

SURGICAL GASTROENTEROLOGY**PAPER-I**Time: 3 hours
Max. Marks: 100

GIS/D/19/46/I

Important Instructions:

- Attempt all questions in order.
- Each question carries 10 marks.
- Read the question carefully and answer to the point neatly and legibly.
- Do not leave any blank pages between two answers.
- Indicate the question number correctly for the answer in the margin space.
- Answer all the parts of a single question together.
- Start the answer to a question on a fresh page or leave adequate space between two answers.
- Draw table/diagrams/flowcharts wherever appropriate.

Write short notes on:

1. Role of liquid biopsy in GI cancer. 10
2. a) Define and classify morbid obesity. 2+8
b) Discuss management options for a 40-year-old female with BMI of 50 along with diabetes mellitus.
3. a) Define high pharyngo-esophageal corrosive stricture. 2+8
b) Discuss various management options in such a patient.
4. a) Enumerate causes of tracheo-esophageal fistula. 3+7
b) How will you investigate and treat a 22-year-old female with TEF following corrosive injury?
5. Role of neo-adjuvant chemotherapy/chemo-radiotherapy in management of carcinoma stomach. Give an evidence based approach. 10
6. a) Classify post gastrectomy complications. 3+7
b) How will you investigate and manage patient with duodenal stump blow out after subtotal gastrectomy?
7. Compare and contrast laparoscopic esophagectomy Vs robotic esophagectomy in carcinoma esophagus. 10
8. a) What is Boerhaave's syndrome? 2+8
b) Outline treatment options in a patient of Boerhaave's syndrome based on timing of presentation.
9. a) Describe High Resolution Manometry (HRM). 5+5
b) Classify achalasia cardia based on HRM and its clinical relevance.
10. a) Define and classify obscure GI bleed. 2+8
b) How you will investigate a 33-year-old male presenting with obscure GI bleed?
