

Third Professional MBBS (Part II) Degree Supplementary Examinations October 2020

General Surgery - I

Time: 3 Hours Max marks: 60

Answer all questions to the point neatly and legibly • Do not leave any blank pages between answers
Indicate the question number correctly for the answer in the margin space • Answer all parts of a single
question together • Leave sufficient space between answers • Draw table/diagrams/flow charts wherever
necessary • Write section A and section B in separate answer books (32 Pages). Do not mix up questions
from section A and section B.

Q P Code: 307001 Section A – Surgery (GIT)
Structured Essay

Marks: 30 (5)

 A 20 years old woman has history of vague periumbilical abdominal pain, nausea and vomiting for the past two days and the pain has now moved to right lower abdominal quadrant. LMP was 7 days before. No history of diarrhea or dysuria. On examination, Temperature 100.8F. Heart rate 100/min. BP 124/82 mm Hg. CVS-unremarkable. Abdomen is soft and there is tenderness in the right lower quadrant. Answer the followinghat is the probable diagnosis

· How will you investigate

· Discuss the management.

(1+2+2) (2x6=12)

Short essays

Femoral hernia

Large bowel obstruction

Clinical Situation (3

- 4. A 35 years old man presents with severe ano-rectal pain associated with defecation. He is afebrile and the examination is incomplete because of patient discomfort and reveals a skin tag, but no erythema/mass. Answer the following:
 - What is the likely diagnosis
 - How will you investigate
 - Briefly mention the management.

Short notes (5x2=10)

- Achalasia cardia
- H.pylori eradication
- Hydatid cyst
- Calot's triangle
- Ranson's criteria

Q P Code: 312001 Section B – Orthopedics Marks: 30
Essay (6

 A nine-year-old girl sustained injury to her left elbow joint due to a fall on outstretched hand. The child was unable to use her left upper limb. Clinical examination revealed a deformed and swollen left elbow joint. Movements of the left elbow joint were painful and restricted. There was no distal neurovascular deficit. Answer the following:

· Give the probable diagnosis

· Outline its management.

(2+4) (4x3=12)

Short essays 2. Torticollis.

- Compartment syndrome.
- Osteoclastoma
- Fat embolism.

Short notes (6x2=12)

- Ganglion.
- Management of frozen shoulder.
- Mallet finger.
- Clinical features of osteosarcoma distal femur.
- Genu valgum.
- Causes for nonunion of fractures.

