

Hepatobiliary system

1. Approach to asymptomatic Gallstone disease is:
 - a. Immediate surgery
 - b. elective surgery
 - c. wait and watch
 - d. Lithotripsy
 - e. Ursodeoxy colic acid in infusion

2. Regarding Stones in CBD all are true except
 - a. found in less than 30% of patients undergoing cholecystectomy
 - b. Can present With charcot's triad
 - c. are suggested by a CBD diameter of more than 9 mm
 - d. ERCP and sphincterotomy is a preferred treatment

3. Most common cause of acute pancreatitis is
 - a. Trauma
 - b. ERCP
 - c. Gallstones
 - d. drug-induced

4. The most common complication of hydatid cyst of liver is
 - a. Jaundice
 - b. ruptured to peritoneal cavity
 - c. Suppuration
 - d. Rapture into biliary channel
 - e. rupture into pleural cavity

5. the term splenunculi refers to
 - a. Calculi Within spleen
 - b. accessories spleen
 - c. atrophic spleen
 - d. small spleen
 - e. none of the above

6. In case of obstructive jaundice the first investigation of significant value is
 - a. MRCP
 - b. ERCP
 - c. CT scan
 - d. USG abdomen
 - e. PTC

7. contraindication for laparoscopic cholecystectomy is
 - a. obese patient
 - b. previous surgery
 - c. male patient
 - d. CA gallbladder
 - e. AC cholecystitis

8. following are problems in obstructive jaundice patient except
 - a. biliary obstruction and sepsis
 - b. impaired clotting
 - c. Risk of renal failure
 - d. impaired resistance to infection
 - e. Hypoproteinemia

9. a patient with recurrent attack of cholangitis had on USG examination a dilated CBD of the next best line of Management:
 - a. Ercp
 - b. PPC
 - c. I/V cholangiogram
 - d. Cholecystostomy
 - e. MRCP

10. A retained stone impact in distal CBD is on T-tube cholangiogram. What is the best management of stone:
 - a. Dissolution therapy
 - b. operative removal
 - c. endoscopic sphincterotomy and stone extraction
 - d. no active treatment is required
 - e. Burhen's technique

11. Callot's Triangle is bounded by all except
 - a. Liver
 - b. common hepatic duct
 - c. CBD
 - d. cystic duct

12. most common cause of benign CBD stricture is
 - a. post surgical
 - b. Sclerosing cholangitis
 - c. Choledocolithiasis
 - d. parasitic infestation
 - e. bacterial cholangitis

13. Splenectomy is done in all of the following except
- Splenic abscess
 - Hereditary spherocytosis
14. most common complication of splenectomy:
- Left lower lobe atelectasis
 - acute dilation of stomach
 - peritoneal effusion
 - injury to pancreas
 - secondary hemorrhage
15. 53 year old man present in emergency with severe epigastric pain radiating to his back find some relief on leaning forward is suddenly become hypotensive with SOB and is taken to the resuscitation room The man also has an alcohol problem
- Acute cholecystitis
 - acute pancreatitis
 - chronic pancreatitis
 - benign gastric ulcer
16. In regards to pancreatic cancer all are true except
- 90% ductal carcinoma
 - less than 20% occur in head of gland
 - usual presentation is pain weight loss and obstructive jaundice
 - ultrasound has sensitivity of 80 to 90% in detection of tumour
 - less than 20% are suitable for active surgery
17. as regards Pancreatic pseudocyst the true statement is
- A walled of collection of amylase rich fluid in lesser sac
 - it is actually associated with chronic pancreatitis
 - it is also called is serous cystadenoma
 - It Appears during first week of acute pancreatitis
 - in majority of cases it has to be treated surgically by cystogastrostomy
18. the indications of choledectomy are except
- palpable Stones in CBD
 - dilated CBD
 - a positive pre-operative cholangiogram
 - Raised Transaminases
19. which of following is correct regard to hydatid liver disease
- human is definitely host for Echinococcus
 - producers tender hepatomegaly with Jaundice
 - it's a diagnosis is based on seroLogical test and images

20. the true statement as regard pancreatic secretion is
- stimulated by screening enterokinase
 - stimulated by secreting and cholecystokinin
 - it is acidic in nature
 - It is is rich is insulin and glucagon
 - proteolytic enzyme are secreted in active forms
21. 60 year old male presents with progressive jaundice weight loss and itchy over the body for past four months observation and examination liver and Gall bladder are the palpable, nontender the diagnosis is
- acute Viral hepatitis
 - CA head of pancreas
 - CA gallbladder
 - Hilar cholangiocarcinoma
 - Mirizzi's syndrome
22. In a child with biliary atresia the usg was inconclusive what should be the Next appropriate investigation
- CT scan
 - MRCP
 - Angiography
 - HIDA scan
 - CT pet scan
23. as regards bile secretion by the liver true statement is
- liver secretion bile at the rate of 400ml/hr
 - bile secretion is controlled by gastrin
 - bile pigments and cholestorm form main component
 - the gallbladder act as reservoir of bile only
 - bile secretion are controlled by cck
24. as regards of the hepatobiliary system the correct statement is
- X-ray abdomen is used for gallstones
 - only cholecystography is used for acute cholecystitis
 - USG is used for stones and biliary dilation
 - ercp is invasive than MRCP
 - CT with IV contrast is only used in tumors
25. about girls Champs all are correct except
- most common biliary pathology occurs in 5 to 15% of adult population
 - are symptomatic ine about 80%
 - there are three types cholesterol pigment and mixed
 - formed in gallbladder
 - Mixed stones are most common variety

26. the indication for choledocotomy are all except
- Stones in CBD
 - USG evidence of choledocolithiosis
 - dilated CBD
 - positive pre-operative Calangiogram
 - raised transaminases
27. ultrasonic features of acute cholecystitis are following except
- distended gallbladder
 - diffuse wall thickening
 - pericholecystic fluid
 - all of the above
 - intrahepatic biliary dilation
28. in a patient with obstructive jaundice which non invasive technique you will choose if the result of initial ultrasonography are
- CT scan
 - MRCP
 - PTC
 - Biliary santiography
 - none of the above
29. a 60 year old male presents with progressive jaundice and weight loss for last 6 months examination show deep jaundice hepatomegaly palpable gall bladder. the diagnosis is
- mucocele of gallbladder
 - CA gall bladder
 - CA head of pancreas
 - HCC
 - Cholangiocarcinoma