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# MBBS Ear – ENT Chapter Wise Previous Exam Questions conducted by KUHS (Kerala University of Health Sciences)

- 1. Malignant otitis externa
- 2. Osteomeatal complex
- 3. Two complications of stapedectomy
- 4. MC Even's triangle
- 5. Grommet
- 6. Labyrinthitis
- Ototoxicity
- 8. Otomycosis
- 9. Cerumen
- 10. Treatment of keratosis obturans
- 11. Presbyacusis
- 12. Theories of hearing
- 13. Treatment of Meniere's disease/Surgical treatment of Meniere's disease
- 14. Surgical treatment of choice for atticoantral type of CSOM
- 15. Name two conditions where you get Hennebertz sign
- 16. Korner's septum and its importance
- 17. Bat's ear and how it is corrected
- 18. Four causes of conductive hearing loss
- 19. What is Schwart'z sign and its clinical importance?
- 20. Management of otosclerosis
- 21. Audiometric findings in otosclerosis
- 22. Objective tinnitus
- 23. Tympanic plexus
- 24. Rinne's test/ What is false negative Rinne test
- 25. Sudden sensory-neural hearing loss
- 26. Myringotomy
- 27. Cortical mastoidectomy
- 28. Modified radical mastoidectomy
- 29. Discuss treatment of lateral sinus thrombosis
- 30. Four causes for referred otalgia
- 31. Two indications for cochlear Implant
- 32. Aural polyp
- 33. Malleus
- 34. Two conditions producing positive Hennerbert's sign
- 35. Gardinego's syndrome
- 36. Boundaries of trautmann triangle
- 37. Cholesteatoma
- 38. Noise induced hearing loss
- 39. Oncogenic brain abscess
- 40. Management of Bezold's abscess
- 41. Pre auricular sinus

# Draw and label

- 1. Mastoid air cells
- 2. Stapes



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- 3. Right tympanic membrane
- 4. Draw a diagram of the auditory pathway
- 5. Draw a diagram of the medial wall of the middle ear
- 6. Draw a diagram of organ of corti and label its parts
- 7. Draw a diagram of ossicular chain

# **Essays**

1.A 38 years old female patient coming with progressive hearing loss and occasional tinnitus with no history of ear discharge. Tuning fork tests reveal a bilateral similar conductive hearing loss. There is family history of hardness of hearing. Answer the following:

- What is the probable diagnosis
- Describe the clinical features of this condition
- Enumerate non- suppurative causes of conductive hearing loss
- What investigations are to be done
- Discuss the treatment (1 +2+2+2+3=10)

2. A 45 years old male, presented with chronic intermittent scanty purulent foul smelling ear discharge in right ear for past 15 years and progressive hardness of hearing for 5 years. On examination of the right ear, tympanic membrane revealed an attic perforation-presently with right sided facial nerve palsy. Answer the following:

- What is the most probable diagnosis
- Describe the aetiopathology
- Describe the clinical features
- What investigations will you do
- How will you treat this patient (1+2+2+2+3=10)

3. A 25 years old female presented with progressive hearing loss worsening after pregnancy. On examination of the ear, tympanic membranes are normal. Answer the following:

- What is the most probable diagnosis
- Describe the clinical features of this condition
- Describe the audiometric finding
- What is the nonsurgical treatment of this condition
- Mention the surgical treatment of the condition and list four complications of the surgery (1+2+2+3=10)