Mcq ENT time allowed 45 minute

- 1. A 6y/M presented in ENT OPD with recurrent URTI, and mouth breathing. He was diagnosed as having adenoid hypertrophy. Adenoidectomy was done. 1 week after surgery the boy was again brought with to OPD with torticollis. Regarding this case
- a. Torticollis is not a complication of surgery .
- b adenoidectomy should not have been done as it would have regressed spontaneously
- c. due to velopharangeal insufficiency
- due to Grisel syndrome
- e. due to nasopharangeal stenosis
- 2- A 31 year old male admitted in Medical ward for dengue fever is complaining of bilateral nasal obstruction since 1 day. You are called to assess the patient. He gives no history of trauma to nose. On examination there is a smooth swelling in both nasal fossae. On palpation the mass is soft and fluctuant. Vital signs are within normal limits. Diagnosis?
- (a)DNS
- (b) septal abscess
- (C) septal hematoma
- (d)inverted papilloma
- (e) nasal polyp
- 3- A 22 year old woman presents to ENT OPD with long standing history of bilateral nasal obstruction, rhinorrhea & sneezing. The symptoms are only relieved with topical decongestants. There is watering profusely & anterior rhinoscopy reveals moist, swollen nasal mucosa with enlarged inferior turbinates. Most likely diagnosis?
- a)Acute viral rhinitis
- b) Vasomotor Rhinitis
- c)Acute bacterial rhinitis
- d Allergic rhinitis
- e)Atrophic Rhinitis
- 4- A child presents with ear infection with foul smelling discharge since 2 years. On further exploration a small perforation is found in the pars flaccida of tympanic membrane. Most appropriate next step in management i
- a)Topical antibiotics & decongestant for 4 weeks
- (b)IV antibiotics & follow up after 1 month
- (c)Tympanoplasty
- (d)Tympano-mastoid exploration
- (e)Grommet tube insertion
- 5- Obstructive sleep apnoea syndrome is due all except
- a. Enlarged tonsils
- b. enlarged adenoids
- (c.)short soft palate
- d. morbid obesity
- e. Macroglossia
- 6---A 17 year old female presents in emergency with complaint of severe pain in right ear for 8 hours. She also complains of pain in ear while eating. On examination movement of pinna causes severe pain. There is no history of ear trauma. Tympanic membrane is not visualized due to swelling in external auditory canal.
- (a)otomycosis
- (b)boil ear
- (c)diffuse otitis externa
- (d)malignant otitis externa
- (e)eustachian tube dysfuction
- 7--. Which one is not a typical feature of malignant otitis externa
- (a)Pseudomonas causative organism(
- b)old patient
- (c)diabetic patient(
- d mitotic figures are high
- (e)immunocompromised patient

8- Which of the following structures is seen in oropharynx? a. Eustachian tube b. fossa of rosenmuller (c) palatine tonsil d. pyriform sinus e. sphenopalatine foramen 9- Killians dehiscence is formed in a. Superior constrictor muscle b. middle constrictor muscle Cinferior constrictor muscle d. cricothyroid muscle e. thyrohyoid membrane 10-A 55 year old female presents with tinnitus, dizziness & progressive deafness. Differential diagnosis includes all except (a)Acoustic neuroma (b)Endolymphatic hydrops (c)Meningioma (d) Foriegn body (e)Glomus 11.A patient has bilateral conductive deafness, tinnitus with positive family history. Diagnosis is (a)Otospongiosis (b)Tympanosclerosis (c)Meniere's disease (d)otitis media (e)Acoustic neuroma 12. Post head injury patient has conductive deafness. On exam tympanic membrane is normal & mobile. Likely diagnosis (a)Distortion of ossicular chain (b)Haemotympanum( c)external ear canal sclerosis (d)otosclerosis (e)fracture temporal bone 13- A 8 y/M with recurrent URTI, mouth breathing, and failure to grow with high arched palate and impaired hearing a. Tonsillectomy b. adenoidectomy c. myringoto d. grommet insertion (e.) adenoidectomy+grommet insertion 14-A 5 year old boy has been diagnosed to have postero-superior retraction pocket cholesteatoma. All would constitute part of management except( a) Audiometry (b)mastoid exploration (c)Tympanoplasty (d)Myringoplasty (e)myringotomy 15-Horner's syndrome is caused by (a) Nasopharyngeal CA metastasis (b) Facial bone injury (c)Maxillary sinusitis (d)Ethmoidal polyp (e)Leforte III fracture 16- Cause of death in acute diphtheria is a. Myocarditis b. cardiac arrhythmia c. paralysis of soft palate d. paralysis of ocular muscles (C) paralysis of diaphragm 17. All are true regarding plummer Vinson syndrome except? (a)may lead to carcinoma in hypopharynx (b)common with iron deficiency anemia (c)common in females (d)malignant condition (e)common with glossitis 18.All the following cause a grey white membrane on tonsils except a. Infectious mononucleosis (b.)ludwigs angina c. membranous tonsillitis d. diphtheria e. aphthous ulcer 19- A 7 year old child has peritonsillar abscess, presents with trismus, the best treatment is (a)immediate drainage orally (b)drainage externally (c)systemic antibiotics upto 48 hours then drainage (d)tracheostomy

(e)antibiotics + analgesics

20Immediate treatment of CSF rhino	rrhea is
(a)antibiotics & observation(	b)plugging with paraffin guaze
(c)blowing of nose	(d)exploration
(e)head low position & vasoconstricted	nrs
21. The diagnosis in a patient with 6th no	erve palsy, retro-orbital pain & persistent ear discharge is
(a)Gradenigo's syndrome	b)Sjogren's syndrome
(c)Frey's syndrome	(d)Rendu osler weber disease
e)CSOM with complication	(-)
22. Cone of light is present in	
(a) Anterinferior quadrant	b. Antersuperior quadrant
c. Posteroinferior quadrant	d. Posterosuperior quadrant
e. centre	
23. Nystagmus produced by stimulation	of horizontal semicircular canal is
(a)horizontal	b. rotatory
c. vertical	d. all the above e. none of the above
24-A 30 year male presents with trisms	as, fever, swelling pushing the tonsils medially & spreading laterally
posterior to the middle sternocleidomast	oid. He gives history of extractionof 3rd molar few days back for
dental caries. The diagnosis is	•
(a)retropharyngeal abscess	b)Ludwing's angina
c)submental abscess	d)parapharyngeal abscess
(e)quinsy	Oharakana') agam ancom
25 Most appropriate investigation for	angio[ibroma is
a. (a)Angiography	(b)CT Scan
b. (c)MRI	(d)X-Ray nasopharynx
(e)biopsy	(-),
25.Most common presentation in nasoph	arvngeal CA is
(a)Epistaxis	(b)Hoarseness of voice
(c)deafness	d)cervical lymphadenopathy
(e)nasal stuffiness	
	plack foul smelling discharge from nose.Exam shows black
discoloration of inferior turbinate. Diagn	
(a.) (a)mucormycosis	(b)aspergillosis
D. (c)infarction of inferior turbinat	e (d)foreign body
c. (e)rhinosporodiosis	
	otitis media, does not respond to ampicillin. Exam revealed full &
bulging tympanic membrane, the treatme	
a. (a)systemic steroid	(b)ciprofloxacin
(b) (c)myringotomy	(d)cortical mastoidectomy(e)myringoplasty
28-Following are the causes of conductive	
a. ASOM	b-CSOM
c.Otosclerosis	c-Tumors of middle ear
eTyphoid fever	
29- Following are the causes of perceptive	hearing loss except
a. Typhoid fever	b-Meningitis
COssicular fixation	d-Labyrinthitis
e-Presbycusis	
20.	
30- In spheno-ethmoidal recess duct of following	
a. Maxillary sinus	b-Anterior Ethmoidal sinus
c-Anterior ethmoidal sinus	d-Posterior ethmoidal sinus
e-None of the above	
31-Adenoids are located at	
	h Destantan mall of
<ol> <li>Roof of the nasopharynx</li> </ol>	b-Posterior wall of nasopharynx

OJunction of roof and posterior wall of nasopharynx d-Lateral wall of nasopharynx

32-CFS rhinorrhea best diagnosed:

a. By collection of clear fluid in test tube

b-By nasal endoscope after intrathecal dye injection

(c) By beta-2 transferrin in electrophoresis

d-By seeing red hallow around clear circle and non stickiness of handkerchief

33- Choose the ototoxic drug among below

a. Cephradine c-Sulphonamides

b-Cefixime d-Cetrizine

e-tobramycin

34- Which of the statement is true regarding perceptive deafness?

- a. Patient speaks in a low tone and asks others to speak loudly
- b. Rinne is negative
- Weber is lateralized to normal ear
- d. Lesion is between ear canal and oval window
- e. Hearing aid is well tolerated by the patient

35- Regarding tunning fork test choose the best answer.

- a. Rinne's positive indicates conductive hearing loss
- b. Rinne's negatives indicates sensorineural hearing loss
- c. Rinne's negative indicates sensorineural hearing loss and normal hearing.
- d. Weber lateralized towards diseased side indicates sensorineural hearing loss

e. Central Weber indicates normal hearing

36-THE larynx is supplied above the vocal cord by following sensory nerve

a. External laryngeal nerve

6 Internal laryngeal nerve d-Recurrent laryngeal nerve

c-Vagus nerve

e-None of the above

37-In acute epiglotitis the most probable causative agent is

- a. Beta hemolytic streptococcus
- b. Steptococcus viridans and E Coli
- 🔼 H influenza type B
- d. Parainfluenza Type 1 and 2
- e. Corynebacterium diphtheriae

38-The most common and significant complication of sinusitis is

- a. Intracranial complications
- Orbital complications
- c. Bony complications
- d. Loco regional complications
- e. Chronic complications

39-Following is the most useful investigation tool for allergic rhinitis

- a. Serum IgE level
- b. Blood CP
- c. Nasal smear
- Skin test
- e. Provocation test

40--Regarding allergic rhinitis Choose the best answer.

- a. It is IgG mediated response of nasal mucosa.
- b) The treatment of choice is steroids
- c. The treatment of choice is sympathomimetics.
- d. The treatment of choice is antihistamines
- e. Treatment of choice is antibiotics

41-Ethi	noidal polyposis is usually a	ssociated with following dise	eas	e
a. <b>@</b> -A 42-Whi a.	Tuberculosis Asthma ch of the following condition Unilateral choanal atresia	b- Malignancy e- Septicemia is an emergency? b-Bilateral choanal atresia		Pneumonia
b.	asal polyps Nasal polyps	c-Malignancy of the nose		
	asomotor rhinitis following	symptom predominates		
a.) b. c.	Watery rhinorrhoea Nasal itching Watering of eyes			

44: treatment of choice vocal nodules is

a. Voice rest

d. Nasal obstructione. e) None of the above

b-Excision through laryngoscope

c-Excision through laser

c-Medical treatment

e-All of above

## 45-Treatment of retropharyngeal abscess is

- a. I/V antibiotics
- b. incision and drainage
- c. Aspiration though needle
- (d.) A+B
- e. None of the above