016/26

The West Bengal University of Health Sciences
MBBS 3rd Professional Part-II Examination (New Regulation)
March - April 2026

Subject: General Surgery **Full Marks: 100**
Paper: I **Time: 3 hours**

*Attempt **all** questions. The figures in the margin indicate full marks.*

1. a) A 58 year old patient presents with episodes of copious, projectile foul smelling, non-bilious vomiting of undigested food ones a day toward the evening, for the last few weeks, associated with h/o upper abdominal bloating/discomfort and early satiety. He gave past h/o intermittent, gnawing epigastric pain 3-4 hours after meals, which used to disappear for weeks or months only to return. Recently this periodicity has been lost. What is your most likely diagnosis? How would you investigate and manage him? 2+5+8

   b) A 50 year old male, who is on treatment for Diabetes Mellitus for 10 years is admitted with history of injury to his right foot. Examination showed that he is febrile, his right foot and leg is erythematous and oedematous. The dorsum of the foot showed an ulcer with slough and blackish patches around it. What is the clinical condition? What investigations would you suggest? How would you treat the case in question? What complications would you expect if he is not treated properly? 3+3+5+4

2. **Answer the following:**

a) Enumerate the clinical features of primary hyperparathyroidism. How will you investigate to confirm your diagnosis? 5+5

b) Classify choledochal cysts. Outline the clinical features, diagnostic modalities and treatment options of choledochal cysts. 3+7

c) Write on clinical features, complications and treatment of haemorrhoids. 3+3+4

3. **Write short notes on the following:** 2 x 5

a. Protocol of breaking bad news to the family members of a patient diagnosed with inoperable metastatic gastric malignancy.
b. Sentinel lymph node biopsy.

4. **Explain the following statements:** 5 x 4
   a. A patient undergoing Modified Radical Mastectomy may develop postoperative oedema of the the ipsilateral arm.
   b. Frey's syndrome develops after few parotidectomies.
   c. A patient of Hydatid cyst of liver requires medical therapy before surgical procedure.
   d. Obstructive jaundice leads to coagulopathy.
   e. Assessment of nutritional status is essential before major surgery.

5. **Choose the correct option for each of the following:** 10x1

i. Which of the following signs is seen in Acute Haemorrhagic Pancreatitis?
a) Murphy's sign b) Cullen's sign c) Boa's sign d) Macewen's sign

ii. Which one of the following statements regarding oesophagus is true?
a) Oesophagus is 30 cm long.
b) It is lined throughout by coloumnar epithelium.
c) The oesophagus has three natural constrictions.
d) The lower oesophageal sphincter (LOS) is a zone of low pressure.

iii. The characteristic feature of distributive shock includes one of the following:
a) High venous pressure b) High cardiac output
c) Low base deficit d) Low mixed venous saturation

iv. Identify the false statement about ranula:
a) It is a solid neoplasm b) It is related to sublingual gland
c) It is usually situated in the floor of the mouth d) It is brilliantly transilluminant

v. All are true about pancreatic pseudocyst except one of the following:
a) It usually develops following an attack of acute appendicitis.
b) It usually lies outside the pancreas.
c) More than half communicate with main pancreatic duct.
d) The fluid of pseudocyst usually has high CEA (Carcinoembryonic antigen) levels.

vi. A middle aged lady presented with recurrent renal stones, bone pain and generalized weakness. Laboratory investigations show elevated serum calcium, low serum phosphate and increased parathyroid hormone level. The most likely diagnosis is:
a) Parathyroid adenoma b) Chronic renal disease
c) Deficiency of vitamin D d) parathyroid carcinoma

vii. Gastric carcinoma limited to mucosa and submucosa with regional lymph node metastasis is classified as:
a) Carcinoma in situ b) early gastric carcinoma
c) Advanced gastric carcinoma d) Linitis plastica

viii. Triple assessment of breast includes all except:
a) Clinical examination b) FNAC/Biopsy
c) Serum CA-15-3 d) Imaging

ix. Most common organism causing surgical site infection:
a) E.coli b) Staphylococcus aureus c) Klebsiella d) Pseudomonas

x. Layer holding bowel sutures best:
a) Serosa b) Muscularis c) Submucosa d) Mucosa