

पुस्तिका में पृष्ठों की संख्या-32  
No. of Pages in Booklet -32  
पुस्तिका में प्रश्नों की संख्या-180  
No. of Questions in Booklet -180

**SSAP-22**

Paper Code : 10

**SUBJECT : Urology**  
(Super Speciality)

समय: 3.00 घण्टे  
Time: 3.00 Hours

अधिकतम अंक: 180  
Maximum Marks: 180

प्रश्न-पत्र पुस्तिका के पेपर सील/ पॉलिथिन बैग को खोलने पर परीक्षार्थी यह सुनिश्चित कर लें कि प्रश्न पुस्तिका संख्या तथा ओ.एम.आर. उत्तर-पत्रक पर अंकित बारकोड समान हैं। इसमें कोई भिन्नता हो तो परीक्षार्थी वीक्षक से दूसरा प्रश्न-पत्र प्राप्त कर लें। ऐसा सुनिश्चित करने की जिम्मेदारी अभ्यर्थी की होगी।

**On opening the paper seal/ polythene bag of the Question Booklet the candidate should ensure that Question Booklet Number and Barcode of OMR Answer Sheet must be same. If there is any difference, candidate must obtain another Question Booklet from Invigilator. Candidate himself shall be responsible for ensuring this.**

### परीक्षार्थियों के लिए निर्देश

- सभी प्रश्नों के उत्तर दीजिए।
- सभी प्रश्नों के अंक समान हैं।
- प्रत्येक प्रश्न का केवल एक ही उत्तर दीजिए।
- एक से अधिक उत्तर देने की दशा में प्रश्न के उत्तर को गलत माना जाएगा।
- प्रत्येक प्रश्न के चार वैकल्पिक उत्तर दिये गये हैं, जिन्हें क्रमशः 1, 2, 3, 4 अंकित किया गया है। अभ्यर्थी को सही उत्तर निर्दिष्ट करते हुए उनमें से केवल एक गोले अथवा बबल को उत्तर-पत्रक पर नीले बॉल प्वाइंट पेन से गहरा करना है।
- OMR** उत्तर-पत्रक इस परीक्षा पुस्तिका के अन्दर रखा है। जब आपको परीक्षा पुस्तिका खोलने को कहा जाए, तो उत्तर-पत्रक निकाल कर ध्यान से केवल नीले बॉल प्वाइंट पेन से विवरण भरें।
- प्रत्येक गलत उत्तर के लिए प्रश्न अंक का 1/3 भाग काटा जायेगा। गलत उत्तर से तात्पर्य अशुद्ध उत्तर अथवा किसी भी प्रश्न के एक से अधिक उत्तर से है। किसी भी प्रश्न से संबंधित गोले या बबल को खाली छोड़ना गलत उत्तर नहीं माना जायेगा।
- मोबाइल फोन अथवा इलेक्ट्रॉनिक यंत्र का परीक्षा हॉल में प्रयोग पूर्णतया वर्जित है। यदि किसी अभ्यर्थी के पास ऐसी कोई वर्जित सामग्री मिलती है, तो उसके विरुद्ध आयोग द्वारा नियमानुसार कार्यवाही की जायेगी।
- कृपया अपना रोल नम्बर ओ.एम.आर. पत्रक पर सावधानी पूर्वक सही भरें। गलत अथवा अपूर्ण रोल नम्बर भरने पर 5 अंक कुल प्राप्तांकों में से काटे जा सकते हैं।
- यदि किसी प्रश्न में किसी प्रकार की कोई मुद्रण या तथ्यात्मक प्रकार की त्रुटि हो, तो प्रश्न के हिन्दी तथा अंग्रेजी रूपान्तरों में से अंग्रेजी रूपान्तर मान्य होगा।

**चेतावनी :** अगर कोई अभ्यर्थी नकल करते पकड़ा जाता है या उसके पास से कोई अनधिकृत सामग्री पाई जाती है, तो उस अभ्यर्थी के विरुद्ध पुलिस में प्राथमिकी दर्ज कराते हुए विविध नियमों-प्रावधानों के तहत कार्यवाही की जाएगी। साथ ही विभाग ऐसे अभ्यर्थी को भविष्य में होने वाली विभाग की समस्त परीक्षाओं से विवर्जित कर सकता है।

### INSTRUCTIONS FOR CANDIDATES

- Answer all questions.
- All questions carry equal marks.
- Only one answer is to be given for each question.
- If more than one answers are marked, it would be treated as wrong answer.
- Each question has four alternative responses marked serially as 1, 2, 3, 4. You have to darken only one circle or bubble indicating the correct answer on the Answer Sheet using **BLUE BALL POINT PEN**.
- The **OMR** Answer Sheet is inside this Test Booklet. When you are directed to open the Test Booklet, take out the Answer Sheet and fill in the particulars carefully with **blue ball point pen** only.
- 1/3 part of the mark(s) of each question will be deducted for each wrong answer.** A wrong answer means an incorrect answer or more than one answers for any question. Leaving all the relevant circles or bubbles of any question blank will not be considered as wrong answer.
- Mobile Phone or any other electronic gadget in the examination hall is strictly prohibited. A candidate found with any of such objectionable material with him/her will be strictly dealt as per rules.
- Please correctly fill your Roll Number in O.M.R. Sheet. **5 Marks** can be deducted for filling wrong or incomplete Roll Number.
- If there is any sort of ambiguity/mistake either of printing or factual nature, then out of Hindi and English Version of the question, the English Version will be treated as standard.

**Warning :** If a candidate is found copying or if any unauthorized material is found in his/her possession, F.I.R. would be lodged against him/her in the Police Station and he/she would liable to be prosecuted. Department may also debar him/her permanently from all future examinations.

**इस परीक्षा पुस्तिका को तब तक न खोलें जब तक कहा न जाए।**  
**Do not open this Test Booklet until you are asked to do so.**

- 1001551
1. As per Lippes classification motor paralytic bladder is seen in all, EXCEPT -
    - (1) Tabes Dorsalis
    - (2) Pelvic Surgery
    - (3) Pelvic Trauma
    - (4) Herpes Zoster
  2. Which statement is incorrect regarding the high success rate of shock wave lithotripsy?
    - (1) Results are better when stone is not located in the lower calyx
    - (2) Stone attenuation is less than 900 HU
    - (3) Skin to stone distance is less than 10 cm.
    - (4) When renal parenchymal thickness is about 1 cm.
  3. A 62 year old man undergoes a transurethral biopsy of a bladder tumor at the dome. Pathology reveals muscle invasive urothelial and small cell carcinoma. Metastatic workup is negative. The next step is -
    - (1) Intravesical gemcitabine therapy
    - (2) Partial cystectomy
    - (3) Radical cystoprostatectomy
    - (4) Chemo radiation therapy
  4. What is the most important factor for choosing modality of treatment in renal stone?
    - (1) Stone composition
    - (2) Stone location
    - (3) Anatomic abnormalities
    - (4) Stone burden
  5. Best way to differentiate between hematuria and pseudohematuria is -
    - (1) dipstick urine test
    - (2) urine for exfoliative cytology
    - (3) microscopic analysis
    - (4) electrophoresis
  6. Indication of suprapubic prostatectomy for large prostatic adenoma and with -
    - (1) multiple small bladder calculi
    - (2) total SPSA > 10 ng/ml
    - (3) erectile dysfunction
    - (4) symptomatic bladder diverticulum
  7. Incidence of congenital cryptorchidism at 1 year of age is -
    - (1) 1%
    - (2) 2-4%
    - (3) 5%
    - (4) 7%

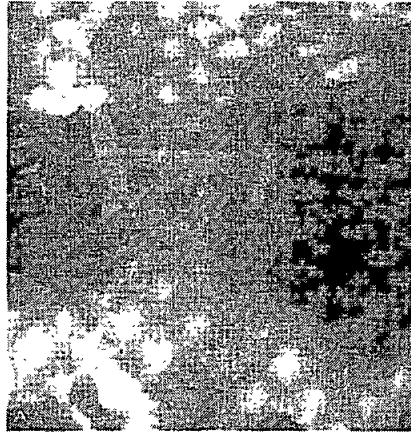
8. Prostatic cancer patients those who are on surveillance died because of the following causes?
- (1) Cardiovascular disease
  - (2) Prostatic cancer
  - (3) Prostate cancer induced anemia

What is the order of relative risk for causing death, choose correct answer using given codes-

- (1) 1, 2, 3
  - (2) 2, 3, 1
  - (3) 2, 1, 3
  - (4) 3, 2, 1
9. Following a intracavernous injection of Trimix a patient developed full erection that is persistent since 5 hours. On examination the corpora is rigid. What is the diagnosis?
- (1) Ischemic priapism
  - (2) Non ischemic priapism
  - (3) Persistent erection
  - (4) Physiological response to Trimix
10. All are advantages of retropubic prostatectomy over suprapubic approach, EXCEPT -
- (1) excellent anatomic exposure
  - (2) direct access to bladder is achieved
  - (3) direct visualization of prostatic adenoma
  - (4) preservation of urinary continence
11. Which is true about supra sacral cord injury?
- (1) Both smooth and striated sphincter dyssynergia
  - (2) Both smooth and striated sphincter synergia
  - (3) Smooth sphincter synergia and striated sphincter dyssynergia
  - (4) Smooth sphincter dyssynergia and striated sphincter synergia
12. Following are likely findings on ultrasound of child (4yr) are found whose mother is diagnosed with cystic renal disease and a polycystin-1 mutation, EXCEPT -
- (1) normal renal ultrasound
  - (2) a unilateral renal cyst
  - (3) hepatic fibrosis
  - (4) multiple unilateral cysts
13. Within how many hours of surgical castration, testosterone levels are within castrate range?
- (1) 4 hours
  - (2) 6 hours
  - (3) 8 hours
  - (4) 12 hours

14. Pain associated with a stone in ureter is the result of -
- (1) irritation of ureter mucosa by the stone
  - (2) obstruction of urine flow with distension of the renal capsule
  - (3) irritation of the intramural ureter
  - (4) urinary extravasation from a ruptured calyceal fornix
15. Which penile implant gives best rigidity and flaccidity?
- (1) 2-Piece inflatable
  - (2) 3-Piece inflatable
  - (3) Malleable semi rigid rod
  - (4) Malleable rigid rod
16. Which is best surgical technique for sperm retrieval. Choose the correct answer from the following -
- (1) Percutaneous Epididymal Sperm Aspiration (PESA)
  - (2) Microsurgical Epididymal Sperm Aspiration (MESA)
  - (3) Testicular Sperm Aspiration (TESA)
  - (4) Testicular Sperm Extraction (TESE)
17. Which assay is direct measure of sperm DNA fragmentation?
- (1) Sperm DNA integrity assay
  - (2) TUNEL assay
  - (3) Comet assay
  - (4) Denatured sperm DNA assay
18. You collect urine specimen of a patient for routine analysis. The specimen is cloudy in colour. On adding acetic acid to urine the urine becomes clear. What is most probable cause of cloudy urine in this case?
- (1) Phosphaturia
  - (2) Pyuria
  - (3) Chyluria
  - (4) Phenacetin

19. A 40 year male presents with complaint of lower back pain. Pain is dull, non colicky. There are also symptoms of weight loss, anorexia, hypertension and decreased urine output. On physical examination there is deep vein thrombosis of lower limb and bilateral pedal edema. IVU picture is attached. What is the most probable diagnosis?



- (1) Retrocaval ureter  
 (2) Common iliac artery aneurysm  
 (3) Retroperitoneal fibrosis  
 (4) Retroperitoneal hematoma
20. Various authors used different parts of intestine for construction of orthotropic neo bladder following radical cystectomy.

Match the list of author's and intestinal segments used –

List I

List II

- |              |                         |
|--------------|-------------------------|
| (A) Reedy    | (1) Ileum               |
| (B) Mainz    | (2) Sigmoid colon       |
| (C) Hautmann | (3) Ileocolonic segment |

Choose the correct answer using the given codes -

- |       |     |     |
|-------|-----|-----|
| (A)   | (B) | (C) |
| (1) 1 | 3   | 2   |
| (2) 2 | 1   | 3   |
| (3) 2 | 3   | 1   |
| (4) 3 | 2   | 1   |

21. What are the main parasympathetic efferent innervation to the pelvic plexus arises from -
- (1) S1  
 (2) S2 to S4  
 (3) T11 to L2  
 (4) L3 to S1

22. Which statement is incorrect about radical cystectomy and orthotopic neobladder construction in female?
- (1) It should be done in the absence of bladder neck involvement
  - (2) These procedures should be adopted in low stage disease ( $\leq$  CT<sub>2</sub>)
  - (3) Vaginal closure should preferably done by interrupted closure
  - (4) Lymphovascular invasion is not good prognostic sign
23. You are catheterizing a patient of spinal cord injury. As soon as you insert the foley the patient develops headache, hypertension, flushing and sweating over face. What is the level of spinal cord injury in this patient?
- (1) Lesion above brainstem
  - (2) Lesion above T6
  - (3) Lesion between T6 and S2
  - (4) Lesion below S2
24. Which is not the treatment option for the management of 2 cm long ureteric stricture situated 2 cm proximal to patent terminal ureter.
- (1) End to End ureteric anastomosis
  - (2) Primary reimplantation
  - (3) Psoas hitch
  - (4) Boari flap
25. Which glucocorticoids among the following has the highest anti-inflammatory potency?
- (1) Hydrocortisone
  - (2) Methylprednisolone
  - (3) Triamcinolone
  - (4) Dexamethasone
26. Following are the initial management of low volume urine leak after renal transplant, EXCEPT-
- (1) Bladder catheter
  - (2) JJ stent placement
  - (3) Percutaneous nephrostomy tube placement
  - (4) Fluid restriction
27. What is the initial assessment of patient aged 50 years old with asymptomatic micro haematuria according to AUA guidelines?
- (1) Blood pressure measurement, serum creatinine level cystoscopy and computed tomography
  - (2) Urine cytology, cystoscopy and CT urogram
  - (3) Urine cytology, Blue light cystoscopy and any upper tract imaging
  - (4) No evaluation is necessary unless micro hematuria is persistent/recurrent

28. Following are the risk factors for stone formation in a neurogenic bladder patient, EXCEPT-
- (1) Chronic Inflammation
  - (2) UTI by Proteus, Klebsiella
  - (3) Black race
  - (4) Long term catheterization
29. Most commonly affected segment of abdominal wall in PBS are -
- (1) medial and inferior
  - (2) medial and superior
  - (3) lateral and inferior
  - (4) lateral and superior
30. Which is incorrect regarding LATITUDE trial -
- (1) it was done in metastatic prostate cancer patients
  - (2) in its treatment arm androgen deprivation, abiraterone and prednisone were used
  - (3) in its treatment arm androgen deprivation, docetaxel and prednisone were used
  - (4) treatment arm had superior overall survival benefits
31. Which statement is correct in reference of renal pyramids?
- (1) It contains loops of Henle
  - (2) It contains loops of Henle and collecting ducts
  - (3) It contains loops of Henle, collecting ducts and papillary ducts
  - (4) It contains loops of Henle, collecting ducts, papillary ducts and minor calyx
32. The ureter related to the anterior portion of the uterosacral ligament -
- (1) Lies inferior
  - (2) Lies posterior
  - (3) Lies superior
  - (4) Lies lateral
33. A neonate presents to you with urinary ascites. What could the most probable cause for this condition?
- (1) Bladder rupture
  - (2) Cloacal malformation
  - (3) Posterior urethral valve
  - (4) Persistent urogenital sinus
34. False for congenital bladder diverticula is -
- (1) peak incidence is age <10 years
  - (2) solitary
  - (3) more common in males
  - (4) located medial and posterior to ureteral orifice

35. The most common site of drainage of an ectopic ureter in a male is -

- (1) vas deferens
- (2) anterior urethra
- (3) seminal vesicle
- (4) posterior urethra

36. Following are the causes of unresolved bacteriuria -

- (1) Papillary necrosis
- (2) Bacterial resistance to selected drug
- (3) Later on developed resistance
- (4) Azotemia
- (5) Rapid infection with new resistant organism

Arrange them in descending order of importance using the codes given below -

- (1) 1, 2, 3, 4, 5,
- (2) 2, 3, 4, 5, 1
- (3) 1, 3, 4, 5, 2
- (4) 2, 3, 5, 4, 1

37. Ideal diameter of urethral bulking agent should be -

- (1) > 50  $\mu\text{m}$
- (2) > 80  $\mu\text{m}$
- (3) > 100  $\mu\text{m}$
- (4) > 150  $\mu\text{m}$

38. Following statements are in reference to molecular and genetic pathway of Gleason 3 and 4 prostatic carcinoma -

- (1) EGF, EGFR are absent in Gleason 3 but over express in 4
- (2) VEGF is more in Gleason 3 but less in 4
- (3) PTEN is present in 90% of Gleason 3 but it is deleted in majority of 4
- (4) Resisting apoptosis, BCL<sub>3</sub> expressed in Gleason 3 but absent in 4

Select correct answer using given codes -

- (1) 1, 2
- (2) 1, 3
- (3) 3, 4
- (4) 2, 4

39. Most common UDS finding in Parkinson disease is -

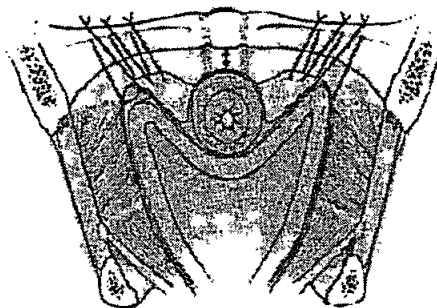
- (1) Smooth sphincter synergia
- (2) Impaired detrusor contractility
- (3) Detrusor overactivity
- (4) True detrusor sphincter dyssynergia



40. Prostatic urethra should accommodate an instrument of -
- |           |           |
|-----------|-----------|
| (1) 28 Fr | (2) 30 Fr |
| (3) 32 Fr | (4) 34 Fr |
41. Proper management of a case of avulsed ureter during basketing of stone with no guide wire in place.
- (1) Immediate surgical exploration and repair
  - (2) Cystoscopy to place a guide wire and ureteral stent
  - (3) Placement of a percutaneous nephrostomy drain
  - (4) Immediate ileal ureter
42. 3 months after PFUDD, 2 cm defect in posterior urethra. What is true about repair?
- (1) one stage anastomotic urethroplasty is preferred
  - (2) orthopedic hardware is contraindication of open repair
  - (3) BMG urethroplasty is recommended
  - (4) Urethral stent placement is recommended
43. A patient with advanced prostate cancer comes with active gross hematuria. After initial management (Hydration, Continuous bladder irrigation, supportive care), next step is -
- (1) androgen deprivation therapy  $\pm$  radiotherapy
  - (2) channel TURP
  - (3) urinary diversion in form of PCN
  - (4) palliative prostatectomy
44. UPOINT is a phenotyping tool used in men with CPPS. What is meaning of 'N' here?
- (1) Nonbacterial
  - (2) Non inflammatory
  - (3) Neurologic
  - (4) Normal prostate exam
45. A Patient having history of recurrent stone formation was put on allopurinol and sodium, potassium citrate, Inspire of these drugs there was stone formation which type of stone it can be -
- (1) Uric acid
  - (2) Calcium phosphate carbonate apatite
  - (3) Cystine
  - (4) Calcium oxalate
46. Most common cause of cystic disease in children is -
- (1) Multicystic dysplastic kidney
  - (2) Medullary cystic disease
  - (3) Autosomal recessive polycystic kidney disease
  - (4) Medullary sponge kidney

47. Which of the following is correct about cytotoxic chemotherapy?
- (1) Docetaxel is not the standard first line for Metastatic Castration Resistant Prostate Cancer (MCRPC)
  - (2) GE TUG AFUIS trial compared 6 cycles of standard dosed docetaxel 75mg/ml<sup>2</sup> every 21 days with Androgen Deprivation Therapy (ADT) versus ADT alone
  - (3) Docetaxel should not be used for metastatic castration sensitive prostate cancer
  - (4) Platinum agents are second line option for patients with MCRPC with progressive disease
48. What would be the incision over peritoneum to preserve the vascular supply of the ureter?
- (1) Always medial to the ureter
  - (2) Laterally in the abdomen and medially in the pelvis
  - (3) Medically in the abdomen and laterally in the pelvis
  - (4) Always lateral to the ureter
49. Which one is not the etiological factor for carcinoma penis?
- (1) Phimosis
  - (2) Human papillomavirus infection
  - (3) Bleomycin intravesical instillation
  - (4) Tobacco consumption
50. Which hormone is responsible for stimulating the growth of prostate during development?
- (1) Estradiol
  - (2) DHT
  - (3) Testosterone
  - (4) Inhibin
51. The anterior and posterior laminae of Gerota fascia merge laterally to form -
- (1) transversus abdominis
  - (2) lumbodorsal fascia
  - (3) lateral renal fascia
  - (4) lateroconal fascia
52. A female is undergoing radical cystectomy. Which structure is not removed?
- (1) Ovaries
  - (2) Uterus
  - (3) Cervix
  - (4) Posterior Vagina
53. A patient comes to you with penile fracture. You have repaired the defect. How long would you advise the patient to refrain from sexual activities?
- (1) 1 week
  - (2) 2 weeks
  - (3) 4 weeks
  - (4) 8 weeks

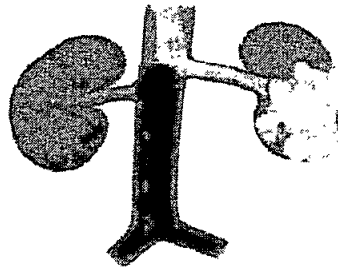
54. What is the clinical symptom in 3 months old baby with urinary tract infection?
- (1) Diarrhea
  - (2) Frequent urination
  - (3) Fever
  - (4) Jaundice
55. Which finding in CT imaging differentiates Bosniak I-III from Bosniak III-IV renal cysts?
- (1) Enhancement on administration of IV contrast
  - (2) high density cystic fluid
  - (3) Intraseptal calcifications
  - (4) Septal nodularity
56. Which is the most important prognostic factor for squamous cell carcinoma of penis?
- (1) Presence and extent of inguinal metastasis
  - (2) Pathological T stage of primary tumor
  - (3) Grade of disease
  - (4) Paraneoplastic syndrome along with size of primary disease and perineural invasion
57. What paraneoplastic syndrome is identified in patients with metanephric adenoma?
- (1) Hyper aldosteronism
  - (2) Hyper parathyroidism
  - (3) Cushing syndrome
  - (4) Polycythemia
58. A female complains of leaking of urine per vagina. On double dye test (with oral phenazopyridine and intravesical blue dye instillation), blue discolouration of tampon is seen in bottom portion. What is the probable diagnosis?
- (1) Ureterovaginal fistula
  - (2) Vesicovaginal fistula
  - (3) Urethrovaginal fistula
  - (4) Vesicouterine fistula
59. Identify the type of surgery –



- (1) Burch colposuspension
- (2) VOS repair
- (3) Paravaginal repair
- (4) MMK procedure

60. Prediction of seminal vesicle by prostate MRI is characterized by a high -
- (1) False – positive rate
  - (2) Positive predictive value
  - (3) Sensitivity
  - (4) Negative predictive value
61. A patient of Lesch Nyhan syndrome was on treatment with high dose of Allopurinol, so what will the composition of stone in this patient?
- (1) Hypoxanthine
  - (2) Uric acid
  - (3) Xanthine
  - (4) 2, 8 – Dihydroxyadenine
62. Kerr's kink in GUTB is seen at -
- (1) ureteropelvic junction
  - (2) abdominal ureter
  - (3) pelvic ureter
  - (4) vesicoureteric junction
63. Correct statement for bladder cancer in a renal transplant recipient -
- (1) Kidney transplant patients are at a same risk of developing bladder cancer as compared with the general population.
  - (2) Bladder cancer in kidney transplant patients is aggressive and tends to be associated with higher recurrence rates.
  - (3) Intravesical bacillus Calmette-Guerin cannot be used because of immunosuppression and high overall comorbidity
  - (4) All are true
64. A 65 years man with 5 PSA of 20ng/ml underwent ultrasound guided 12 core needle biopsy prostate, which turned out to be BPH. Since then PSA was constantly rising & at 6 month it was 35ng/ml. What should be the best diagnostic approach?
- (1) MPMRI (Multi Parametric Magnetic Resonance Imaging)
  - (2) Repeat Transrectal Ultrasound Guided Saturation Biopsy
  - (3) Position Emission Tomography – choline based
  - (4) Magnetic Resonance Ultrasonography Fusion Guided Biopsy
65. Most common benign enhancing renal mass is -
- (1) Renal cyst
  - (2) Oncocytoma
  - (3) AML
  - (4) cystic nephroma

66. During radical prostatectomy which is the most common site of positive margin?
- (1) Area near the neurovascular bundle
  - (2) At prostatic bed
  - (3) Prostate apex
  - (4) At bladder neck
67. In psoas hitch procedure which nerve may get injured?
- (1) Obturator nerve
  - (2) Genitofemoral nerve
  - (3) Ilioinguinal nerve
  - (4) Sciatic nerve
68. You perform transurethral resection of bladder tumour. Pathological reports are suggestive of T1 disease. No muscle tissue was identified in specimen. What will you do next?
- (1) Intravesical therapy
  - (2) Photodynamic therapy
  - (3) Repeat TURBT after 6 weeks
  - (4) Cystectomy
69. Prostate specific membrane antigen has been identified in -
- (1) prostate
  - (2) astrocyte
  - (3) schwann cells
  - (4) All
70. Identify the mayo thrombus group -



- (1) Group A
  - (2) Group B
  - (3) Group C
  - (4) Group D
71. Sipuleucel - T is the first FDA vaccine approved for -
- (1) Renal cell carcinoma
  - (2) Bladder cancer
  - (3) Penile cancer
  - (4) Prostate cancer

72. A 70 years old man on finasteride for 2 years. Now he has SPSA 4ng/ml, so what would be the SPSA value if he is not taking the finasteride?
- (1) 2ng/ml
  - (2) 6ng/ml
  - (3) 8ng/ml
  - (4) 12ng/ml
73. In which condition partial cystectomy can be done -
- (1) 4 cm T2 lesion in the trigone
  - (2) 1 cm T2 lesion in the dome
  - (3) 3 cm T2 lesion in the dome with CIS
  - (4) CIS in two locations
74. As per AUA guideline bone scan is recommended only for patients with -
- (1) Suspected locally advanced disease
  - (2) Gleason score 7 or more
  - (3) PAS level greater than 15 ng/ml
  - (4) All
75. A patient is planned for PCNL for renal pelvic calculus. Intraoperatively your consultant changes plan from standard PCNL to microperc. What is the needle size that you will give to your consultant for microperc?
- |          |          |
|----------|----------|
| (1) 12 G | (2) 14 G |
| (3) 16 G | (4) 18 G |
76. False for microfibrillar collagen is -
- (1) It stimulates blood clotting by allowing proteins of the clotting cascade and platelets to adhere to it
  - (2) Microfibrillar collagen is completely absorbed within 4 weeks.
  - (3) Its efficacy is decreased in patients with thrombocytopenia.
  - (4) Is a bovine – derived collagen agent
77. Which of the following is true of vaginal estrogen preparation and recurrent UTI in postmenopausal women?
- (1) The use of vaginal estrogen has been associated with an increased risk of breast cancer
  - (2) Vaginal estrogen use can confer an increased risk of thrombotic events in women
  - (3) Vaginal estrogen preparation can help with vaginal pain symptoms that can be conflated for UTI but do not modulate UTI risk independently
  - (4) The effect of vaginal estrogen on recurrent UTI risk are related to modulation of local pH and vaginal microflora

78. Treatment of choice in patient with uric acid calculi -
- (1) allopurinol
  - (2) thiazides
  - (3) Potassium citrate
  - (4) Dietary calcium restriction
79. What is the best option for coverage of acute penile skin loss?
- (1) Foreskin flap for small distal lesion
  - (2) Meshed skin graft in a young child
  - (3) Wet to dry dressings
  - (4) Thigh flaps
80. Risk factor for development of TVR syndrome include -
- (1) prostate volume < 45yr
  - (2) failure to use isotonic, iso-osmolar irrigating solution and the bipolar electroresection system
  - (3) underlying hepatic dysfunction
  - (4) Preoperative use of opioids
81. Which one of the following does not help in prevention of TUR-P syndrome?
- (1) Avoid capsular perforation
  - (2) Use of isotonic fluid
  - (3) Fluid height should be 60 cm above the patients
  - (4) Preoperative use of hemostatic medication
82. After colon mobilization for right sided transperitoneal retroperitoneal surgery, which plane should be developed prior to approaching to the renal hilum?
- (1) medial to the gonadal vein
  - (2) Posterior to the gonadal vein
  - (3) Lateral to the gonadal vein
  - (4) Medial to the Inferior Vena Cava (IVC)
83. Which trial has provided the highest level of evidence supporting the oncologic efficacy of robotic cystectomy and lymphadenectomy?
- (1) CALGB
  - (2) KEYNOTE
  - (3) RAZOR
  - (4) CHECKMATE
84. Micropapillary variant of urothelial carcinoma -
- (1) has a clinical outcome like a pure urothelial tumor
  - (2) is an independent predictor of progression free survival
  - (3) is an independent predictor of advanced disease at diagnosis
  - (4) is an independent predictor of cancer specific survival

85. After ESWL – residual fragments of stones may lead to -
- (1) Hypertension
  - (2) An increased rate of recurrent stones
  - (3) A decreased rate of recurrent stones
  - (4) Perinephric hematomas
86. Which treatment should be offered to patient having high flow priapism when all primary non-invasive options failed?
- (1) Aspiration and intra cavernosal  $\alpha$ -adrenergic drug should be injected
  - (2) Sapheno venous shunt proceducers
  - (3) Angioembolization
  - (4) Proximal corpus spongiosum and corpus cavernosum communication operation
87. Complications of intraoperative hypothermia are –
- (1) Increase blood loss
  - (2) Increase possibilities of wound infection
  - (3) Increase in hospitalization stay
  - (4) Prolonged ileus
- Select the right answer using the given codes -
- (1) 1, 2, 3
  - (2) 1, 2, 4
  - (3) 1, 3, 4
  - (4) 2, 3, 4
88. Which statement is incorrect in relation to prostatic cancer?
- (1) All cases of stage PT<sub>3b</sub> of prostatic malignancy SPSA found to be more than 20 ng/ml
  - (2) SPSA nadir value is associated with long term out come
  - (3) SPSA doubling time have bearing with survival
  - (4) PSA density is a key predictor of positive biopsy
89. All are first line therapy for management of OAB, Except -
- (1) caffeine reduction
  - (2) behavioural therapy
  - (3) fluid reduction
  - (4) antimuscarinic agents
90. Which is incorrect regarding radiological imaging of renal cell carcinoma?
- (1) Contrast enhanced CT scan shows enhancement of more than 15-20 Hounsfield Units (HU)
  - (2) Contrast enhancement MRI shows 20% enhancement
  - (3) In complex Bosniak's type IV renal cysts having calcification and nodule, MRI is more likely to detect renal cell carcinoma
  - (4) Multiparameteric MRI allows better staging of disease, clear cell renal carcinoma has low Apparent Diffusion Coefficient (ADC) value as compared to papillary carcinoma



91. Which one has little role in pathogenesis of benign prostatic hyperplasia?
- (1) Androgen
  - (2) Estrogen
  - (3) Growth factors
  - (4) Stromal epithelial interaction
92. Most common viable malignancy in a post chemotherapy NSGCT relapse is -
- (1) teratoma
  - (2) yolk sac tumor
  - (3) choriocarcinoma
  - (4) adenocarcinoma
93. Which of the following occupation has the highest relative risk of bladder cancer?
- (1) Tobacco worker
  - (2) Dye worker
  - (3) Chimney sweeper
  - (4) Rubber worker
94. Which one is correct about intravesical bladder cancer therapy?
- (1) Perioperative intravesical chemotherapy reduces the risk of recurrence and progress of disease in low risk tumors
  - (2) BCG and chemotherapy have similar efficacy
  - (3) After bladder tumor resection chemotherapy should be given in all the patients.
  - (4) Intravesical BCG immunotherapy reduces both recurrence and progress of disease in high grade tumor
95. Most common risk factor for RCC -
- (1) radiation therapy
  - (2) anti-hypertensive medications
  - (3) tobacco use
  - (4) diuretics
96. What percentage of kidneys can be non functional after 2 years if left untreated with stag horn stone?
- (1) 25%
  - (2) 50%
  - (3) 75%
  - (4) 100%
97. You start second line ATT to a GUTB patient. After starting the treatment patient came in emergency with hallucinations, delusions and subsequently had one episode convulsion. Which drug is responsible for these side effects?
- (1) Streptomycin
  - (2) Capreomycin
  - (3) Kanamycin
  - (4) Cycloserine

98. Most aggressive form of primary hyperoxaluria is -
- (1) PH 1
  - (2) PH 2
  - (3) PH 3
  - (4) PH 4
99. True regarding use of CT in carcinoma prostate is -
- (1) separation between levator ani muscle and prostate is clearly defined
  - (2) does not visualize early metastasis
  - (3) intraprostatic anatomy is well demonstrated
  - (4) all
100. What is wrong about type I posterior urethral valve?
- (1) May have associated renal dysplasia
  - (2) It's leaflets arise from verumontanum and fuse anteriorly just distal to external urinary sphincter
  - (3) These are the hypertrophied inferior urethral crest formed by Wolffian duct
  - (4) Majority are sporadic but inheritance too as autosomal recessive
101. True for adrenal imaging -
- (1) MRI imaging of the adrenal glands is slightly superior to CT in terms of spatial resolution
  - (2) Contrast resolution of MRI via T1 – weighted and T2 –weighted images is superior to that of CT
  - (3) On T1 – weighted images, the normal adrenal gland is difficult to distinguish from retroperitoneal adipose tissue because of the presence of intracellular lipid with the gland
  - (4) On T2 – weighted images, the normal adrenal gland has a uniform intermediate signal intensity that is slightly less intense than that of the liver and renal cortical tissue
102. An advantage of alprostadil for intracavernosal pharmacotherapy is -
- (1) lower incidence of prolonged erection
  - (2) lower incidence of painful erection
  - (3) lower cost
  - (4) long term half-life once reconstituted
103. Which one is not the cause of increased specific gravity of urine?
- (1) Diabetes mellitus induced glycosuria
  - (2) Intravenous injection of iodinated contrast
  - (3) Deficiency of antidiuretic hormone
  - (4) Salt losing nephropathy
104. Which is nonurease producing organism?
- (1) Proteus vulgaris
  - (2) Pseudomonas aeruginosa
  - (3) Enterococcus faecalis
  - (4) Candida humicola

105. Which nomogram is used for predicting the stage of prostatic carcinoma?
- (1) Kattan
  - (2) Parton
  - (3) Tamada
  - (4) Schroder
106. A 40 year male patient of blunt injury abdomen came with the enhanced CT Scan which shows good arterial perfusion, normal appearing parenchyma and collecting system with medial hematoma. What is the probable site of injury?
- (1) Arterial
  - (2) Venous
  - (3) Pelvic ureteric junction
  - (4) Upper ureter
107. What is the role of intravesical mitomycin-C chemotherapy for high risk superficial bladder cancer?
- (1) Reduces the risk of progression
  - (2) Reduces the risk of recurrence
  - (3) Is preferrel over BCG, particularly for CIS
  - (4) None of the above
108. A patient comes to you with complaint of swelling over left scrotum. Upon examination there are dilated spermatic veins which are easily visible and decompress in supine position. What is the grade of varicocele?
- (1) Grade 1
  - (2) Grade 2
  - (3) Grade 3
  - (4) Grade 4
109. Which of the following statement is incorrect regarding urodynamic studies?
- (1) Not essential before surgical treatment of stress incontinence
  - (2) Essential when urodynamic obstruction is suspected
  - (3) Indicated in the diagnosis and management of Neurogenic voiding dysfunction
  - (4) Essential for diagnosis and management of over active bladder
110. A patient complains of total incontinence. His urine loss is unrelated to any physical activity. As per Stamey incontinence grading system it is -
- (1) Grade 1
  - (2) Grade 2
  - (3) Grade 3
  - (4) Grade 4
111. Which is not the usual complication of mid urethral mesh surgery?
- (1) Sexual dysfunction
  - (2) Mesh perforation in rectum
  - (3) Urinary retention
  - (4) Infection and pain

112. What doses at and above of ionizing radiation causes irreparable damage to spermatogenesis in exposed testis?
- (1) 2.5Gy
  - (2) 5Gy
  - (3) 7.5Gy
  - (4) 10Gy
113. What is most common urologic complication after phallic reconstruction?
- (1) Urethral fistula
  - (2) Urethral stricture
  - (3) Stress incontinence
  - (4) Urge incontinence
114. Pain in the flaccid penis is usually due to -
- (1) peyronie's disease
  - (2) bladder or urethral inflammation
  - (3) calculi impacted in the distal ureter
  - (4) priapism
115. A person is a known case of pheochromocytoma. Classical triad will include all, EXCEPT-
- (1) Headache
  - (2) Episodic perspiration
  - (3) Tachycardia
  - (4) Flushing
116. Which statement is incorrect about enzalutamide -
- (1) it increases survival when used in non-metastatic castration resistant prostate cancer
  - (2) it is advised as a standard of care for metastatic costration sensitive prostate cancer
  - (3) it should not be used in androgen receptor splice variants AR-V7
  - (4) it increases AR mediated transcription
117. All are seen with tumor lysis syndrome, EXCEPT -
- (1) hyperuricemia
  - (2) hypercalcemia
  - (3) hyperphosphatemia
  - (4) hyperkalemia
118. Which one of the following statement is incorrect regarding the best measures for reduction of radiation exposure to the medical persons?
- (1) Reducing time of exposures
  - (2) maximizing distance from radiation source
  - (3) Shielding
  - (4) Increasing numbers of exposures

119. What is the typical microscopic picture of xanthogranulomatous pyelonephritis?
- (1) Eosinophilic cells with inflammatory cells
  - (2) Lipid laden histocytes with inflammatory cells
  - (3) Giant cells, fatty cells, with inflammatory cells
  - (4) Michaelis-Gutmann bodies cells with inflammatory cells
120. Possible causes of pneumaturia are following, EXCEPT one -
- (1) diverticulitis of bladder
  - (2) colon carcinoma
  - (3) recently done urinary tract instrumentation
  - (4) ectopic ureter
121. Patient with retention of urine on cystoscopy found to have large prostate with big median lobe, bladder has big bladder diverticula with variable size stones. Which approach will be the best to deal these problems?
- (1) Retropubic
  - (2) Suprapubic transvesical
  - (3) Transurethral
  - (4) Combination of (1) and (3)
122. All are true for cryoablation (CA) of renal tumor, EXCEPT -
- (1) Argon gas based system is used
  - (2) Target temperature is less than - 20°C
  - (3) A double freeze thaw cycle is used
  - (4) Each cycle should last for 8-10 minutes
123. Management of clinical stage I NASCT in 20 years old man who has undergone laproscopic RPLND and found to have 2 cm Lymph node -
- (1) Convert to an open procedure
  - (2) Abort the procedure and administer chemo.
  - (3) Perform a unilateral template dissection and administer chemotherapy
  - (4) Continue the procedure and perform a full bilateral dissection.
124. A hypochoic lesion of the prostate can be caused by all of the following, EXCEPT -
- (1) Granulomatous prostatitis
  - (2) Transition zone, benign prostatic hyperplasia nodule
  - (3) Prostate cancer
  - (4) Hematologic malignancies
125. What is the best energy source to be used in laproscopic surgeries for incising & hemostasis?
- (1) LASER
  - (2) Monopolar electrosurgical system
  - (3) Bipolar electrosurgical system
  - (4) Ultrasound based system

126. Various urinary bladder diseases have different histopathological finding. Match list I with list II and select the correct answer using the codes given below the lists –

- | List I  |  | List II   |  |
|---|--|---|--|
| (A) Dysplasia   |  | (1) Minimal atypia, cell polarity maintained nuclei mildly enlarged, cell wall thickness more than 7 layers |  |
| (B) Carcinoma in situ   |  | (2) Normal urothelial thickness umbrella cell present, polarity lost, nucleus enlarged                      |  |
| (C) Papillary Urothelial Neoplasm of Low Malignant Potential (PUNLMP) |  | (3) Severe nuclear atypia, cellular polarity lost, non cohesive cells, pleomorphism loss of umbrella cells  |  |
| (D) Low grade non muscle invasive tumor                               |  | (4) Papillary, fibrovascular increased cellular size, some nuclear atypia, mitotic figure occasional        |  |

- |     | A | B | C | D |
|-----|---|---|---|---|
| (1) | 1 | 2 | 3 | 4 |
| (2) | 2 | 3 | 1 | 4 |
| (3) | 3 | 1 | 4 | 2 |
| (4) | 3 | 2 | 4 | 1 |

127. Match list I with list II to select the correct embryological origin of various urogenital structures. Select correct answer by using the codes given below –

- | (List I)                        |  | (List II)                 |  |
|---------------------------------|--|---------------------------|--|
| (A) Testis                      |  | (1) Mesonephric tubules   |  |
| (B) Efferent ductules of testis |  | (2) Indifferent gonad     |  |
| (C) Appendix of testis          |  | (3) Intermediate mesoderm |  |
| (D) Kidney                      |  | (4) Mullerian duct        |  |

- |     | A | B | C | D |
|-----|---|---|---|---|
| (1) | 2 | 1 | 4 | 3 |
| (2) | 2 | 4 | 3 | 1 |
| (3) | 3 | 1 | 2 | 4 |
| (4) | 2 | 4 | 1 | 3 |

128. Which statement is not true regarding the success of shock wave lithotripsy for given renal stone size?

- (1) Placement of a ureteral stent improves the outcome
- (2) Precise intrarenal location other than lower pole does not affect the outcome
- (3) Stone hardness is important factor
- (4) Obstruction distal to stone negatively affect the outcome

129. At what level above spinal cord injury, bladder filling may precipitate autonomic dysreflexia -

- (1) S2 level
- (2) L4 level
- (3) T10 level
- (4) T6 level

130. All are relative indications for abdominal repair of VVF repair, EXCEPT -
- (1) Large fistula
  - (2) Need for ureteral reimplantation
  - (3) Radiation fistula
  - (4) Low fistula
131. You are taking testicular biopsy of azoospermic men with normal palpable testis, normal vas deferens and normal FSH. Which fixatives will you not use for testicular biopsy?
- (1) Bouin
  - (2) Zenker
  - (3) Collidine Buffered Glutaraldehyde
  - (4) Formaldehyde
132. Which is false about Erythropoiesis?
- (1) Reduced Erythropoiesis is common in CKD
  - (2) Erythropoiesis is inhibited by low circulating oxygen tension
  - (3) During chronic Inflammation, Erythropoiesis is decreased
  - (4) The Kidney makes most of the Erythropoietin in the body
133. A patient undergoing major surgical procedure, his prior platelet count was 62000/mm, during surgery there was diffuse oozing of blood noted, so what the appropriate hemostatic agent would be -
- (1) An oxidized regenerated cellulose agent
  - (2) Micro fibrillar collagen
  - (3) A topical thrombin agent
  - (4) A fibrin sealant
134. What is commonest site of penile cancers?
- (1) Glans
  - (2) Coronal sulcus
  - (3) Shaft
  - (4) Frenulum
135. Which test should always be considered in men with prevalent storage symptoms & history of smoking?
- (1) Urinalysis
  - (2) Serum PSA level
  - (3) Urine cytology
  - (4) Frequency volume charts

136. Most common accepted indication for core needle biopsy of renal mass -

- (1) renal cell carcinoma
- (2) renal oncocytoma
- (3) renal cyst
- (4) renal metastasis

137. Which is not true about ureteral urothelial tumor?

- (1) 70% in distal ureter
- (2) Bladder recurrence is 15% to 75% within 5 years
- (3) MRI is better than CT scan for distinguishing it from other pathology
- (4) Metastasis of disease is nearly zero at diagnosis

Choose the correct answer using the given codes -

- (1) 2, 3, 4
- (2) 1, 2
- (3) 2, 3
- (4) 3, 4

138. What are the main watershed areas in colon where anastomosis should be avoided?

- (1) Area near splenic flexure
- (2) Area near hepatic flexure
- (3) Middle part of transverse colon
- (4) Area near rectosigmoid junction

Select correct answer using -

- (1) 1, 2
- (2) 2, 4
- (3) 1, 4
- (4) 2, 3

139. Following are the common presentations in most of the benign renal mass, Except

- (1) Female gender
- (2) Incidental diagnosis
- (3) Older patient age
- (4) Smoking history

140. Classic triad of hypospadias includes all, EXCEPT -

- (1) Dorsally hooded foreskin
- (2) Proximal urethral meatus
- (3) Ventral penile curvature
- (4) Micropenis

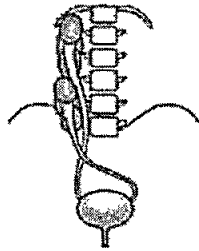


141. What is common mechanism behind Ureteral injury during stone basketing?
- (1) Ureteroscopy without dilating the ureteral orifice first.
  - (2) Ureteroscopy in nondilated systems
  - (3) Use of the holmium laser
  - (4) Persistence in stone basketing attempts in the face of a ureteral tear
142. A 50 year old man undergoes a partial nephrectomy for a 4cm renal mass. On pathologic evaluation, the mass is diffusely eosinophilic for establishing the diagnosis of oncocytoma which immunohistochemical will be helpful-
- (1) cytokeratin 7
  - (2) Estrogenic receptor
  - (3) HMB - 45
  - (4) Melan - A
143. Which one is not the function of mineralo-corticoids?
- (1) Renal sodium reabsorption
  - (2) Renal chloride reabsorption
  - (3) Renal potassium reabsorption
  - (4) Renal proton secretion
144. While doing open radical prostatectomy, where will you find neurovascular bundle of Walsh?
- (1) Between Prostatic fascia and Levator fascia
  - (2) Between Denonvilliers fascia and Prostatic fascia
  - (3) Between Denonvilliers fascia and Levator fascia
  - (4) None of the above
145. Which is not the indication for a metabolic stone evaluation?
- (1) Children with stone
  - (2) Recurrent stone former
  - (3) Amyloidosis with infection
  - (4) Patients having pathological fracture
146. Which of the following is not advisable for the treatment of genetic Tuberous sclerosis complex associated Angiomyolipoma (AML)?
- (1) Selective arterial embolization
  - (2) Cryoablation
  - (3) Electromagnetic ablation
  - (4) Everolimus
147. If PFUDO, after excision of the traumatic scan, the distance between the two ends of healthy urethra can be minimized by all of the following, EXCEPT -
- (1) Mobilizing the corpus spongiosum of the corpora cavernosa up to the corona of the glans
  - (2) Excision of buck fascia from the corpus spongiosum
  - (3) Dissection of the intracanal space down to the pubis
  - (4) Periosteal elevation and infrapubectomy

148. Which doing pyelolithotomy you accidentally injured the most anterior structure at the renal hilum. Which structure is injured?
- (1) Anterior segmental artery
  - (2) Renal vein
  - (3) Renal artery
  - (4) Renal pelvis
149. How will you manage a 3 month old child with ultrasound finding of dilated pelvis having 10 mm antero posterior diameter with pelvis and major clypeal dilated. Where ultrasonography expect above does not show any other positive finding?
- (1) Go for isotope renal scan, voiding cystourethrogram if both are normal then start prophylactic antibiotics
  - (2) Monthly ultrasonography, two monthly isotope renal scan and continuous prophylactic antibiotics
  - (3) Monthly ultrasonography, repeated voiding cystourethrogram three monthly for one year and continuous prophylactic antibiotics
  - (4) Repeat ultrasonography at 3 and 6 month and decide accordingly
150. Following are the risk factors for stone formation in kidney, Except one-
- (1) Diabetes
  - (2) Sarcoidosis
  - (3) Parkinson disease
  - (4) Family history of stones
151. A woman during UDS examination is found with absence of electromyography (EMG) recruitment with a squeezing of the clitoris, it suggests -
- (1) S<sub>2</sub> S<sub>3</sub> S<sub>4</sub> de-innervation
  - (2) dysfunction in the cauda – equina
  - (3) positive Bulbocavernosus Reflex (BCR)
  - (4) normal finding in 30% of normal females
152. All are associated with renal vein thrombosis, EXCEPT -
- (1) Elevated LDH
  - (2) Shrunken kidney
  - (3) Hematuria
  - (4) Flank pain
153. Nephrocalcin inhibits -
- (1) Growth of calcium oxalate monohydrate crystals
  - (2) Nucleation of calcium oxalate crystals
  - (3) Aggregation of calcium oxalate crystals
  - (4) All of the above

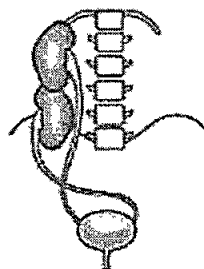
154. Which is the most common type of crossed renal ectopia with fusion?

(1)



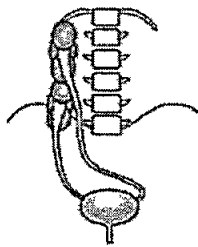
Unilateral fused kidney  
(inferior ectopia)

(2)



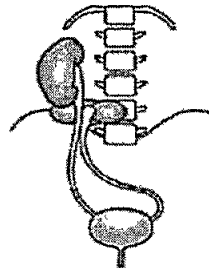
Sigmoid kidney  
(S-shaped kidney)

(3)



Unilateral fused kidney  
(superior ectopia)

(4)



L-shaped kidney

155. Which is correct about complications of hypospadias repair?

- (1) 60% of complications occur within 1 month after surgery
- (2) Potential risk factors for complication after hypospadias repair is proximal meatus location
- (3) Meatal stenosis is most common complication
- (4) Cecil – Culp repair for hypospadias may cause chordee

156. Which vaccine is US FDA approved for Genito urinary cancer?

- (1) Prostavac-VF for prostate cancer
- (2) IMA901, for kidney cancer
- (3) Gardasil, for human papillomavirus
- (4) Sipuleucel-T for prostate cancer

157. Which is considered as first line treatment for caliculi diverticular stone?

- (1) Shock wave lithotripsy
- (2) Percutaneous lithotomy
- (3) Ureterorenoscopy
- (4) Laproscopy

158. A female patient with uncomplicated cystitis is to be started on antibiotics. What is duration of therapy?

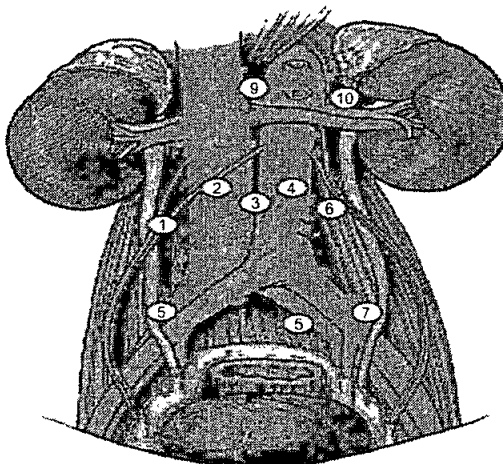
- (1) 3 days
- (2) 5 days
- (3) 7 days
- (4) 10 days

159. What are correct regarding vascular complications during laproscopic and robotic surgeries of the kidney?
- (1) Proper identification of vascular structure are important to prevent complications
  - (2) There should be meticulous surgical dissection
  - (3) Common areas for post-operative bleeding are bed of dissection, adrenal, gonadal, lumbar vessels
  - (4) Malfunction of equipment is also responsible for this complication
- Choose correct answer using given codes -
- (1) 1, 2, 3, 4
  - (2) 1, 2, 4
  - (3) 2, 3, 4
  - (4) 1, 3, 4
160. A man of 34 years presented with large retroperitoneal mass and raised LDH level without any other clinical finding. Which investigation should be done next for diagnosis?
- (1) Repeat tumor marker study
  - (2) CT Scan abdomen
  - (3) Biopsy of mass
  - (4) Ultrasonography of Scrotum
161. A 20 year old male has solid, painless, right intratesticular mass, confirmed in scrotal USG, the following are the tumor marker hca – 96 mU/mL (upper limit < 5 mU/mL)  $\alpha$  - Fetoprotein – 58 ng/ml (upper limit < 11 ng/ml) so what is most likely histologic finding in right testis?
- (1) Pure teratoma
  - (2) Pure seminoma
  - (3) Pure embryonal carcinoma
  - (4) Pure yolk sac tumor
162. False for primary mediastinal NSGCT in comparison to tumors of testes is -
- (1) carry extra copy of short arm of chromosome 12
  - (2) more sensitive to chemotherapy
  - (3) associated with elevations in serum  $\alpha$ -fetoprotein (AFP)
  - (4) associated with klinefelter syndrome
163. During insertion of veress needle you noticed vascular backflow upon aspiration. Which vessel is most likely to be injured?
- (1) Left iliac vein
  - (2) Right iliac vein
  - (3) Left iliac artery
  - (4) Right iliac artery

164. Choose the correct answer -
- (1) Thin descending limb of loop of Henle is poorly permeable whereas ascending thin limb is highly permeable to water
  - (2) Thin descending limb of loop of Henle is highly permeable whereas ascending thin limb is impermeable to water
  - (3) Thin descending limb of loop of Henle is highly permeable to  $\text{Na}^+$  and  $\text{Cl}^-$
  - (4) Thin ascending limb of loop of Henle is impermeable to  $\text{Na}^+$  and  $\text{Cl}^-$
165. Patient with vaginal vault prolapse and no symptoms of stress urinary incontinence should undergo a sacrocolpopexy only (i.e. no sling) -
- (1) regardless of preoperative testing
  - (2) if stress urinary incontinence was only demonstrated on physical examination
  - (3) if no stress urinary incontinence was demonstrated on either physical examination or urodynamic testing
  - (4) if they had a previous history of a bulking agent
166. Sentinel lymph node in Ca penis is -
- (1) superomedial to the junction of the saphenous and femoral veins
  - (2) superolateral to the junction of the saphenous and femoral veins
  - (3) inferomedial to the junction of the saphenous and femoral veins
  - (4) inferolateral to the junction of the saphenous and femoral veins
167. The most common aetiology for ESRD in the United States is -
- (1) Focal Segmental Glomerulosclerosis (FSGS)
  - (2) Membranoproliferative glomerulonephritis (type 2)
  - (3) Membranous glomerulonephritis
  - (4) Diabetes mellitus
168. Which is not a predictor of cancer-specific survival after nephrectomy for RCC?
- (1) Pathologic stage
  - (2) Tumor size
  - (3) Nuclear grade
  - (4) Patient age
169. In a patient of RCC, there is an isolated right – sided varicocele. You suspect tumor thrombus and advise the patient for MRI scan. The scan shows involvement of intrahepatic portion of IVC below the diaphragm. What is the level of this thrombus?
- (1) Stage I
  - (2) Stage II
  - (3) Stage III
  - (4) Stage IV

170. Identify correct statement about flap and graft used for urethroplasty –
- (1) Onlay flap procedure has superior outcome than graft
  - (2) In onlay procedure both graft and flap have equivalent success rate
  - (3) Tubularized graft and flap have equivalent outcome
  - (4) Tubularized flap has superior outcome as compared to graft
- Select the correct answer using the given codes -
- (1) 1, 3
  - (2) 2, 4
  - (3) 2, 3
  - (4) 1, 4
171. Embryological adrenal cortex arises from -
- (1) urogenital ridge
  - (2) neural crest
  - (3) metanephron
  - (4) None of the above
172. Ureteral calcification in Schistosomiasis is -
- (1) intramural with dilated ureter
  - (2) intramural with non-dilated ureter
  - (3) extramural with dilated ureter
  - (4) extramural with non-dilated ureter
173. What is advantage of supine PCNL over prone PCNL?
- (1) Improved pulmonary mechanics
  - (2) A large horizontal working surface
  - (3) Easier entry into upper pole calyces
  - (4) Reduced pressure in the collecting system
174. In patients with unilateral renal agenesis, the ipsilateral adrenal gland is commonly -
- (1) found just inside the ipsilateral internal inguinal ring
  - (2) found in its normal anatomic position in the upper retroperitoneum
  - (3) absent
  - (4) found in association with the contralateral adrenal gland
175. All are the absolute indication for operative management in renal trauma, EXCEPT -
- (1) Expanding/pulsatile hematoma
  - (2) Suspected renal vascular pedicle avulsion
  - (3) Ureteropelvic junction avulsion
  - (4) Urinary extravasation from parenchymal injury.

176. A patient of Nonseminoma germ cell tumor, on imaging found to have isolated frontal lobe brain metastasis. Which is the best treatment option?
- (1) Excision – As complete cure possible
  - (2) Chemotherapy – As it will take off all micrometastasis
  - (3) Radiation – As it will avoid tumor bleeding
  - (4) Low dose radiation and 2 cycles of chemotherapy – As non seminoma is non radio sensitive
177. Factors responsible for recovery of erectile function after radical prostatectomy are all, EXCEPT -
- (1) age of patient
  - (2) duration of surgery
  - (3) status of potency preoperatively
  - (4) ability to preserve both NVB
178. What is the name of node marked as 6?



- (1) Paraaortic
  - (2) Preaortic
  - (3) Inter – aortocaval
  - (4) Paracaval
179. Urine production begins at -
- (1) 8<sup>th</sup> week of gestation
  - (2) 10<sup>th</sup> week of gestation
  - (3) 12<sup>th</sup> week of gestation
  - (4) 14<sup>th</sup> week of gestation
180. During VVF repair transvaginally, how can we access posterior peritoneum -
- (1) Posterior Fornix
  - (2) Anterior Fornix
  - (3) Rectovaginal septum
  - (4) Lateral fornices

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**Space for Rough Work**