

Time 45 minutes.

-Pain on pulling the pinna is almost diagnostic of

- a) Wax ear
- b) Otomycosis
- c) Furunculosis
- d) ASOM
- e) All of above

-watery discharge from external meatus is seen in

- a) Acute Otitis media
- b) Chronic Otitis media
- c) Otitis externa
- d) Tympanic membrane perforation
- e) None of above

-Causative agent of malignant otitis externa

- a) Staph aureus
- b) Beta hemolytic streptococcus
- c) Pseudomonas
- d) H influenza
- e) None of above

-The type of tympanogram which is seen in OME is called

- a) Type a graph
- b) Type b graph
- c) Type c graph
- d) Type Ad graph
- e) None of the above

-The commonest etiological factor for otitis externa is

- a) Local trauma
- b) Chest infection
- c) Eustachian tube dysfunction
- d) URTI
- e) None of the above

-In OME gold standard investigation is

- a) X ray mastoid bone
- b) PTA
- c) Tympanometry
- d) Tuning fork tests

-in OME patient can have all the complaints except

- a) Hearing loss
- b) Learning difficulties
- c) Speech delay
- d) Ear discharge
- e) Recurrent infections

-The most commonly involved organisms of ASOM are

- a) Staphylococcus aureus and beta hemolytic streptococcus
- b) Staphylococcus aureus and H Influenzae
- c) Streptococcus pneumoniae and H Influenzae
- d) E coli and klebsiella
- e) None of above

-ASOM is more common in children as

- a) They have Short, wide and more horizontal Eustachian tube
- b) They have low immunity
- c) They live in a close community
- d) They are more prone to infection
- e) None of above

-The commonest etiological factor for ASOM is

- f) Local trauma
- g) Chest infection
- h) Eustachian tube dysfunction
- i) URTI
- j) None of the above

- During suppurative phase of acute suppurative Otitis media one can do following operation

- a) Myringoplasty
- b) Tympanoplasty
- c) Myringotomy
- d) Mastoidectomy
- e) none of the above

-The operation done to reconstruct tympanic membrane perforation is called

- a) Tympanoplasty
- b) Myringoplasty
- c) Ossiculoplasty
- d) None of the above

-The most common cause of tympanic membrane perforation in children is

- a) Otitis externa
- b) OME

- c) Trauma
- d) Acute otitis media
- e) All of the above

-A patient having conductive type of hearing loss & type Ad tympanogram can have

- A) OME
- B) Otitis Externa
- C) Ossicular discontinuity
- D) Otoseclerosis
- E) Eustachian tube dysfunction

-Type C tympanogram indicates

- A) OME
- B) Otitis Externa
- C) Ossicular discontinuity
- D) Otoseclerosis
- E) Eustachian tube dysfunction

- Characteristic feature in PTA of a patient suffering from Acute Otitis media would be

- A) Bone conduction curve at 40 db level
- B) Gap between Air & bone conduction curves while bone conduction curve at normal level
- C) Both air & bone conduction curve at 40 db level
- D) Both air & bone conduction curves in normal range
- E) None of above

- PTA of a patient having Sensory Neural Hearing Loss can show

- A) Bone conduction curve at 40 db level
- B) Gap between Air & bone conduction curves while bone conduction curve at normal level
- C) Both air & bone conduction curve at 40 db level
- D) Both air & bone conduction curves in normal range
- E) None of above

- A 11 years child having cough, running nose & fever for 4 days developed severe right sided earache at 2 am at night. Till morning he started thick mucopurulent discharge from his right ear after which his earache subsided. Most probable diagnosis is,

- a) Otitis Externa
- b) Malignat otitis Externa
- c) Acute Otitis Media
- d) Otitis Media with effusion
- e) Chronic suppurative otitis media

In acute tonsillitis, the following bacteria may be responsible except

- a. Beta hemolytic streptococcus
- b. Staph aureus
- c. H influenzae
- d. Pseudomonas

- e. None of the above
- Follicular tonsillitis is a feature of
- a. Acute tonsillitis
  - b. Chronic tonsillitis
  - c. Peritonsillar abscess
  - d. Infectious mononucleosis
  - e. Diphtheria

Antibiotic of choice in case of acute tonsillitis is

- a. Penicillin group
- b. Macrolides
- c. Cephadrine
- d. Ciprofloxacin
- e. Levofloxacin

Following are the cardinal signs of chronic tonsillitis except

- a. Flushing of anterior pillar
- b. Enlarged jugulodiagastric lymph nodes
- c. Tonsils with prominent crypts
- d. Edema and redness of soft palate
- e. None of the above

The most common method of tonsillectomy

- a. Dissection method
- b. Guillotine method
- c. Laser
- d. Electrical cauterization
- e. Cryosurgery

The latest method of tonsillectomy is

- a. Dissection method
- b. Guillotine method
- c. Laser
- d. Electrical cauterization
- e. Cryosurgery

The main complication of tonsillectomy is

- a. Remnant
- b. Damage to teeth
- c. TM joint dislocation
- d. hemorrhage

Q.No.1- A 50 year male known diabetic came in OPD with complaint of otalgia and right ear discharge for last 2 weeks. He has been taking medications but his symptoms are not improving. on examination the ear was full of granulation tissues & there was paralysis of fascial nerve of right Side.

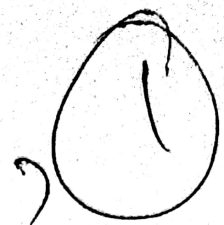
1. whats most probable diagnosis 1
2. name the investigations for this patient to reach the diagnosis 2
3. whats treatment in this case 2

Q.1 - Malignant otitis externa. (1)

Q.2 - CT Scan. (1)

MOT

- Treatment
- control of diabetes.
  - Analgesic
  - Antibiotic treatment
  - surgical removal.



Q.No.2 A 6 years child came in opd. Her mother complains about his mouth breathing and snoring at sleep for the last 1 year. She is also worried due to his inattentive behaviour and poor hearing.

1. whats most probable diagnosis 1
2. what findings do you expect on otoscopy 2
3. name investigations with justification 2
4. how would you treat this child.

- 1) Adenoid Hypertrophy with OMC 1
- 2) → Redness of tympanic membrane
- Leash of blood vessels
- Bulging of tympanic membrane. can be present.
- Handle at malleus can be horizontal.

- 3) → X-ray nasopharynx lateral view.  
→ Audiometry to check the bone conduction  
→ Tympanometry shows its type? (1)

4)

Q.No. write short note on treatment of secondary hemorrhage after tonsillectomy.

3

Secondary Haemorrhage -

are occurs after the tonsillectomy. The treatment of secondary hemorrhages is normal. & just to wash the wound and clear the blood clot. & encouraged patient to take cold fluids & liquids. & clear the clots with water. & control the bleeding by vessels ligation by electrical cautery.