

GENERAL SURGERY

THEORY QUESTION PAPER PATTERN(100 Marks): Not yet published by university. We have given questions under following headings - long essay, short essay ,short answer and objective one word answers

BASIC PRINCIPLES

Shock (B-11, SRB-83)

Short essays

1	Define and classify shock, discuss about the management of septic shock [KU, RGU]	4	Discuss the different types of hemorrhage and management of hypovolemic shock [KU]
2	Define and classify shock and discuss the initial management & resuscitation in shock. [KU]	5	Define Shock. Discuss the clinical features, presentation and management of various types of Shock [RGU]
3	Define shock. Describe pathophysiology and classification of shock. Discuss the management of hypovolaemic shock [TU, RGU]		

Short answers

1	Secondary hemorrhage [KU 23, RGU]	3	MODS. [TU]
2	Classify shock [RGU]	4	Septic shock [RGU, TU]

Blood Transfusion (B-20, SRB-97)

Short essays

1	Enumerate all the different major and minor blood groups. Enumerate various blood products. Describe the blood transfusion reactions and its management. [KU]		
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Short answers

1	Massive Blood transfusion [RGU]	4	Transfusion reactions. [TU]
2	Complications of blood transfusion [RGU, TU]	5	Blood transfusion. [TU]
3	Mention indications for blood transfusion [RGU, TU]	6	Blood substitutes [RGU]

Wound healing and tissue repair (B-24, SRB-19)

Short Essays

1	Classify wounds. Describe factors affecting wound healing [KU 23]	3	Stages of wound and mention its complications [KU 18]
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2	What are the stages of wound healing and mention the factors which delay wound healing [KU 20,TU]	4	Classify wounds. Describe the principles of management of severely injured person. [RGU]
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Short answers

1	Phases of wound healing [KU 20,RGU]	4	Pressure sores [TU]
2	Factors affecting wound healing [KU 19,17,RGU]	5	Hypertrophic scar. [RGU,TU]
3	Name four difference between keloid & Hypertrophic scar. [TU]		

Surgical infection(B-50,SRB-47)

Short essays

1	Definition, type,Pathogenesis clinical features of gangrene? Discuss the management of gas gangrene? [RGU,TU]	2	Describe the etiology, clinical features and treatment of tetanus [RGU]
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Short answers

1	Tetanus [KU 19,17,RGU,TU]	5	Systemic inflammatory response syndrome(SIRS) [KU 19,TU]
2	Gas gangrene [KU 18,17,RGU,TU]	6	Fourniers gangrene [KU 19,TU]
3	Dry gangrene [KU 20]	7	Prevention of Tetanus. [TU]
4	Universal precautions [KU 20,RGU,TU]	8	Mention universal precautions for surgery in HIV patients [RGU]

Topical infections and infestations(B-66)

Short Essays

1	Hydatid disease [RGU]		
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Short answers

1	Amoebic liver abscess [KU 18,17,15]	6	Ameobiasis [TU]
2	Tuberculous cervical lymphedinitis [KU 22, RGU,TU]	7	Mycetoma of foot/ Madura Foot. [TU]
3	Staging of tubercular lymphedinitis [KU 15,RGU]	8	Amoeboma [RGU]
4	Surgical complications of enteric fever. [TU]	9	Abdominal tuberculosis [TU]
5	Actinomycosis [TU]	10	Filarial Lymphedema [TU]

Basic surgical skills and anastomoses(B-94)

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Short answers			
1	Principles of laparoscopy [KU 23,RGU]	7	Types of suture material. [TU]
2	Advantages of laproscopic surgery [KU 16]	8	Name four indications for using Romovac Suction drain. [TU]
3	Contraindications of laproscopic surgery [KU 15,RGU]	9	Hilton's method of Drainage [TU]
4	Complications of laproscopy [RGU]	10	Lasers in surgery. [TU]
5	Mention various types of abdominal incisions. [RGU]	11	Surgery in diabetic patient. [TU]
6	Minimal access surgery [TU]		

Principles of pediatric surgery(B-254)

Short essays

1	Briefly discuss the diagnosis and managemet of congenital diaphragmatic hernia in a child [KU 16]	2	Types of oesophageal atresia [KU 15]
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Short answers

1	Hirschsprungs disease [KU 23,RGU]	4	Imperforate anus [KU 18]
2	Congenital pyloric stenosis [KU 19]	5	Hypertrophic pyloric stenosis [KU 17]
3	Exomphalos [RGU]	6	Diaphragmatic hernia. [TU]

Principles of oncology(B-198)

Short answers

1	Causes of cancer [KU 19]	4	Hodgkins lymphoma [KU 20,RGU,TU]
2	How do you clinically stage Hodgkins lymphoma [KU 16]	5	Haemangioma. [TU]
3	Tumour markers [KU 18]	6	Name four sarcomas which predominantly spread by lymphatic routes [TU]

Surgical ethics and law(B-227)

Short answers

1	Confidentiality[TU]		
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INVESTIGATION AND DIAGNOSIS

Diagnostic Imaging (B-117,SRB-1211)

Short answers

1	Double Contrast Study	[RGU]	4	Digital Subtraction Angiography	[RGU]
2	MRI scan	[RGU]	5	CT Scan	[RGU]
3	PET (Positron Emission Tomography) scan	[RGU]			

Gastrointestinal endoscopy(B-143)

Short answers

1	Colonoscopy	[KU 22,15,RGU,TU]	6	ERCP	[KU 19,TU]
2	Principles of laparoscopy	[KU 23]	7	Indications of ERCP	[RGU]
3	Flexible endoscopy.	[TU]	8	Diagnostic Laparoscopy	[TU]
4	Therapeutic endoscopy.	[TU]	9	Ultrasonography	[TU]
5	Newer advances in Endoscopy	[RGU]			

Tissue and molecular diagnosis(B-177)

Short answers

1	FNAC	[KU 16,TU]	3	Core needle biopsy.	[TU]
2	Trucut Biopsy.	[TU]			

PERIOPERATIVE CARE

Short answers

1	Perioperative workup of the surgical patient[KU 18]				
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Anaesthesia and pain relief(B-285,SRB-1205)

Short answers

1	Local anaesthesia	[KU 21,TU]	12	General Anaesthesia, and Triad of General Anaesthesia	[TU]
2	Pain management	[KU 21,TU]	13	Endotracheal anaesthesia and stages.	[TU]
3	Local anesthetic agents	[KU 21,TU]	14	Patient controlled analgesia	[TU]
4	Lignocaine	[KU 18,TU]	15	Nerve blocks.	[TU]
5	Spinal anaesthesia	[KU 20,18,RGU,TU]	16	Succinylcholine	[TU]
6	Intravenous anaesthesia	[KU 20]	17	Muscle Relaxants	[TU]
7	Bupivacaine	[KU 19,TU]	18	Complications of spinal anaesthesia.	[TU]
8	Regional anaesthesia	[KU 18,TU]	19	Common local anaesthetic techniques.	[TU]
9	Brachial block	[KU 15]	20	Digital block anaesthesia.	[TU]
10	Epidural Anaesthesia	[KU 23,RGU,TU]	21	Lumbar puncture.	[TU]
11	Propofol.	[TU]			

Nutrition and fluid therapy(B-329)

Short essay

1	Indications for artificial nutritional support. Detail about total parenteral nutrition and its complications	[RGU,TU]
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Short answers

1	Hypokalaemia	[KU 23,RGU]	3	Hyperkalemia	[RGU]
2	Total parenteral nutrition	[KU 22,RGU,TU]			

Post operative care(B-315)

Short essay

1	Wound dehiscence	[KU 17]	2	Post operative care for abdominal surgery	[TU]
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Day case surgery(B-299,SRB-1238)

1	Day case surgery[TU]				
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TRAUMA

Early assessment and management of severe trauma(B-354)

1	Damage control surgery	[TU]	2	FAST	[TU]
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Traumatic brain injury(B-360,SRB-1150)

Short essays

1	What is Glasgow coma scale. Discuss its components and role in the management of Head Injuries. [KU 16]
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Short answers

1	Lucid interval	[KU 23, 20,RGU,TU]	5	Extra dural hematoma	[KU 21,RGU,TU]
2	Glasgow coma scale	[KU 23,18,17,RGU,TU]	6	Trimodal pattern of death in Trauma	[KU 17]
3	Subdural hematoma	[KU 23, 19,16,RGU,TU]	7	What is lucid interval as applied to head injuries	[KU 15]
4	Diagnosis and management of Subdural hematoma	[KU 22]	8	Diagnosis and management of subdural hematoma	[KU]

Torso Trauma(B-371,SRB-30)

Short essay

1	A 20 years old man is admitted with evisceration of bowel following a bull gore injury. How will you manage this patient	[KU 15]	3	Blunt abdominal trauma evaluation	[KU 20]
2	Classify firearm wounds and discuss the management of bullet wound over the chest from front	[KU 23]	4	Discuss causes and pathophysiology of Flail Chest. How do you manage a case of haemothorax?	[RGU]

Short answers

1	Flail chest	[KU 23,21, 20,18,17,RGU,TU]	4	Tension pneumothorax	[KU]
2	Diagnostic peritoneal lavage	[KU 18]	5	Cardiac tamponade	[KU 16]
3	Types of pneumothorax and principles of their management	[KU 15]	6	Open chest injuries	[TU]

Extremity Trauma(B-416)

Short answers

1	Volkman's ischemic contracture	[KU 18]	2	What are the types of nerve injury	[KU 16]
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Burns(B-664,SRB-122)

Long essays

1	A 55 years old female attended casualty following suicide attempt by pouring kerosene and igniting herself. Evaluation showed 60% burn involving face, trunk and extremities. Discuss the early management of this patient, sensible complications and definitive management [KU 17]
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Short essays

1	Electrical burns and its management	[KU 23]	5	Discuss the cause of burns and management of 60% burns	[KU 16]
2	Classify burns injury. Discuss the management of 60% burns in a 40-year-old man (management of 60% burns in a patient weighing 60Kg[RGU])	[KU 22]	6	Discuss the pathophysiology of burns. How do you manage a patient with 30% burns with a short note on post burns sequelae?	[TU]
3	Discuss the types of burn and its management	[KU 21]	7	Classify thermal burns. Management of thermal burns.	[RGU]
4	Discuss the assessment of surface area and fluid management of thermal burns				[KU 15]

Short answers

1	Fluid management in burns	[KU 20, RGU,TU]	4	Acid burns	[RGU]
2	Electrical burns	[KU 18]	5	Inhalation Injury	[TU]
3	What is the rule of nine as applied to burns	[KU 16,RGU]	6	Parkland's formula for burns.	[TU]

Plastic and reconstructive surgery(B-681)

Short answers

1	Split skin graft	[KU 23 ,19,RGU]	4	Types of skin grafts and indications	[RGU]
2	Thiersch graft	[KU 15,TU]	5	Flaps	[TU]
3	Vascular grafts.	[TU]			

Disaster surgery(B-446)

Short answers			
1	Gas gangrene	[KU 21,20,TU]	5 Tetany [KU 16,TU]
2	Tetanus	[KU 18,RGU,TU]	6 Crush Syndrome [TU]
3	Triage	[RGU]	7 Necrotising fascitis. [RGU,TU]
4	Rhus sardonicus	[RGU]	

ELECTIVE ORTHOPEDICS

Short answers			
1	Felon	[KU 22,RGU]	7 Adamantinoma. [TU]
2	Bakers cyst	[KU 15]	8 Wrist drop [RGU]
3	Principles of treatment of hand infections	[KU 23,RGU]	9 Ganglion [RGU]
4	How do you treat acute paronychia	[KU 15]	10 Deep Palmar Abscess [TU]
5	Paronychia	[RGU,TU]	11 Pulp space infections [RGU]
6	Acute paronychia	[TU]	12 Ingrowing toe nail. [TU]

SKIN AND SUBCUTANEOUS TISSUE

Short essay			
1	Basal cell carcinoma	[KU 20,18 15,TU]	4 Classify Melanoma? Discuss the clinical features, prognostic factors and management of Malignant Melanoma?[RGU]
2	Discuss the classification of ulcers	[KU19]	5 List the premalignant lesions of skin. Discuss the clinical features and management of malignant melanoma.[RGU,TU]
3	Describe the layers of skin, premalignant lesions of skin. Describe the epidemiology,etiology, pathogenesis, clinical presentation and management of Basal cell carcinoma.	[RGU ,TU]	7 Discuss aetiology, clinical features and management of Squamous cell carcinoma of skin.[RGU]
Short answers			
1	Sebacous cyst	[KU 22,21,20,18,15,RGU,TU]	12 Carbuncle [KU 18]
2	Keloid	[KU 21,RGU,TU]	13 Melanoma [KU 18,RGU,TU]
3	Malignant melanoma	[KU 21]	14 Types of hemangioma [KU 17]

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4	MOHS -micrographic surgery	[KU 20]	15 Basal cell carcinoma/Rodent ulcer [KU 17,RGU,TU]
5	Types of basal cell carcinoma	[KU 15]	16 Clarks staging of malignant melanoma [KU 15]
6	Desmoid tumour	[RGU,TU]	17 Marjolin's Ulcer [RGU,TU]
7	Kaposi sarcoma	[RGU,TU]	18 Collar stud abscess. [TU]
8	Premalignant conditions of skin	[RGU]	19 Erysipeals [TU]
9	Epidermal cyst.	[TU,RGU]	20 Hidradenitis suppurativa. [TU]
10	Squamous cell carcinoma.	[TU]	12 Epidermoid cyst [RGU]
11	Xeroderma pigmentosum	[RGU]	13 Pyogenic Granuloma. [TU]

HEAD AND NECK

Cranial neurosurgery(B-702,SRB-1150)

Short answers			
1	Classify types of hydrocephalus	[KU 16]	3 Pott's Puffy Tumor [RGU]
2	Astrocytoma	[TU]	4 Barrey's Aneurysm. [TU]

Pharynx ,Larynx and Neck(B-774,SRB-440)

Short essays			
1	Classify neck dissection and mention briefly the complication of neck dessection		[KU 21]
Short answers			
1	Ludwings angina	[KU 23,RGU,TU]	12 Neck dessection [KU 21]
2	Honer's syndrome	[KU 23,RGU]	13 Cystic hygroma [KU 16,15,RGU,TU]
3	Branchial cyst	[KU 20,19,17,16,15,RGU,TU]	14 Types and complications of modified radical neck dissection [KU 18]
4	Carotid body tumour	[KU 19,RGU,TU]	15 Tuberculous cervical adenitis [KU 16]
5	Cold abcess	[KU 19,16,RGU,TU]	16 Branchial sinus [KU 18]
6	Tracheostomy	[KU 19,18,16,RGU,TU]	17 Carotid body tumour [KU 15,TU]

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7	Tracheostomy	[KU 22, 19, TU]	18	Chemodectoma	[KU 21]
8	Zenkers diverticulum	[KU 17]	19	How will you diagnose and treat ludwings angina	[KU 15]
9	Staging of tubercular lymphedinitis	[KU 15]	20	Classification of dermoid cyst	[KU 16]
10	Sternomastoid tumour	[RGU]	12	Mention complications of tracheostomy	[RGU]
11	Brachial fistula	[RGU, TU]			

Oral cavity (B-813,SRB-401)

Short essays

1	Etiology, pathology, clinical features and management of carcinoma tongue.	[TU]	3	Describe the pathology, clinical features, investigations and management of carcinoma-buccal mucosa.	[TU]
2	Discuss aetiology, pathology, clinical features and management of carcinoma of buccal mucosa.	[RGU]	4	Predisposing factors and premalignant conditions in oral cavity malignancy	[TU]

Short answers

1	Dentigerous cyst	[KU 20,18,RGU,TU]	8	Differential diagnosis of ulcer tongue.	[TU]
2	Carcinoma tongue	[KU 20]	9	Tongue tie	[RGU]
3	Premalignant conditions of oral cavity	[KU 16,RGU,TU]	10	Cleft Lip	[RGU, TU]
4	Leukoplakia	[KU 18,RGU,TU]	11	Speckled leukoplakia	[RGU]
5	Differential diagnosis of tongue ulcers	[RGU]	12	Dental Abscess.	[TU]
6	Types of cleft lip and timing of repair	[RGU]	13	Dental cyst.	[TU]
7	Cancrum oris	[RGU]	14	Epulis[RGU]	[TU]

Disorders of salivary glands(B-831,SRB-469)

Long essays

1	A 30 year old man comes with complaints of painless swelling on the left side of face below and in front of ear lobe, measuring 3x4 cm on physical examination. a) What is the probable diagnosis b) What are the investigations to confirm the diagnosis	2	Classify tumors of salivary glands. Discuss etio-pathogenesis, clinical features, investigations and management of mixed parotid tumor.	[KU 17]
		3	Classify parotid neoplasm. What are the clinical features suggestive of malignancy in a parotid tumor? How will you evaluate parotid	

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c) Discuss the management[KU 23]	swelling and what are the principles, Discuss the surgical management of parotid tumor.	[TU]
Short essays		
1	Pleomorphic adenoma of the parotid gland	[KU 22,RGU,TU]
2	Warthins tumour	[KU 21,RGU,TU]
3	Classify Parotid tumours. Discuss the clinical features and management of Mixed Parotid tumour.	[RGU]
4	Classify salivary gland tumor. Discuss clinical features and management of pleomorphic adenoma of parotid	[TU]
Short answers		
1	What is a Ranula	[KU 21,20,15,RGU,TU]
2	Warthins tumour	[KU 21,TU]
3	Freys syndrome	[KU 19,RGU,TU]
4	Stafne bone cyst	[KU 18]
5	Pleomorphic adenoma	[KU 17,RGU]
6	How do you diagnose and treat submandibular duct calculus[KU 15]	
	7	Classification of Salivary gland tumour
	8	Management of Frey's syndrome
	9	Mention complications of parotid gland surgery
	10	Plunging Ranula
	11	Points to identify facial nerve during parotid surgery.
	12	Salivary calculus

BREAST AND ENDOCRINE

The thyroid gland(B-850,SRB-492)

Long essays

1	35-year-old female presented with history of swelling of 5x4cm since 4 months in front of the neck which moves with deglutition with loss of weight in spite of increased appetite. She is irritable with lack of sleep and oligomenorrhea. On examination tachycardia noted, patient looks anxious with lid lag and staring look. a) What is the probable diagnosis b) How do you investigate c) Briefly discuss management [KU 23]	3	A 40 years old female presented to the out-patient department with swelling on anterior aspect of neck for six years and breathless for last two months. On examination found that her neck veins are dilated. Answer the following: •What is your probable diagnosis. •How will you investigate this case •How will you manage this condition	[KU 18]
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DIAGNOSIS: GRAVES DISEASE		DIAGNOSIS: GOITRE WITH RETROSTERNAL EXTENSION AND COMPRESSION SYMPTOMS	
2	A 60 years old female attends to the surgery OPD with complaints of swelling in the front of the neck along with level II lymph nodes on the left side. Answer the following. • Discuss the specific investigations that are helpful in the diagnosis • Discuss the specific treatment options available for this condition • Discuss the complication following surgery for this patient [KU 17]	4	30 year old woman presenting with painless swelling of the months duration in front of the lower part of neck swelling has two nodules swelling moves with deglutition. Answer the following. a) What is the diagnosis b) What are the investigations required c) Discuss the complications and management [KU 22]
5	A 55 years old female has come to surgical OPD with complaints of swelling in left side of neck and swelling moves up with deglutition and also there is a palpable 2x2 cm firm, lymph node in level IV on the left side. Answer the following. • What is the most probable diagnosis in this case and how will you investigate this patient. • Discuss about management options appropriate for this case scenario • Briefly discuss on the various complications expected following surgery for this condition along with management for each of them [KU 18]	DIAGNOSIS: MULTINODULAR GOITRE	

DIAGNOSIS: CARCINOMA THYROID WITH LYMPH NODE METASTASIS			
Short essays			
1	Discuss the clinical features, investigations and treatment of toxic goiter [KU 23]	5	Discuss the pathogenesis, clinical features, investigations and management of multi nodular goiter. [KU 19, TU]
2	Define Goitre, etiology, Clinical features, investigations and management of primary thyrotoxicosis. (Graves disease) [TU]	6	Classification of Thyroid Neoplasms, Clinical features, Diagnosis and Management of Papillary Carcinoma of Thyroid [TU]
3	Draw and illustrate the Triangles of Neck. Discuss the clinical features, presentation and management of Papillary Thyroid Carcinoma. [RGU]	7	Describe in detail the diagnosis and management of a nodule in thyroid [TU]
4	Discuss the classification, clinical features, investigations and treatment of thyrotoxicosis? [RGU]		
Short answers			
1	SNT (Solitary Nodular Thyroid) [KU 23, 20, TU]	16	Secondary thyrotoxicosis [RGU]
2	Thyroiditis [KU 22, TU]	17	Toxic adenoma [RGU]
3	Thyroglossal cyst [KU 21, 17, 16, RGU, TU]	18	Role of ultrasonography in thyroid. [TU]
4	Medullary carcinoma thyroid [KU 21, 16]	19	Thyroid Storm [RGU]

5	Papillary carcinoma thyroid [KU 20]	20	Radioactive iodine [TU]
6	Thyroglossal cyst [KU 21, 16]	21	Prethibial myxoedema [TU]
7	Follicular carcinoma of thyroid [KU 19]	22	Iodine 131 [TU]
8	Graves disease [KU 19, RGU]	23	Lateral aberrant thyroid [TU]
9	Papillary carcinoma thyroid [KU 18, RGU]	24	Thyroid function test [TU]
10	Neoplasms of thyroid [KU 17]	25	Complications of thyroidectomy [RGU, TU]
11	Thyroid scan [KU 16]	26	Hashimoto's thyroiditis [TU]
12	Thyroid function tests [KU 15]	27	Radio isotope Thyroid scan [TU]
13	Causes of solitary nodular goitre [KU 15]	28	Lingual thyroid [TU]
14	Thyroglossal fistula [KU, RGU]	29	Retrosternal goiter [RGU]
15	How will you clinically diagnose a thyroglossal cyst [KU 15]		

The parathyroid gland (B-873, SRB-540)

Short essay				
1	Discuss Etiology, Pathology, clinical features and surgical management of parathyroid Adenoma			[TU]
Short answers				
1	Hypocalcemia	[RGU]	3	Trousseau's sign [TU]
2	Sestamibi scan	[TU]		

The adrenal gland and other abdominal endocrine disorders (B-888, SRB-549)

Short answers			
1	Phaeochromocytoma [KU 15, TU]	4	Neuroblastoma [TU]
2	Multiple-Endocrine neoplasia type-II [TU]	5	MEN syndromes [RGU]
3	Neuroendocrine tumours. [TU]		

The Breast (B-914, SRB-556)

Long essays

DIAGNOSIS:GRAVES DISEASE		DIAGNOSIS:GOITRE WITH RETROSTERNAL EXTENSION AND COMPRESSION SYMPTOMS	
2	A 60 years old female attends to the surgery OPD with complaints of swelling in the front of the neck along with level II lymph nodes on the left side. Answer the following •Discuss the specific investigations that are helpful in the diagnosis •Discuss the specific treatment options available for this condition •Discuss the complication following surgery for this patient [KU 17]	4	30-year-old woman presenting with painless swelling of six months duration in front of the lower part of neck Swelling has two nodules swelling moves with deglutition,Answer the following a)What is the diagnosis b)What are the investigations required . c)Discuss the complications and management [KU 22] DIAGNOSIS:MULTINODULAR GOITRE
5	A 55 years old female has come to surgical OPD with complaints of swelling in front of neck since 6 months. On examination, there is a 3 x 2 cm swelling in left side of neck and swelling moves up with deglutition and also there is a palpable 2x 2 cm firm, lymph node in level IV on the left side. Answer the following: •What is the most probable diagnosis in this case and how will you investigate this patient. •Discuss about management options appropriate for this case scenario •Briefly discuss on the various complications expected following surgery for this condition along with management for each of them [KU 18] DIAGNOSIS:CARCINOMA THYROID WITH LYMPH NODE METASTASIS		

Short essays

1	Discuss the clinical features,investigations and treatment of toxic goiter [KU 22]	5	Discuss the pathogenesis, clinical features, investigations and management of multi nodular goiter. [KU 19,TU]
2	Define Goitre, etiology,Clinical features, investigations and management of primary thyrotoxicosis. (Graves disease) [TU]	6	Classification of Thyroid Neoplasms. Clinical features, Diagnosis and Management of Papillary Carcinoma of Thyroid [TU]
3	Draw and illustrate the Triangles of Neck. Discuss the clinical features, presentation and management of Papillary Thyroid Carcinoma. [RGU]	7	Describe in detail the diagnosis and management of a nodule in thyroid [TU]
4	Discuss the classification, clinical features, investigations and treatment of thyrotoxicosis? [RGU]		

Short answers

1	SNT(Solitary Nodular Thyroid) [KU 23, 20,TU]	16	Secondary thyrotoxicosis [RGU]
2	Thyroiditis [KU 22,TU]	17	Toxic adenoma. [RGU]
3	Thyroglossal cyst [KU 21,17,16,RGU,TU]	18	Role of ultrasonography in thyroid. [TU]
4	Medullary carcinoma thyroid [KU 21,16]	19	Thyroid Storm [RGU]

5	Papillary carcinoma thyroid [KU 20]	20	Radioactive iodine [TU]
6	Thyroglossal cyst [KU 21,16]	21	Pretibial myxoedema. [TU]
7	Follicular carcinoma of thyroid [KU 19]	22	Iodine 131. [TU]
8	Graves disease [KU 19,RGU]	23	Lateral aberrant thyroid. [TU]
9	Papillary carcinoma thyroid [KU 18,RGU]	24	Thyroid function test. [TU]
10	Neoplasms of thyroid [KU 17]	25	Complications of thyroidectomy [RGU,TU]
11	Thyroid scan [KU 16]	26	Hashimoto's thyroiditis. [TU]
12	Thyroid function tests [KU 15]	27	Radio isotope Thyroid scan [TU]
13	Causes of solitary nodular goitre [KU 15]	28	Lingual thyroid. [TU]
14	Thyroglossal fistula [KU,RGU]	29	Retrosternal goiter [RGU]
15	How will you clinically diagnose a thyroglossal cyst [KU 15]		

The parathyroid gland(B-873,SRB-540)

Short essay

1	Discuss Etiology, Pathology, clinical features and surgical management of parathyroid Adenoma. [TU]
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Short answers

1	Hypocalcemia [RGU]	3	Trousseau's sign. [TU]
2	Sestamibi scan [TU]		

The adrenal gland and other abdominal endocrine disorders(B-888,SRB-549)

Short answers

1	Phaeochromocytoma [KU 15,TU]	4	Neuroblastoma [TU]
2	Multiple-Endocrine neoplasia type-II [TU]	5	MEN syndromes [RGU]
3	Neuroendocrine tumours. [TU]		

The Breast(B-914,SRB-556)

Long essays

1	A 45 year old nulliparous women presented with painless lump in the right breast for 6months duration ,4x3 cm in size ,hard in consistency and mobile with single,central axillary lymph node hard in consistency. Answer the following. •What is the probable diagnosis. •What are the risk factors. [KU 21] •Discuss the investigations and management of the condition DIAGNOSIS: CARCINOMA BREAST , T2N1M0	3	A 50year old lady presents with a hard 3x3cm lump in the left breast since 3 months, slowly growing in size and painless. Answer the following questions: •What could be the probable diagnosis •What clinical signs would support the diagnosis •What investigations would be required •Outline the treatment of this condition [KU 20] DIAGNOSIS: CARCINOMA BREAST,LEFT SIDE,T2N0M0
2	A 60 years old female attends the surgery OPD with complaints of lump of 6cmX5cm in the outer quadrant of right breast , Which is hard and adherent to skin Answer the following: •Discuss the specific examination useful for diagnosis •Discuss the specific investigations necessary •Discuss the treatment option available for this condition [KU 16]	4	A 50 years old woman comes with a lump in her breast of two months duration. Answer the following: •What are the likely causes of lump breast at this age •How will you investigate this patient •Briefly discuss the screening methods for early diagnosis of carcinoma breast. •Discuss Breast conservation in the management of carcinoma Breast. [KU 16]

Short Essays

1	How is breast cancer staged? What is the treatment of stage I and stage II breast cancer [TU]	4	Etiology, clinical features and management of breast abscess[RGU]
2	Discuss about Benign Breast Diseases. Write in detail about Phylloides Tumour. [TU]	5	Describe triple assessment. Clinical presentation ,pathology, management of carcinoma breast. [TU]
3	Classify carcinoma breast. Discuss etiology, clinical features and management of Ca. breast T2N0M0 in a 30 year old patient. [RGU]	6	Etiopathogenesis clinical features and management of Carcinoma breast T2 N1 M0. [TU]

Short answers

1	Triple assessment [KU 23, 22,19,RGU,TU]	13	Tamoxifen [RGU,TU]
2	Phyllodes tumor [KU 23]	14	Ductal Ectasia [RGU]
3	Mastalgia [KU 22,TU]	15	Mammography [TU]
4	Sentinel node biopsy [KU 22]	16	Neo adjuvant therapy. [TU]
5	Fibroadenosis [KU 22]	17	Nipple retraction. [TU]
6	Phyllodes tumour of breast [KU 20,RGU,TU]	18	Inflammatory carcinoma of breast [TU]

7	Discuss the investigations and management of abnormal nipple discharge [KU 16]	19	ANDI.(Aberation in normal development and involution of breast). [TU,RGU]
8	Antibioma [KU 19,RGU,TU]	20	Etiology and management of gynecomastia [RGU]
9	Sentinel node [KU 19]	21	Early breast cancer [RGU]
10	QART therapy [KU 18,TU]	22	Fibroadenoma [RGU,TU]
11	Gynecomastia [KU 17,RGU,TU]	23	TNM staging of Breast cancer [RGU]
12	BIRADS grading in mammogram [KU 17]		

One word answers

1	List out four investigations in a case of breast lump. [TU]	2	Benign breast diseases[RGU]
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CARDIOTHORACIC

The thorax(B-974,SRB-1171)

1	Cervical rib [KU 21]	11	Cardiac tamponade [RGU]
2	Stove in chest [KU 19,TU]	12	Haemothorax [RGU]
3	Thoracic outlet obstruction [KU 18]	13	Pneumothorax [TU]
4	VATS [KU 17]	14	Hydropneumothorax [RGU]
5	Hemopneumothorax [KU 17,TU]	15	Empyema Thoracis [RGU]
6	Tension pneumothorax [KU 15,RGU]	16	Name two indications for ICD [TU]
7	Pigeon chest [KU 18]	17	Subphrenic abscess [TU]
8	Empyema necessitans [KU 16,RGU]	18	Mondor's disease [RGU]
9	Subdiaphragmatic abscess [RGU,TU]	19	Surgical emphysema [RGU]
10	Pyothorax [TU]		

VASCULAR

VENOUS DISORDERS (B-1035, SRR-246)

Long essays

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| <p>1. A 50-year-old male who is on treatment for diabetes mellitus for 10 years is admitted with history of an ulcer in the right foot. Examination showed that he is feeling the right foot and leg is oedematous, reddish, along with an ulcer with slough on the dorsum of foot and black patches around it.</p> <ul style="list-style-type: none"> What is the clinical condition? What are the investigations required? How is the situation managed? How is the patient rehabilitated? <p style="text-align: right;">[KU 22]</p> <p>DIAGNOSIS: DIABETIC ULCER INFECTED WITH SURROUNDING CELLULITIS</p> | <p>2. A 50-year-old male with complaints of dilated and tortuous veins along the medial aspect of right lower limb associated with dull aching pain with healing ulcer just above the medial malleolus. Answer the following:</p> <ul style="list-style-type: none"> What is the probable diagnosis? What are the investigations? What are the complications? How will you treat this patient? <p style="text-align: right;">[KU 19]</p> <p>DIAGNOSIS: VARICOSE VEIN, RIGHT LOWER LIMB, VENOUS ULCER</p> |
| <p>3. A 50-year-old male traffic constable has come to surgical OPD with complaints of dull aching pain in both legs for past 10 years along with a small ulcer over right leg since 3 months. On examination there is dilated and tortuous veins over both lower limbs along with a 4x3 cm ulcer over the medial malleolus on right leg. Answer the following:</p> <ul style="list-style-type: none"> What is the most probable diagnosis in this case and how will you proceed to investigate this patient? Discuss in detail about the various management options available for this patient. Discuss about conservative management of ulcer in this case, if the patient is not willing for surgery. <p style="text-align: right;">[KU 20]</p> <p>DIAGNOSIS: CHRONIC VENOUS DYSFUNCTION, LOWER LIMBS, VENOUS ULCER ON RIGHT SIDE</p> | |

Short essays

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| <p>1. Define varicose vein. Describe the etiology, pathogenesis, classification, clinical features and management of varicose veins. [RGU]</p> <p>2. What is a venous ulcer? Describe in detail etiology, pathology, clinical features and management of venous ulcers in the lower limb. [TU, RGU]</p> | <p>3. Discuss the etiology, clinical features and management of deep vein thrombosis of lower limb. [RGU]</p> <p>4. Discuss the CEAP Classification, Etiopathogenesis, clinical features, investigations and management of varicose vein. [TU]</p> |
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Short answers

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| <p>1. Define varicose veins.</p> <p>2. Deep vein thrombosis.</p> | <p>11. Sclerosing agents. [TU]</p> <p>12. Rigaard's regime [RGU, TU]</p> |
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DECIPHER

GENERAL SURGERY

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| <p>3. Marginal ulcer. [KU 23, 22, 16, RGU, TU]</p> <p>4. Venous ulcer. [KU 22, RGU, TU]</p> <p>5. Saphena vein. [KU 16, TU]</p> <p>6. What is Trendelenburg test for varicose veins? [KU 15]</p> <p>7. Complications of varicose veins. [RGU, TU]</p> <p>8. Doppler Scan. [RGU]</p> <p>9. Duplex mapping. [TU]</p> <p>10. Lipodermatosclerosis. [TU]</p> | <p>13. Deep vein thrombosis. [RGU, TU]</p> <p>14. Modified perthe's test. [TU]</p> <p>15. Trendelenberg operation. [TU]</p> <p>16. Differentiate arterial, venous and neural claudication. [TU]</p> <p>17. Modified well's criteria. [TU]</p> <p>18. Mondor's disease. [TU]</p> <p>19. Clinical features of venous hypertension of leg. [TU]</p> |
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ARTERIAL DISORDERS (B-997, SRR-192)

Long Essays

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| <p>1. A 60-year-old diabetic is admitted with blackening and ulceration of right big toe. Answer the following:</p> <ul style="list-style-type: none"> What are the likely causes? How will you investigate this patient? Briefly discuss the management of this patient. <p style="text-align: right;">[KU 16]</p> | <p>2. Enumerate the causes of lower limb ischemia. Discuss the etiopathogenesis, clinical features and management of Thrombo angitis obliterans and add a note on gangrene. [TU, RGU]</p> |
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Short essays

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| <p>1. Enumerate cause of peripheral vascular disease. Discuss clinical features, investigations and management of a case of Buerger's disease. [RGU, TU]</p> <p>Define gangrene. Discuss etiopathogenesis, clinical features, investigations and management of gas gangrene. [KU 18]</p> <p>2. Thrombo angitis obliterans. [KU 21, 20, 18, RGU, TU]</p> | <p>3. A 50-year-old Hypertensive male patient presents to the Clinic with Claudication Pain over the Right Thigh with a Gangrene of Right 4th and 5th Toe. Discuss in detail the management of this particular patient. [RGU]</p> <p>Discuss the causes, Pathophysiology, clinical features, investigation and management of chronic lower limb ischaemia. [RGU]</p> <p>4. Intermittent claudication. [KU 22, RGU, TU]</p> |
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Short answers

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|---|---|
| <p>1. Intermittent claudication. [KU 23]</p> <p>2. Lumbar sympathectomy. [KU 22, RGU]</p> <p>3. Anticoagulous fistula. [KU 18, TU]</p> <p>4. Rest pain. [KU 19]</p> | <p>12. Raynauds Diseases. [TU]</p> <p>13. Ankle systolic pressure index. [TU]</p> <p>14. DVT Prophylaxis. [TU]</p> <p>15. Diabetic Foot - Grading. [TU]</p> |
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5	Duplex scan	[KU 17]	16	Diabetic gangrene.	[TU]
6	What are the grades of intermittent claudication of the lower limb	[KU 15]	17	Discuss the investigation and principles of management of ischaemic limb.	[RGU]
7	Raynaud's phenomenon	[RGU]	18	Reverse 3 sign	[RGU]
8	Arteriogram.	[TU]	19	Write four indications for amputation?	[TU]
9	Guillotine amputation	[TU]	20	Define gangrene and types of gangrene.	[TU]
10	Arterial emboli.	[TU]	21	Cirsoid Aneurysm.	[TU]
11	False Aneurysm.[TU]				

Lymphatic disorders(S-272)

Short essays

1	Etiopathogenesis, clinical features, diagnosis and management of tuberculous lymphadenitis.	[RGU]	3	Describe the management and clinical features of secondaries in neck lymphnodes	[TU]
2	Classify lymphoma. Write in detail about clinical features, diagnosis and management of hodgkins lymphoma.	[TU]			

Short answers

1	Primary lymphedema	[KU 22]	4	Tuberculous lymphnode.	[TU]
2	Mention the stages of tubercular lymphadenitis	[RGU]	5	Lymphangioma.	[TU]
3	Secondary Lymphoedema	[RGU]	6	Lymph cyst.	[TU]

GENITO URINARY

Urinary symptoms and investigations(B-1447)

Short answers

1	Intravenous pyelography	[KU 23]	4	Acute retention of urine	[RGU]
2	Outline the causes of Hematuria	[KU 20, RGU, TU]	5	Lower Urinary tract symptoms	[RGU]
3	Indications for Intra Venous Urography	[IVU]			

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GENERAL SURGERY

Kidney , Ureters and urinary bladder(B-1466,SRB-1055)

Short essays

1	Causes of Hematuria. Describe in detail the clinical features , investigations and management of Renal cell carcinoma	[RGU]	3	Discuss the pathology, clinical features and management of Hydronephrosis	[RGU]
2	Enumerate the various pathological lesions seen in tuberculosis of kidney. Discuss briefly the clinical features and management of tuberculosis of the kidney	[RGU]	4	What are the types of renal calculi. Discuss the investigations and management of a calculous Renal disease.	[TU, RGU]

Short answers

1	Intravenous pyelogram	[KU 23, TU]	13	Polycystic kidney disease	[KU 21, RGU, TU]
2	Vesical calculi	[KU 23]	4		
3	Renal stones	[KU 22]	14	Unilateral hydronephrosis	[KU 18, RGU]
4	Hypernephroma	[KU 19, RGU, TU]	15	Staghorn calculus	[RGU, TU]
5	Briefly discuss the etiology and management of hydronephrosis	[KU 15]	16	Acute kidney injury in surgical ward-causes.	[TU]
6	Hydronephrosis	[KU 20, TU]	17	Indications for urinary diversion.	[TU]
7	Renal stones	[KU]	18	Autosomal dominant polycystic kidney diseases.	[TU]
8	Renal cell carcinoma	[KU 19]	19	Discuss pathology and management of Wilms Tumour	[RGU, TU]
9	Ureteric colic	[KU 16]	20	Urethral injury	[TU]
10	Percutaneous nephrolithotomy (PCNL)	[RGU]	21	Urinary bladder cancer	[RGU]
11	Horse-shoe kidney	[RGU, TU]	22	Ureterocele	[RGU]
12	Retrograde pyelogram	[RGU]	23	Hepato Renal syndrome	[RGU]
			24	ESWL.	[TU]

The Prostate and seminal vesicles(B-1522,SRB-1103)

Short essay

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GENERAL SURGERY

1	Discuss causes of Acute Retention of Urine. Discuss management of Benign Prostatic Hypertrophy [RGU]	2	Etiology, pathology, clinical features and management of Benign enlargement of prostate. [TU]
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Short answers

1	Brachytherapy [KU 20, RGU]	4	Benign prostatic hyperplasia [KU 19, RGU]
2	P.S.A (Prostate specific antigen) [TU]	5	Mention the symptoms of Benign Prostatic Hypertrophy (BPH). [RGU]
3	Transurethral resection of prostate [RGU]	6	Lower Urinary tract symptoms due to BPH [RGU]

Urethra and penis(B-1538,SRB-1111)

Short essays

1	Describe in detail the pathology and surgical management of carcinoma penis [TU]	2	What are the premalignant conditions of penis? Discuss the pathology and management of carcinoma of penis. [TU]
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Short answers

1	Carcinoma penis [KU 23,20,23, RGU, TU]	10	Carbuncle [KU 18, RGU]
2	Circumcision [KU 19, RGU, TU]	11	How do you manage paraphimosis [KU 16]
3	Pre malignant conditions of carcinoma penis [KU 21, RGU, TU]	12	Mention the indications of circumcision [KU 15, RGU]
4	Phimosis [KU 21, 18, 15, RGU, TU]	13	Urethral stricture [KU 22, RGU]
5	Premalignant lesions of penis [KU 20, TU]	14	Hypospadias [RGU]
6	Peyronie's disease [RGU, TU]	15	Paraphimosis. [TU]
7	Diverticula of urinary bladder [RGU]	16	Ectopic Vesicae [TU]
8	Name four premalignant conditions of Penile swelling. [TU]	17	Mention the causes for stricture urethra. [RGU]
9	Foleys catheterization. [TU]	18	Management of carcinoma penis [RGU]

Testis and scrotum(B-1558,SRB-1128)

Long essays

1	A 45 years old male patient came to the out-patient department with history of 15x10 cm sized swelling in right side of the scrotum. On examination swelling was confined to the scrotum, fluctuant and transilluminant. Answer the following: •What is your probable diagnosis and mention the differential diagnosis of this condition.
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GENERAL SURGERY

- How will you investigate and workup this patient for surgery.
- How will you manage this condition and mention the complications of surgical procedure.

DIAGNOSIS: HYDROCELE, RIGHT SIDE

[KU 19]

Short essays

1	Classify testicular tumours. How will you investigate, diagnose and treat a case of seminoma testis. [TU]		Classify testicular tumour. Aetiopathology, clinical features investigation and management of teratoma [TU]
1	Hydrocele [KU 23,16, RGU]	18	Undescended testis [KU 17, RGU, TU]
2	Testicular tumors [KU 17]	19	Varicocele [KU 22, RGU, TU]
3	Seminoma testis [KU 22, TU]	20	Vasectomy [KU 22]
4	Complications of hydrocele surgery [KU 18]	21	What is the difference between undescended and retractile testis [KU 16]
5	Pyocele [KU 21, RGU]	22	Fourniers ganrene [KU 23,19, RGU]
6	Torsion testis [KU 21, RGU, TU]	23	Encysted hydrocele of cord [KU 17]
7	Infantile hydrocele [KU 21,20]	24	Undescended testis [KU 22, 17, RGU]
8	Congenital hydrocele [KU 19]	25	Retractile testis [TU]
9	Retractile Testis [RGU]	26	Epididymal cyst [RGU]
10	Mention aetiology of Hydrocele [RGU]	27	Complications of vasectomy [RGU]
11	Secondary hydrocele [RGU]	28	Encysted hydrocele of cord. [TU]
12	Surgical procedures for Hydrocele [RGU]	29	Secondary Hydrocele causes. [TU]
13	Seminoma testis [RGU]	30	Bubonocoe. [TU]
14	Orchitis. [TU]	31	Lipoma of cord. [TU]
15	Complications of hydrocele. [TU]	32	Congenital hydrocele. [TU]
16	Teratoma Testis [TU]	33	Complications of Pyocele [TU]
17	Tumour markers in testicular tumours [TU]	34	Spermatocele [TU]

Instruments used in general surgery and fundamental principles in the operating theatre (B -1560)

Short answers

1	Sterilisation method for surgical instruments [RGU]	3	Gas Sterilization [RGU]
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GENERAL SURGERY

2	Sterilization methods	[RGU]	
SWELLING AND ULCERS			
Short essays			
1	Define and classify ulcers. Briefly describe the etiopathogenesis, clinical features and management of an ulcer on the dorsum of the foot in a 60 Year old diabetic male		[RGU]
Short answers			
1	Dermoid Cyst	[KU 23, RGU, TU]	14 Pyogenic abscess [RGU]
2	Implantation dermoid cyst	[KU 22, TU]	15 Types of hemangiomas and differences [RGU]
3	Psoas abscess.	[KU 23 TU]	16 Cylindroma [RGU]
4	Haemangioma	[RGU]	17 Carbuncle [RGU, TU]
5	Lipoma	[RGU, TU]	18 Differential diagnosis of right iliac fossa mass [RGU]
6	Pyogenic granuloma	[RGU]	19 Mention transilluminant swellings in the body [RGU]
7	Cold abscess	[RGU]	20 Neurofibroma. [TU]
8	Sebaceous cyst	[RGU, TU]	21 Bed sores. [TU]
9	Classification of cyst	[RGU]	22 Ulcer edges. [TU]
10	Hypertrophic Scar	[RGU]	23 Pressure sores [TU]
11	Trophic ulcer	[RGU, TU]	24 Name four swellings which give cross-fluctuation? [TU]
12	Haematoma	[RGU]	25 Dercum Disease. [TU]
13	Patient has ulcer near Right medial malleolus. How will you evaluate and treat?		[TU]

GIT

THEORY QUESTION PAPER PATTERN(50 marks): Not yet published by university. We have given questions under following headings - long essay, short essay ,short answer/short note and one word answers.

venous disorders(B-1025,SRB-246)

Long essays

1	A 50 year old male who is on treatment for diabetes mellitus for 10 years is admitted with history of an injury in the right foot. Examination showed that he is febrile, the right foot and leg is oedematous reddish, along with an ulcer with slough on the dorsum of foot and black patches around it. •What is the clinical condition. •What are the investigations required •How is the situation managed •How is the patient rehabilitated. [KU 22] DIAGNOSIS: DIABETIC ULCER -INFECTED WITH SURROUNDING CELLULITIS	2	A 50 years old male with complaints of dilated and tortuous veins along the medial aspect of right lower limb associated with dull aching pain with healing ulcer just above the medial malleolus. Answer the following: •What is the probable diagnosis •What are the investigations •What are the complications •How will you treat this patient [KU 19] DIAGNOSIS :VERICOSE VEIN, RIGHT LOWERLIMB ,VENOUS ULCER
3	A 50 years old male, traffic constable has come to surgical OPD with complaints of dull aching pain in both legs for past 10 years along with a small ulcer over right leg since 1 month. On examination there is dilated and tortuous veins over both lower limbs along with a 4x3 cm ulcer over the medial malleolus on right leg. Answer the following: •What is the most probable diagnosis in this case and how will you proceed to investigate this patient. •Discuss in detail upon the various management options available for this patient. •Discuss about conservative management of ulcer in this case, if the patient is not willing for surgery DIAGNOSIS:VERICOSE VEIN BILATERALLY IN LOWERLIMBS,VENOUS ULCER ON RIGHT SIDE [KU 20]		

Short essays

1	Define varicose vein. Describe the etiopathogenesis, classification, clinical features and management of varicose veins [RGU]	3	Discuss the etiology, clinical features and management of deep vein thrombosis of lower limb. [RGU]
2	What is a venous ulcer? Describe in detail etiology, pathology, clinical features and management of Varicose Veins in the Lower Limb. [TU, RGU]	4	Discuss the CEAP Classification Etiopathogenesis, clinical features, investigations and management of varicose vein. [TU]

Short answers

1	Palomo varicosectomy [KU 23]	11	Sclerosing agents. [TU]
2	Deep vein thrombosis [KU 23,21, RGU, TU]	12	Bisgaard's regime [RGU, TU]

3	Marjolin's ulcer [KU 23,22,16, RGU, TU]	13	Deep vein thrombosis [RGU, TU]
4	Venous ulcer [KU 22, RGU, TU]	14	Modified perthe's test. [TU]
5	Saphena varix [KU 16, TU]	15	Trendelenburg operation [TU]
6	What is trendelenburg test for varicose veins [KU 15]	16	Differentiate arterial, venous and neural claudication. [TU]
7	Complications of varicose veins. [RGU, TU]	17	Modified well's criteria. [TU]
8	Doppler Scan [RGU]	18	Mondor's disease. [TU]
9	Duplex Imaging [TU]	19	Clinical features of venous hypertension of leg. [TU]
10	Lipodermatosclerosis [TU]		

Arterial disorders(B-997,SRB-192)

Long Essays

1	A 60 years old diabetic is admitted with blackening and ulceration of right big toe. Answer the following: •What are the likely causes •How will you investigate this patient. •Briefly discuss the management of this patient. [KU 16]	2	Enumerate the causes of lower limb ischemia. Discuss the etiopathogenesis, clinical features and management of Thrombo angitis obliterans and add a note on gangrene [TU, RGU]
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Short essays

1	Enumerate cause of peripheral vascular disease. Discuss clinical features. Investigations and management of a case of Buerger's disease. [RGU, TU]	3	A 50 years old Hypertensive male patient presents to the Clinic with Claudication Pain over the Right Thigh with a Gangrene of Right 4" and 5 Toe. Discuss in detail the management of this particular patient. [RGU]
	Define gangrene. Discuss etiopathogenesis, clinical features, investigations and management of gas gangrene. [KU 18]		Discuss the causes, Pathophysiology, clinical features, investigation and management of chronic lower limb ischaemia [RGU]
2	Thrombo angitis obliterans [KU 21,20,18, RGU, TU]	4	Intermittent claudication [KU 22, RGU, TU]

Short answers

1	Intermittent claudication [KU 23]	12	Raynauds Diseases. [TU]
2	Lumbar sympathectomy [KU 22, RGU]	13	Ankle systolic pressure index. [TU]
3	Arteriovenous fistula [KU 18, TU]	14	DVT Prophylaxis. [TU]
4	Rest pain [KU 19]	15	Diabetic Foot - Grading [TU]