

*Pina W*

1. Potato nose is seen in:
  - Malignancy
  - Sarcoidosis
  - Rhinophyma
  - Rhinosporidiosis
  
2. Extraction of which tooth commonly leads on to oroantral fistula:
  - a. Second pre molar
  - b. First molar
  - c. First pre-molar
  - d. Second molar
  
3. Sodium chromoglycate is helpful in allergic rhinitis because it causes:
  - a. Desensitization
  - b. Decongestion of nasal mucosa
  - c. Mast cell stabilization
  - d. Vasoconstriction
  
4. Nasal polyps in a child should arouse the suspicion of:
  - a. Celiac disease
  - b. Aspirin hypersensitivity
  - c. Cystic fibrosis
  - d. All the above
  
5. squamous papilloma of the nose arises from
  - a. Turbinates
  - b. Vestibule
  - c. Septum
  - d. Any of the above
  
6. Best approach for surgical excision of inverted papilloma of nose is:
  - a. Caldwell-luc's approach
  - b. External ethmoidectomy
  - c. Intranasal approach
  - d. Lateral rhinotomy
  
7. Syphilis of nose usually involves the:
  - a. Nasal septum
  - b. Ethmoid sinus
  - c. Nasal bone

d. Maxillary sinus

8. Septal perforation may be seen in all EXCEPT:

- a. Tuberculosis
- b. Syphilis
- c. Leprosy
- d. Toxoplasmosis

9. Cosmetic rhinoplasty is preferably avoided in:

- a. Nose with thick greasy skin
- b. Ethnic noses
- c. Over forty years of age
- d. All of the above

10. Cribriform plate is a part of:

- a. Ethmoid bone
- b. It is a separate bone
- c. Frontal bone
- d. Vomer

11. Treatment for carcinoma maxillary sinus is:

- a. Radiotherapy
- b. Radiotherapy followed by surgery
- c. Maxillectomy followed by radiotherapy
- d. Chemotherapy only

12. Sphenopalatine foramen is site for origin of following

- a. Bulla ethmoidalis
- b. Middle turbinate
- c. Nasopharyngeal carcinoma
- d. angiofibroma

13. Sensory supply of nasal cavity mainly from the:

- e. Ophthalmic nerve
- f. Infra orbital nerve
- g. Maxillary nerve
- h. Vidian nerve

14. Radiologically, maxillary sinus is best seen in:

- i. Lateral view
- j. Oblique view
- k. Occipito frontal view

I. Occipitomenal view

15. Commonest intracranial complication of sinusitis is:

- m. Brain abscess
- n. Cavernous sinus thrombosis
- o. Cortical venous thrombosis
- p. Meningitis

16. Reduction rhinoplasty is for:

- q. Hump nose
- r. Narrow nose
- s. Crooked nose
- t. Saddle nose

17. A 40 yr old man visited ENT OPD many times over the last few years, with complaints of nasal obstruction, headache, facial discomfort & mucopurulent nasal discharge. He has impaired sense of smell although no rhinorrhea. Several sinus washouts & B/L antrostomies have been tried but with little or temporary relief. There is crusting & purulent discharge in both nasal cavities, nasopharynx & oropharynx. Inferior turbinates hypertrophied. X-Ray PNS shows complete opacification of maxillary & ethmoidal sinuses, frontal being clear though smaller than average. Most likely diagnosis? a) Chronic sinusitis b) Chronic Rhinitis c) Fungal sinusitis d) Mucormycosis e) Aspergillosis

18. Fracture zygoma shows all features except (a) diplopia (b) CSF rhinorrhea (c) epistaxis (d) trismus (e) malar eminence flattening

19. Horner's syndrome is caused by

(a) Nasopharyngeal CA metastasis (b) Facial bone injury (c) Maxillary sinusitis (d) Ethmoidal polyp (e) Leforte III fracture

20. Apple jelly nodules in nasal septum is seen in

(a) lupus vulgaris (b) TB (c) Scleroma (d) sarcoidosis (e) Wegener's granulomatosis.

21. The nasal infection can drain into cavernous sinus leading to cavernous sinus thrombosis. The route of spread of infection is through

- a. Artery
- b. Vein
- c. Lymphatic
- d. All of above

22. Toxic shock syndrome is caused by

- a. Beta Hemolytic streptococcus
- b. Streptococcus pneumoniae
- c. Staphylococcus aureus
- d. None of the above

23. A 5 year boy came with history of trauma nose 4 days back and bilateral nasal obstruction for last 2 days. There was no history of bleeding from nose. On examination patient was afebrile & both nasal cavities revealed smooth rounded fluctuant swellings of the septum. The most probable diagnosis is

- a. Clotted blood in both nasal cavities
- b. DNS
- c. Septal Hematoma
- d. Septal perforation

24. In above case the treatment should be

- a. Suction clearance of nasal cavities
- b. Immediately do incision and drainage
- c. Septal surgery
- d. Incision and drainage after seven days of antibiotics

25. The latest technique to reduce the size of turbinate is

- a. Local decongestants
- b. Linear cauterization

- c. Partial turbinectomy  
d. Laser
26. A 20 year lady came in OPD with complaint of sneezing, watery nasal discharge itching and nasal obstruction for last 10 years. On examination the nasal mucosa was pale looking and inferior turbinate was hypertrophied. The most probable diagnosis is
- Atrophic rhinitis
  - Vasomotor rhinitis
  - Infective rhinitis
  - Allergic rhinitis
27. A 25 year male came in OPD with complaint of right sided nasal obstruction for last 3 years and history of repeated attacks of nasal infection for last 3 years, Anterior rhinoscopy is unremarkable & throat examination showing a smooth greyish mass covered with nasal discharge which is hanging down from nasopharynx, The most probable diagnosis is
- Adenoid hypertrophy
  - Antrochoanal polyp
  - Ethmoidal polyp
  - Carcinoma nasopharynx
28. In litte's area the following vessels anastomose
- Superior labial artery
  - Greater palatine artery
  - Sphenopalatine and anterior ethmoidal artery
  - All of above
29. The commonest cause of epistaxis is
- Idiopathic
  - Hypertension
  - Trauma
  - Bleeding disorders
30. The following vessel can be ligated during surgical treatment of epistaxis
- Sphenopalatine artery
  - Maxillary artery
  - External carotid artery
  - All of above
31. The latest treatment of epistaxis is
- Anterior nasal packing
  - Posterior nasal packing
  - Endoscopic cauterization of sphenopalatine artery
  - Ligation of anterior ethmoidal artery
32. If a patient came in OPD with complaint of external deformity of nose for last 2 months. He had a history of trauma nose 2 months back. On X-Ray nose lateral view there was no fracture of nasal bone the treatment of choice is
- No treatment only reassurance
  - Fracture correction
  - Septorhinoplasty
  - Rhinoplasty
33. Which of the following sinus is absent at birth
- Maxillary sinus
  - Sphenoid sinus
  - Ethmoidal sinus
  - None of above
34. A 20 years lady came in OPD with complaint of foul smell from nose noticed by the parents of the patient and nasal obstruction for last 2 years. She underwent turbinectomy 2 ½ years back. On examination nasal cavity appeared roomy with atrophy of turbinates and greyish black dry crusts seen covering the turbinates. The most probable diagnosis is
- Sinusitis

- b. Infective rhinitis
- c. Atrophic rhinitis
- d. Allergic rhinitis
- e. Vasomotor rhinitis

**35. The type of malignancy which is seen in hardwood industry is**

- a. Squamous cell carcinoma of nose and paranasal sinuses
- b. Adeno carcinoma of nose and paranasal sinuses
- c. Lymphoma of nose and paranasal sinuses
- d. Adenoid cystic carcinoma of nose
- e. Sarcoma of nose

Write short note on fess

A 20 year old boy came in ent opd with swelling nose .mild epistaxis .He had history of fight in his village 2 days back on anterior rhinoscopy there is deflection of septum with external deformity of nose ,How will you manage the patient .