

FINAL EXAM
JUNE 2014

NATIONAL BOARD OF EXAMINATIONS

OTO-RHINO-LARYNGOLOGY**PAPER - IV**

ENT/J/14/28/IV

Time : 3 hours

Max. Marks : 100

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.

1. Briefly discuss the mechanism of wound healing. What are the intrinsic and extrinsic factors which can effect wound healing? Briefly discuss the best practices that a surgeon should practice to improve healing outcome. 3+4+3
2. What is LASER? Briefly discuss the various types of LASERs used in ENT practice with possible application in various ENT conditions. What are the limitations and complications of surgical LASERs? 2+5+3
3. What is "Hypotensive Anaesthesia"? Briefly discuss the various methods of rendering hypotensive anaesthesia. Discuss the role of hypotensive anaesthesia in ENT practice and its complications. 2+4+(2+2)
4. Discuss the aetiopathogenesis, clinical features, evaluation and management of a case of thyroglossal cyst. 3+2+2+3
5. Write short notes on: 5+5
 - a) Transoral Robotic Surgery
 - b) Gene therapy and its possible role in ENT diseases
6. What is hyperbaric oxygen therapy (HBOT)? Briefly discuss the role of HBOT in ENT practice and its mechanism of action. Give a brief account of complications of HBOT. 2+(3+2)+3
7. Define palliative care in advanced head and neck malignancies. Briefly discuss the principles of palliative care and methods of achieving them. 3+(4+3)
8. What is neoadjuvant chemotherapy? Discuss the rationale behind its use. Discuss in brief its advantages and disadvantages. 3+3+4
9. Discuss the role of embolisation in management of head and neck lesions. Give a brief account of indications and materials used for embolisation. What are the advantages, disadvantages and complications of embolisation? 2+2+(2+2+2)
10. Define carcinoma of unknown primary site (CUPS). What are the possible primary sites in a case of CUPS with cervical metastasis? How will you evaluate and manage a case of carcinoma of unknown primary site (CUPS) with cervical metastasis? 2+2+(3+3)