Asst. Reefessor. Comp. Exam- 2024 & Source (Med. Edu Dept.) Exam Date 03/07/2025

790309

प्रश्न-पस्तिका संख्या व बारकोड / Question Booklet No. & Barcode

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

Sub: General Surgery

पस्तिका में पष्टों की संख्या . 24

Number of Pages in Booklet: 24

पस्तिका में प्रश्नों की संख्या

No. of Questions in Booklet : 150



अधिकतम अंक : 150

Paper Code: 56

समय : 02:30 घण्टे + 10 मिनट अतिरिक्त*

Time: 02:30 Hours + 10 Minutes Extra*

Maximum Marks: 150 प्रश्न-पुस्तिका के पेपर की सील/पॉलिथीन बैंग को खोलने पर प्रश्न-पत्र हल करने से पूर्व परीक्षार्थी यह सुनिश्चित कर लें कि :

प्रश्न-पुस्तिका संख्या तथा ओ.एम.आर. उत्तर-पत्रक पर अंकित बारकोड संख्या समान हैं।

• प्रथन-पुस्तिका एवं ओ.एम.आर. उत्तर-पत्रक के सभी पुष्ठ व सभी प्रथन सही मुद्रित हैं । समस्त प्रथन, जैसा कि ऊपर वर्णित है, उपलब्ध हैं तथा कोई भी पुष्ठ कम नहीं है / मुद्राण त्रूटि नहीं है । किसी भी प्रकार की विसंगति या दोषपूर्ण होने पर परीक्षार्थी वीक्षक से दूसरा प्रथन-पत्र प्राप्त कर लें । यह सुनिश्चित करने की जिम्मेदारी अभ्यर्थी की होगी । परीक्षा प्रारम्भ होने के 5 मिनट पश्चात ऐसे किसी दावे/आपत्ति पर कोई विचार नहीं किया जायेगा।

On opening the paper seal/polythene bag of the Question Booklet before attempting the question paper, the candidate should ensure that: Question Booklet Number and Barcode Number of OMR Answer Sheet are same.

All pages & Questions of Question Booklet and OMR Answer Sheet are properly printed. All questions as mentioned above are available and no page is missing/misprinted.

If there is any discrepancy/defect, candidate must obtain another Question Booklet from Invigilator. Candidate himself shall be responsible for ensuring this. No claim/objection in this regard will be entertained after five minutes of start of examination.

परीक्षार्थियों के लिए निर्देश

- 1. प्रत्येक प्रश्न के लिये एक विकल्प भरना अनिवार्य है ।
- सभी प्रश्नों के अंक समान हैं। 2.
- प्रत्येक प्रश्न का मात्र एक ही उत्तर दीजिए । एक से अधिक उत्तर देने की दशा में प्रश्न के उत्तर को गलत माना जाएगा।
- OMR उत्तर-पत्रक इस प्रश्न-पुस्तिका के अन्दर रखा है । जब आपको प्रश्न-पुस्तिका खोलने को कहा जाए, तो उत्तर-पत्रक निकाल कर ध्यान से केवल नीले बॉल पॉइंट पेन से विवरण भरें ।
- कपया अपना रोल नम्बर ओ.एम.आर. उत्तर-पत्रक पर सावधानीपूर्वक सही भरें । गलत रोल नम्बर भरने पर परीक्षार्थी स्वयं उत्तरदायी होगा ।
- ओ.एम.आर. उत्तर-पत्रक में करेक्शन पेन/व्हाईटनर/सफेदा का उपयोग निषिद्ध है।
- प्रत्येक गलत उत्तर के लिए प्रश्न अंक का 1/3 भाग काटा जायेगा । गलत उत्तर से तात्पर्य अशद्ध उत्तर अथवा किसी भी प्रश्न के एक से अधिक उत्तर से है ।
- 8. प्रत्येक प्रश्न के पाँच विकल्प दिये गये हैं, जिन्हें क्रमश: 1, 2, 3, 4, 5 अंकित किया गया है । अभ्यर्थी को सही उत्तर निर्दिष्ट करते हुए उनमें से केवल एक गोले (बबल) को उत्तर-पत्रक पर नीले बॉल पॉइंट पेन से गहरा करना है।
- 9. यदि आप प्रश्न का उत्तर नहीं देना चाहते हैं तो उत्तर-पत्रक में पाँचवें (5) विकल्प को गहरा करें । यदि पाँच में से कोई भी गोला गहरा नहीं किया जाता है, तो ऐसे प्रश्न के लिये प्रश्न अंक का 1/3 भाग काटा जायेगा ।
- 10.* प्रश्न-पत्र हल करने के उपरांत अभ्यर्थी अनिवार्य रूप से ओ.एम.आर. उत्तर-पत्रक जाँच लें कि समस्त प्रश्नों के लिये एक विकल्प (गोला) भर दिया गया है। इसके लिये ही निर्धारित समय से 10 मिनट का अतिरिक्त समय दिया गया है।
- 11. यदि अभ्यर्थी 10% से अधिक प्रश्नों में पाँच विकल्पों में से कोई भी विकल्प अंकित नहीं करता है तो उसको अयोग्य माना जायेगा ।
- 12. मोबाइल फोन अथवा अन्य किसी इलेक्ट्रोनिक 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 ।

चेतावनी : अंगर 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 राजस्थान सार्वजनिक परीक्षा (भर्ती में अनुचित साधनों की रोकथाम अध्यपाय) अधिनियम, 2022 तथा अन्य प्रभावी कानून एवं आयोग के नियमों-प्रावधानों के तहत कार्यवाही की जाएगी। साथ ही आयोग ऐसे अभ्यर्थी को भविष्य में होने वाली आयोग की समस्त परीक्षाओं से विवर्जित कर सकता है।

INSTRUCTIONS FOR CANDIDATES

- It is mandatory to fill one option for each question.
- 2 All questions carry equal marks.
- 3. Only one answer is to be given for each question. If more than one answers are marked, it would be treated as wrong answer.
- The OMR Answer Sheet is inside this Question Booklet. When you are directed to open the Question Booklet, take out the Answer Sheet and fill in the particulars carefully with Blue Ball Point Pen only
- Please correctly fill your Roll Number in OMR Answer Sheet. Candidates will themselves be responsible for filling wrong
- Use of Correction Pen/Whitener in the OMR Answer Sheet is strictly forbidden.
- 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.
- Each question has five options marked as 1, 2, 3, 4, 5. You have to darken only one circle (bubble) indicating the correct answer on the Answer Sheet using BLUE BALL POINT PEN.
- If you are not attempting a question then you have to darken the circle '5'. If none of the five circles is darkened, one third (1/3) part of the marks of question shall be deducted.
- 10.* After solving question paper, candidate must ascertain that he/she has darkened one of the circles (bubbles) for each of the questions. Extra time of 10 minutes beyond scheduled time, is provided for this.
- A candidate who has not darkened any of the five circles in more than 10% questions shall be disqualified.
- 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 with as per rules.

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 be liable to be prosecuted under Rajasthan Public Examination (Measures for Prevention of Unfair means in Recruitment) Act, 2022 & any other laws applicable and Commission's Rules-Regulations. Commission may also debar him/her permanently from all future examinations.

उत्तर-पत्रक में दो प्रतियाँ हैं - मुल प्रति और कार्बन प्रति। परीक्षा समाप्ति पर परीक्षा कक्ष छोड़ने से पूर्व परीक्षार्थी उत्तर-पत्रक की दोनों प्रतियाँ वीक्षक को साँपेंगे, परीक्षार्थी स्वयं कार्बन प्रति अलग नहीं करें । वीक्षक उत्तर–पत्रक की मल प्रति को अपने पास जमा कर, कार्बन प्रति को मल प्रति से कट लाइन से मोड कर सावधानीपूर्वक अलग कर परीक्षार्थी को सौंपेंगे, जिसे परीक्षार्थी अपने साथ ले जार्येगे। परीक्षार्थी को उत्तर-पत्रक की कार्बन प्रति चयन प्रक्रिया पूर्ण होने तक सुरक्षित रखनी होगी एवं आयोग द्वारा माँगे जाने पर प्रस्तुत करनी होगी।

- 1. A 44 year old man with primary hyperparathyroidism is undergoing a focused parathyroidectomy. How can one confirm that adequate parathyroid gland has been removed?
 - (1) PTH falls more than 20% within 10 minutes of removal of gland.
 - (2) PTH falls less than 50% within 10 minutes of removal of gland.
 - (3) PTH falls more than 10% within 10 minutes of removal of gland.
 - (4) PTH falls more than 30% within 10 minutes of removal of gland.
 - (5) Question not attempted
- 2. Referred pain from small intestine is usually felt at the level
 - (1) T8
 - (2) T10
 - (3) T12
 - (4) L1
 - (5) Question not attempted
- 3. As a 1st year resident assisting in a superficial parotidectomy, you have been asked to identify the facial nerve trunk with respect to a 'Conley's pointer'. What is this pointer related to?
 - (1) Squamotympanic fissure
 - (2) Mastoid process
 - (3) Tragus of external acoustic canal
 - (4) Styloid process
 - (5) Question not attempted

- 4. Characteristic haemolymphatic collection between the fascial plane is called
 - (1) Jean-Nicholas lesion

Before Comp Exam - 2024

med. Edw Dept.) Brown Date oslopous

- (2) Morel-Lavales lesion
- (3) Barbara-Judy lesion
- (4) Waterloo-Doreen lesion
- (5) Question not attempted
- 5. Ischemia of brain results when cerebral blood flow rate drops below _____ for every 100 g of brain tissue.
 - (1) 20 ml/min
 - (2) 40 ml/min
 - (3) 55 ml/min
 - (4) 75 ml/min
 - (5) Question not attempted
- 6. A patient was brought to the emergency room following a road traffic accident. You notice that the senior resident uses the trauma scoring system which involves the absorption of energy and duration of ischemia of the injury as one of the components. Which of the following trauma scoring systems is being used here?
 - (1) Mangled extremity severity score
 - (2) Injury severity score
 - (3) Revised trauma score
 - (4) Trauma and injury severity score
 - (5) Question not attempted

- 7. Which among the following is correct regarding adequate thyroid FNAC sampling?
 - (1) 6 follicular clusters with 10 cells each
 - (2) 3 follicular clusters with 10-15 cells each
 - (3) 10 follicular clusters with 6-8 cells each
 - (4) 12 follicular clusters with 10-12 cells each
 - (5) Question not attempted
- 8. Ileus implies failure of peristalsis and thus a functional obstruction without mechanical obstruction. It can occur in association with following metabolic electrolyte imbalance that is
 - (1) Hypokalemia, Hyponatremia, Hypomagnesemia
 - (2) Hypokalemia, Hypernatremia, Hypomagnesemia
 - (3) Hyperkalemia, Hyponatremia, Hypomagnesemia
 - (4) Hypokalemia, Hypocalcemia, Hypomagnesemia
 - (5) Question not attempted
- 9. A 75 year old man presented with urinary hesitancy and poor flow of urine. On per-rectal examination, a suspicious multiple hard nodule within one lobe of the prostate were felt. Serum PSA Levels were found to be elevated. TRUS-guided prostatic biopsy report shows grade 3 prostatic cancer. What is the preferred treatment option for this patient?
 - (1) Active surveillance/monitoring
 - (2) Radical prostatectomy
 - (3) External beam radiation therapy
 - (4) Androgen deprivation therapy
 - (5) Question not attempted

- 10. Which of the following is the commonest cause of pathological nipple discharge in a non-lactating woman?
 - (1) Duct ectasia
 - (2) Intraductal papilloma
 - (3) Paget's disease of breast
 - (4) Galactorrhea
 - (5) Question not attempted
- 11. In adults neck masses greater than 2 cm have a probability of being malignant greater than
 - (1) 20%
 - (2) 40%
 - (3) 60%
 - (4) 80%
 - (5) Question not attempted
- 12. Which of the following formulas will you use to calculate the amount of albumin to be administered to a patient with burns?
 - (1) Parkland formula
 - (2) Muir and Barclay formula
 - (3) Evan's formula
 - (4) Wallace formula
 - (5) Question not attempted
- 13. Thickness of pleural fluid in pleural cavity is
 - (1) 5 μm
 - (2) $10 \, \mu m$
 - (3) 20 μm
 - (4) 30 μm 1 lo 2 hod bans
 - (5) Question not attempted

- 14. Which of the following would be the most commonly encountered ectopic tissue in Meckel's diverticulum?
 - (1) Gastric and pancreatic
 - (2) Colonic and pancreatic
 - (3) Gastric and colonic
 - (4) Thyroid and lung
 - (5) Question not attempted
- 15. In patients with which of the following symptoms is Nesbitt's procedure done?
 - (1) Penile deformity, painful erection and palpable penile plaques
 - (2) Downward directed stream of urine with bending of penis
 - (3) Painful erection of penis > 4 hours
 - (4) Popping sound during sexual intercourse, painful and flaccid penis
 - (5) Question not attempted
- **16.** What is the most common cause of testicular torsion?
 - (1) Inversion of the testis
 - (2) Presence of remnant of mullerian duct
 - (3) High investment of tunica vaginalis
 - (4) Pedicle between epididymis and body of testis
 - (5) Question not attempted

- 17. What is the most common site of gastric adenocarcinoma in the Japanese population?
 - (1) Cardia
 - (2) Body
 - (3) Antrum
 - (4) Fundus
 - (5) Question not attempted
- 18. A 25 year old male is brought to the emergency room after a road accident. He is pale traffic and a blood diaphoretic has pressure of 88/60 mmHg with a heart rate of 128 bpm. What is the appropriate initial most management?
 - (1) Administer IV fluids and reassess
 - (2) Perform an emergency CT scan of the abdomen
 - (3) Give vasopressors immediately
 - (4) Start IV antibiotics
 - (5) Question not attempted
- 19. Result of thyroid function test:
 TSH undetectable, free T4 High,
 Free T3 normal suggest
 - (1) Thyrotoxic
 - (2) Myxoedema
 - (3) Suppressive T4 therapy
 - (4) T₃ toxicity
 - (5) Question not attempted

- 20. A patient with blunt abdominal trauma is found to have free fluid in the abdomen on FAST (Focused Assessment with Sonography for Trauma) but is hemodynamically stable. What is the next best step?
 - (1) Immediate laparotomy
 - (2) Repeat FAST in 30 minutes
 - (3) CT scan of the abdomen with contrast
 - (4) Diagnostic peritoneal lavage
 - (5) Question not attempted
- 21. In a patient with spinal cord injury at the level of T4, which of the following signs is most suggestive of neurogenic shock?
 - (1) Hypotension with bradycardia
 - (2) Hypotension with tachycardia
 - (3) Increased central venous pressure
 - (4) Cool, clammy skin
 - (5) Question not attempted
- 22. Homonymous hemianopia with central sparing occurs with which brain tumour?
 - (1) Pituitary adenoma
 - (2) Vestibular schwannoma
 - (3) Occipital glioma
 - (4) Parietal medulloblastoma
 - (5) Question not attempted
- 23. All of the following are gastrointestinal manifestations seen in patients with FAP except:
 - (1) Gastric and duodenal polyps
 - (2) Fundal gland hyperplasia in gastric polyp
 - (3) Epidermoid cyst
 - (4) Esophageal carcinoma
 - (5) Question not attempted

- 24. A 45 year old male patient complained of fever with abdominal pain in the lower left quadrant. A CT scan was advised which showed sigmoid diverticulitis with a large, walled-off pelvic abscess. All of the following management options are included except:
 - (1) Administration of antibiotics
- (2) Percutaneous drainage
- (3) Hartmann's procedure
 - (4) Primary anastomosis
 - (5) Question not attempted
- 25. A chronic alcoholic presents with regurgitation and retrosternal pain. Endoscopic biopsy confirms Barrett's esophagus without dysplasia. What is most appropriate management in this case?
 - (1) Proton-pump inhibitors with 2 yearly surveillance
 - (2) Prophylactic esophagectomy
 - (3) Endoscopic radiofrequency ablation
 - (4) Observation with 6 monthly surveillance
 - (5) Question not attempted
- 26. Gastric conduit created after oesophageal resection done for oesophageal cancer is primarily based upon
 - (1) Right gastroepiploic artery
 - (2) Left gastroepiploic artery
 - (3) Left gastric artery
 - (4) Right gastric artery
 - (5) Question not attempted

- 27. The SNAP principle is used for the management of
 - (1) Wound dehiscence
 - (2) Pseudomembranous colitis
 - (3) High-output fistula
 - (4) Ischemic colitis
 - (5) Question not attempted
- 28. Pain caused by gentle traction of right testicle in a case of acute appendicitis in older adults is known as:
 - (1) Danforth sign
 - (2) Ransohoff sign
 - (3) Ten horn sign
 - (4) Claybrook sign
 - (5) Question not attempted
- 29. Cryoprecipitate includes
 - (1) Factor 2
 - (2) Factor 7
 - (3) Factor 9
 - (4) vWF
 - (5) Question not attempted
- **30.** A man with severe burn injuries is admitted to the ward. Proton-pump inhibitors are started. Which ulcer is being prevented?
 - (1) Cushing's ulcer
 - (2) Curling's ulcer
 - (3) Buruli's ulcer

- (4) Marjolin's ulcer
- (5) Question not attempted

- 31. Which of the following commonly used regional flaps in head and neck reconstruction does not contain a fasciocutaneous component in it?
 - (1) Supraclavicular artery island
 - (2) Temporoparietal fascia
 - (3) Pectoralis major
 - (4) Deltopectoral flap
 - (5) Question not attempted
- **32.** Calcium is transported in the blood bound to plasma proteins, largely albumin is
 - (1) 15%
 - (2) 40%
 - (3) 45%
 - (4) 55%
 - (5) Question not attempted
- **33.** What is the most common complication following haemorrhoidectomy?
 - (1) Urinary retention
 - (2) Fecal incontinence
 - (3) Infection
 - (4) Delayed haemorrhage
 - (5) Question not attempted
- **34.** Surgical treatment of Giant Fibroadenoma includes all Except
 - (1) wide local excision with margin of 2 cm
 - (2) removal of overlying skin
 - (3) removal of pectoralis major
 - (4) removal of ipsilateral axillary lymph nodes.
 - (5) Question not attempted

- **35.** Familial breast cancer refers to breast cancer in patients with family history but
- (1) related to inheritance of major autosomal dominant gene.
 - (2) without a germline mutation.
 - (3) associated with chromosomal amplification.
- (4) associated with point mutation.
 - (5) Question not attempted
- 36. A 30 year old nulliparous female presented with nodularity and tenderness in the left breast. Core biopsy was done after imaging. The histological diagnosis was not in concordance with imaging findings. What should be the next procedure planned for the patient?
 - (1) Open surgical biopsy
 - (2) Repeat imaging by 3D mammography
 - (3) Stereotactic core biopsy
 - (4) Wait and watch
 - (5) Question not attempted
- 37. True about cutting mode of diathermy—
 - (1) Higher voltage current
 - (2) Interrupted current
 - (3) Use for achieving haemostasis
 - (4) Minimal lateral spread of energy
 - (5) Question not attempted

- **38.** In timeline principle of trauma, time zero signifies
 - Seconds after the application of external force of injury.
 - (2) Seconds before the application of external force of injury.
 - (3) At the time of application of injury.
 - (4) None of these
 - (5) Question not attempted
- 39. Heart lung transplantation is characterized by simultaneous replacement of heart & lung in patients suffering from end stage cardiac & pulmonary disease. Which of the following condition does not fall in above transplantation?
 - (1) Eisenmenger syndrome
 - (2) Sarcoidosis of heart & lung
 - (3) Primary pulmonary hypertension with irreversible right sided heart failure
 - (4) Dilated cardiomyopathy
 - (5) Question not attempted
- 40. A 22 year old male is diagnosed with tuberculosis. Which of the following features will make a primary tuberculosis more likely?
 - (1) Mediastinal enlargement
 - (2) Septal thickening
 - (3) Upper zone cavitation
 - (4) Apical consolidation
 - (5) Question not attempted

- **41.** Which of the following procedure is largely malabsorbtive and also restrictive?
 - (1) Sleeve gastrectomy
 - (2) Roux-en-Y gastric bypass
 - (3) Biliopancreatic diversion
 - (4) Laparoscopic adjustable gastric banding
 - (5) Question not attempted
- 42. Not a component of Cushing's triad
 - (1) Hypotension
 - (2) Bradycardia
 - (3) Irregular respiration
 - (4) Tachypnea
 - (5) Question not attempted
- 43. Collar Button ulcer is characteristic of
- (1) Crohn's disease
 - (2) Typhoid many malaged
 - (3) Intestinal TB
 - (4) Ulcerative collitis
 - (5) Question not attempted
- 44. Which of the following is not a criteria for Damage Control Surgery?
 - (1) Acidosis(pH < 7.2)
 - (2) Coagulopathy
 - (3) Transfusion approaching 10 units
 - (4) Injury severity score > 36
 - (5) Question not attempted
- **45.** Which type of bile duct injury can be managed by ERCP stenting only?
 - (1) Strasberg type C
 - (2) Strasberg type B
 - (3) Strasberg type D
 - (4) Strasberg type E

- **46.** Correct statement about dumping syndrome
 - (1) Early dumping syndrome is more common with billroth 1
 - (2) Late dumping is due to rapid gastric emptying
 - (3) Late dumping is more common phenomenon
 - (4) Early dumping is due to rapid passage of high osmolarity food from stomach to small intestine.
 - (5) Question not attempted
- 47. The Rockall score for upper gastrointestinal bleeding severity score for age < 60 is
 - (1) 0
 - (2) 1
 - (3) 2
 - (4) 3
 - (5) Question not attempted
- 48. Mucosal/Submucosal ulceration seen in what grade of Zargar grading for caustic ingestion?
 - (1) 1
 - (2) 2
 - (3) 3
 - Question not attempt (4)
 - (5) Question not attempted
- 49. Post operative ileus in patients undergoing elective major abdominal surgery occurs in
 - (1) 10 20%
 - (2) 30 40%
 - (3) 41 50%
 - (4) 51-60%
 - (5) Question not attempted

50.	Cae	cal rapid decompression is	5
Tall	war	ranted when caecal diameter is	Marita consciona in consci
	(1)	4 cm started rieg (2)	Service and Co.
	(2)	6 cm isd a base of 2	arrai confront
	(3)	8 cm	(at 1000) (bit
	(4)	12 cm	The state of the s
	(5)	Question not attempted	al Shape (Switch, Sub-
	Total volume of CSF is		
	(1)	100 ml	a charge card a

200 ml (2)

- (3) 150 ml
- (4) 250 ml
- (5) Question not attempted
- of 52. Scaphocephaly craniosynostosis involves which suture?
 - Saggital (1)
 - (2) Lambdoid
 - (3) Metopic
 - Coronal (4)
 - (5) Question not attempted
- Spinal cord ends at 53.
 - (1) T12
 - (2) L1
 - (3) L2
 - (4) L3
 - (5) Question not attempted
- Self reported constipation for 54. female to male ratio
 - 2:1
 - (2) 4:1
 - (3) 1:2
 - (4) 1:4

56

- 5. A male patient aged 45 years presented with a single cavity in right lobe of liver. He presented with abdominal pain dyspepsia on examination and vomiting. hepatomegaly along with eosinophilia was present primarily. What surgical procedure can be done which is most effective treatment?
 - (1) PAIR
 - with (2)Cyst evacuation omentopexy
 - Pericystectomy
 - Partial hepatectomy (4)
 - Question not attempted
- 56. Annular pancreas result from
 - Abberant migration of dorsal pancreatic bud
 - (2) Abberant migration of ventral pancreatic bud
 - Failure of dorsal and ventral pancreatic duct to fuse during embryogenesis
 - Abnormal PDX1 expression (4)
 - (5) Question not attempted
- If a patient requires emergency survive but no surgery attendants are available to give consent, what will you do?
 - (1) Will operate without consent
 - Will wait for attendant to reach hospital
 - Will not operate (3)
 - Will get consent from hospital (4) authorities
 - (5) Question not attempted

- 58. Pulsatile bone tumours are all of these except:
 - (1) Osteosarcoma
 - (2) Renal and thyroid metastasis
 - (3) Aneurysmal bone cyst
 - (4) Osteoid osteoma
 - (5) Question not attempted
- **59.** Prophylactic cholecystectomy may be preferred for asymptomatic cholelithiasis in following situations except:
 - (1) Stone < 2 cm
 - (2) Choledocholithiasis
 - (3) Hereditary spherocystosis
 - (4) Transplant patient (During transplantation)
 - (5) Question not attempted
- **60.** Which of the following is false about tetanus?
- (1) Causative organism is gram positive spore forming bacteria
 - (2) Endotoxin binds to neuromuscular junction
 - (3) Incubation period of 7 days
 - (4) Symptoms include spasm of facial muscles.
 - (5) Question not attempted
- 61. A 50 year old female came with complaints of lump in the right breast. On examination she was found to have 4 cm lump in right breast with peau de orange appearance with a 2 cm fixed lump in the right axilla. What is the TNM staging of this patient?
 - (1) T4aN1
 - (2) T4bN1
 - (3) T4bN2a
 - (4) T4cN2a

- **62.** Catabolic phase after surgery is characterized by all except:
 - (1) Hypovolemia
 - (2) Hyperthermia
 - (3) Decreased basal metabolic rate
 - (4) Reduced cardiac output
 - (5) Question not attempted
- **63.** Keloid formation is an abnormality of which phase of wound healing?
 - (1) Haemostasis
 - (2) Inflammation
 - (3) Proliferation
 - (4) Maturation
 - (5) Question not attempted
- **64.** Most common type of polyps of rectum
 - (1) Hyperplastic polyp
 - (2) Serrated adenomas polyp
 - (3) Tubular adenomas polyp
 - (4) Villous adenomas polyp
 - (5) Question not attempted
- 65. A 45 year old female presents to the emergency department with complaint of severe abdominal pain epigastric region which is radiating to back. On investigation her S. amylase and lipase levels raised. Suspecting acute a CT pancreatitis. scan was performed which shows heterogeneous pancreas peripancreatic fat stranding and single peripancreatic fluid collection with necrosis of 40% What is the CTSI score of this patient?
 - (1) 6/10
 - (2) 7/10
 - (3) 8/10
 - (4) 9/10
 - (5) Question not attempted

Most common cause of hemobillia 71. All of the following are treatment 66. options for pilonidal sinus except: Blunt abdominal trauma (1) (2)Penetrating trauma (1) Limberg flap Iatrogenic trauma (3) (2) Bascom cleft lift. (4) Ruptured hemangioma Delorme procedure (3) (5) Question not attempted (4) Karydakis procedure Most common cause of intestinal 67. (5) Question not attempted obstruction is (1) Adhesions Secondary haemorrhage 72. Obstructed hernia (2) occurs at (3) Malignancy Faecal impaction (1) 24 hours (4) Question not attempted (5)(2) 6 hours 48-72 hours (3) 68. All of the following are perineal prolapse procedures for rectal (4) 7-14 days except: Question not attempted (5)(1) Thiersch wiring Goldberg procedure (2) Which of the following is not a 73. (3) Delorme's operation metabolic abnormality (4) Altemeier's procedure gastrectomy? Question not attempted (5) Weight loss (1) 69. Injuries to the bile ducts are Osteoporosis (2) recognised at the time of operation Hypokalemia (3) in 1% (4) Anemia (1) (2) 3% Question not attempted (3)5% (4) 15% The most common cause of short 74. Question not attempted (5)bowel syndrome in neonates is bowel resection secondary to All the following 70. materials are absorbable except: (1) Mid gut volvulus (1) Vicryl Necrotizing enterocolitis (2) (2) Prolene Mesenteric occlusion (3) Monocryl (3) Duodenal diverticula (4) (4) PDS

(5) Question not attempted

(5) Question not attempted

- **75.** All of the following are characteristic of SMA syndrome except:
 - (1) Also called Wilkie syndrome
 - (2) Compression of 3rd part of duodenum
 - (3) Increased aorto-mesenteric angle
 - (4) Surgery of choice is duodenojejunostomy
 - (5) Question not attempted
- 76. According to NICE guidelines, all of the following are indications for CT imaging for head injury within 1 hour except:
 - (1) Focal neurological deficit
 - (2) Retrograde amnesia > 30 minutes
 - (3) More than one episode of vomiting
- (4) Suspected base of skull fracture
 - (5) Question not attempted
- 77. True oesophageal diverticula among the following:
 - (1) Pharyngoesophageal diverticula
 - (2) Epiphrenic diverticula
 - (3) Mid-esophageal diverticula
 - (4) Zenker's diverticula
 - (5) Question not attempted
- 78. All of the following are storage lower urinary tract symptoms except:
 - (1) Hesitancy
 - (2) Urgency
 - (3) Frequency
 - (4) Nocturia
 - (5) Question not attempted

- **79.** What is not true regarding a Bochdalek hernia?
 - (1) Early respiratory distress leading to early diagnosis and treatment are good prognostic sign.
 - (2) The contents of hernial sac commonly includes retroperitoneal fat, left kidney or spleen.
 - (3) The condition is diagnosed prenatally by ultrasonography.
 - (4) Pericardial cyst is a differential diagnosis.
 - (5) Question not attempted
- **80.** All are bacterial causes of splenic enlargement except:
 - (1) Typhus
 - (2) Psitacosis
 - (3) Weil's disease
 - (4) Tuberculosis
 - (5) Question not attempted
- 81. 4 month old infant presented with constipation since birth. On per rectal examination a sudden release of feces was seen. A contrast enema showed a dilated descending colon leading to a constricted segment. Which of the following is involved in the pathogenesis of the disease? Mutation in
 - (1) GDNF
 - (2) INF alpha
 - (3) TNF alpha
 - (4) TNF beta
 - (5) Question not attempted

- 82. True regarding Congenital Hypertrophic Pyloric Stenosis (CHPS) is
 - (1) Occurs more commonly in female infants.
 - (2) Infants with CHPS typically develop hyperchloremic hyperkalemic metabolic acidosis.
 - (3) This condition is most commonly diagnosed in infants between 2-8 weeks of age.
 - (4) USG is considered unreliable for diagnosis and is rarely used.
 - (5) Question not attempted
- 83. What is the source of endogenous fluids in the body?
 - (1) Consumed liquids
 - (2) Reduction of solid food stuff
 - (3) Oxidation of solid food stuff
 - (4) Both Consumed liquids and Oxidation of solid food stuff
 - (5) Question not attempted
- 84. The retroperitoneal space is obliterated following all except:
 - (1) Radiation
 - (2) Crohn's disease
 - (3) Perforation
 - (4) Long standing diverticular disease inflammation
 - (5) Question not attempted

- 85. A child presented with acute right iliac fossa pain and vomiting to the surgery department and was suspected to have acute appendicitis. While ruling out the differential diagnosis of this condition in a child, the resident looks for colicky pain and cervical lymphadenopathy. Which differential is she trying to rule out?
 - (1) Meckel's diverticulitis
 - (2) Mesenteric lymphadenitis
 - (3) Intussusception
 - (4) Henoch-Schonlein purpura
 - (5) Question not attempted
- 86. A 45 year old male with widely metastatic small bowel neuroendocrine tumour has symptoms of flushing and diarrhoea. Which of the following drug is useful to control the symptom?
 - (1) 5 Fu + oxaliplatin
 - (2) Sunitinib
 - (3) Octreotide
 - (4) Diphenoxylate HCL & atropine
 - (5) Question not attempted
- 87. In a middle aged patient the most commonly done operation for 3rd and 4th degree internal with external haemorrhoid associated with prolapse is
 - (1) Milligan Morgan open haemorrhoidectomy
 - (2) Fergusson closed haemorrhoidectomy
 - (3) Longo's stapler haemorrhoidectomy
 - (4) Whitefield submucosal haemorrhoidectomy
 - (5) Question not attempted

- 88. All of the following statements regarding development of thyroid and parathyroid are true except:
 - (1) Thyroglossal duct develop from median bud of pharynx
 - (2) Parathyroid gland develop from 3rd and 4th pharyngeal pouch.
 - (3) The developing thyroid lobe amalgamate with the structure that arise in 4th pharyngeal pouch
 - (4) Para follicular cells from neural crest reach the thyroid via ultimobranchial body.
 - (5) Question not attempted
- 89. Refeeding syndrome can be prevented by all of the following methods except:
 - (1) Electrolyte abnormalities are corrected before feeding
 - (2) Daily vitamin supplementation
 - (3) Start feeding slowly
 - (4) Hyperphosphatemia to be corrected before feeding
- (5) Question not attempted
- **90.** The amount of lactate present in Hartman's solution is
 - (1) 29 mmol/L
 - (2) 39 mmol/L
 - (3) 49 mmol/L
 - (4) 59 mmol/L

- **91.** Paragangliomas are sited mainly in the
 - (1) Head and neck
 - (2) Thorax
 - (3) Abdomen
 - (4) Pelvis
 - (5) Question not attempted
- 92. Von Hippel-Lindau disease is
 - (1) X linked
 - (2) multiple loss-of-functions mutations
 - (3) an autosomal dominant disease
 - (4) an autosomal recessive disease
 - (5) Question not attempted
- **93.** Retrocaval ureter on intravenous urogram is seen as
 - (1) I sign
 - (2) reverse J sign
 - (3) reverse L sign
 - (4) reverse C sign
 - (5) Question not attempted
- **94.** A patient on TPN may develop deficiency of
 - (1) Vitamin B₁₂
 - (2) Folic acid
 - (3) Amino acids
 - (4) Zinc
 - (5) Question not attempted
- **95.** In hypovolemic shock, which of the following compensatory mechanisms occur first?
 - (1) Activation of the reninangiotensin system
 - (2) Increased myocardial contractility
 - (3) Peripheral vasoconstriction
 - (4) Increased erythropoiesis
 - (5) Question not attempted

- 96. Inferior parathyroid glands in relation to recurrent laryngeal nerve lie

 (1) medial

 (2) lateral

 (3) anterior
 - (4) posterior
 - (5) Question not attempted
- 97. Marker of severity of acute pancreatitis is persistent single or multiple organ failure of _____.
 - (1) > 24 hours
 - (2) > 48 hours
 - (3) > 36 hours
 - (4) After a week
 - (5) Question not attempted
- **98.** After transurethral resection of prostate incontinence results in
 - (1) 1%
 - (2) 3%
 - (3) 4%
 - (4) 5%
 - (5) Question not attempted
- **99.** What is the classic finding in distributive shock?
 - (1) Increased cardiac output
 - (2) Increased systemic vascular resistance
 - (3) Decreased heart rate
 - (4) Reduced pulmonary capillary wedge pressure
 - (5) Question not attempted

- **100.** For ICG fluorescence imaging, the light source should emit:
 - (1) UV light
 - (2) Infrared light
 - (3) Near-infrared (NIR) spectrum light
 - (4) Red light 18-07
 - (5) Question not attempted
- 101. Topical haemostatic agents used during intraoperative surgery are all except -
 - (1) Absorbable collagen
 - (2) Bone wax
 - (3) Fibrin sealent
 - (4) Tranexmic acid
 - (5) Question not attempted
- **102.** The aim of preventing formation of scar on the skin is by use of which newer isolated molecule?
 - (1) TGFβ1
 - (2) TGFβ2
 - (3) TGFβ3
 - (4) Decorin
 - (5) Question not attempted
- 103. Doppler study is based on the principle of doppler shift that is pickup moving blood flow in a blood vessel. Power doppler is used to
 - (1) Pick up flow towards probe
 - (2) Pick up flow away from probe
 - (3) Pick extremely slow flow
 - (4) Turbulent flow
 - (5) Question not attempted

- 104. Goal-directed fluid therapy (GDFT) aims to maintain Mean Arterial Pressure (MAP) of:
 - (1) 40-50 mm Hg
 - (2) 50-55 mm Hg
 - (3) 60-65 mm Hg
 - (4) 70-80 mm Hg
 - (5) Question not attempted
- any associated enlarged lymphnodes should be delayed until atleast ______after local treatment of primary lesion.
 - (1) 1 week
 - (2) 2 weeks
 - (3) 3 weeks
 - (4) 4 weeks
 - (5) Question not attempted
- **106.** The main advantage of LIRA over IPOM plus is:
 - (1) Tension closure of defect
 - (2) Non-closure of defect
 - (3) Tension-free closure with lower rates of bulging and recurrence
 - (4) Larger mesh requirement
 - (5) Question not attempted
- 107. Needlescopic VATS is mainly used for which procedure?
 - (1) Lobectomy

- (2) Pneumonectomy
- (3) Dorsal sympathectomy
- (4) Carinal resection
- (5) Question not attempted

- 108. The indigenous Indian-made robotic surgical system is:
 - (1) Hugo by Medtronic
 - (2) Versius by CMR
 - (3) SSI Mantra
 - (4) Senhance System
 - (5) Question not attempted
- 109. Priapism means a persistent errection lasting longer than
 - (1) 01 hour
 - (2) 02 hours
 - (3) 03 hours
 - (4) 04 hours
 - (5) Question not attempted
- 110. High-Intensity Focussed
 Ultrasound (HIFU) causes closure
 of veins by:
 - (1) Thrombosis
 - (2) Mechanical occlusion
 - (3) Thermal fibrosis without thrombosis
 - (4) Sclerotherapy
 - (5) Question not attempted
- 111. Which scoring system is used for risk stratification in ERAS?
 - (1) Glasgow Coma Scale
 - (2) APACHE II score
 - (3) P-POSSUM score
 - (4) Ranson score
 - (5) Question not attempted
- 112. The commonest congenital deformity impacting on the upper limb
 - (1) Klippel-Feil syndrome
 - (2) Pseudoarthrosis
 - (3) Sprengel's shoulder
 - (4) Scoliosis
 - (5) Question not attempted

- 113. The Hepp-Couinaud technique is associated with:
 - (1) Hepaticoduodenostomy
 - (2) End-to-end anastomosis
 - (3) Hepaticojejunostomy
- (4) Ligation of cystic duct
 - (5) Question not attempted
- 114. Pemberton's sign is used for:
 - (1) Thyroid malignancy
 - (2) Thoracic inlet obstruction
 - (3) Thyrotoxicosis
 - (4) Thyroid cyst
- (5) Question not attempted
- 115. In TARM repair, ports are placed:
 - (1) On left flank only
 - (2) In right upper quadrant
 - (3) At least 10 cm cranial or caudal to defect center
 - (4) Directly over the defect
 - (5) Question not attempted
- 116. Which of the following is not an advantage of ICG?
 - (1) Nontoxic and nonionizing
 - (2) Long circulation time in blood
 - (3) Good tissue penetration
 - (4) Allows repeated application
 - (5) Question not attempted

- 117. A common femoral vein on colour doppler show which pattern?
 - (1) monophasic pattern without pulsation.
 - (2) monophasic pattern with pulsation.
 - (3) monophasic pattern without pulsation with respiration variation.
- (4) triphasic pattern.
 - (5) Question not attempted
- **118.** Risk of pathological fracture can be assessed using the
 - (1) Mirel's score
 - (2) Well's score
 - (3) Gleason score
 - (4) Eckdart score
- (5) Question not attempted
- 119. Number of main bones in the foot
- (1) 14
 - (2) 21 11 DQ 08 01 145 TAR 588
 - (3) 26
 - (4) 30
 - (5) Question not attempted
- **120.** On auscultation, a bruit heard over the thyroid gland suggests:
 - (1) Thyroid carcinoma
 - (2) Thyroid cyst
 - (3) Graves' disease
 - (4) Thyroiditis
 - (5) Question not attempted

- 121. The Achilles tendon rupture is relatively frequent in the age group
 - (1) 20 29 years
 - (2) 30 39 years
 - (3) 40 50 years
 - (4) 51 70 years
 - (5) Question not attempted
- 122. Transversus Abdominis Plane (TAP) block is associated with:
 - (1) Delayed bowel recovery
 - (2) Earlier recovery of bowel functions
 - (3) Increased opioid use
 - (4) Increased PONV
 - (5) Question not attempted
- 123. The triage triangle arrangement for setting up an external triage point during the large mass casualty event, the 2nd swipe assess/treat these patient as
 - (1) Airway and article haemorrhage
 - (2) Breathing and article haemorrhage
 - (3) Breathing and circulation, document of the injury, vital sign on trauma card
 - (4) Disability with rapid neurological examination and GCS
 - (5) Question not attempted

- of recurrent urinary tract infection presents with fever, tachypnea, and tachycardia. On examination, he appears confused and has hypotension. Which of the following is used as the initial treatment for his condition?
 - (1) Vasopressors
 - (2) Blood transfusion
 - (3) Crystalloids
 - (4) Inotropic agents
 - (5) Question not attempted
- 125. Primary insult or mechanical damage occurring at the moment of impact in treatment terms is sensitive to -
 - (1) Preventive measure
 - (2) Therapeutic measure
 - (3) Intervention i.e. operation
 - (4) None of these
 - (5) Question not attempted
- **126.** Allgrove syndrome is associated with all except
 - (1) Alacrimia
 - (2) Achalsia
 - (3) Familial adrenal insufficiency
 - (4) Pituitary adenoma
 - (5) Question not attempted

- **127.** Diagonal arteries arise from which vessel?
 - (1) Left anterior descending artery
 - (2) Left main coronary artery
- (3) Right coronary artery
 - (4) Circumflex coronary artery
 - (5) Question not attempted
- **128.** Which of the following is a primary constituent of intracellular fluid?
 - (1) Sodium
 - (2) Magnesium
 - (3) Chloride
 - (4) Bicarbonate
 - (5) Question not attempted
- 129. Adjuvant oral chemotherapy and radiotherapy have limited role and do not increase survival benefit following surgical resection in gall bladder carcinoma. Majority of patients who present with unresectable disease are candidates for palliative chemotherapy. The preferred drug is
 - (1) Capecitabine alone
 - (2) Capecitabine + oxaliplatine
 - (3) Gemcitabin
 - (4) Cisplatin
 - (5) Question not attempted

130. A 60-year-old female, known diabetic and hypertensive. an open mesh underwent hernioplasty for an incisional hernia 10 days ago. She now presents with persistent serous discharge from the surgical wound, redness around the wound edges and low-grade fever. examination. the wound erythematous with gaping at the lower end and purulent discharge. Blood investigations show leukocytosis. Ultrasound of the abdominal wall shows a localized fluid collection superficial to the mesh without signs of deep mesh infection.

What is the most appropriate next step in management?

- (1) Start IV antibiotics and observe
- (2) Complete mesh removal and wound debridement
- (3) Wound exploration with drainage of collection and preservation of mesh
- (4) Negative pressure wound therapy without drainage
- (5) Question not attempted
- 131. Most common cause of intracerebral bleed is
 - (1) Berry's aneurysm
 - (2) Hypertension
 - (3) Diabetes
 - (4) Thrombocytopenia
 - (5) Question not attempted

132. A 58 year old male, chronic smoker with a history of hypertension and dyslipidemia. presents with complaints of intermittent claudication in the left calf for the past 6 months. The symptoms are limiting his daily activities. On examination, left lower limb pulses are feeble distal to the femoral artery and Ankle-Brachial Index (ABI) on the left side is 0.5. Duplex ultrasound suggests significant stenosis of the left Superficial Femoral Artery (SFA). CT Angiography shows a focal 6 cm segment stenosis of the SFA without significant calcification or distal disease.

What is the most appropriate next step in management?

- (1) Exercise therapy and risk factor modification alone
- (2) Bypass surgery with vein graft
- (3) Endovascular angioplasty with or without stenting
- (4) Primary amputation
- (5) Question not attempted
- 133. Anastomotic leaks most commonly occur at around
 - (1) 5 days
 - (2) 7 days
 - (3) 10 days
 - (4) 14 days

(5) Question not attempted

3-month history of altered bowel habits, weight loss and occasional bleeding per rectum. On digital rectal examination, an irregular mass is felt 6 cm from the anal verge. Colonoscopy confirms a mid-rectal tumour and biopsy reveals moderately differentiated adenocarcinoma. MRI pelvis shows a cT3N1 tumour with involvement of mesorectal fascia, but no distant metastasis.

What is the next best step in management?

- (1) Immediate low anterior resection
- (2) Neoadjuvant chemoradiotherapy followed by surgery
- (3) Adjuvant chemotherapy and observation
- (4) Palliative colostomy
- (5) Question not attempted
- 135. A 45 year old woman presents with a gradually enlarging thyroid swelling over 6 months. She complains of mild dysphagia but no dyspnea or voice change. On examination, there is a 5 cm firm, non-tender swelling moving with deglutition. Ultrasound neck shows a solitary solid hypoechoic nodule in the right lobe of thyroid with irregular margins and microcalcifications. Fine Needle Aspiration Cytology (FNAC) is reported as Bethesda Category V Suspicious for Malignancy.

What is the next best step in management?

- (1) Observation with repeat FNAC after 6 months
- (2) Total thyroidectomy
- (3) Right hemithyroidectomy (lobectomy)
- (4) Radioactive iodine ablation
- (5) Question not attempted

presents with progressive dysphagia for solids for 2 months, significant weight loss and anorexia. Upper GI endoscopy shows an ulceroproliferative growth at 30 cm from incisors involving the lower third of the esophagus. Biopsy confirms moderately differentiated squamous cell carcinoma. Contrastenhanced CT scan shows no distant metastasis but involvement of periesophageal lymph nodes. PET-CT confirms localized disease without distant spread.

What is the next best step in management?

- (1) Immediate surgical resection (Esophagectomy)
- (2) Definitive chemoradiotherapy
- (3) Neoadjuvant chemoradiotherapy followed by surgery
- (4) Palliative stenting
- (5) Question not attempted
- 137. A 45 year old female presents 5 days after laparoscopic cholecystectomy with progressive abdominal distension, fever and jaundice. On examination, she has right upper quadrant tenderness with guarding. Laboratory investigations Total bilirubin 5.2 mg/dL, Direct bilirubin 4.1 mg/dL and raised ALP. Ultrasound shows free fluid in the subhepatic region. MRCP shows a complete transection of the common bile duct at the level of the hepatic duct confluence (Strasberg Type E4 injury).

What is the next best step in management?

- (1) ERCP with stenting
- (2) Percutaneous drainage followed by delayed repair
- (3) Immediate Roux-en-Y Hepaticojejunostomy
- (4) Re-exploration with primary repair over T-tube
- (5) Question not attempted

- 138. N16 nodal status in carcinoma colorectal
 - (1) Metastases in 1 regional node
 - (2) Metastases in 2 or 3 regional nodes
 - (3) Metastases in 4-6 regional lymph nodes
 - (4) There are nodules made up of tumour cells found in the structures near the colon that do not appear to be lymph nodes
 - (5) Question not attempted
- 139. A 58 year old male chronic alcoholic presents with epigastric pain radiating to the back for 1 week. Serum amylase and lipase are elevated. CT abdomen shows necrotizing pancreatitis involving 40% of the pancreas without of infection. evidence He is haemodynamically stable tolerating oral intake.

What is the most appropriate next step in management?

- (1) Immediate surgical necrosectomy
- (2) Continue conservative management with supportive care
- (3) Percutaneous drainage of necrosis
- (4) ERCP with pancreatic duct stenting

- 140. Maximum diameter of instruments used in needlescopic surgery
 - (1) 1 mm are appears tolv
- (2) 2 mm
 - (3) 3 mm
- (4) 4 mm
 - (5) Question not attempted
- 141. Kings college criteria for liver transplant includes all except
 - (1) Arterial pH < 7.3
 - (2) INR > 6.5
 - (3) Creatinine > 3.4 mg/dl
 - (4) Hepatic encephalopathy Grade 1 & 2
 - (5) Question not attempted
- 142. A 40 year old female presented with complaints of a painless lump in her right breast. USG showed the presence of a smooth-walled anechoic cyst with internal echoes of the floating debris. What will be the BIRADS score and management of this patient?
 - (1) BIRADS 3, requires drainage of cyst.
 - (2) BIRADS 2, requires only observation without biopsy.
 - (3) BIRADS 3, requires therapeutic aspiration & biopsy to plan management.
 - (4) BIRADS 2, requires therapeutic aspiration & biopsy to plan management.
 - (5) Question not attempted

- 143. Superficial inguinal lymph node form a vertical and horizontal group, are multiple in number, which drain into external iliac group of lymph node. These group of lymph node lie
 - (1) above the inguinal ligament
 - (2) below the inguinal ligament
 - (3) along the femoral vein
 - (4) along great saphaneous vein
 - (5) Question not attempted
- 144. A child, previously diagnosed with an endocrine tumour, presented with conjugate eye movements and myoclonus. Which of the following tumours must have led to this clinical presentation?
 - (1) Meningioma
 - (2) Neuroblastoma
 - (3) Cortical tuberculoma
 - (4) Parathyroid adenoma
 - (5) Question not attempted
- 145. Kasabach-Merritt syndrome is associated with
 - (1) Hepatic adenoma (11%)
 - (2) Focal nodular hyperplasia (22%)
 - (3) Liver Hemangioma (57%)
 - (4) Hepatoblastoma (10%)
 - (5) Question not attempted

- 146. During laparoscopic surgery, after inserting the Veress needle, which of the following findings would indicate that the needle remains in an extraperitoneal location?
 - (1) The hanging drop test shows the drop remains in the hub of needle.
 - (2) Free flow of saline into the cavity.
 - (3) Abdominal pressure reading of less than 10 mm Hg.
 - (4) No aspiration of blood.
 - (5) Question not attempted
- 147. Cranial extension of short saphenous vein into the thigh is known as
 - (1) Popliteal vein
 - (2) Vein of Giacomini
 - (3) Posterior femoral vein
 - (4) Anterior accessory great saphenous vein
 - (5) Question not attempted
- 148. A young patient presented with fever and pain in the right upper quadrant of the abdomen. USG shows a single abscess in the right lobe of the liver less than 5 cm. Serology is positive for anti-amebic antibodies. Which of the following is the most appropriate management?
 - (1) Needle aspiration 2
 - (2) Pig tail catheter insertion
 - (3) Metronidazole plus diloxanide
 - (4) PAIR therapy
 - (5) Question not attempted

- 149. Acoustic shadow on USG is produced by
 - (1) Calculus
 - (2) Air
 - (3) All hyperechoic lesion
 - (4) All hypoechoic lesion
 - (5) Question not attempted
- **150.** A 31 year old primigravida came to the emergency room with nausea and severe pain in the abdomen. examination. she had tenderness in the right iliac fossa; she however. was febrile. Ultrasound with graded compression and non-contrast MRI were negative for appendicitis. What is the next step in the management of this patient?
 - (1) CECT abdomen and pelvis with high-risk consent
 - (2) Observation and regular monitoring in the ward
 - (3) Diagnostic laparoscopy to look for another cause
 - (4) Appendicectomy due to high clinical suspicion

रफ कार्य के लिए स्थान / SPACE FOR ROUGH WORK

- (6. During Japasoscour surger, after inserting the Veress needle, which of the following findings would noticate that the needle remains in an extrapertioneal location?
- (1) The hanging throu test shows the high of a edie
- (2). Free flow of saline into the cavity
- (5) Abdominal pressure reading to the transfer than 10 mm Hg
 - boold to noncurses of (4)
 - (5) Question on estempted
- 147. Cramal extension of short is each money were into the thigh is known as
 - (I) Paplicativein
 - (2) Vein of Orsemilin
 - (2) Posterior femoral vein
- (4) Anterior accessory great suphenous vem
 - (b) Question not attempted
- A young patient presented with fever and pain in the right apper quadrant of the abdomen USC show a single abscess in the right lobe of the liver less than 5 cm. Serology is positive for anti-ametic antibodies. Which of the following is the most appropriate management?
 - (1) Needle aspiration
 - (2) Pig tail catheter inscensor
- (3). Metromdazole plus diloxanide
 - (i) PAIR therapy
 - (b) Onestron not attempted

- रफ काय के लिए स्थान / SPA
 - culumbs) (1)
 - nA. (2)
- 3) All hyperechoicelesion
- (4) All hypoechoic lesion
- (5) Question not attempted
- A 31 year old pumigravida came to the entrgency room with names and severe pain in the abdomen On examination she that the civil itself less tonderness in the civil itself less however, she was febrile bowever, she was febrile Ultrasound with graded compression and non-contrast MMI were negative for appendicities. Were negative for appendicities what is the next step us the next step us the next step us the
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- (3) Diagnostic Ispanoscopy to look
 for another cause
- (4) Appendicectomy due to high elimical suspicion
 - (5) Question not sittempted