The candidate fill the Question Paper Booklet No. on Answer Sheet carefully after opening the Paper Seal / Polythene bag. Candidate himself shall be responsible for any error.

INSTRUCTIONS FOR CANDIDATES

1. Answer all questions.
2. All questions carry equal marks.
3. Only one answer is to be given for each question.
4. If more than one answers are marked, it would be treated as wrong answer.
5. 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.
6. 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.
7. 1/3 part of the marks(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.
8. 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.
9. Please correctly fill your Roll Number in O.M.R. Sheet. 5 Marks can be deducted for filling wrong or incomplete Roll Number.

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.

Do not open this Test Booklet until you are asked to do so.
1. A Z-plasty is a
   (1) Rotation flap
   (2) Advancement flap
   (3) Transposition flap
   (4) Pedicle flap

2. The modern medical ethical principle of moral obligation to protect patients from harm and injustice is which one of the following:
   (1) Casuistry
   (2) Non-maleficence
   (3) Beneficence
   (4) Primum non nocere

3. Which flap is not a part of the subscapular vascular axis?
   (1) Serratus anterior flap
   (2) Latissimus dorsi flap
   (3) Intercostal perforator artery flap
   (4) Thoracodorsal perforator flap

4. Following tissue expansion
   (1) Thickness of epidermis increases
   (2) Thickness of epidermis decreases
   (3) Thickness of dermis increases
   (4) Fat increases

5. Whose name is associated with full thickness skin graft?
   (1) Ollier
   (2) Thiersch
   (3) Wolfe
   (4) Santoni

6. Which of the following statement is true for Integra?
   (1) it is microbiologically inert and easily causes infection
   (2) it is a bilaminar biodegradable tissue engineered dermal matrix generation template
   (3) its major disadvantage in burn reconstruction is its contraction
   (4) it is a biodegradable skin regeneration template

7. The groin flap is usually based on
   (1) superficial circumflex iliac artery
   (2) superficial circumflex femoral artery
   (3) superficial inferior epigastric artery
   (4) lateral circumflex artery

8. According to the Mathes and Nahai classification Sartorius is a:
   (1) Type I muscle flap
   (2) Type II muscle flap
   (3) Type III muscle flap
   (4) Type IV muscle flap

9. Obstetrical brachial plexus injury most frequently involves:
   (1) C^6 T^1
   (2) All cervical roots
   (3) Only C^5
   (4) Upper plexus C^5 C^6 and C^7
10. The initial event in the development of Boutonnière deformity is
   (1) lateral and palmar migration of extensor lateral bands
   (2) laxity or rupture of proximal interphalangeal joint volar plate
   (3) Hyperextension of distal interphalangeal joint
   (4) loss of continuity of the central slip insertion into the back of the base of middle phalanx

11. Position of wrist, metacarpophalangeal joint and proximal interphalangeal joint in safe position of immobilisation respectively is:
   (1) 0 – 30° extension – 70° to 90° flexion – full extension
   (2) 0 – 30° flexion – 70° to 90° flexion – full extension
   (3) 0 – 30° flexion – straight – full flexion
   (4) 0 – 30° extension – 70° to 90° extension – full flexion

12. Palpitation for traumatic amputation of thumb in older children differs from that in young children with congenital absence of thumb in:
   (1) Traumatic cases of older children require a bone graft necessarily to replace the missing metacarpal
   (2) Traumatic cases of older children require shortening of flexor tendons necessarily
   (3) In younger patients, the extensor tendons do not need shortening
   (4) Extensor tendons do not need shortening in older patients

13. Which is correct in relation to replantation of a digit?
   (1) Advisable at the level of distal interphalangeal joint (DIP)
   (2) Generally recommended for proximal ambitia class III ring avulsion
   (3) Should only be considered with guillotine injuries
   (4) Is not successful when cold ischaemia exceeds 24 hours

14. A forty year female has a pinpoint tenderness at the base of deformed nail in ring finger. The area is painful to touch and sensitive to cold. The most likely diagnosis is:
   (1) Giant cell tumour
   (2) Glomus tumour
   (3) Epidermal inclusion cyst
   (4) Ganglion cyst

15. Usual relation of the digital nerve to digital artery in the finger is:
   (1) Dorsal
   (2) Volar
   (3) Proximal
   (4) Distal

16. The carpal tunnel
   (1) is formed by proximal and distal carpal rows and the flexor retinaculum
   (2) contains the ulnar artery
   (3) contains the ulnar nerve
   (4) contains the tendon of palmaris longus
17. In De Quervain’s tenosynovitis all are true except:
   (1) High incidence is seen in women
   (2) Multiple slips of both Abductor Pollicis Longus (APL) and Extensor Pollicis Brevis (EPB) can be present
   (3) Assessment can be done by Finkelstein’s test
   (4) Steroid injection and splintage are better than either alone

18. All is true of the ulnar nerve in Guyon’s tunnel except
   (1) can cause Ramsay Hunt syndrome
   (2) compression in zone I results in sensory and motor palsy
   (3) compression in the first portion of zone 2 results in motor symptoms only
   (4) compression in the third zone results in sensory symptoms only

19. Infectious causes of mononeuropathies include all except:
   (1) Schistosomiasis
   (2) Leprosy
   (3) Lyme disease
   (4) Herpes Zoster

20. Amniotic band syndrome is associated with all except
   (1) Constriction rings
   (2) Ectodermal necrosis aetiological theory
   (3) Patterson classification
   (4) Lymphoedema

21. The ‘Middle Finger Extension Test’ is useful for all except
   (1) Intrinsic Tightness
   (2) Radial tunnel syndrome
   (3) Lateral epicondylitis
   (4) Posterior intersosseous nerve palsy

22. In Dupuytren’s disease:
   (1) there is an increased ratio of Type I to Type III collagen
   (2) there is an increased ratio of Type II to Type III collagen
   (3) there is an increased ratio of Type III to Type I collagen
   (4) there is an increased ratio of Type II to Type I collagen

23. In the surgical treatment of trigger finger what structure is incised:
   (1) A1 pulley alone
   (2) A2 pulley
   (3) A4 pulley
   (4) Both Grayson’s ligament and the A1 pulley

24. Regarding syndactyly all are true except
   (1) Most common congenital hand deficiencies 1 per 2000 to 2,500 live births.
   (2) Strong familial tendency (10-40%).
   (3) Males are affected twice as frequently as females.
   (4) Web creep is less likely to occur if the separation is performed before the age of two.
25. In hand embryology:
   (1) The apical ectodermal ridge secretes fibroblast derived growth factor 4.
   (2) The apical ectodermal ridge governs thumb development.
   (3) The apical ectodermal ridge influences the sonic hedgehog gene.
   (4) The apical ectodermal ridge controls the dorsoventral axis.

26. In rehabilitation of tendon injuries:
   (1) A volar slab is best for flexor tendon injuries.
   (2) A dorsal slab in extension is best for flexor tendon injuries.
   (3) Kleniester traction is reserved for thumb injuries.
   (4) The Belfast regime is a CAM (controlled active motion) regime.

27. Most appropriate angles for fusion of the digits are:
   (1) Thumb – neutral IP joint, neutral MCP joint.
   (2) Thumb – neutral IP joint, 45° MCP joint.
   (3) Index – 5° DIP joint, 40° PIP joint, 25° MCP joint.
   (4) Index – 10° DIP joint, 10° PIP joint, neutral MCP joint.

28. The autonomous zone for the median nerve in hand is:
   (1) Index finger tip
   (2) Middle finger tip
   (3) Small finger tip
   (4) Dorsal side of the first web space.

29. The anaesthetic effect of a local anaesthetic is produced by:
   (1) preventing passage of sodium
   (2) preventing passage of potassium
   (3) preventing passage of calcium
   (4) preventing passage of carbonate.

30. Which one of the following is likely to result in a hook nail deformity?
   (1) Deep laceration of more than 50% of nail and its bed
   (2) Crush injury to the nail bed and bone.
   (3) Bony avulsion of more than 50% of nail and its bed.
   (4) Paronychia.

31. The structure that contributes to the rigid flexion in a fixed flexion contracture of proximal interphalangeal joint (PIP joint) is:
   (1) collateral ligament
   (2) contracted proximal part of volar plate.
   (3) accessory collateral ligament
   (4) rigid dorsal part of the volar plate.

32. If the flexor digitorum profundus (FDP) insertion is transected and the tendon is allowed to retract, it may lead to the development of:
   (1) lumbrical plus finger
   (2) Lumbrical minus finger
   (3) Quadriga effect
   (4) No effect.
33. The parotid duct is vulnerable to injury in facial lacerations. Where is it located in the face?
   (1) lies on the middle third of a line between tragus and middle of upper lip.
   (2) lies on the anterior third of a line between tragus and middle of upper lip.
   (3) lies on the posterior third of a line between tragus and middle of upper lip.
   (4) lies on the middle third of a line between tragus and angle of mouth.

34. A high score in Glasgow Coma Scale (GCS) is an indication of:
   (1) Good prognosis
   (2) Bad prognosis
   (3) Deterioration in patient’s condition
   (4) Impending coma

35. Which one of the following procedures is suitable for treating large postburn medial canthal webs?
   (1) Z-plasty
   (2) Double Z-plasty
   (3) V-M plasty
   (4) Scar excision and full thickness grafting

36. T3 N3 M0 Squamous Cell Carcinoma (SCC) of the alveolus of the mandibular symphysis may need the following except:
   (1) free fibular osteocutaneous flap
   (2) bilateral radical neck dissection with preservation of left internal jugular vein
   (3) marginal mandibulectomy
   (4) post operative radiotherapy

37. Based on orbital reconstruction, the blow-out fractures may be categorised into the following types except:
   (1) Single hinge
   (2) Double hinge
   (3) Trap door
   (4) Comminuted type

38. Which of the following cystic tumours of the neck are not appropriately matched to their frequency and age of occurrence?
   (1) Infant - thyroglossal duct cyst – most frequent
   (2) Adult - thyroglossal duct cyst – most frequent
   (3) Adult-cervical thymic cyst – very uncommon
   (4) Adult – metastatic cystic carcinoma – most frequent

39. In children below the age of 5 years which of the following facial bones is likely to fracture:
   (1) condyle of mandible
   (2) neck of mandible
   (3) symphysis of mandible
   (4) parasymphysial region of mandible
40. The preferred approach and point of entry for the temporo-mandibular joint arthroscopy is
   (1) along a line from tragus to the tip of nose
   (2) along a line from the tragus to angle of mouth
   (3) along a line from the tragus to lateral canthus
   (4) along a line from tragus to menton

41. Full thickness cranial defect located near the frontal sinus should preferably be managed by
   (1) Bone cement
   (2) Hydroxyapatite cement
   (3) Acrylic mould
   (4) Calvarial graft

42. The ‘Crane Principle’ is commonly used for restoration of which defects?
   (1) Avulsive skin loss
   (2) Muscle defect
   (3) Bone defect
   (4) Nerve defect

43. Which is the common plane of scalp avulsion?
   (1) skin and subcutaneous tissue level
   (2) galea aponeurotica
   (3) loose areolar tissue
   (4) pericranium

44. Which of the following techniques uses the maximum amount of rib cartilage in frame work design in auricular reconstruction?
   (1) Tanzer
   (2) Brent
   (3) Nagata
   (4) Spina

45. Cauliflower ear is common in
   (1) Mountain climbers
   (2) Pugilists
   (3) Post burn chondritis
   (4) Benign ear tumours

46. Worthen flap for closure of a lateral forehead defect is:
   (1) A local flap
   (2) Advancement flap
   (3) Bilobed flap
   (4) Rotation flap

47. An eyelid defect of less than 25% of the eyelid can be corrected by
   (1) lateral canthotomy and primary closure
   (2) Mustarde technique
   (3) Forehead flap
   (4) Tenzel flap

48. A flap of choice for central full thickness defect of the upper lip is:
   (1) Abbe flap
   (2) Estlander flap
   (3) Karapandzic flap
   (4) Gillies fan flap
49. A suitable muscle flap in one stage facial reanimation for smile reconstruction in facial palsy is:
   (1) Palmaris longus
   (2) Radial artery forearm flap
   (3) Pectoralis major flap
   (4) Latissimus dorsi flap

50. The ‘Mobius syndrome’ is characterised by which one of the following?
   (1) Right side facial palsy
   (2) Left side facial palsy
   (3) Bilateral facial palsy
   (4) Unilateral facial paresis

51. Which of the following free flap skin paddle is relatively insensate in head and neck reconstruction in cases of malignancy?
   (1) Radial artery forearm flap
   (2) Anterolateral thigh flap
   (3) Rectus abdominis myocutaneous flap
   (4) Pectoralis major myocutaneous flap

52. An indication for use of non-vascularised method of mandibular reconstruction is:
   (1) Mandibular fracture non-union
   (2) Large defects
   (3) Composite defects of bone and soft tissue
   (4) Defects of mandible with scarring

53. The platysma flap for coverage of the lower face is based on
   (1) superior thyroid artery
   (2) submental artery
   (3) transverse cervical artery
   (4) occipital artery

54. Radionecrotic defects of the nape of neck can best be reconstructed by:
   (1) Latissimus dorsi flap
   (2) Trapezius musculocutaneous flap
   (3) Pectoralis major myocutaneous flap
   (4) Deltopectoral flap

55. Histopathology showing picket fence arrangement of nuclei in the peripheral layer around skin tumour is suggestive of
   (1) Keratoacanthoma
   (2) Seborrheic Keratosis
   (3) Squamous cell carcinoma
   (4) Basal cell carcinoma

56. Melanomas located in which area have a worse prognosis:
   (1) Nose
   (2) Cheek
   (3) Forehead
   (4) BANS area

57. Tessier cleft which is the most laterally placed on the face is:
   (1) Number 6 cleft
   (2) Number 7 cleft
   (3) Number 8 cleft
   (4) Number 10 cleft
58. Treacher Collins syndrome characterised by clefting in the maxillozygomatic, temporozygomatic and frontozygomatic regions is a combined manifestation of
(1) Number 5, 6 and 7 Tessier cleft
(2) Number 6, 7 and 8 Tessier cleft
(3) Number 7, 8 and 9 Tessier cleft
(4) Number 8, 9, 10 and 11 Tessier cleft

59. The classic test to diagnose velocardiofacial syndrome otherwise known as Di George syndrome is:
(1) FISH (Fluorescent in situ hybridisation / analysis)
(2) Chromosomal karyotyping
(3) MR angiography
(4) Serum creatine kinase level estimation

60. The incisive foramen, a key anatomic landmark used in classification of clefts, that is commonly followed was described by:
(1) Veau
(2) Kernahan
(3) Oborne
(4) Pohlmann

61. Brachycephaly is the term for
(1) Narrow skull
(2) Long skull
(3) Wide skull
(4) Asymmetrical skull

62. Pfeiffer syndrome consists of all except
(1) Midface hypoplasia
(2) Brachydactyly
(3) Cleft palate
(4) Hypertelorism

63. The ‘whistle’ deformity, a secondary deformity of cleft lip and palate repair refers to which one of the following:
(1) Nose
(2) Whistle shaped scar on the lip
(3) Vermilion
(4) Buccal mucosa

64. A simple ridge of mucosa created on the back of the pharynx of cleft patients to try and reduce nasal escape is called after whom?
(1) Pigott
(2) Hynes
(3) Passavant
(4) Orticochea

65. Classifications, scoring systems and syndromes that are relevant to cleft lip and palate and its management include all except
(1) GOSPA scale
(2) Kernahan’s classification
(3) CATCH-22 syndrome
(4) Kubitz’s scale

66. In bilateral cleft lip repair, the forked flap takes donor tissue from which structure?
(1) Nasal mucosa
(2) Buccal mucosa
(3) Prolabial vermilion
(4) Prolabial skin
67. Which is correct regarding hemifacial atrophy, also known as Romberg’s disease?
   (1) is due to a chromosome abnormality (11 p 3)
   (2) is best monitored using thermography
   (3) is due to chromosome abnormality (15 q 11)
   (4) best treated surgically within 6 months of diagnosis

68. A harlequin orbit is diagnostic of
   (1) Sagittal craniosynostosis
   (2) Coronal craniosynostosis
   (3) Metopic craniosynostosis
   (4) Fibrous dysplasia

69. A suitable diagnostic tool for evaluation of velopharynx before surgery in patients with occult submucous clefts is:
   (1) Nasoendoscopy
   (2) Fluoroscopy
   (3) Magnetic Resonance Imaging
   (4) Contrast enhanced computed tomography

70. The first to advocate including of palatal periosteum in flaps used for cleft palate repair was
   (1) Von Langenbeck
   (2) Dieffenbach
   (3) Hulke
   (4) Fergusson

71. Telecanthus is defined as
   (1) Lateral displacement of orbits
   (2) Lateral nasal displacement
   (3) Increased width of nasal bridge line
   (4) Prominence of supra orbital rims

72. In a case of craniofacial macrosomia, which of the following is true regarding jaw opening?
   (1) Jaw does not deviate on opening
   (2) Jaw deviates to the affected side
   (3) Jaw deviates to the normal side
   (4) Clicking of jaw is present on the affected side

73. All are true regarding submucous cleft palate except
   (1) Bifid uvula
   (2) Notching of hard palate
   (3) Muscular diastasis of the soft palate with intact mucosa
   (4) Pterygoid Hamulus is absent

74. The following is true regarding cleft palate surgery
   (1) Intravelar veloplasty involves repair of nasal mucosa
   (2) Veau-Kilner-Wardill technique is a push forward technique
   (3) Langenbeck technique involves raising a unipedicled flap
   (4) Furlow’s technique is a Y – V plasty

75. Retrognathia is the term used for
   (1) Mandibular enlargement
   (2) Mandibular protrusion
   (3) Maxillary retrusion
   (4) Mandibular retrusion
76. Le Fort II osteotomy may be indicated in
   (1) Thyrotoxic exorbitism
   (2) Binder syndrome
   (3) Apert syndrome
   (4) Crouzon's syndrome

77. The facial bipartition technique is best suited to the correction of
   (1) Hemifacial microsoma
   (2) Apert's syndrome
   (3) Mandibular prognathism
   (4) Frontonasal encephalocele

78. In relation to presurgical orthopaedics in context of cleft lip and palate
   (1) can be undertaken simply by use of an obturator
   (2) its use is universal in severe deformities
   (3) dynamic devices are often fixed to the mandible
   (4) despite their benefits, they can make subsequent cleft repair more difficult

79. Which one of the following is true regarding Furlow's double opposing Z plasty in cleft palate repair?
   (1) The levator muscle is included in the anteriorly based flap
   (2) The levator muscle is included in the posteriorly based flap
   (3) Z plasty is performed on the oral surface
   (4) The levator muscle is not dissected

80. The triad of Pierre Robin sequence consists of which one of the following?
   (1) Glossoptosis, micrognathia and cleft palate
   (2) Glossoptosis, cleft palate and TMJ ankylosis
   (3) Glossoptosis, micrognathia and airway obstruction
   (4) Glossoptosis, micrognathia and TMJ ankylosis

81. A patient with an isolated chest wall defect 4 cm in diameter involving two ribs with adequate soft tissue is treated appropriately by
   (1) Nylon or polypropylene mesh only
   (2) Any mesh with a methyl methacrylate sandwich
   (3) Methyl methacrylate alone
   (4) No chest wall reconstruction is needed

82. Which of the following statements regarding autologous breast reconstruction is incorrect?
   (1) Tissue expanders do not work well for irradiated chest wall breast reconstruction
   (2) The nipple must always be resected in cases of invasive breast cancer at less than 2.5 cm of the areola
   (3) Primary reconstruction is usually better than secondary reconstruction
   (4) Skin sparing mastectomy yields more local recurrences
83. In the process of breast implant selection, the following are important except:
   (1) soft tissue quality
   (2) implant volume
   (3) Bra and cup size
   (4) Implant shape and type

84. Concerning mastopexy:
   (1) Lassus is credited with describing the vertical mastopexy without undermining
   (2) Lassus is credited with describing the vertical mastopexy with undermining
   (3) Ptosis is derived from the Greek word for 'hanging'
   (4) The Benelli technique does not allow parenchymal repositioning

85. The most reliable technique of breast reduction to preserve Nipple Areola Complex (NAC) sensitivity is:
   (1) The superior pedicle
   (2) The inferior pedicle
   (3) Lateral pedicle
   (4) Wuringer's septum based pedicle

86. In which one of the following mastectomies, both the pectoralis major and minor are removed?
   (1) Simple mastectomy
   (2) Subcutaneous mastectomy
   (3) Halsted mastectomy
   (4) Modified radical mastectomy

87. Which of the following is not an advantage of immediate breast reconstruction after skin sparing mastectomy?
   (1) Improved cosmesis
   (2) Improved oncologic outcome
   (3) Psychologically beneficial
   (4) Smaller scarring

88. Good flap options for obliteration of defects of the pleural cavity include all except:
   (1) Rectus abdominis muscle flap
   (2) Serratus anterior muscle flap
   (3) Pectoralis major muscle flap
   (4) Latissimus dorsi myocutaneous flap

89. Pectus carinatum is characterised by which of the following:
   (1) Defect in the sternum
   (2) Depression of the sternum
   (3) Abnormal growth of the cartilage at the costochondral junction
   (4) Manubrium is spared in this deformity

90. Which of the following is not true of anatomical implants?
   (1) Indicated in patients with minimal soft tissue coverage
   (2) They may have higher rate of rotation
   (3) They may affect the early diagnosis of breast cancer
   (4) They can provide better aesthetic outcome
91. Which of the following arteries does not provide blood supply to the nipple areola complex?
   (1) Internal mammary artery
   (2) Intercostal perforators
   (3) Superior thoracic artery
   (4) Lateral thoracic artery

92. The most constant nerve that innervates the Nipple Areola complex is
   (1) 2nd Lateral Intercostal Nerve
   (2) 3rd Lateral Intercostal Nerve
   (3) 4th Lateral Intercostal Nerve
   (4) 5th Lateral Intercostal Nerve

93. Which one of the following free flaps is the flap of choice for reconstruction of breast?
   (1) TRAM flap
   (2) Anterolateral thigh flap
   (3) Tensor fascia lata flap
   (4) Gluteal flap

94. An undesirable complication observed by the patient following reduction mammoplasty
   (1) unequal reduction and nipple asymmetry
   (2) Fat necrosis
   (3) Dog ear
   (4) Hypertrophic scarring

95. In delayed breast reconstruction, the biggest disadvantage of using internal mammary vessels as recipient vessels for free TRAM flap is
   (1) small size of artery
   (2) inconsistent size of vein
   (3) abnormal course of artery
   (4) difficulty in access of these vessels

96. Which one of the following is an absolute contraindication for the use of latissimus dorsi muscle flap for breast reconstruction?
   (1) previous posterolateral thoracotomy
   (2) Smoker
   (3) Diabetes mellitus
   (4) Prior division of the thoracodorsal artery

97. A case of woody hard breast where the implant cannot be felt would fall into which grade as per Baker’s classification
   (1) Grade 1
   (2) Grade 2
   (3) Grade 3
   (4) Grade 4

98. Which of the following vessel is preferred as a recipient vessel for a free TRAM flap in immediate breast reconstruction?
   (1) Thoraco-dorsal vessels
   (2) Intercostal vessels
   (3) Thoraco-acromial vessels
   (4) Internal mammary vessels
99. The skate flap has been described for the reconstruction of which one of the following:
   (1) Oral commissure
   (2) Nipple
   (3) Lower lip
   (4) Soft tissue contour deformity

100. The rough texture of areola is due to the presence of which one of the following:
   (1) Cooper’s ligament
   (2) Sweat glands
   (3) Montgomery glands
   (4) Acne

101. The following is true regarding vaginal agenesis
   (1) Urinary abnormalities are rare
   (2) Caused by a defect in the mesonephric duct
   (3) Can be treated with a split skin graft
   (4) Vascularised bowel is the worst reconstruction option

102. With regards to management of pressure sores which is true?
   (1) Serum albumin measurements are helpful as a prelude to surgery
   (2) Surgical management is preferred
   (3) MRI is a poor modality in the assessment of osteomyelitis
   (4) Herbal remedies with or without acupuncture are often curative

103. In relation to penile reconstruction, which one of the following is true?
   (1) An ulnar forearm free flap reconstruction has significant advantages over a radial forearm free flap
   (2) Reconstruction to fulfil sexual function and achieve orgasm is not feasible
   (3) Vascularised bone reconstruction using a free fibular flap is a fallacy
   (4) Penile nerve supply is exclusively from the genitofemoral nerve

104. Which method used to repair hypospadias is the odd one out?
   (1) Byars
   (2) Cecil Culp
   (3) Horton Devine
   (4) Duplay

105. Which is true regarding osteomyelitis in the lower limb?
   (1) The commonest causative organism overall is streptococcus pyogenes
   (2) Is classified by pairolero
   (3) The incidence in severe open tibial fractures is reduced from almost 50% to less than 1% with prophylactic antibiotics
   (4) A common causative organism in relation to joint replacements is a common skin commensal
106. For reconstructing a defect of the abdominal wall that is less than 7 cm which of the following is a technique of choice:
(1) Primary direct and layered closure
(2) Local fasciocutaneous flap
(3) Rectus abdominis musculocutaneous flap
(4) Free anterolateral thigh flap

107. Chordee is present circumferentially in which of the following location?
(1) 6 O'clock position
(2) all around the organ
(3) ventrally from 3 O'clock to 9 O'clock position
(4) dorsally from 9 O'clock to 3 O'clock position

108. In Filarial lymphoedema of lower extremity and genitalia, which part escapes involvement in penis?
(1) Penile base
(2) Penile shaft
(3) Glans and prepuce
(4) None of the above

109. An associated condition with hypospadias is
(1) ventral curvature
(2) misplaced urethral opening on ventral surface of penile shaft
(3) dorsal hood of skin
(4) cryptorchidism

110. Which one of the following is the method of choice for vaginal reconstruction following pelvic exenteration?
(1) Flap of colon
(2) Gracilis flap
(3) Full thickness skin graft
(4) Split thickness skin graft

111. A decubitus ulcer with exposed bone would be placed in which grade
(1) Grade 1
(2) Grade 2
(3) Grade 3
(4) Grade 4

112. Peyronie's disease is characterised by the formation of fibrous nodules within which of the following layer?
(1) Skin
(2) Tunica albuginea
(3) Buck's fascia
(4) Dartos fascia

113. Virchow's triad related to deep venous thrombosis in lower limb consists of venous stasis, intimal injury and
(1) Thromboembolism
(2) Hypercoagulability
(3) Low platelet count
(4) Protein C deficiency

114. Which one of the following is an ingredient of tumescent fluid for liposuction that requires bicarbonate need?
(1) Ringer lactate
(2) Normal saline
(3) Epinephrine
(4) Lidocaine
115. The increased blood viscosity in diabetic microangiopathy is attributed to
(1) White blood cell
(2) Red blood cell
(3) Platelet
(4) Macrophages

116. The various compartments of leg have blood supply from two angiosomes except
(1) Anterior compartment
(2) Lateral compartment
(3) Posterior compartment
(4) Deep Posterior compartment

117. The MAGPI (Meatal advancement and glanuloplasty incorporation) procedure is indicated for which one of the following:
(1) Coronal hypospadias without stordee
(2) Midpenile hypospadias with stordee
(3) Penoscrotal hypospadias
(4) Perineal hypospadias

118. Which one of the following pressure sore typically presents with minimal skin involvement and extensive bursa formation?
(1) Sacral
(2) Trochanteric
(3) Ischial
(4) Heel

119. The primary advantage of a musculocutaneous perforator flap is to
(1) Spare the muscle
(2) Increase the vascularity of the flap
(3) Increase the versatility of the flap
(4) Increase the skin island of the flap

120. Which of the following is true in the reconstruction of traumatic lower limb injuries?
(1) Use of the medial head of gastrocnemius leads to a significant functional deficit
(2) Scoring of the fascia of gastrocnemius can allow the flap to cover a larger area
(3) Soleus and gastrocnemius have the same pattern of vascular supply
(4) The lateral head of gastrocnemius is larger than the medial head

121. The mechanism of tissue injury in electrical burns is due to
(1) Thermal trauma
(2) Passage of current through the skin, subcutaneous tissue, nerves, vessels and muscles which offer least resistance
(3) High levels of chemicals that develop inside the tissues namely thromboxane
(4) All of the above

122. In a case with burn contractures of the axilla, elbow and wrist which one should be released first?
(1) Axilla
(2) Elbow
(3) Wrist
(4) All of them simultaneously
123. The specific antidote for hydrofluoric acid burns of an upper extremity is
(1) Milk
(2) Calcium gluconate gel
(3) Kerosene
(4) Dilute sodium hyposulfite

124. Contracture is defined as
(1) Limitation of active and passive range of motion across a joint
(2) Fibrosis of skin or underlying musculoskeletal structures across a joint
(3) Approximation of the two opposing surfaces across a joint due to fibrosis with loss of full range of active and passive motion
(4) Contracture of joint with loss of passive movements

125. A burnt hand should be kept elevated and dressed in
(1) Coin picking position
(2) Cricket ball holding position
(3) Hammer throw position
(4) Any of the above

126. Cubital tunnel syndrome is compression of which one of the following nerves?
(1) Median nerve
(2) Radial nerve
(3) Ulnar nerve
(4) Posterior interosseous nerve

127. How many nerve compression syndromes have been described in the upper extremity?
(1) Six
(2) Seven
(3) Eight
(4) Nine

128. Buried dermal flap procedure for treatment of lymphoedema was popularised by
(1) Kondolean
(2) Thompson
(3) Miller
(4) Charles

129. Hypoplastic thumbs type II of the Blauth classification can be treated successfully by
(1) Releasing the contracted 1st web space, reconstruction of ulnar collateral ligament, transposition flap in 1st web space, a full thickness skin graft and opponensplasty.
(2) Releasing the contracted 1st web space, reconstruction of radial collateral ligament, transposition flap in 1st web space, a full thickness skin graft and opponensplasty.
(3) Amputation of the hypoplastic thumb and a toe to hand transfer
(4) Amputation of hypoplastic thumb, index finger pollicisation and FTG
130. Regarding tumours in the hand which is true?
   (1) Giant cell tumours of tendon sheath are always related to synovium
   (2) Melorheostosis is a lymphoma
   (3) Hildreth’s test differentiates glomus tumours from other vascular tumours
   (4) Giant cell tumours of tendon sheath recur commonly and are usually benign.

131. A contraindication to centralisation or radialisation of radial club hand is
   (1) Stiff elbow
   (2) Stiff finger
   (3) Stiff shoulder
   (4) Absent thumb

132. In carpal tunnel syndrome all are true except
   (1) there is a 25% incidence in males
   (2) carpal tunnel decompression was first performed in 1896
   (3) it is commonly bilateral
   (4) the age of presentation rises towards a peak in the late fifties

133. Excision of a ganglion on the dorsum of the wrist may lead to development of a neuroma in relation to which one of the following nerve
   (1) Radial
   (2) Median
   (3) Ulnar
   (4) Posterior interosseous

134. Crossed polydactyly refers to
   (1) Radial polydactyly
   (2) Ulnar polydactyly
   (3) Radial and Ulnar polydactyly
   (4) Both hand and feet polydactyly

135. While managing electrical burns of the hand and upper extremity during initial exploration and debridement of necrotic tissue one should refrain from
   (1) Extensive debridement of tendons
   (2) Ulnar and median nerve debridement
   (3) Both (1) and (2)
   (4) None of the above

136. Imaging characteristics suggestive of malignant nerve sheath tumours include all except
   (1) Larger size and perilesional oedema
   (2) Heterogeneous enhancement
   (3) Perilesional enhancement on MRI
   (4) Standardized uptake value with fludeoxyglucose F18 on PET less than 4.0

137. A turret exostosis of the proximal phalanx should be treated by
   (1) Intrallesional excision of the lesion
   (2) Marginal excision of lesion and periosteum over it
   (3) Wide excision
   (4) Radical excision
138. In ‘triple nerve palsy’ in Leprosy, surgical intervention includes

(1) Transfer of pronator teres to extensor carpi radialis brevis (ECRB) to provide wrist extension

(2) Flexor carpi radialis (FCR) is transferred to provide four finger extension and palmaris longus for thumb extension

(3) Flexor digitorum superficialis of middle finger transfer to provide MC flexion of four fingers and FDS of ring finger for opponensplasty

(4) All of the above

139. Malignant giant cell tumour of the distal end of radius that has not broken through the cortex should be treated by

(1) Shelled out in pseudo capsule

(2) Intra compartmental en bloc excision with cuff of normal tissue

(3) Extra compartmental en bloc excision

(4) None of the above

140. In a freshly burned hand, the common position of hand, a recipe for disaster, that is assumed by the patient is

(1) position of comfort

(2) position of immobilisation

(3) position of function

(4) safe position

141. The key developments in zone 2 flexor tendon injury repairs are all except

(1) use of a strong core suture – 4/6 strand repair

(2) venting the critical annular pelley

(3) slightly tensional repair and performing digital flexion – extension test

(4) late partial range active motion to ensure tendon gliding

142. In nerve injuries, motor fibres are distinguished from sensory fibres in the proximal segment by all except

(1) Internal topography

(2) Intra-operative stimulation

(3) Neurolysis with the eyes

(4) Fascicular identification is not required

143. The commonest inheritance pattern for Dupuytren’s disease is

(1) Autosomal recessive

(2) Autosomal dominant

(3) Sex linked dominant

(4) Sex linked recessive

144. The least common sarcoma in the hand is

(1) Chondrosarcoma

(2) Liposarcoma

(3) Synovial sarcoma

(4) Fibro sarcoma

145. Lasers produce their effect through which one of the following:

(1) Photothermolysis

(2) Vaporisation

(3) Thermocoagulation

(4) Photocoagulation
146. Which filler substance is correctly matched with its trade name?
(1) Hydroxyapatite and Radiesse®
(2) Hyaluronic acid and Sculpture®
(3) Acellular cadaveric dermis and Zyderm®
(4) Large particle hyaluronic acid and Bioalcamid®

147. The following classifications are relevant to alopecia
(1) Ludwig
(2) Norwood
(3) McCauley
(4) All of the above

148. Which of the following techniques of face lift has the highest rate of facial nerve damage?
(1) Deep plane
(2) Sub superficial Musculo Aponeurotic System (SMAS)
(3) Subcutaneous plane
(4) Sub periosteal

149. Which of the following lasers is matched with its correct wave length?
(1) Alexandrite – 755 nm
(2) Carbon dioxide – 2940 nm
(3) Erbium – YAG – 10,600 nm
(4) KTP – 1064 nm

150. Botulinum toxin
(1) is derived from Bacillus anthracis
(2) is derived from Bacillus botulinum
(3) is derived from spore-forming anaerobic bacteria
(4) can cause tetanus

151. Which of the following subcutaneous infiltration techniques used in a patient undergoing suetion lpectomy has an infiltrate to aspirate ratio of 1:1?
(1) Dry
(2) Super wet
(3) Tumescent
(4) Wet

152. A patient with true ptosis would have all the following characteristic features except:
(1) Upper lid would cover more than 1.0 mm of cornea
(2) Upper lid cannot be moved upwards to clear the cornea
(3) Upper lid skin fold is almost nonexistent
(4) The upper eyelid skin hangs down to cover the lid margin

153. Resection of which of the following muscles is most appropriate for treating a forty year old female with transverse rhytids along the root of nose:
(1) Corrugator supercilli
(2) Procerus
(3) Frontalis
(4) Orbicularis oculi

154. Regarding structural fat grafting which is true?
(1) It should never be used in the nose
(2) Can be used to augment midface hypoplasia
(3) No risk of blindness when used around the eye
(4) HIV is an absolute contraindication
155. Which of the following is not a useful nerve block for peri-orbital surgery?
(1) Infra-orbital nerve block
(2) Anterior ethmoidal nerve block
(3) Zygomaticofacial nerve block
(4) Frontal nerve block

156. The risk of nerve injury in danger zone in forehead plasty is to
(1) Supratrochlear nerve
(2) Superficial division of supraorbital nerve
(3) Deep division of supraorbital nerve
(4) No risk of nerve injury

157. The advantages of closed rhinoplasty include all except
(1) No external scar
(2) Makes dissection of alar cartilages difficult especially in malposition
(3) Permits creation of a precise pocket for graft material without need for fixation
(4) Allows composite grafting to alar rims

158. The most important single variable in the coverage achievable in hair transplantation
(1) Hair length
(2) Hair density
(3) Total area coverage
(4) Hair diameter

159. All are true for spreader grafts except
(1) they can be used to stent open the internal nasal valve
(2) stabilize the septum
(3) preserve or enhance the dorsal aesthetic lines
(4) secured with 5-0 Nylon in vertical mattress fashion

160. The advantages of CO₂ laser cutaneous resurfacing over Erbium: YAG laser include all except
(1) More tissue contraction
(2) Excellent haemostaiss
(3) Shorter post laser recovery
(4) Long lasting results

161. The term ‘SOOF’ in relation to midfacial aging refers to which one of the following:
(1) Sub orbicularis oculi fat
(2) Sub orbicularis oris fat
(3) Superficial orbicularis oris fat resection
(4) Supra fascial orbicularis oris fat transfer

162. Which one of the following areas is not favourable for liposuction?
(1) Lateral side of arm
(2) Posterior side of arm
(3) Medial side of arm
(4) Anterior side of arm

163. Morbid obesity is
(1) BMI – 25 TO 29.9
(2) BMI – > 30
(3) BMI – 35 TO 39.9
(4) BMI > 40

164. The most common location in arm for redundant skin in the massive weight loss patient is
(1) Anterior axillary fold
(2) Posterior axillary fold
(3) Both (1) and (2)
(4) None of the above
165. The last cell to enter wound during inflammatory phase of wound healing is:
   (1) Platelet
   (2) Neutrophil
   (3) Lymphocyte
   (4) Macrophages/Monocyte

166. Match List I with List II and select the correct answer by using the codes given below:

   **List I**      **List II**
   (A) Gillies and Millard (a) Principles and Art of Plastic Surgery (1957)
   (B) Majno (b) The Healing Hand (1975)
   (C) Sushruta (c) Sushruta Samhita (600 BC)
   (D) Szymanowski (d) Manual of Operative Surgery (1870)

   **Codes:**
   A  B  C  D
   (1) d  b  c  a
   (2) a  b  c  d
   (3) d  a  c  b
   (4) a  d  c  b

168. When a scar does not cross a line of minimal tension, revision is best done by:
   (1) Z plasty
   (2) W plasty
   (3) Fusiform excision
   (4) M plasty

169. In autosomal dominant inheritance, an affected individual has the following chance of having an affected offspring:
   (1) 25 percent
   (2) 50 percent
   (3) 75 percent
   (4) 100 percent

170. Which is not true of a ‘SHAFT’ syndrome patient?
   (1) sad and hostile
   (2) sharp and hostile
   (3) anxious
   (4) frustrated and tenacious

171. Following is true for midazolam, except
   (1) it is a benzodiazepine
   (2) is a short acting agent that acts predominantly on central nervous system
   (3) its effect is not dose dependent
   (4) can be used as a premedication / sedative

172. For medical photography in plastic surgery, a patient should be placed at a distance of _____ to eliminate shadows:
   (1) 1 foot in front of the background
   (2) 2 feet in front of the background
   (3) 3 feet in front of the background
   (4) 4 feet in front of the background
173. An absolute contraindication for split skin grafting of a granulating wound is the presence of:
(1) Staphylococci
(2) β-hemolytic streptococci/streptococcus pyogenes
(3) Pseudomonas aeruginosa
(4) Bacillus proteus

174. Every third amino acid in collagen is
(1) Proline
(2) Hydroxyproline
(3) Glycine
(4) Hydroxylysine

175. Body mass index is calculated by
(1) Ratio of soft tissue mass to bone mass
(2) Multiplying height (in metres) by weight (in kgm)
(3) By dividing body weight in kgm by square of body height in metres
(4) By dividing twice the body weight in kgm by half the height in metres

176. Which of these conditions is a disorder of collagen?
(1) Marfan syndrome
(2) Cutis laxa
(3) Progeria
(4) Osteogenesis imperfecta

177. Knowledge of statistical concepts is important to practice evidence based plastic surgery.
Following statements are true except:
(1) Regression analysis is used to find how one set of data relates to another.
(2) Correlation measures the strength of association between variables.
(3) P value gives the probability of any observed difference having happened by chance.
(4) Mode is the point which has half the values above and half the values below.

178. Who is considered as ‘Father of Foetal Surgery’?
(1) William Liley
(2) Harold Gillies
(3) Joseph Lister
(4) Mc Indoe

179. Who performed and published the first successful free ‘great toe to hand’ transfer in humans?
(1) Nakayama (1964)
(2) Komatsu and Tamai (1965)
(3) Cobbett (1968)
(4) Mc Lean and Buncke (1972)

180. Thinning of a paramedian forehead flap for nasal reconstruction is
(1) Never safe
(2) Only feasible at the distal 1 cm of the flap
(3) Safest, if performed at an intermediate stage
(4) Generally, not necessary to achieve a good result