding colorectal cancer with hepatic metastasis: Primary nerve repair is done within 1 month of a) Primary neurorrhaphy is recommended when nerve is sharply incised b) Results of primary nerve repair is excellent even c) nated wound in contami Primary nerve repair should be done before skeletal stability is achieved d) All of the following about Wilms' tumor are correct 0.19 Usually presents in the first five years of life Also called as nephroblastoma Mostly treated by chemotherapy followed by c) nephrectomy d) Lymphatic spread is common On digital rectal examination which of the following 0.20 features do not suggest prostate carcinoma:

a) Nodules within the prostate

b) Obliteration of the median sulcus

c) Mobile rectal mucosa over the prostate d) Irregular stony hard consistency 0.21 Following statements are true with regard to the management of testicular tumors, except: The commonest are the germ cell tumors Seminomas metastasize mainly via the hematogenous route
Tumor markers (AFP and HCG) should be
measured prior to orchidectomy Which of the following has highest fetal radiation exposure:

a) Abdominal CT by Q.22 Abdominal CT b) Chest radiograph
Head CT d) Pelvic radiography Which of the following zone of the prostate gland is most 0.23 common location for prostatic cancer. Central zone Transitional zone b) Central zone
Peripheral zone d) Periurethral zone Which of the following is false about spleen:

a) Haemangioma is the most common benign Q.24 tumor
Lymphoma occurs rarely in the spleen
Post-splenectomy septicaemia may result from
Haemophilusinfluenzae
Splenunculi are found in the hilum of the spleen
in 50 percent of cases tumor b)

colorectal cancer present with synchronous liver

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It may be present at rest

a) b) Intermittent claudication is most commonly felt

in the calf Claudication distance is usually inconsistent on c)

a day-to-day basis for a given patient

It is thought to be due to nerve compression in d) the leg muscle compartment

Q.12 Which of the following statements regarding complications of surgical treatment of varicose veins are true

Wound infections rarely occurs

Foot drop may occur
Causalgia is a frequent complication
Saphenous nerve neuralgia occurs due to short saphenous vein surgery

Q.13 Indications for coronary artery bypass grafting are all except: a) >50 percent stenosis of the left main stem

a)

Two or three main coronaries diseased

Poor ventricular function associated with multi-vessel disease

> 30 percent stenosis of the proximal left

d) anterior interventricular artery

Q.14 Which of the following about chyluria is false

Filaria is the most common cause The chyle never clots

may be useful in c)

Lymphagiography may be useful in lymphourinary fistula Treatment includes a low fat and high protein d)

Q.15 Which of the following is not a recommended treatment for malignant pleural effusion:

a) Chest tube drainage and talc slurry for

pleurodesis

Thoracoscopy with pleural biopsy and drainage with talc poudrage for pleurodesis Chronic indwelling catheterization with at home b)

c) drainage

Complete pleurectomy at initial presentation d)

For microvascular free flap, what is the maxir for which the muscle tolerates the warm ischemia:

30 minutes b) 2 hrs 3 hrs d) 4-6 h a)

All are operations done for Lymphedema except is:

Sistrunk operation b) Homans operation Charles operation d) Begers operation

Q.18 Which of the following is true for primary nerve repair:

Wilms tumor

d) Neuroblastoma

Q.28 Which of the following statement is false regarding

management of burn patients:
a) In adults with burns over 15 percent TBSA, IV fluid is indicated

The key to monitor hydration is urine output Full thickness burns involves the er b)

c)

epidermis only
A nasogastric tube should be used in all patients
with burns over 15 percent of TBSA d)

0.29 Which of the following is false about reactionary

nage: Defined as delayed haemorrhage occurring within 24 hrs of operation Caused by dislodgement of clot, normalization

b)

of blood pressure or slippage of ligature
It is usually venous
d) It can be significant, requiring re-

exploration

Which of the following predispose to bile duct carcinoma:

a) Gall bladder stones

b) Colorectal carcinoma

Q.30

Primary sclerosing cholangitis Chronic calcific pancreatitis

Which of the following is not an advantage of full 0.25

thickness skin graft: a) Better cosmetic outcome

Can be meshed and increase surface area

Better sensory recovery All of the above

d)

d)

0.27

What is the most significant disadvantage of the laryngeal mask airway (LMA) over an endotracheal tube:

Failure to provide a competent airway Failure to allow tracheal suction Enhanced risk of tube obstruction Risk of pulmonary aspiration a)

c) d)

Most common extra-cranial solid tumor of childhood is: