

- 62) Which is true
- Extradural tumor is malignant.
 - Intradural tumor is benign.
 - Medulloblastoma is an example of intradural.
 - Bleeding in epidural hematoma
- 63) Bleeding in epidural hematoma
- Venous
 - Usually associated with # of the skull.
 -
 -
- 64) A pax who has survived subarachnoid hemorrhage secondary to rupture aneurysm. is at risk of
- Re-~~hemorrhage~~ ^{bleeding} and vasospasm
 - Ischemic stroke
- 65) A pax in Que 64 is not at risk of
- Ischemic stroke
 - Re-~~hemorrhage~~ ^{bleeding} & vasospasm
- 66) In a child what can be confused with acute appendicitis
- Mesenteric adenitis
 - Intussusception
 - Acute ...
- 67) micturition centre is in:
- Sacral spine
 - Cerebrum
 - Cerebellum
 - Pon ✓
- 68) ADH is from
- Anterior pituitary
 - Posterior ^{pituitary}
 - Hypothalamus
 -
- 69) ADH release is stimulated by
- Baroreceptors
 - Chemoreceptors
 - Osmoreceptors
- 70) Que on treatment of erectile dysfunction ??
- LHRH agonist
 - LHRH antagonist
- 71) Concerning paraumbilical hernia
- Defect is in the umbilical region.
 - ✓ ✓ is on the right of the umbilicus
- 72) Duodenal ulcer is commoner than gastric ulcer
- Commoner in blood group A (duodenal ulcer)

Transfusion of stored blood intraop can result in any of the following except:

- a. Thrombocytopenia
- b. Hypokalemia
- c. Citrate toxicity
- d. reduced level of 2,3 DPG

Which of the following statements concerning ICU is false?

- a. A place where patients with potentially reversible conditions are treated
- b. It should have ample space around each bed
- c. It should have a high nurse:patient ratio
- d. Ideally it should have < 4 beds.

In a severely head injured patient being treated in ICU, all are true except:

- a. \downarrow RAS is overactive
- b. They cannot maintain their airway
- c. Coughing & swallowing is defective
- d. Withdrawal from noxious stimuli is defective

Which of the following is a definition of pain?

- a. An unpleasant sensory & emotional experience associated with actual or potential tissue damage or described in terms of such damage. \rightarrow distinctive definition.
- b. ...
- c. ...

Which of the following are examples of neuropathic pain except:

- a) DM neuropathy
- b) ~~DM~~ trigeminal neuralgia (Herpetic)
- c) Radiculopathy
- d) Ureteric colic.

A 50yr old man with cardiac failure usually on digoxin scheduled for ex-lap. under GA which of the following should be used with caution?

- a. Succinylcholine
- b. Vecuronium
- c. Atrocurium
- d. Morphine

ASA Physical status classification

ASA 4 is severe systemic dx that is consistent treat to life.

12 ASA 4 ASA 3 ASA 5 ASA 6

* ~~ASA 4~~ of choice for preventing Mendelson Syndrome

a) 3 M M Citrate

13 b) 3 M Mg trisilicate

c) 0.3 M Na citrate

d) 0.3 M Mg trisilicate

* Growth hormone produce all of the except lipolysis

14 b) Insulin antagonism

c) Hypoglycemia

d) ↑ Inflamm response

* Pro inflamm. cytokines include all except

15 a) IL1 b) IL6 c) ILT d) TNF-α

* The hormones directly controlling the Erb phase include all except

a) Adrenocorticotrophic hormone

b) Catecholamine

c) Cortisol

d) Ondansetron → is a drug

ADH

a. Act by ↑ permeability of DCT


b. Is released by neurosecretion

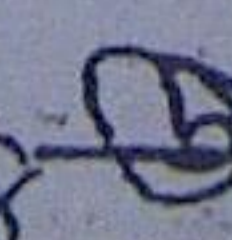
c. Secreted in 1st & 2nd early post-op period

d. Serum level is ↑ by low plasma osmolality

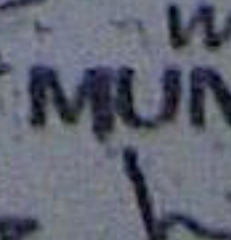
* Gh of d & f statement is false w respect

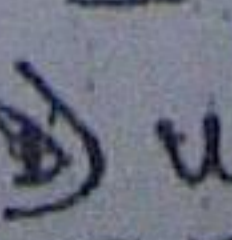
Congrats to metabolic rate observed in injured pt.

Dr. Ifedolapo Olaide  Burn of 40% TBSA has a higher rate than # femur

BALOGUN  Peritonitis has rate higher than # femur

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With love MUM & DAD.  Fatula without mfx has a higher rate than 40% burn

 Uncomplicated post-op period has similar response to multiple organ failure

* Prophylactic antibiotic

- 19 a) Choice is influenced by site of operation
- b) Admin over a 5d period is ideal.
- c) Adequately compensate for poor surgical technique
- d) Usually given by oral route.

* Of antibiotic and normal flora

- 20 a) Extent of prolonged use of broad spectrum antibiotic may cause severe enteritis.
- b) Normal flora of skin include bacteroides spp.
- c) Diptheroids, pneumococci are not resident in the nasopharynx.
- d) Diet has no influence on intestinal flora.

* All surgical infection in general,

- a) lymphocytosis is characteristic of suppurative infection.
- b) Numerous immature polymorph (left shift)
- 21 i) is characteristic of fungal infection
- c) Eosinophilia is characteristic of TB
- d) Agglutination / skin test remain +ve after infection has subsided

* Concerning use of drains

- 22 a) Drain is inserted into an abscess cavity after opening should be removed ^{48hr} post op
- b) Curvated red rubber drain is used in closed drainage
- c) Earlier removal of drain after mastectomy may lead to formation of seroma
- d) Drains are usually placed in the main wound.

X-ray of neck & thoracic inlet
in gutter are used to

- a) Distinguish toxic from euthyroid case
- b) Exclude or parathyroid enlargement
- c) Associated aortic trachea configuration
- d) Access employment problems

Right repair can be relaxed using
thinner slide mer doney slide
own slide

In a normal relationship of mesenteric

- a) before SMA is on the Rt of SMA
- b) SMA is on the Rt of its vein
- c) Coeliac trunk is crossed by SMA
- d) IMA branches off of Lt renal artery

A 20yr old man has been worked down
from its ~~main~~ ~~base~~ ~~has~~ ~~a~~ ~~clot~~ ~~of~~
refract ~~airway~~. Examination reveals a
possible ~~th~~ ~~of~~ ~~the~~ ~~peric~~ ~~th~~ ~~th~~ ~~th~~ ~~fever~~
Sh ~~off~~ ~~dit~~ ~~is~~ ~~a~~ ~~most~~ ~~appropriate~~ ~~choice~~ ~~of~~
O₂ therapy

- a) ETT intubation
- b) Nasal cannula
- c) nonbreathable mask in reservoir
- d) Trachea mask

A 35yr old man in sepsis is being
Rx in ~~dit~~ ~~is~~ ~~a~~ ~~red~~ ~~inflamed~~ ~~gran~~ ~~mass~~.
He is due to go to theater to have ~~a~~ ~~mass~~
excised. HR is 115 bpm, Bp is 80/30 mmHg

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He is oliguric - Sh is
of ~~dit~~ ~~is~~ ~~a~~ ~~most~~ ~~appropriate~~
adrenaline

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c. IV F chocking
d. Compression

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A 30yr old man Nigeria from
have an elective hernia repair
of surgery, hernia was found on
Rt side in = protrusion medial to
of epigastric vessels & another lateral
to it

- Ⓚ Rt direct inguinal hernia
b. Rt indirect inguinal
28 c. femoral
d. pantaloon hernia

Regarding pancreatic carcinoma

- a. < 20% are ductal ca.
29 b. 80% are suitable for curative ca
c. 80% occur in the head of the pancreas
d. USS has sensitivity of 40% in the
detection of the tumor.

Cholelithiasis are for

- 30 a) Are found in 80% of those undergoing
cholecystectomy (want pre-op ERCP)
b) Commonly present in Saint triad
ERCP
c) Cystectomy / biliary clearance is in
the Rx of choice
d) If removed by exploration of CBD, the T-
tube can be removed after 3d.

Metabolic response to trauma, ADH

- g) act by ↑ing the permeability of DCT
h) release by neurosecretory
31 e) secreted ↓ in early post-op period
d) serum level is ↑ by low plasma osmolality

In metabolic response to injury, Ch is the
a. Changes in Na^+ conc. in ECF does not initiate metabolic response.

b. Direction & intensity of response depends on severity of injury

c. In ECF Na^+ balance initiates response

d. Responses vary depending on the cause.

Ch of dis doesn't influence metabolic response to injury

a. Age of pt at presentation.

b. Nature & severity of injury

33 c. Nutritional status of injured pt

d. Social status / education / environment

Ch of H^+ statement is true w respect to metabolic rate ultimate in injured pt.

a. Burn of 40% have a higher

PT

a) Intrinsic pathway

~~Extrinsic pathway~~

34 b) ~~Extrinsic pathway~~ is initiated by ~~act~~ of

act of prothrombin

conc \uparrow by heparin

\times conc \uparrow by warfarin

Regarding acute appendicitis, Ch is true

23 a. Lymphoid hyperplasia is a common cause

b. mortality is greatest in elderly

c. Risk of developing illness is greatest in infant

d. Neoplasm is a cause of obstruction

24 Vermiform appendix is a common cause

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In metabolic response to injury, Ch is true

a. Changes in Ca^{2+} conc. in ELF do not initiate metabolic response.

b. Direction & intensity of response depends on severity of injury

c. In the ELF Ca^{2+} initiates response

d. Responses vary depending on the cause.

Ch of dis does not influence metabolic response to injury

a. Age of pt at presentation.

b. Nature & severity of injury

33 c. Nutritional status of injured pt

d. Social status / education / creedment

Ch of dis statement is true w respect to metabolic rate ultrastructure in injured pt.

a. Burn of 40% have a higher

PT

a) Intrinsic pathway

Extrinsic pathway

34 b. Ca^{2+} is referred to normal by Ca^{2+} of

adm of prothrombin

c. Ca^{2+} \uparrow by heparin

d. Ca^{2+} \uparrow by warfarin

Regarding acute appendicitis, Ch is true

a. Lymphoid hyperplasia is a common cause

b. mortality is greatest in elderly

23 c. Risk of developing illness is greatest in infant

d. Neoplasm of vermiform appendix is a cause of obstructed

vermiform appendix is a common cause

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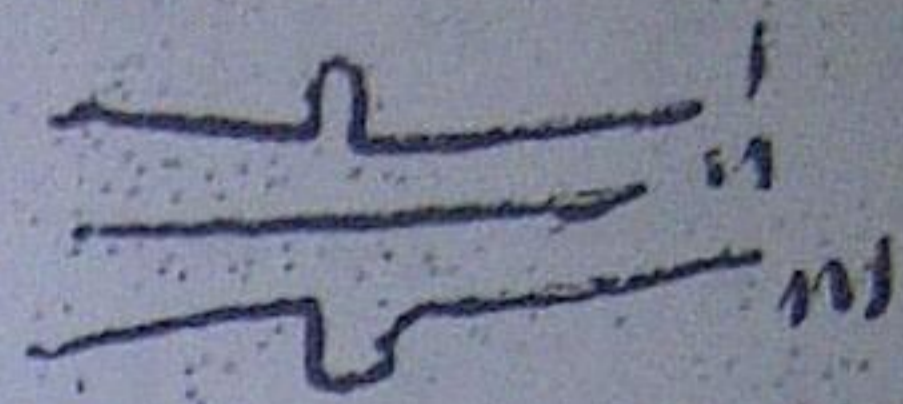
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Endoscopic class of early gastric ca.

- a. Escroated is type II
- b. Escroated is type I
- c. protruded is type I
- Superficial is type I



Early gastric cancer

- a. Ca confined to $\frac{1}{2}$ mucosa of submucosa
 - b. Ca presenting within $\frac{1}{12}$ of oesophagus
- 37) c. Ca = clinical diagnosis
d. Ca defined as Ca confined to $\frac{1}{2}$ wall of $\frac{1}{2}$ stomach.

Gastric tumor

- a) In UTT, $\frac{1}{2}$ involvement is in $\frac{1}{2}$ cardia
 - b. Most cases seen in UTT are benign
- 38) 20% of early gastric ca present as early ca
78% as malignant tumor.

In Pz $\frac{1}{2}$ mechanical intestinal obstruction

- a) A supine plain abd x-ray will show $\frac{1}{2}$ dilated colonocolic while erect film will show haustric markings
- b) If $\frac{1}{2}$ Pz is clinically ill, a lateral decubitus view can replace supine view
- c) $\frac{1}{2}$ water contrast suggest by bowel distention while haustric $\frac{1}{2}$ suggest small bowel
- d) ~~Heat~~ obstruction multiple or the least centrally located or ingestion of proximal jejunal or ileal obstruction

A 25 yr old Pt came to hospital complaining of colicky abd pain w/ freq. feculent vomiting. abd was tense & tender, on exam. Hb = 14.5/dl. There was leukocytosis. Most likely dxs in the Pt are

- a. acute appendicitis
- b. simple upper jejunal obstruction
- c. strangulated upper jejunal obstruction
- d. strangulated duodenal obstruction

Electrolyte & metabolic imbalance commonly seen in acute mech. intestinal obstruction include all except -

- a. hypokalemia
- b. metabolic alkalosis
- c. hypocalcemia
- d. hypernatremia

25 yr old woman was seen in emergency room w/ colicky lower abd. pain & vomiting, her menstrual hx was irregular. on O/E, Pt was pale w/ suprapubic & RIF tenderness. Gh of dx is easily available in dx of dx in U.I.H

- 1. Abd MRI
- 2. Abd-pelvic CAT
- 3. Abd-pelvic US
- 4. Colonoscopy

A 20 yr old student reported in emergency room w/ colicky abd pain, nausea & vomiting. tenderness in RIF, temp = 37.5°C, leucocyte count = 15×10^9 w/ shift to left.

Congrats my option includes

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a) Abd CT for confirm dx
 b) Appendectomy
 c) Ex-lap
 d) Observe Pt in ER

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A 24-yr old pt complain of abd pain
 of Lt side initial on Lt RIF but
 later generalized. WBC pt was febrile
 = generalized of abdominal tenderness.
 Bowel sound is hyperactive.

Best Rx option in this pt is

- a) Appendectomy true grid iron iron
- b) immediate ex-lap
- c) Use of broad spectrum antibiotic only
- d) Hospital admission CT rep. to take a decision

A 45yr old pt presented w/ clinical sx
 of acute pancreatitis. Δ It will be useful
 in determine severity of progression except

- a) Serum lipase $< 3x$ normal
- b. Age > 55 yo
- c. WBC count $< 15,000/\text{mm}^3$
- d. BUN $< 200\text{mg/dl}$ (11.1mmol/L)

20yr presented in hosp w/ abd discomfort
 wt loss + easy fatigability. WBC , found to be
 pale + temp of 37.8°C . Likely dx:

- a) Appendicular mass
- b) Cecal mass
- c) Cecum abscess

A 6yr old boy brought to clinic by his
 mother w/ complain of Rt testis absent since
 SCROFUM. WBC testis was found on
 superficial inguinal ring (brought to the surface
 by some diff.

- a) hormonal therapy
- b) orchidectomy
- c) unilateral orchidopexy
- d) watch till puberty

Most common site of Elbow Injuries

1) Deep injury rim

2) Injured cap

48 c. superficial injury

3) ~~distal humerus~~

A 3yr old boy brought to hospital with

Lt injured swelling. Swelling was prex. reducible

but @ pressure, it was not reducible & no

response to cough impulse. Assessed

at distance - Best Mx

4) ~~Urgent Ex-tp~~

49 h Emergency injured hand repair surgery

5) cover orthopedic & analgesic only

6) Urgent injured hand surgery

Sh of 2nd & 3rd complicated by result of an

injury to 2nd & 3rd ulnar nerve during

removal of parotid tumor

7) Gustatory sweating (Frey's Synd.)

8) orolingual parotidoma

50 c. Anorexia

9) Vex:

Maxillary sinus 1) usually medially in Sh #

51) 2) Le-fort I

3) Zygomatic arch

4) Le-fort II

5) Nasoethmoidal #

Sh of 3rd mtd, if sterilized is ineffective

6) auto claving

Congrats

Ethylene oxide gas

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In incidence of Sialoliths is high.

③ Parotid gland

- a. Submandibular
- b. Sublingual gland
- c. Sublingual gland
- d. Minor salivary glands

If a pt is on heparin / need urgent laparotomy, Effort can be

- a) Vit K.
- b) Protamine sulphate.
- c.
- d.

Most commonly used needle for FNAC is

- a. 27 gauge
- b. 30 gauge
- c. 18 gauge
- d. 16 gauge

Ductal papilloma

- a) only palpable below $\frac{1}{2}$ areolar ^{= multiple ducts}
- b) Present w nipple discharge
- c) may ulcerate & mimic carcinoma of bc
- d) micro ductectomy (can be Rx)

Tamoxifen

- a) Anti progestone use in breast cancer
- b) Adm IV
- c) Contraindicated in $\frac{1}{2}$ elderly
- d) still be used at least 5 yrs in early bc
- e) best mt'd of confirming site of bleed in upper GI bleeding
- f) Gastrointestinal endoscopy

Cilastaz Co.

- a) Lt sided tumor present w febrility & ...
- b) Rt " " " "

The Δ # 1 of middle 3rd of 2 feet
run for $\frac{1}{2}$ max. sinus, orbit, exit on
frontal septum,

1 the 1st 2 Left 3 none -

9) CSF hemorrhage is characterized by all except
of ~~bleeding of soft~~ ~~of~~ ~~one~~ ~~of~~
does not stain handkerchief @ Bilateral.
All is useful in BPH.

develops in loop diameter of meninges
@ 8th level

~~Meningeal space 4cm~~

a) Arachnoid cap Arachnoid bridge.

6) CSF occurs most commonly

in ~~the~~ ~~of~~ ~~childhood~~

b) Crown H 2 largest Intracranial

~~of~~ ~~absorbed~~

Intramedullary spinal tumor (not)

~~of~~ ~~the~~ ~~ependyma~~ ~~metastases~~

1) Medical Rx in ~~protection~~ ~~protection~~

2) Drug not needed for head injury

3) Dexamethasone

Best predictor of outcome in head injury

GCS ppt for CT scan by ~~Reynolds~~

My response in GCS.

~~the~~ ~~flex.~~ ~~response~~ ~~in~~ ~~the~~ ~~patient~~

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65 A 45 yr old male with a history of raised ICP.
5 - 6p

- * Cerebral perfusion pressure is MAP - ICP
- * Commonest site of intracranial metastases
67 Lung.

All are false of extradural haematomas except middle meningeal artery
course of unmyelinated fibres - normally takes fibres of 12th nerve.

70 Radiotherapy in ortho except US

71 Radiotherapy using Te^{99m} use in diagnosis stress fracture, bone tumor, later deformity metatars

72 1st test in accessory motion in a joint is passive motion

73 1st fx of chronic osteomyelitis except abscess

74 1st loss of ^{temporal} proprioception is neuroprexia

In nerve injury Wallerian degeneration distal neuroprexia

75 wrist drop \Rightarrow Radial N

77 Fromet sign \Rightarrow Ulnar N.

78 Brachial plexus injury at shoulder distal

79 Klumpke shoulder distal Erb's wrist drop ulnar syndrome 80

* A 45 yr old is seen for a H ↑ ICP.
C5 - Lp

* Cerebral perfusion p^o is

MAP + ICP MAP - ICP

* Common site of intracranial metastases
67 ~~68~~ Lung, -

All are false of extradural hematoma ^{except}
Middle meningeal artery

Arise from unmyelinated fibres - usually
below fibres 69 ✓ 12 wk.

70 Radionuclide imaging very Te⁹⁹ use in dys

71 Radionuclide imaging very Te⁹⁹ use in dys
Stress #, bone tumor, bone deformity, metastases

72 ↓ lit test in accessory motion in a joint
pressure motion

73 ↓ fx of chronic osteomyelitis, except

abscess,
74 ↓ ^{temporary physiologic} loss of

neuropraxia

In nerve injury Wallerian degeneration distal
75 ↓ neuropraxia

76 wrist drop ⇒ Radial N

77 Fromet sign ⇒ Ulnar N.

78 Brachial plexus injury ⇒ shoulder distal

79 Klumpke Shoulder distal Erb's wrist drop
Ulnar syndrome 80

Massive hemoptysis (not true)

- 81) Trachea bronchus injury < 600ml over 24 hrs period
 - 82) Pulm TB is a major cause
 - c) 90-95% originate from pulm artery
 - d) Chest x ray can identify it with 1 mm
- 82) Max of massive hemoptysis
- CTD bronchial artery embol. th
lobectomy

Foreign body aspirate

- 83) children 1-3 yrs are most at risk
- Sx of foreign body including cough, wheezing, stridor
- CX ray of CT can be used
- most deaths occur in ppl < 65 yrs.

Concerning PDA (except)

- 84) persistent lumen in fetal ducts - shunt
- R-L shunt - sh dependent on side of PDA.

ASD (not true)

- 85) ASD common primary is in cranium
- Lt → Rt shunt
- ECG of Echo may aid in dx
- common in supine

VSD (except)

- 86) Commonest congenital defect (at 4^{15-20%})
- pericardial type is common
- Pulm HTN may complicate
- ✓ VSD never close

90%

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Best shaped heart & echo
is commonest congenital
OT/engelsky → S. ans.
in SED

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A stiff universe → all of it done

Down side complicated
 • hyper & hypoplasia is rare.
 82. Laryngeal flap - myo-epithelium flaps
 - C-flap

↓ lengthen tubes
 89. change tone, retract, retracts
 in ortho, etc & gives mechanism -
 all of it down

Acute otitis media in children
 epiphysis metaphysis

90. Larynx related down
 91 non-conjugated space
 Constricted to within cartilage

92. Unilateral discharge
 Ix of disease in nose vs diff in ear

93. MUCG
 using stapes
 94. > 80% in adenoidectomy
 adenoidectomy

95. Teratomas present
 Recurrence rate & bronchiectasis

96. Tumor in children / young adult
 Chondrosarcoma - Giant cell tumor (20-40%)
 neurofibroma - Fibrosarcoma

97. Bone tumors from cartilage
 osteosarcoma, chondrosarcoma, chondromyxoid fibroma

Indication for

- 1) Multiple #
- 2) Pathological
- 3) Unstable reduction
- 4) Inarticular site
- 5) Short segment dr
- 6) Soft tissue inter
- 7) Elderly patient

POP

1) less expensive

Heavy

Hemiplegic Gait

Back stop for

any to prevent

- pain
- paralysis
- paralysis
- falling

poikilothermic

Complications of POP

- Too tight → Comp

- P° sore (ie bed all)

- Joint stiffness

Disuse atrophy

Disuse osteoporosis

Too loose → Delay w

- 114 Concerning ASD all of the ffg are true except
- 115 All of ffg true about VSD except
- 116 Concerning TDF, all the ffg true except
- 117 ffg true about bronchiectasis except
- 118 About lung abscess, which of the statements is not true.
- 119 Concerning bronchogenic Ca, all are true except
- 120 Concerning dysplasia, one of the ffg is not true
- 121 About achalasia, one of the following is not true
- 122 The process of healing by scar tissue involving opposed surfaces close to each other & producing flexion deformity - Contracture
- 123 Extension deformity or a lateral procedure is called
- 124 A clean cut in the skin produced during a surgical procedure is called
- 125 A fracture of ulna An ulcer is defined as breach in the continuity of a surface tissue or organ and is caused by
- 126 A skin graft normally has epidermal and dermal elements. It is transfer from the donor to recipient area, which of the following is not true regarding skin grafting
- 127 Which of the ffg appearance suggest for a graft
- 128 A skin graft will not survive in which of the ffg situation.
- 129 The donor site of a graft can develop which of the ffg complications
- 130 The latissimus donor flap is a useful flap for head and neck reconstruction, it can be used as which of the ffg
- 131 True flap of the bone
- 132 The target lines represent which of the following
- 133 In orthopedics, establishing a diagnosis involves the ffg. All of the ffg
- 134 The commonest cause of chronic osteomyelitis is sickle cell disease patient is
- 135 Acute osteomyelitis is originated in
- 136 The pathognomonic feature of chronic osteomyelitis is (presence of sequestrum)
- 137 A temporary physiologic loss of conductivity along a neuron is called (Neuropraxia)
- 138 In nerve injury, Wallerian degeneration does not occur in which of the following
- 139 Horner's drop is a consequence of injury to the following except
- 140 Fromet sign is used to clinically identify injury to which of the following

- 40) Brachial plexus injury following shoulder dislocation is spontaneous vertex delivery usually present with
- 41) Which of the following tumor typically seen in adolescent and young adult
 (a) Chondrosarcoma (b) Fibrosarcoma (c) Osteosarcoma (d) Neurofibroma (e) Giant cell tumor
- 42) The following tumor is a benign tumor originating from cartilage
- 43) Definitive management for a displaced femoral neck fracture in a 70yr old man is
- 44) Management of type 3 open tibial fracture include all the following except.
- 45) The commonest congenital musculoskeletal deformity in U11H is
- 46) A fracture of the radial shaft with dislocation of the distal radio-ulnar joint is
- 47) A closed femoral shaft fracture in a 24yr old is
- 48) The first step in assessing motion in a joint is to check for
 (a) passive motion (b) Active motion (c) provocative motion (d) Unstable motion (e) none of the above.
- 49) Radioisotope imaging using technetium 99 labelled HDP is useful in diagnosing the ffg - Acute osteomyelitis
- 50) The ffg are radiological investigation use in orthopedics
 (a) plain x-ray (b) ultrasound (c) CT scan (d) Arthroscopy (e) Bone mineral densitometry
- 51) Union of a simple uncomplicated tibial fracture in a adult normally takes
 (a) 3 weeks (b) 6 weeks (c) 12 weeks (d) 16 weeks (e) 6 months

MU

QR

(9)

Secundum

- Que 114 - Osteum ~~fibrosum~~ is of Commonest (50-70%)
- 115 VSD Normally close (a small VSD may close by 1 year)
- 116 Is of Commonest acyanotic but $\delta \neq \delta$
- 142 - Enchondroma or osteochondroma
- 136 - Neuropraxia.
- 137 - Neurotmesis.
- 138 - Humeral # # ^{above} @ elbow (Radial Nerve)
- 139 - Ulnar Nerve
- 140 Erb's palsy (Waster's sign) - proximal to the elbow
Klumpke affects intrinsic m. of ^{distal to elbow} hand
- 146 Galeazzi #
- 143 ORIF
- 149 Acute Osteomyelitis
- 145 Talipes equinovarus
- 134 Metaphysis in children & adult but ^{metaphyses & epiphyses in infants.}
- 131 Cleavage line
- 133 Staph aureus.
- 129 Hyper & hypopigmented scars
- 128 All of d above
- 135 - Involucrum and sequestrum.
- 141 - Fibrosarcoma commonly occur in adolescent and young adult

- ① Babinski test
- ② Straight leg raising test
- ③ Long term indwelling (intermittent) bladder catheter in spinal cord injured pt is associated with squamous cell carcinoma
- ④ Prostatic 13 bladder carcinoma
- ⑤ Acquired hypospadias
- ⑥ Calcareous urethral structure
- ⑦ Concerning post traumatic urethral stricture
- ⑧ The following modalities or form of Rx for BPH
- ⑨ The following are well established fact about prostate carcinoma
- ⑩ High incidence of squamous cell Ca of bladder has been found in - Bladder schistosomiasis
- ⑪ A 65yr old man who had 18 month hx of LUT symptoms was presented at the ASE ward in acute retention had his urinary retention relieved with urethral catheter. The attending physician should watch out for
 - ① post obstructive diuresis
 - ② post obstructive azotemia
 - ③ post obstructive hypocalcaemia
 - ④ post obstructive paralysis
- ⑫ Micturition center is in PONS
- ⑬ Cocaine belongs to which group of drug
- ⑭ Insulin belongs to which group of drug
- ⑮ The following are not complications of prostate carcinoma
- ⑯ Transversal prostatic ectopy - osteitis pubis
- ⑰ Radical prostatectomy - intestinal obstruction
- ⑱ Radical prostatectomy - impotence
- ⑲ Suprapubic cystostomy - impotence
- ⑳ Prostate biopsy not indicated in
 - ① detrusor dysynergia occur
 - ② orthotopic transplantation means
 - ③ mechanism of allograft rejection
- ㉑ The following are living related donor
- ㉒ is contraindicated to urethral catheterisation
- ㉓ Investigation of choice is neonate in micturition difficulty in passing urine
- ㉔ MCUG
- ㉕ Concerning urinary stones 75% are radiolucent
- ㉖ The following can cause tension pneumothorax except
- ㉗ The following are true of tension pneumothorax
- ㉘ Clinical sign include tracheal deviation to contralateral side
- ㉙ Concerning massive haemoptysis one of the following is true
- ㉚ All the following are modalities in the management of massive haemoptysis except (CTTO)
- ㉛ All these statements are true about Fx of aortic aneurysm
- ㉜ Concerning PDA, all is true except (R-L shunt)

6

64 Elderly, Alcoholics & px on anticoagulants.

* Epilepsy occur in px w/ astrocytoma

67 Dopamine analogs.

63 - Arachnoid cells in Meninges (Cap).

66 Schwannomas, meningiomas
ependymomas & Astrocytoma or Intramedullary.

poor prognosis.

69 - GCS (Level of Consciousness)

65 - ~~CN VII (facial nerve)~~ Abducent ne

96 - Pons

94 - Schistosomiasis.

97 - ~~CN VIII~~ ~~vestibular~~ CN VIII

98 α_1 receptor blocker.

107 >80% are radiolucent

105 U-shaped structure

106 MCUG

109 ↑ se percussion note & breath sound

108 Aneurysm

104 Non Consanguinous spouse

74 Middle Meningeal artery

70 Response a pain (withdrawal)

11

- 60 objective method for diagnosing sensorineural hearing loss is - Brain stem audiometry
- 61 CSF rhinorrhoea is Xsed by all the ffy except ^{salivary gland} epistaxis ^{nasal} meningitis
- 62 All the ffy is useful in EDH xpt @ analgesic @ low diameters
- 63 meningitis @ steroids
- 64 Meningeal arachnoid granulation
- 65 Extrinsic subdural hematoma occur most commonly in
- 66 Extrinsic nerve with longest intracranial course
- 67 Which of the ffy is not an intracranial spinal tumor - schwannoma
- 68 Medical TX in prolactin secreting tumor is dopamine agonist
- 69 Drug which is not needed in primary management of head injury @ Dexamethasone @ mannitol @ Hyperventilation @ Ranitidine
- 70 Best predictor of outcome in head injury px is MM4 response in GCS indicates (withstand to power)
- 71 A 45 yr old px presented with signs and symptoms of RLEP, which investigation should not be done -> lumbar puncture
- 72 Cerebral perfusion pressure @ MAP + ICP
- 73 MAP - ICP @ MAP + ICP @ MAP x ICP
- 74 The most common primary site for intracranial metastasis is Lungs
- 75 All are source of extracranial hematoma except - middle meningeal artery
- 76 FXS of Brown Sequard Syndrome, except
- 77 Cushing triad is Tachycardia, hypertension, bradycardia
- 78 CSF findings in Acute bacterial meningitis
- 79 Worse prognosis despite best Rx seen in @ Epidermal hemorrhage @ Chronic acute Epidermal hemorrhage
- 80 Xtrinsic subdural he. @ Acute subdural hee.
- 81 For nothman's notch is (free edge of tentorium)
- 82 A 60 yr old male sustains mild trauma while opening the door of bathroom, after 4 weeks he presented with waxing & waning consciousness and right hemiparesis, most likely diagnosis is
- 83 Which of the ffy is not included in spinal fluid culture
- 84 Bitemporal herniation is xtic of
- 85 Severe traumatic brain injury is defined as
- 86 RLEP in px with brain tumor may be caused by the following caused by tumor mass cerebral edema hydrocephalus
- 87 Cushing response Tachycardia, bradycardia, hypertension
- 88 All ffy are caused of Communicating hydrocephalus
- 89 Causes Meningitis, stroke, metastasis, multiple sclerosis
- 90 A 50 yr old man with low back pain and progressive numbness of the lumbar region, examination that must be performed is @ Tapping for deep tendon reflex @ DRE @ West point

- 7) Concerning Intensive Care unit ⁽²⁾
- a) It is a place where px with potentially vulnerable combat wounds are managed
 - b) Should have ample space around each bed
 - c) High nurse to px ratio
 - d) Ideally should have less than 4 beds

- 8) In the severely injured px best managed in the ICU, all but one
- a) RAS is overactive
 - b) they can't maintain their airway
 - c) Cough & swallow defective
 - d) withdrawal from noxious stimuli defective

- 9) LASP ^{definition} definition of pain, which is not true
- a) An unpleasant sensory

- 10) Examples of neuropathic pain except ^{urethritis}
- a) A 50yr old man with cardiac failure using digoxin scheduled for exploratory laparotomy under GA, which of these management should be used ^{with caution - succinylcholine & halothane}

- 11) In the ASA physical status classification, a px with severe systemic dx that is a constant threat to life is
- a) ASA 4
 - b) ASA 5
 - c) ASA 3
 - d) ASA 6

- 12) Antacid of choice to prevent Mendelson syndrome is
- a) 0.3 Na citrate

- 13) The freq. of IM morphine administered for control of pain in a young fit adult is
- a) 2 hrs
 - b) 4 hr
 - c) 6 hr
 - d) 8 hr

- 14) Contraindication to use of NSAIDs in control of pain include all but
- a) RF
 - b) Asthma
 - c) SCD
 - d) PUD

- 15) Opioid receptor include the following except ^{mu kappa lambda}

- 16) Halothane contains
- a) 0.1 thymol
 - b) 0.001 thymol
 - c) 0.01 thymol
 - d) 0.02 thymol

18) which is best use as inhalational agent for induction of anaesthesia in children
a) Halothane b) Isoflurane c) Enflurane
d) Sevoflurane

19) which is least metabolised in the liver
a) Sevoflurane b) Halothane c) Isoflurane
d) Desflurane

20) Pain on injection when administering propofol can be reduced by --- (slow administration)

21) which is not true concerning nutrition in the critically ill

22) In monitoring oxygenation, the following are true except

23) Blood pressure measured with except
a) palpation b) manometer c) auscultation
d) oscillometry

24) All are examples of amide local anaesthetics except

25) which is not true about local anaesthetics
a) They are weak acids/bases b) Unionized form cross the cell membrane c) Ionized form block Na⁺ ion pumps with the cytoplasm of the nerve
d) they are weak acids

26) Unilateral hypertranslucency on chest radiograph (pneumothorax)

27) But wing shadow on CXR is a recognised feature of

28) The following are causes of unilateral elevation of left hemidiaphragm except
(pulmonary edema, sarcoidosis, pneumonia, emphysema)

29) Air fluid level in a pulmonary cavity on CXR is usually seen in → lung abscess (half moon sign)

30) which is the most likely finding in the skull radiograph of an adult
CPICP craniovertebral Bicuspid

31) Shape of epidural haemorrhage on CT scan

32) Corn horn calcification seen in → alzheimer's

33) Optimal contrast study to diagnose post-wetral valve is → MCUG

34) The ffg are true of post-wetral valve
a) usually associated with dilated ventricles
b) often present after 21 yrs
c) may present with difficulty in breathing
d) Commonly found in males

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30) Which is the most likely finding in the skull radiograph of an adult
a) RLP b) craniosynostosis c) Biconcave

31) The shape of epidural haemorrhage on CT scan

32) Corn horns calcification seen in → biliary

33) Optimal contrast study to diagnose portocaval shunt is → MCUG

34) The flg are true of post urethral valve
a) usually associated with dilated ureters
b) often present after 2 yrs
c) may present with difficulty in breathing
d) commonly found in males

- 35) Dysphagia may occur in association with ⁽⁴⁾ except (a) Gross oesophageal varices (b) Achalasia (c) Oesophageal cancer (d) Scleroderma
- 36) Hb genotype ^{frequently} found with retinopathy \rightarrow SC
- 37) Sea fan is a feature of \rightarrow SC retinopathy
- 38) Cause of very painful red eye with marked decrease in vision is most likely \rightarrow Acute decompensated glaucoma
- 39) A safe ophthalmic medication to be prescribed in patient with Epidermolysis bullosa is (a) Artificial tear (eye drop) (b) Squamous cell carcinoma (c) (d)
- 40) An ocular tumour commonly associated with AIDS is (a) CMV retinitis (b) Herpes zoster ophthalmicus (c) (d)
- 41) One of these ophthalmic infections is a marker for AIDS \rightarrow CMV retinitis
- 42) One is not a risk factor for developing Diabetic retinopathy (a) Renal disease (b) Pregnancy (c) Anemia (d) Hypertension
- 43) One is not a feature of non-proliferative Diabetic retinopathy (a) SAFF (b) (c) (d)
- 44) Papilloedema is a characteristic of which grade of hypertensive retinopathy \rightarrow Grade IV
- 45) Tapering of vision on either side of the retina is (a) (b) (c) (d)
- 46) AV crossing is a feature of which grade (a) (b) (c) (d)
- 47) First visceral cleft gives all the following except (a) (b) (c) (d)
- 48) A poorly developed antihelix and overdeveloped concha cartilage are (a) (b) (c) (d)
- 49) Length of bony external canal of adult is approximately \rightarrow 3.5mm
- 50) The tympanic membrane takes its innervation from (a) (b) (c) (d)
- 51) A 40 year old male present with left nasal obstruction and fleshy reddish nasal polyp??
- 52) There is hx of recurrence after previous surgery after 2 yrs w/ ass. e Foreign body (a) (b) (c) (d)
- 53) One of the fflg may cause nasal septal perforation (a) (b) (c) (d)
- 54) In the adult, Eustachian tube is approximately the following length \rightarrow 4cm
- 55) Eustachian tube is opened by \rightarrow valve mechanism
- 56) During ear examination, the reservoir sign is (a) (b) (c) (d)
- 57) Rinne's test negative in all except (a) (b) (c) (d)
- 58) Objective method for diagnosing sensory neural hearing loss is (a) (b) (c) (d)
- 59) Before any odour can be perceived, it must first pass through (a) (b) (c) (d)

- 1) Indiv between
- 2) What
- 3) Croc
- 4) Cond
- 5) ul
- 6) Tw

1 In dissociative anaesthesia, there is inhibition of transmission between
a hypothalamic & pontine nuclei
b cerebral cortex & brain stem
c cerebral cortex & thalamic system
d spinal cord & peripheral nerves

2 Which of the following is seen in a 35 yr old chronic cigg. smoker, scheduled for surgery under GA
a tendency to frequent bradycardia → tachycardia, HTN
b increase Hb → use Hb (high carboxyhb)
c decrease available Hb for O₂
d increase liver enzymes - chronic alcoholics

3 Goals of labour analgesia include all but
a dramatically decrease labour pain
b prevent parturient from participating in birthing experience - minimal motor function
c minimal motor block to allow ambulation
d minimal effect on fetus

4 Conc. pain relief in adult xpt
a multi-modal technique recommended
b morphine is the mainstay
c PCA is useful in all steps of utero analgesia
d local anaesthetics are too weak to be useful

5 Which is untrue concerning intraop. fluid therapy
a Urine output > 0.5 ml/kg/hr is a good sign for adequate fluid replacement
b Colloid osmotic pressure increases with the use of crystalloids - cause causes pulmonary oedema
c 60% of the testach is more effective than 10% pentan in plasma volume expansion
d Side effect of crystalloids are less compared to colloid

6 Transfusion of stored blood intraop. can result in any of the following except
a dilutional thrombocytopenia
b hypokalemia (hyperkalemia)
c Citrate toxicity
d decrease in level of 2,3-DPG - impaired O₂ carrying capacity

ANSWER TRUE OR FALSE (FOR EACH STATEMENT)

- 1. Epigastric pain/dyspepsia are pointers to lesions affecting the descending colon. **F**
- 2. Haematochezia never occurs in patients with oesophageal varices. **F**
- 3. Troisier's sign is usually positive in viscera malignancies. **T**

CHOOSE THE BEST ANSWER

- 4. Groin and thigh pain radiating from medial aspect of the thigh is seen in:
 - A. Coccyx - ischial bursitis
 - B. Distorted femoral canal
 - C. Testicular torsion
 - D. Cholecystitis
 - E. Bladder infection
- 5. Duchenne paralysis is the waiter's tip attitude, suggestive of:
 - A. Radial nerve
 - B. C7, T1 nerve roots
 - C. C5, C6 Nerve roots
 - D. Median nerve
 - E. Axillary nerve

14
20
14

CHOOSE THE BEST ANSWER IN QUESTIONS 6 TO 10

- 6. Commonest postoperative complication for perforated typhoid fever:
 - A. Intestinal obstruction
 - B. Urinary tract infection
 - C. Wound infection
 - D. Gut prolapse
 - E. Re-perforation
- 7. The tonsils may be removed in the following way EXCEPT:
 - A. Milligan-Morgan method
 - B. Parks method
 - C. Rubber-band ligation
 - D. Abdomino-perineal excision
 - E. Injection sclerotherapy

8. A 4 years old patient develops pyrexia and rigors after operation. Which of the following include the following EXCEPT

- A. Wound infection
- B. Urinary Tract Infection
- C. Deep vein Thrombosis
- D. Chest Infection
- E. Pelvic abscess

9. Secondary haemorrhage occurs

- A. Immediately after operation
- B. Within six hours of operation
- C. One day of operation
- D. Within 14 to 21 days of operation

which of the following provide correct information regarding amount of blood loss during surgery?

- A. Just by guericine
- B. Monitoring of pulse pressure
- C. Weighing of surgical sponge used during surgery
- D. Measuring the contents of suction bottle is not helpful
- E. None of the above

Questions 11 - 17

Each of the following questions consists of a statement and a reason. Answer by using the following Keys:

- A. If both statement and reason are correct and related cause and effect
- B. If both statement and reason are correct but not related cause and effect
- C. If statement is true but the reason is false
- D. If statement is false but the reason is true
- E. If both the statement and reason are false

11. "Eczema" of the breast nipple requires evaluation, even in the male, for the possibility of Paget's disease BECAUSE Paget's changes may appear before the underlying breast carcinoma is overt.

12. Prolonged continued follow up for patients with breast fibroadenoma is necessary BECAUSE this lesion is a pre-malignant one.

13. Inverted papillomatosis of the nipple is a rare lesion with clinical significance BECAUSE it stimulates Paget's disease of the nipple.

14. Prophylactic postoperative radiotherapy for patients who had a radical mastectomy for Breast carcinoma may be contraindicated BECAUSE the incidence of second primary cancers, especially of the breast, is higher in these patients.

15. Males with breast carcinoma have a poorer prognosis than females BECAUSE they are usually treated at a later stage but also because there is a very low salvage rate if axillary nodes are positive.

16. Diagnostic peritoneal lavage (DPL) lack specificity BECAUSE it fails to investigate the retroperitoneum.

17. Computerized Tomograph (CT) scan of the abdomen in blunt abdominal trauma is 100% specific BECAUSE it can assess the retroperitoneum.

CHOOSE THE BEST ANSWER

18. The commonest cause of mortality in burn patient is

- A. Fluid imbalance
- B. Electrolyte derrangement
- C. Sepsis
- D. Inhalation injury
- E. Renal complications

In Burn patient, there is an alteration in the host defense as a result of the following

- A) Decrease neutrophil chemotaxis and phagocytosis
- B) Increase in the circulating lympho-suppressors
- C) Decrease in humoral response to antigen stimulation

Which of the following provide correct information regarding amount of blood loss during Surgery?

- A. Just by pulsation
- B. Monitoring of pulse pressure
- C. Weighing of surgical sponge used during surgery
- D. Measuring the contents of suction bottle is not helpful
- E. None of the above

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- B) Increase in the circulating immuno-suppressors
- C) Decrease in lymphocyte response to mitogen stimulus

No ans

20. In Burn wound, the following are correct except
- A. Burn wound organisms with a bacterial count of 10^8 gm of tissue
 - B. More common sites of infection are the lungs, urinary tract and suppurative Thrombophlebitis
 - C. *Candida albicans* causes a superficial invasion
 - D. Fungi and viruses can colonize and infect the burn wound
 - E. Commonest viral infections of burn wound are herpes Type 1 and Cytomegalovirus

21. Circulatory disturbance may occur in Burn patient as a result of the following except.
- A. Systemic decrease in cell transmembrane potential secondary to decrease Na ATPase activity
 - B. Effects of local mediators oxidants and arachidonic acid metabolites.
 - C. Burns greater than 20% total body surface area
 - D. Loss of capillary integrity
 - E. Rapid oedema secondary to inflicting agent

22. In Burn patient, the following statements are correct except:
- A. Fluid replacement is given to support the patient throughout the initial 24-48 hrs period of hypovolaemia
 - B. The composition of the resuscitating fluid should be individualized to the patient.
 - C. IV fluid should be given for smaller burn as little as 10% surface area burnt.
 - D. Potassium level tends to drop at 4th day and calcium after the 6th day especially if the patient has not resumed normal feeding
 - E. One litre of fluid per day is added for 1°C rise in body temperature

CHOOSE THE BEST ANSWER

23. The following are true of villous adenoma of the rectum except
- A. Hypokalaemia is a feature
 - B. Characterized by profuse mucous secretion
 - C. Tendency to malignancy
 - D. Frond like appearance
 - E. Must be treated by anterior resection

24. The following are the treatment options for rectal prolapse, except.
- A. Thiersch circlage
 - B. Delorme's procedure
 - C. Ripstein procedure
 - D. Lohant procedure
 - E. Thiersch graft

Lohant procedure

25. Most patients with fissure-in-ano respond to
- A. Lord's anal stretch
 - B. Fistulotomy
 - C. Fistullectomy
 - D. Proctoscopy
 - E. Anal packing

Lord

QUESTIONS 26 TO 28, CHOOSE THE BEST ANSWER:

26. The following are true of Hypovolaemic shock except.

In the management of Hypovolaemic shock, the following procedures are usually done in I.M.M except.

- A. Rapid infusion of normal saline
- B. Urgent transfusion of crossmatched blood
- C. Elevation of the foot of the bed
- D. Insertion of Swan-ganz catheter
- E. An indwelling urethral catheter

28. Only one of the following is correct as a regular cause of shock

- A. Open Tibial fracture
- B. Ureteric Colic
- C. Severe fulminating acute pancreatitis
- D. Strangulated hernia within six hours of onset.
- E. Acute Cholecystitis.

pancreatitis

FOR QUESTIONS 29 TO 30, ANSWER TRUE (T) OR FALSE (F)

- 29. In acute liver mortality may be reduced with appropriate surgical intervention **T**
- 30. In a patient with Haemorrhagic shock, the first correct action is to give Hydrocortisone intravenously **F**

QUESTIONS 31 - 35

Each of the following questions consists of a statement and a reason. Answer by using the following Key:

- A. If both statement and reason are correct and related cause and effect.
- B. If both statement and reason are correct but not related cause and effect.
- C. If the statement is true but the reason is false.
- D. If the statement is false but the reason is true ✓
- E. If both the statement and reason are false.

AB

E

31. Colonic polyps of less than 0.5cm in size should be fulgurated when discovered BECAUSE carcinoma in such small polyps is almost never found.

32. Pancolectomy (Total colectomy) with ileorectal Anastomosis is a reasonable operation for patients with diffuse polyps who do not have rectal polyps BECAUSE such patients never develop polyps in the rectal segments during the post-operative period.

33. In patients with adenocarcinoma of the large bowel which has spread to adjacent structures but has not spread widely through nodes, extended resections are appropriate BECAUSE such findings suggest a biologically favourable circumstance and thus reasonable cure rate.

34. Lymphosarcoma of the stomach should be resected even when it is not feasible to remove the entire tumour BECAUSE the response of the residual tumour to irradiation is so good that 5 year survival of 50% can be obtained.

A

C

Vagotomy and pyloroplasty is a reasonable treatment for benign gastric ulcers that are acutely bleeding BECAUSE this procedure provides a large incidence of recurrent gastric ulcer.

and alert, tongue is moist. Pulse 100/min BP = 120/80 mm Hg. Temperature 37.8°C
Abdominal examination revealed tenderness and rebound tenderness in the R.L.F

CHOOSE THE BEST ANSWER

36. The most likely diagnosis in this case

- A. Mesenteric adenitis
- B. Acute appendicitis
- C. Typhoid ileitis
- D. Yersinia Terminal ileitis
- E. Carcinoma of the caecum

37. The full blood count in this patient will usually reveal WBC count of

- A. 3000 - 5000/ml
- B. 10,000 - 14,000/ml
- C. 10,000 - 15,000/ml ✓
- D. 1500 - 200/ml
- E. None of the above

10,000 - 15,000

10,000

38. If this case is diagnosed as Acute appendicitis, any of the following incisions may be used for surgery except

- A. Lanz incision ✓
- B. Grid-Iron incision ✓
- C. Right paramedian incision ✓
- D. Kocher's incision
- E. None of the above

Kocher's incision for distal cystectomy

39. The postoperative Hospital stay following straight forward appendicectomy should usually be around

- A. 4 - 10 days ✓
- B. Two days
- C. Twenty one days
- D. Four weeks
- E. None of the above

40. The following should be routinely monitored after an uncomplicated appendicectomy except

- A. Pulse rate ✓
- B. Blood pressure ✓
- C. Intake/output ✓
- D. Discharge from the drain site
- E. Temperature ✓

QUESTION 41 - 45

ANSWER THE FOLLOWING QUESTIONS BY USING THE KEY OUTLINE BELOW

- A. If Numbers 1, 2 and 3 are correct.
- B. If Numbers 1 and 3 are correct.
- C. If Numbers 2 and 4 are correct.
- D. If Number 4 is correct.
- E. If all the Numbers are correct.

41. A Multinodular goiter:

is usually preceded by a diffuse goitre in early adult life.

12. With respect to thyroid cancer:

1. All types can be diagnosed by preoperative fine needle aspiration cytology of the gland.
2. Frequently produces multinodular enlargement of the gland
3. Can be excluded if there is a localized but soft enlargement of the gland.
4. The female to male ratio of occurrence is 3:1.

13. Papillary carcinoma of the thyroid:

1. May follow radiation exposure in childhood ✓
2. Is a slow growing tumour ✓
3. Usually metastasizes to lymph nodes ✓
4. Is usually a multifocal tumour ✓

14. In thyroid carcinoma:

1. Undifferentiated carcinoma occurs with equal incidence in both sexes.
2. Undifferentiated carcinoma is most common above the age of 60 years.
3. Follicular carcinoma of the thyroid is associated with a relatively good prognosis in childhood.
4. Follicular carcinoma is more common in females than males.

15. Primary hyperthyroidism

1. Often manifest by a lump in the neck.
2. Associated with a high incidence of thyroid cancer
3. Rarely recurrent after parathyroid surgery.
4. Best diagnosed by the findings of elevated serum calcium.

CHOOSE THE BEST ANSWER IN Q 46- 51.

46. The artery of haemorrhage in peptic ulcers is the

- A. Left gastric artery
- B. Left gastro-epiploic artery
- C. ~~Gastro-duodenal artery~~
- D. Superior pancreaticoduodenal artery
- E. Short gastric artery

47. A 65yrs present with massive upper GI haemorrhage. The following are appropriate to management except:

- A. Insert 2 canulae for resuscitation ✓
- B. Insert 2 canular for resuscitation ✓
- C. Immediately rush 3 litre of 5% Dextrose
- D. Insert catheter to monitor urine output ✓
- E. Take quick history and quick general examination. ✓

48. The following are the indications for operative treatment of peptic ulcer.

- A. Perforation ✓
- B. Haemorrhage ✓
- C. Failure of medical treatment ✓
- D. All the above ✓
- E. None of the above ✓

41. Common cause of triad of symptoms of Epigastric pain, haematemesis and melaena

- A. Duodenal Ulcer
- B. Meckel's diverticulum
- C. Haemorrhoids
- D. Anal fissure
- E. Fistula-in-ano.

FOR QUESTIONS 51 -- 52, ANSWER TRUE (T) OR FALSE (F)

51. Teratomas are tumours of multiple tissues native to the organ from which they arise T F

52. Inguinal hernias in girls usually occur through the canal of Anton Nuck T of the

FOR QUESTIONS 53 TO 55, CHOOSE THE BEST ANSWER

53. In major omphalocele:

- A. Polydactyly is commonly in the family history
- B. Inferior vena cava is absent
- C. Patient cannot be helped in any way
- D. Other major anomalies may be present
- E. Surgical reduction of all contents is easy.

54. In undescended testis

- A. Right side is commoner than left ✓
- B. Fibrosis of the ipsilateral kidney prevented the undescend
- C. Patients are best operated at puberty
- D. Orchiectomy is the best operation
- E. Bilateral undescend is common

CHOOSE THE BEST ANSWER

55. ALL EXCEPT - Are true about strangulated hernia

- A. Sudden onset of acute pain in pre-existing hernia
- B. Forceful vomiting ✓
- C. Tense and tender feeling of hernia ✓
- D. Loss of expansile impulse on coughing ✓
- E. History of recent regression in size of hernia

56. A patient is advised to avoid strenuous activity following herniorrhaphy for a period of:

- A. One day
- B. One week
- C. 3 weeks
- D. Six weeks
- E. Six months

57. A hernia incarcerating only a portion of the lumen of intestine is known as:

- A. Obturator
- B. Richter
- C. Kober
- D. Littre
- E. Hirsch

Richter

58. complications of hernia include

59. Which of the following is NOT true regarding paraumbilical hernia

- A. It is seen usually in female ✓
- B. Omentum in the sac is usually adherent ✓
- C. It is often troubled by intertrigo ✓
- D. It is unlikely to be strangulated ✓
- E. Can be treated surgically. ✓

unlikely to
strangulate

D. Can be strangulated
operate early

CHOOSE THE BEST ANSWER

60. The following are true function of the spleen except

- A. Production of immunoglobulin ✓
- B. Removal of Howell-Jolly and Heinz bodies from the red cells ✓
- C. Cytopenesis in myeloproliferative disease ✓
- D. Normal site of haemopoiesis in healthy adult ✓
- E. Reservoir of blood cells ✓

61. Splenectomy is an indication in the following conditions except.

- A. Subcapsular haematoma
- B. Hereditary spherocytosis
- C. Hypersplenism
- D. Shattered spleen
- E. As part of variceal surgery

~~As part of variceal surgery~~

62. The following are associated with the aetiology of acute pancreatitis except:

- A. Endoscopic retrograde cholangiopancreatography ✓
- B. Alcoholism ✓
- C. Pancreas Divisum ✓
- D. Hypercalcaemia ✓
- E. Hyperthyroidism

63. The following are indications for surgery in pancreatitis except:

- A. Pancreatic Necrosis
- B. Chronic Pancreatic Pseudocyst
- C. Pancreatic abscess
- D. Pseudaneurysm
- E. Acute pancreatic pseudocyst

Pseudo aneurysm

except D

64. The following are treatment options for bleeding oesophageal varices except.

- A. Endoscopy/Sclerotherapy
- B. Balloon tamponade using Sengstaken Black tube
- C. Portocaval shunt surgery
- D. Transjugular intra hepatic portosystemic stent shunt
- E. Hepatic resection. Hepatic resection;

E

QUESTIONS 65-67. ANSWER TRUE (T) OR FALSE (F)

65. Budd-Chiari Syndrome is obstruction of the portal vein at the pancreatic level

F

66. Amoebic liver abscess is usually multiloculated and the amoebic cyst gets to the liver through the hepatic vein.

F

67. Splenectomy is indicated in all patients with sickle cell disease

F

69. The following statements are correct about keloid except:

- A. It is possibly autoimmune in aetiology
- B. Starts soon after the injury and rarely subsides — hyperplastic scars
- C. It outgrows its boundary
- D. Commonest between the age of 10-30 years
- E. It is autosomal recessive genetically.

QUESTIONS 70-72

Answer the following questions by using the key outlined below:

- A. If numbers 1, 2 and 3 are correct.
- B. If number 1 and 3 are correct.
- C. If numbers 2 and 4 are correct.
- D. If only number 4 is correct.
- E. If all the numbers are correct.

70. Acute cholecystitis should be treated by:

- A. Nasogastric suction and intravenous fluids
- B. Urgent cholecystectomy
- C. Antibiotic therapy
- D. Cholecystostomy.

71. Acute cholecystitis:

- A. 1. Is almost invariably related to the presence of gallstones
- 2. Usually presents with biliary colic
- 3. Is often associated with jaundice.
- 4. Is not characterized by pyrexia in the early hours of the disease.

72. Stones in the common bile duct:

- C. 1. Are present in 10% of cases of cholecystitis
- 2. Often gives rise to Charcot's triad (Fever, intermittent jaundice & Hypertendral pc)
- 3. Are not usually associated with a distended gall bladder
- 4. Are usually accompanied by progressive jaundice.

CHOOSE THE BEST ANSWER

73. In chronic leg ulcer, the following statements are correct except.

- A. Poorly treated traumatic ulcer is a common cause
- B. Vascular angiography is a common investigation
- C. Lymphoedema is a complication
- D. Wound Biopsy is a preferred investigation
- E. Bed Rest is a form of treatment

74. In Basal cell carcinoma, the following statements are correct except:

- A. It is the most common malignancy of Caucasians
- B. It arises from the cells of the basal layer of the epithelium
- C. It is typically papillomatous or ulcerative.
- D. It occurs most often at sites with the greatest concentration of pilosebaceous follicles.
- E. Patients with xeroderma pigmentosum are predisposed.

76. In lymphoedema, the following statements are correct except:

- A. It is a chronic condition characterized by accumulation of protein rich fluid within the extracellular space of the subcutaneous tissue and skin.
- B. Lymphoedema praecox is congenital and occurs at the juvenile onset.
- C. Lymphangiosarcoma is a malignant transformation.
- D. Early skin changes of keratosis depict the intermediate stage of the disease.
- E. The recurrent limb swelling may pit at the early onset.

AM ad

77. In malignant melanoma, the following statements are correct except:

- A. It could arise de novo
- B. Dysplastic naevus is an aetiological precursor lesion.
- C. The vitreous body is a predisposing aetiological factor
- D. Ray amputation is a form of treatment
- E. Adjuvant therapies include immuno-therapy and chemotherapy

Melanoma

78. The following statements about wound are correct except:

- A. It is an area of compromised tissue integrity.
- B. When it heals by secondary intention, the wound is dirty, edge elevated and infected.
- C. Vitamin A and C are co-factors in hydroxylation of lysine and proline during the process of wound healing.
- D. Dyschromia is a known complication of wound healing.
- E. Surgical debridement is a form of wound care.

only this?

79. Wound cleansing with antiseptic solution include the use of the following agents except:

- A. Chlorhexidine solution of 1% - 4% *Antiseptic*
- B. Cetrimide solution of 1% *- 5% solution*
- C. Hydrogen peroxide of 3% - 6% *(A)*
- D. Hypochlorite solution. *Substrate hypochlorite solution*
- E. Povidone Iodine

80. Concerning wound closure, the following statements are correct except:

- A. A clean wound that presented within 12 hours post injury may be closed primarily.
- B. A wound close cleanliness is uncertain and presented 12 hours post injury must be closed.
- C. Timing and cleanliness is an important factor in wound closure.
- D. The nature of wound determines the method of closure.
- E. A wound with a wide gap may be closed by either a skin graft or flap closure.

81. In direct wound closure, the following statements are correct except:

- A. Haemostasis must be secured
- B. Incision should follow skin tension
- C. Edge of the wound should be inverted.
- D. Fine sutures are better used
- E. Gentle handling of the tissue.

(C)

QUESTIONS 82 AND 83; ANSWER TRUE (T) OR FALSE (F)

82. HIV positive patient who suffer from burn injury but have no stigmata of AIDS should be treated similarly to HIV negative patient

T → 10-15% T

83. Calorie given to burn patient should consist of 50% Carbohydrate, 35% protein and 15% fat.

F

F

QUESTION 84 - 86

ANSWER THE FOLLOWING QUESTIONS BY USING THE KEY OUTLINED BELOW:

76. Cystic degeneration is congenital and occurs at the juvenile onset
 D. Early skin changes of keratinosis depict the intermediate stage of the disease,
 E. The recurrent lump swelling may pit at the early onset.

77. In malignant melanoma, the following statements are correct except:

- A. It could arise de novo
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- B. When it heals by secondary intention, the wound is dirty, edges are closed and infected**
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- C. Hydrogen peroxide of 3% - 6%**
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82. HIV positive patient who suffer from burn injury but have no stigmata of AIDS should be treated similarly to HIV negative patient **T**

83. Calorie given to burn patient should consist of 50% Carbohydrate, 35% protein and 15% fat. **F**

QUESTION 84 - 86

ANSWER THE FOLLOWING QUESTIONS BY USING THE KEY OUTLINED BELOW:

- A. If Number 1 and 3 are correct
- B. If Number 1 and 2 are correct

- D. If Number 4 is correct
- E. If all the numbers are correct.

(11)

84. Patients with Zollinger-Ellison syndrome have:
- 1. Hypersecretion of gastric acid ✓
 - 2. Elevated level of serum gastrin ✓
 - 3. Non-beta cell islet tumours of the pancreas ✓
 - 4. Symptoms to require total gastrectomy. ✓

E

E

85. Patients with a perforated duodenal ulcer who have been followed over a period after treatment by simple closure:
- 1. Often could have treated by a definitive ulcer operation
 - 2. Are usually symptomatic
 - 3. Require surgery more often if they had ulcer symptoms for over one year before operation.
 - 4. Require surgery more often if follow-ups are prolonged.

86. Peptic ulcers of the posterior wall of the stomach and duodenum:
- 1. Can cause anterior retroperitoneal abscess.
 - 2. Can cause mediastinitis X
 - 3. Are often not seen on roentgenologic studies.
 - 4. Are more commonly diagnosed clinically than anterior ulcers. X

B

B

QUESTIONS 87 - 95.

TRUE OR FALSE

- 87. Diagnostic peritoneal lavage is useful in unstable patients to assess for blood and need for laparotomy. **T**
- 88. In patients with blunt abdominal injury, computerized Tomography is the investigation used in the stable patients to define site of injury and may permit non-operative treatment. **T**
- 89. In blunt abdominal trauma, Abdominal ultrasound can detect 70mls of fluid but cannot determine type of fluid. **F**
- 90. In a patient with blunt abdominal trauma, Plain abdominal X-ray showing fracture of the transverse processes of the lumbar vertebrae may be associated with kidney injury. **T**
- 91. Focused Abdominal Sonography for trauma is adequate for detection of visceral perforation. **T**
- 92. In a patient with acute abdomen, faeculent vomiting may indicate distal small bowel obstruction. **F T**
- 93. Acute abdomen is the most common cause of surgical emergency admission. **T**
- 94. In gastric cancer, three-fourth of patients have metastases at first presentation. **T**
- 95. In metastatic adjuvant of gastric cancer, limbic plastics constitute about 10%. **T**

- D. If Number 1 is correct
- E. If all the numbers are correct.

11

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- 95. In the oesophagus, the most common site of gastric cancer, limits plastica constitute about 10%. T

97. Regarding intravenous Nutrition of surgical patients, which is the correct statement
- A. All post-operative patients require intravenous Hyperalimentation
 - B. 2000 - 4000 calories in 2000 - 4000 mls of fluid can be given safely
 - C. Intravenous Hyperalimentation can be safely given via the saphenous vein
 - D. Three litres of fluid in the form of 2 litres of 5% dextrose and one litre of normal saline can be given intravenously daily in the first 48 hours following a straight forward appendectomy

FOR QUESTIONS 98 TO 101, MATCH THE FOLLOWING LETTERWORD OR STATEMENT WITH THE CORRESPONDING LETTERWORD OR STATEMENT SUCH THAT EACH LETTER WORD OR STATEMENT CAN BE USED ONCE, MORE THAN ONCE OR NOT AT ALL.

- | | | |
|------------------------------------|-----------------------------------|--|
| <input checked="" type="radio"/> B | 98. Daily urine output | A. 300 cc |
| <input checked="" type="radio"/> C | 99. Villous adenoma of the rectum | <input checked="" type="radio"/> D. 1500 cc |
| <input checked="" type="radio"/> D | 100. Principal cation in the ECF | C. Potassium loss |
| <input checked="" type="radio"/> E | 101. Oesophageal structure | <input checked="" type="radio"/> D. Sodium ion |
- E. Intravenous feeding
F. Achylasia

QUESTIONS 102-103, CHOOSE THE BEST ANSWER

102. The following are true of the Portal vein except:
- A. Result from the union of the superior mesenteric vein the inferior mesenteric vein ~~portal vein~~
 - B. Carries 50% of hepatic blood supply
 - C. Is formed behind the neck of the pancreas
 - D. Bifurcates into right and left terminal branches with minimal cross communications
 - E. Like most other veins in the body, it has valves
103. Pyogenic abscess may reach the liver through:
- A. Intrahepatic Biliary system
 - B. Portal vein
 - C. Hepatic artery
 - D. All of the above
 - E. None of the above

QUESTIONS 104 - 106. MATCH THE FOLLOWING LETTER WORD OR STATEMENT AGAINST THE CORRESPONDING LETTER WORD OR STATEMENT SUCH THAT EACH LETTERWORD OR STATEMENT CAN BE USED ONCE, MORE THAN ONCE OR NOT AT ALL.

- | | | |
|------------------------------------|-----------------------------------|---|
| <input checked="" type="radio"/> C | 104. Bleeding oesophageal varices | A. Erroneous portosystemic shunt |
| <input checked="" type="radio"/> B | 105. Budd - Chiari Syndrome | B. Idiopathic Hepatic venous Thrombosis |
| <input checked="" type="radio"/> E | 106. Splenomegaly | C. Injection of sclerosants |
- D. Thrombocythemia
E. Splenectomy

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| E | 106. Splenomegaly | C. Injection of sclerosants |
- D. Thrombocyb oenia
E. Splenectomy

CHOOSE THE BEST ANSWER:

107. The following are common causes of lower GIT bleeding Except.

- A. Haemorrhoids
- B. Cancer of the rectum
- C. Ano-rectal fissure
- D. Condylomata acuminata
- E. Rectal polyps

108. A common cause of pathological lead-point in intussusception is

- A. Infected water
- B. Ascites
- C. Adhesions
- D. Food Residue
- E. Polyp

109. The commonest cause of surgical obstructive jaundice in a neonate is

- A. Neonatal hepatitis
- B. Intra-uterine cholangitis
- C. Common duct stones
- D. Biliary atresia
- E. Alligier's syndrome

110. The commonest cause of a painless left loin mass in a 3yr old boy is

- A. Wilms' tumour
- B. Neuroblastoma
- C. Hepatoma
- D. Peri-ampullary carcinoma
- E. Carcinoma of unknown origin

111. In thyroglossal cyst

- A. The swelling is attached to the sternomastoid muscle *below hyoid bone*
- B. The swelling is usually to the left of midline
- C. The swelling moves with swallowing but not with protrusion of tongue
- D. The Hyoid bone and attached muscles are usually abnormal
- E. Sistrunk is operation of choice

TRUE (T) OR FALSE (F)

112. Colonoscopy is superior to Barium Enema in evaluation of a patient with lower gastrointestinal haemorrhage. *T*

CHOOSE THE BEST ANSWER:

113. With regards to salivary gland tumour the following are true except:

- A. Pleomorphic adenoma is the commonest
- B. Benign tumours are rarer in the minor than the major salivary glands
- C. Monomorphic adenomas are benign
- D. Parotid gland is most frequently affected
- E. Lymphomas can affect the salivary gland.

114. In the principles of therapeutic use of antibiotics in surgery, the following are true except:

- A. Result of culture and sensitivity must always be followed strictly
- B. Physiologic deficiencies must be corrected for optimal result
- C. Empirical use of antimicrobial may be indicated
- D. Therapeutic antimicrobial use is indicated in perforated duodenal ulcer
- E. Parenteral antibiotics is usually given before operation

CHOOSE THE BEST ANSWER

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- B. Physiologic deficiencies must be corrected for optimal result
- C. Prophylaxis of antimicrobial may be indicated
- D. Therapeutic antimicrobial use is indicated in perforated duodenal ulcer
- E. Topical antibiotic is usually given before operation

ANSWER THE FOLLOWING QUESTIONS BY USING THE KEY OUTLINE BELOW.

- A. If numbers 1, 2 and 3 are correct
- B. If Numbers 1 and 3 are correct
- C. If Numbers 2 and 4 are correct
- D. If only number 4 is correct
- E. If all the number are correct.

115. Which of the following is (are) complication(s) of laparoscopic cholecystectomy

- 1. Bile leak
- 2. Persistent pneumoperitoneum
- 3. Shoulder tip pain
- 4. Ascites

116. Bil contains the following

- 1. Sodium taurocholate
- 2. Bilirubin
- 3. Sodium
- 4. Cholecystokinin

117. Which of the following can present as acute abdomen:

- 1. Porphyria
- 2. Haemolytic crises as in sickle cell disease
- 3. Diabetic ketoacidosis
- 4. True haemophilia.

118. Which of the following is (are) relevant treatment of post-operative paralytic ileus:

- 1. Insertion of nasogastric tube and connection to suction
- 2. Administration of intravenous infusion
- 3. Correction of hypokalaemia
- 4. Insertion of a rectal tube.

119. Differential diagnosis of Crohn's disease is (are)

- 1. Cholecystitis
- 2. Acute appendicitis
- 3. Chronic duodenal ulcer
- 4. Pyrexia of unknown origin.

120. Systemic manifestation(s) of Crohn's disease include(s):

- A. Intra-abdominal abscess.
- B. Ano-rectal lesion like multiple fistulae-in-ano
- C. Arthritis
- D. Hypercholesterolaemia

QUESTION 121 - 125.

Match each of the numbered items listed with the appropriate lettered statement or choice. Each lettered item may be used more than once:

121 For Patients with thyroid carcinoma match the type of surgery with the clinical features of the disease

- A. Partial excision of a lobe
- B. Lobectomy with isthmusectomy
- C. Near total thyroidectomy
- D. En Bloc neck dissection without sternocleidomastoid muscle removal
- E. Cincle radial neck dissection.

Von Hippel Lindau.

Cysts in liver

" " " pancreas

hence shoe kidney

ADPKD

RCC.

Stuffer's syndrome.

- ↓ed serum phosphate.
- ↑ PT.
- hypoalbuminaemia
- ↑ transaminases
- thrombocytopenia
- neutropenia

Liver
affection.

Thoracic spine : metastasis

Cervical
lumbar spines → spine injury

Ante

- hip is fixed
- Ext rotated
- Adducted

Poste

but fixed
limb is shortened
internally rotated
adducted

Hip fracture

Ext rotated
Externally rotated

AVN + femoral head injury
sudden palsy

Post traumatic arthritis +
femoral shaft (near fracture)
knee injury.

Femoral fracture

Ext rotated
Externally rotated

Vertical → knee cylinder : very common
Transverse : 20% of femoral fracture
Only common in patella

- ① Double mgt. Dura involve free neck from waking
- ② Pinkish hematomas - 3 common cause of meningitis
- ③ Upper GI bleed, left, 5 common cause of mgt
- ④ Preop prep of a 10yr old boy going for surgery in
scout of pentonitis
- ⑤ Depnehemorrhage, classify & manage. of severe one
- ⑥ Acute abd - 5 cause in UHT of mgt
- ⑦ Mgt of those in paraplegic pre & causes
- ⑧ Chest tube insertion, step; ⑨ Back pain causes of

in a 40 yr old office worker up dr is no pathology
Lewin found

1-Anthem - aspects

2-Hallux valgus => affects 5th toe, big toe, thumb

3-Tuple bubble on superior

4-Tx of hydrocele in 10yr old

5-Ganglion of bld transf re immediate few mm 1/2 to giving of blood

6-Resus, GCS 13, abd distension, absent bowel sound, signs of shock

Diag (Brain injury, Abd injury w/ hemoperitoneum)

7-Art in duod bleeding: artery, post

8-What are hemorrhoids?

9-~~Its aspects~~ In obstructed jaundice (unconjugated bilirubin, serum bilirubin)

10-Cause of surgical bile duct obstr? Behav stress, neonatal hepatitis

(11) Art supplying of left side of stomach (cardia) middle, left, right gastric art

(12) Most likely part of humerus and wt suspension of pathologic # minor trauma of humerus

(13) As # is best stabilized by anast, surg or physiological neck of humerus

(14) Pathological # are # in (a) diseased bone (b) - U-plaster, hanging cast, plates & screws, interlocking nail

(15) Dupuytren contracture affects index, ring or finger

(10) A 20 yr old boy

turned his knee while playing

Next day joint swelling
tender

was noticed

Attempt to aspirate

(a) Bleeding into the joint

(1) Knee joint aspiration

is best done

(a) Laterally (b) Medially (c) Anteriorly (d) Posteriorly

is stimulated by
baroreceptor (b) Chemoreceptor (c) Osmoreceptor

Erectile dysfunction with _____

LHRH agonist LHRH antagonist

fill in
P-R!! _____ is _____
(a) (b) (c) (d)

13 Q on inguinal hernia or tender, ^{inguino} ~~per~~ital swell.

17 Concerning paraumbilical hernia:

- (a) Defect is in of umbilical region
- (b) Defect is on the right of of umbilicus
- (c) _____
- (d) _____

(5) (a) nodular ulcer commoner than gastric

Many questions on Warts

40-50% do not require

Also questions on stth stth except

Q: A scenario
Q: on
Inguer finger: what causes it
(b) because there is a nodule - -

but complains of easy satiety after eating
The line of ngt??

If there are group of structures that prevent the bowing
of the strings. So ~~we~~ ^{there are} ~~have~~ pulleys A & C.

- (a) Annular or _____ (c)
- (b) _____

which is true about C.

- (a) circular or _____

41. Que on d pancreas:
It has 2 feet
Has both infracolic & supra c

(42) Osgood schletter dxs.

(a) Upper femoral epicondylitis (b) Lower femoral

(c) Tibial epicondylitis

(43) # of femoral head

(a) Supplied by retinacular art.

(b)

(44) Origin of Meckel diverticulum.

(a) Allantoids (b) Remnant of ... duct

(c) omphalo-...duct

(45) Hemiarthroplasty:

(a) partial or total replacement (b) (c)

(46) Normal Nat conc: 130-140, 135-140
in ECF 110-115

(47) Diagnosis of Hirschsprung dxs.

(a) Nolet suction biopsy (b) Surove (c) duhammel suo biopsy

(48) Standard adjuvant in colon in UIC

(a) 5 FU + Levamisole (b) Adriamycin + Vinblastine

(c) Vincristine + Tamoxifen

(49) Length of repair of long saphenous, we of these will y
in f. epigastric vein, obturator vein, Superior

(50) UIC on medial malleolus: Venous, Neuro-pile

Case of: Acute abd pain, vomiting, melena stool,
& some 'CF'

(30) Diag: Rupture appendix, perforated duod. ulcer
Hemorrhagic pancreatitis,

(31) Most imp't invest:

Acute ECRP, Barium follow through, Abd USS

(32) most imp't tx

- Solove lunge of d pancreas & - -
- Ex lap & repair of d duod ulcer
- Ex-lap & appendectomy.

(33) Omphalocele major is assoc wt

- Beckwith: VACTER - VACTERAL - CHARGE.

(34) ~~Breast~~ FAP is

metaplastic poly are premalign.

✓ Juvenile ✓ benign.
✓ premalign.

(35) FAP is

assoc wt osteoma & epidermoid cyst in

Gardner synd

Assoc wt Xrn IQ

It is an Auto R. disorder

(36) Best choice of pre-op Abot:

Flagyl/cefuroxime, Flagyl/taipro, Gentamicin + Ciprofloxacin

(37) chest tube insertn: you best

4th I.C.S Ant- axillary line 5th, 6th, 7th

(38) Ques on Gun shot injury 2 d abd ^{better than penetrate} _{must} ^{local explor to see} _{internal}

(39) USS (detects 70% of fluid,
better than CT in

(40) Δ most easily injured organ in blunt abd injury

spleen, liver, kidney

(41) Ques on pro-thrombin time Ceg reduced by heparin,
warfarin, it assesses d intrinsic pmsy