

## topics in ent for mbbs

### **EAR**

#### **1. Anatomy**

- External acoustic canal.
- Tympanic membrane anatomy. The diagram of landmark of tympanic membrane is v. Imp. Practice it by drawing more and more. Even in viva also, it is important.
- Anatomy of middle ear and the diagram of structures related to anatomy of middle ear is v.v. Imp.
- Anatomy of inner ear - bony and membranous labyrinth.

#### **2. Physiology**

- You must know about the organ of corti and diagram.
- Physiology of hearing should be cleared.

#### **3. Assessment of hearing**

- Tuning fork tests are imp as it is basic of ear examination and in every ear disorder, you have to do it. For vivas, it is v.v. imp. If you don't know how to perform these tests in viva, then examiner will think that you know nothing. You must know why we use 512 Hz tuning fork. Remember that Weber test is more sensitive than Rinne test. Why? Read yourself.
- Pure tone audiometry and speech audiometry is v. Imp.
- Impedance audiometry - Tympanometry and acoustic reflex.

#### **4. Hearing loss**

- Read everything about conductive hearing loss - Its etiology, management etc. Tympanoplasty can be asked in vivas.
- Sensorineural hearing loss is again v. Imp. Its etiology, characteristics, types - inflammatory, ototoxicity, presbycusis etc.

#### **5. Vestibular function assessment**

- Spontaneous nystagmus
- Fistula test is imp.
- Caloric test is imp
- Benign paroxysmal positional vertigo (not much imp).

#### **6. Disorders of external ear**

- Otitis externa is v. Imp. Furuncle, otomycosis, diffuse otitis externa, malignant otitis externa can come as separate question.

### **7. Eustachian tube**

Just read Valsalva test from it.

### **8. Disorders of middle ear**

- Acute suppurative otitis media is a v. imp topic. It often comes in exams.

- Serous otitis media is again imp.

- Cholesteatoma is also v. Imp. Its theories of origin must be cleared.

- Chronic suppurative otitis media is a v.v. imp topic. Read the tubotympanic and atticoantral type thoroughly. Even in vivas also, it is the favourite question of examiner. So learn it by heart.

- Complications of csom is again v.v. imp - both intratemporal and intracranial. I found it somewhat difficult to learn. So, pay special attention to it.

- Tuberculous otitis media is not much imp.

### **9. Otosclerosis**

It is again imp. topic. Its etiology, types, signs and symptoms, treatment must be cleared

### **10. Facial nerve**

- Anatomy of facial nerve and its diagram - its course and branches.

- Bells palsy especially its treatment.

- Herpes zooster oticus ( Ramsay hunt syndrome)

### **11. Meniere's disease**

-It is v.v. imp topic and is asked in vivas also.

- Difference between cochlear and retrocochlear lesion.

### **12. Tumours of middle ear**

Glomus tumour - not much imp. Just read it

### **13. Acoustic neuroma**

Read everything in it

### **14. Rehabilitation of hearing impaired**

- All types of hearing aids are imp. Conventional, bone anchored, implantable and chochlear implants.

## **15. Otalgia - important for both theory and viva.**

### **NOSE**

#### **1. Anatomy**

- As it is the basic topic, so you must know the anatomy of nose. Even you may be asked about it in practicals. The diagram of lateral wall of nose is imp
- You need not to study physiology of nose

#### **2. External ear**

- Read rhinophyma and furuncle (boil) from it

#### **3. Nasal septum**

- Deviated nasal septum is v. Imp topic.
- Septal hematoma and septal abscess

#### **4. Rhinitis**

- Acute rhinitis is imp. - viral and bacterial
- Chronic rhinitis - simple, hypertrophic, atrophic.
- Allergic rhinitis is again imp.
- Vasomotor rhinitis and other form of non allergic rhinitis

#### **5. Granulomatous disease**

- Rhinoscleroma
- Rhinosporidiosis
- Rhinolith
- Nasal myiasis is imp

#### **6. Nasal polypi**

- Bilateral ethmoidal rhinitis is v. Imp - its etiology, pathogenesis, signs and symptoms, treatment etc.
- Antrochoanal polyp is again imp. Difference Between both is imp.

#### **7. Epistaxis**

- Diagram of blood supply of nasal septum
- Causes, sites and management of epistaxis is v. Imp.

#### **8. Trauma to face**

- Read fractures of maxilla

- Oroantral fistula

### **9. Paranasal sinuses**

- Anatomy of paranasal sinuses

- Acute sinusitis is v. Imp. Acute maxillary sinusitis and acute frontal sinusitis comes in exams.

- Chronic sinusitis again imp. Read the various surgeries.

- Mucocele of paranasal sinuses.

- Carcinoma of maxillary sinuses - read it fully

### **PHARYNX**

**1. Anatomy of pharynx** - nasopharynx, oropharynx and laryngopharynx along with diagrams.

**2. Adenoids**

**3. Nasopharyngeal fibroma** - also read its various surgical approaches.

**4. Nasopharyngeal carcinoma is imp.**

**5. Acute and chronic pharyngitis** - read everything- etiology, clinical, treatment. Also read atrophic pharyngitis.

**6. Tonsils**

Acute tonsillitis is a v.v. imp topic. Its types should be cleared. It is also frequently asked in viva.

- Tonsillar bed diagram.

- Differential diagnosis of membrane over tonsil - v. Imp.

- Read facial diptheria.

- Chronic tonsillitis is also v. Imp.

### **7. Head and neck space infection**

- Ludwig's angina - etiology, clinical, treatment, complications

- Peritonsillar abscess

- Retro pharyngeal abscess - acute and chronic

- Parapharyngeal abscess

8. Pharyngeal pouch - its a small topic and important also.

9. Stygia (eagles syndrome)

## **LARYNX**

### **1. Anatomy**

It is v. Imp for both theory and practical. It is difficult to understand. So, watch YouTube videos and try to visualise it. Muscles of larynx are also difficult to learn but you have to study this whole chapter.

### **2. Inflammation of larynx**

- Acute laryngitis
- Acute epiglottitis
- Acute laryngo tracheal bronchitis and its differentiation from acute epiglottitis.
- Chronic laryngitis
- Reinke's oedema
- Tuberculosis of larynx

### **3. Congenital lesions**

- Laryngomalacia, laryngeal web, laryngocele
- Stridor is v. Imp. Read everything

### **4. Laryngeal paralysis**

- Causes of laryngeal paralysis
- Recurrent laryngeal nerve paralysis, superior laryngeal nerve paralysis, combined. This chapter is v.v. imp. This topic is conceptual. So try to make good concept. You can't learn it by just rattafying.

### **5. Tumors of larynx**

- Vocal nodule and polyps
- Squamous papillomas
- Cancer larynx - its a v.v. imp topic. Its TNM classification, types, diagnosis, treatment - Everything should be cleared.

### **6. Voice and speech disorders**

- Hoarseness
- Hyponasality, hypernasality, struttering ( not much imp)

### **7. Tracheostomy**

- Read it in detail

**ORAL CAVITY**

1. Ulcers of oral cavity
2. Submucous fibrosis
3. Premalignant lesions ( leukoplakia and erythroplakia).
4. Carcinoma oral tongue
5. Mumps, Acute suppurative parotitis, Sjogren's syndrome, Salivary calculi - all are imp.
6. Pleomorphic adenoma, warthin's tumour, Frey's syndrome.

**THYROID GLAND**

1. Hypothyroidism, hyperthyroidism, graves disease.
2. Thyroid carcinoma

**OESOPHAGUS**

1. Plummer Vinson syndrome is v. Imp. And is a short topic.
  2. Cardiac achalasia
  3. Carcinoma oesophagus
  4. Dysphagia
- Read about various lasers and Their clinical application. Read basics of lasers.
  - AIDS is an imp topic. So read the ent manifestations in HIV.
  - Diagram of structures seen on posterior rhinoscopy is v. imp.
  - Diagram of structures seen on indirect laryngoscopy is imp.

**SURGERIES**

Surgeries are imp for both theory and practicals

1. Mastoidectomy is very imp. Don't merge into details of steps of operation. Just read basics of cortical, radical and modified radical and difference between them. You must know about endaural and postaural approach.
2. SMR and Septoplasty are both v. Imp. You must know difference between them. It is frequently asked in vivas
3. Tonsillectomy is v.v. Imp topic. Especially its complications are frequently asked in both vivas and theory. Read various methods of tonsillectomy. Also read adenoidectomy.
4. Myringotomy - less imp. 5. Read the indications of Caldwell luc operation.