



The scalp laceration;



1. It should be repair in how many layers (1)
2. Which type of sutures should be used (1)
3. Suggest the type of dressing after repair (1)
4. Which structure is responsible of gapping of wound (2)

St 1

The CXR of a breathless Pt. with
trauma to Rt. Side of chest.



1. Write two radiological findings.(2)
2. What is clinical diagnosis (1)
3. What immediate life saving procedure to be done (2)

st 2

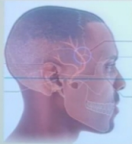
The Pt. of head trauma with bruise at his masoid.



1. What is this clinical sign.(2)
2. What type of lesion results this sign. (2)
3. What radiological investigation will you request (1)

St 3

Regarding Pt. of head injury.



1. What is this encircled area called.(1)
2. Name bones which make suture here. (2)
3. What is the significance of this area (1)
4. Bleeding from this artery gives rise to which type of hematomata (1)

st 5

The Pt. of head injury.



1. What is this clinical sign.(2)
2. What two lesions result this sign. (2)
3. What type of hemorrhage happened in conjunctiva (1)

St 4

A newborn down syndrome is brought to pediatric surgeon with bilious vomiting. Here is his X-ray:



1. What is radiological sign. (1)
2. What is your clinical diagnosis (2)
3. What suggestive clinical feature could have present on antenatal USG (1).
4. What operation would you suggest (1).

St 7

The Pt. of head injury-



1. What is this investigation (1)
2. What two radiological findings you noticed. (2)
3. What is the source of this bleed (1)
4. What are indications of surgical intervention (1)

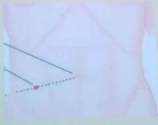
St 6



1. Name the artery supplying appendix (1)
2. This artery is the branch of (1)
3. What are the different positions of appendix (2)
4. What position of appendix associated with loose motions (1)

St 9

You are going to do your first appendectomy; you are asked to mark the incision;



1. Name the line joining the umbilicus and bony prominence (1)
2. What is the point over this line (1)
3. What incision will you make over this point (1)
4. What layers will be encountered before reaching appendix (2)

St 8

hemicolectomy:



1. What portion of gut is removed in the operation (1)
2. The anastomosis is based upon what arterial supply.(2)
3. What suture will you use in anastomosis. (0.5)
4. Write three possible indications of this operation (1.5)

St 10



1. Name the x-ray (1)
2. Write down two radiological finding noted (2)
4. What is the treatment of this condition (2)

St 11

**Sta
tion
=6**



1. Name the x-ray (1)
2. Write down two radiological finding noted (2)
4. What is the treatment of this condition (2)

st 11

The spinal anaesthesia in progress

- 1) At which intervertebral level the needle is inserted (1)
2. What are three main complications of this procedure (3)
3. In which space injection is made (1)



St 12



St 13

STATION NO : 17

1. What is the diagnosis (1)
2. What are other findings in the skin(2)
3. How will you investigate (1.5)

st 13

19



Station #10
13 y. boy with
X-ray

1. Name the X-ray (1)
2. What is Diag. (2)
3. Two common associated complications (2)



St 14

1. Name the study (1)
2. Identify three findings (2)
3. What is Diag. (1)
4. Two possible causes (1)



St 15



Station = 1

- Name the x-ray (1)
- What is radiological finding noted (2)
- Name two clinical conditions which give rise to this x-ray

St 16



Station =2

1. Name the x-ray (1)
2. Write down two radiological finding notes
3. What is the treatment and condition

St 17

Station =5



Name the x-ray

(1)

What is radiological finding noted

(2)

Name two clinical conditions which give rise to this x-ray

2

st 16

Station=3

- 1. Name the x-ray (1)
- 2. what was posture of patient (1)
- 3. Write down two radiological finding noted (2)
- 4. What is the diagnosis. (1)



St 18

Station #4



1. Write down three clinical features noted (1.5)
2. What is your diagnosis (1)
3. How will you confirm your diagnosis (1)
4. How you will rule out liver involvement (1.5)

St 19

Station =5

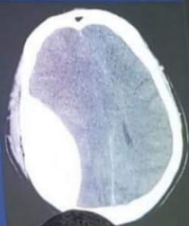
1. Name this investigation (1)
2. Write down two radiological finding noted (2)
3. What are the two possible causes (2)



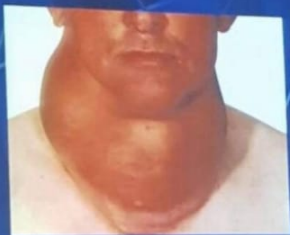
St 20

Station =6

1. Name this study (1.5)
2. Write down finding (1.5)
3. What operation will you suggest (2)

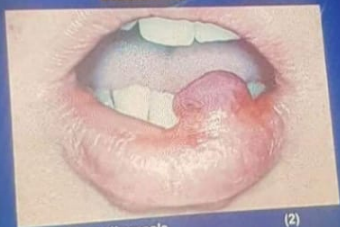


St 21



St 22

Station 12



1. What is ur diagnosis (2)
2. What is the cause of this condition? (1)
3. What is the treatment (1)

st 24

Station =13

• (70 y Pt. with the X ray above)

1. What is Diagnosis ?
(2)
2. What is the posture of leg on examination?
(1.5)
3. Suggest treatment .
(1.5)



st 23

Station =14

- 1. Name this study - 1.5
- 2. what is the finding in the study 1.5
- 3. What is your diagnosis (2)



st 25

Mamography

Pt. with solitary do

- 1. what is your diagnosis (2)
- write down two eye signs noted (1)
- Suggest two blood test to diagnose the case (1)
- Suggest treatment (1)



st 26

Station =14

- 1. Name this study -
1.5
- 2. what is the
finding in the study
1.5
- 3. What is your
diagnosis



(2)

st 25
mamography

Station =14

1. what is your diagnosis (2)
2. write down two eye signs noted (1)
3. Suggest two blood test to diagnose the case (1)
4. Suggest treatment (1)



St 27



wet gangrene

St 29



Station;

This is picture of a Diabetic patient with h/o IHD

1. What is your diagnosis (2)
2. What is the cause of this condition? (1)
3. What is the treatment

St 28

Station. 1
painless
swelling on
lateral aspect
of mandible



What is your provisional diagnosis(2)
Suggest operation for this benign disease (1)
What is the most important complication that can happen in its operation(1)

st 30

st 31

**Station.
2
traumat
ised pt.**



1. What procedure has been done in this patient (2)
2. Name two complications that can happen in this procedure. (1)
3. Name two indications of this procedure in this pt. (2)

**Station =2
specimen of renal
stone**

1. Identify the type of stone(1)
2. From which portion of urinary tract it has been removed (1)
3. Which type of infection give rise to this stone formation (1)
4. What is the chemistry of this stone (1)
5. Enumerate two complication caused by this stone (1)



st 33



Station. 3

1. What is your diagnosis (1)
2. What is the type of lesion (1)
3. Name the regional lymph nodes which could involve (1)
How you will confirm your diagnosis (2)

st 32

Station -10

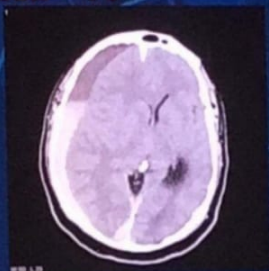


Operation in progress in a 15yr. girl

1. What is provisional diagnosis (1)
 2. Name possible incision been made for her (1)
 3. What are three possible complications after operation can happens (1)
- ant antibiotic prophylaxis (2)

st 34

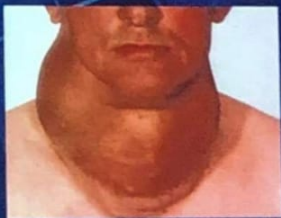
Station =11



1. Name this study (1.5)
2. Write down findings (1.5)
3. What operation will you suggest (2)

st 35

Station 12 (pt. with swelling & cardiac symptoms)



1. What is your diagnosis (1)
2. What type of thyrotoxicosis can have this pt. (1)
3. Name the incision in his operation (1)
4. What are three important steps of management for compression hematoma (1.5)

st 36

Station= 7 Specimen of MNG



1. Name the incision for Total Thyroidectomy (1)
2. Name three complications could happened during operation (1.5)
3. What are three important steps of management for compression hematoma (2.5)

st 37

Station 13

1. What is ur diagnosis
(1)
2. Outline steps of management ?
(4)



st 39

Station= 8



1. What is ur diagnosis (2)
2. What is the cause of this condition? (1)
3. What is the treatment (2)

st 38



Station =3

1. Name the x-ray (1)
2. Write down two radiological finding noted (2)
4. What is the treatment of this condition (2)

st 40

Station=7

1. Name the x-ray (1)
2. what was posture of patient (1)
3. Write down two radiological finding noted (2)
4. What is the diagnosis. (1)



st 41

Station =4

- 1. Name this investigation (1)
- 2. Write down radiological finding noted (2)
- 3. What two possible the causes (2)



st 42



st 43



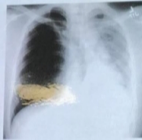
st 44



st 46



st 45



- Name the x-ray
- Identify abnormality
- What procedure indicated
- What is triangle of safety

st 47



Carefully see this Xray of lower limb of a patient who fell down while playing football

Identify and type of this fracture 1.0

What are the principles of management of such fracture 3.0

Name different operative option for this fracture internal fixation 1.0

st 48



A 46-year male presented in OPD with a non-healing ulcer at his left leg for more than 4 months.

- 1. What is your most likely diagnosis 1.0
- 2. What findings in examination of this patient would favor your diagnosis 2.0
- 3. Name different types of leg ulcers 1.0
- 4. Name one investigations helpful in your management 1.0

st 49



- 1. Identify the procedure in this picture 1.0
- 2. Enlist three indications of this procedure 2.0
- 3. Name three different complication of this procedure: 2.0

st 50

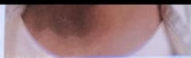


A 17 years old young boy presented with c/o abdominal distention and repeated vomiting for 3 days and colicky abdominal pain for one day with absolute constipation. He had open appendectomy one year ago for perforated appendix

- What is your clinical diagnosis 1.0
- What initial measures would you advise for this patient 2.0
- What should be appropriate treatment option if patient doesnot improve in next 24-48hrs 2.0

Activate Windows

st 51



A 16years young boy presented to OPD with this small swelling since childhood and now increasing gradually in size

- What is your suspected diagnosis 1.5
- Give three Differential Diagnosis 2.0
- Name the operation for this case 1.5

st 52

Microsoft PowerPoint

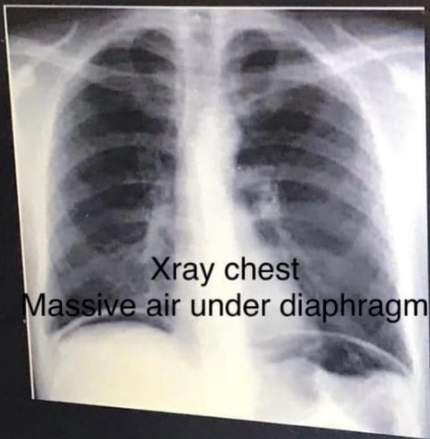
Interactive

- A 42 years old female presented in emergency with C/O severe pain in the epigastric region and an episode of vomiting. Pain was slightly reduced on leaning forward. She has been on steroids for osteoarthritis. Her previous USG of abdomen revealed multiple gall stones.
- What are differential diagnosis 1.5
- What imaging study is required to confirm diagnosis 1.0
- What complications can occur if disease progressed 2.5

Click to add notes

11:19 AM
2/16/2019

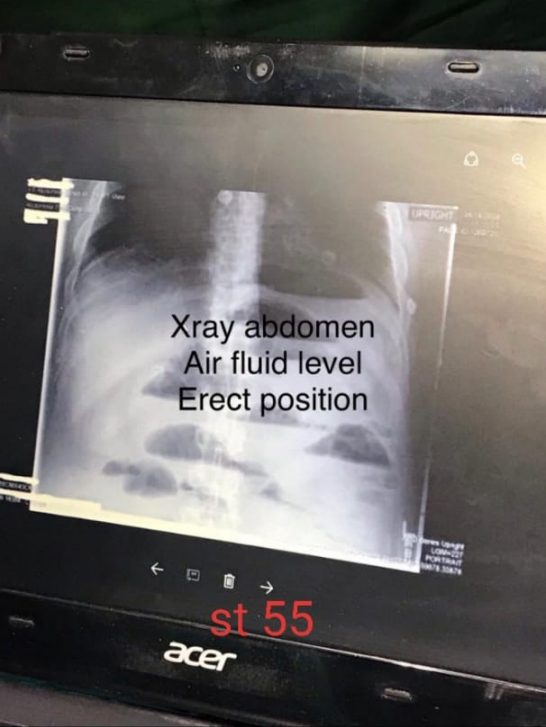
st 53



Xray chest
Massive air under diaphragm

st 54

acer



Xray abdomen
Air fluid level
Erect position

st 55

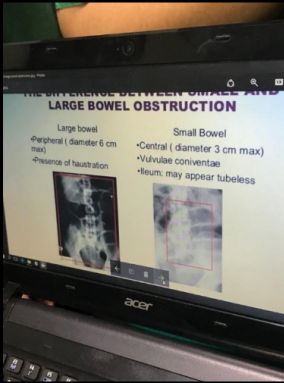
acer



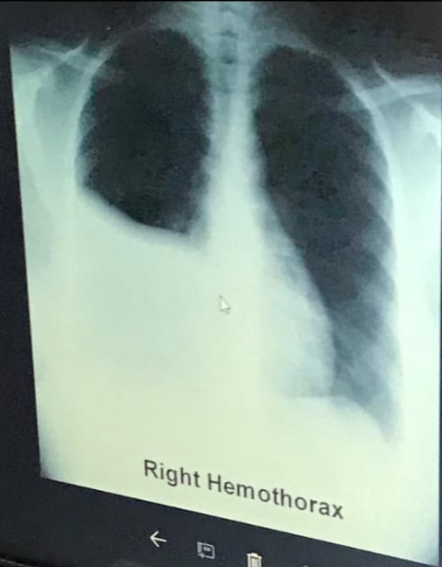
st 57

st 56

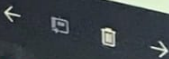




st 58



Right Hemothorax

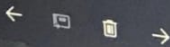


st 60

acer

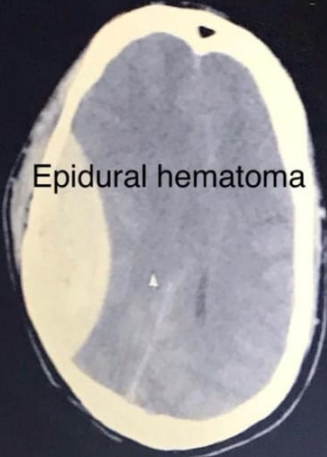


Contrast barium enema image demonstrates marked narrowing of the caecum, ascending colon and terminal ileum. Dilatation of the small intestine proximal to the narrowed segment of ileum is also seen.



st 61

acer



Epidural hematoma

An axial CT scan of the head at the level of the lateral ventricles. A large, crescent-shaped, hyperdense (bright white) collection is visible on the left side of the image, representing an epidural hematoma. This collection is compressing the underlying brain tissue and causing a midline shift towards the right. A small white arrowhead points to the falx cerebri in the center of the brain.

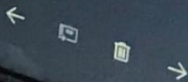
st 59

Navigation icons: a left-pointing arrow, a square, and a right-pointing arrow.



Gastroschisis

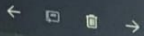
st 62



ac



Figure 1--A wide-angle view showing the anatomic relationship of the Meckel's diverticulum to the remainder of the ileum.



acer

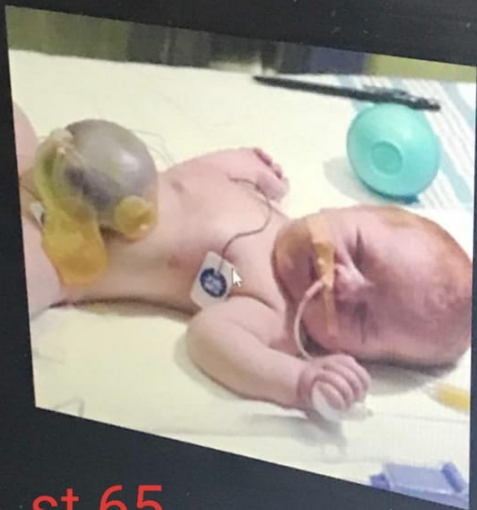
st 63



R tension pneumothorax


st 64

acer



st 65





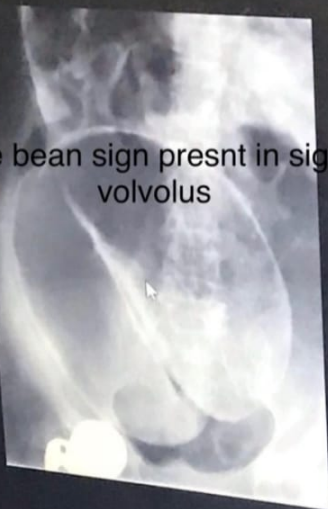
Large intestinal obs
Valvular constrictions

The image is a frontal abdominal X-ray. It shows a significantly dilated large intestine, particularly in the cecum and ascending colon, which is characteristic of a large bowel obstruction. There are several distinct, sharp, V-shaped or beak-like constrictions visible along the course of the large intestine, indicating valvular narrowing. The overall appearance is one of a distended, obstructed large bowel. A small 'R' marker is visible in the bottom left corner of the X-ray image. At the bottom of the screen, there is a navigation bar with icons for back, home, delete, and forward.

st 66

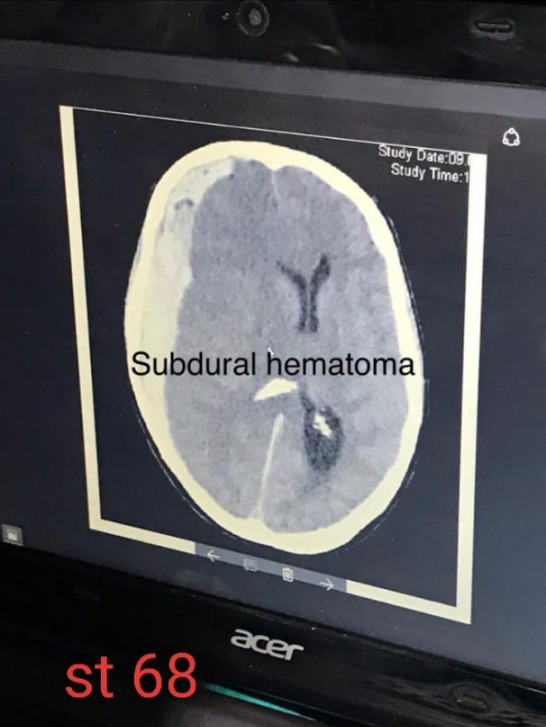
acer

Coffee bean sign present in sigmoid
volvulus



st 67

acer



Study Date:09.1
Study Time:1

Subdural hematoma

acer

st 68



Tension pneumothorax

st 69

acer

UNICEF DIAGNOSTICS
19/02/08 17:56:55 PM

SHIMLIMON,
ROOM 190208 12:48:30 PM

M0.4 Fw 0.1 3.5C
OB 213



B
Frg 1.0 M
Gain 98
F/A 1/3
Map 0.0
D 17.8 cm
DR 63
FR 32 H
* AO 108 %
s-

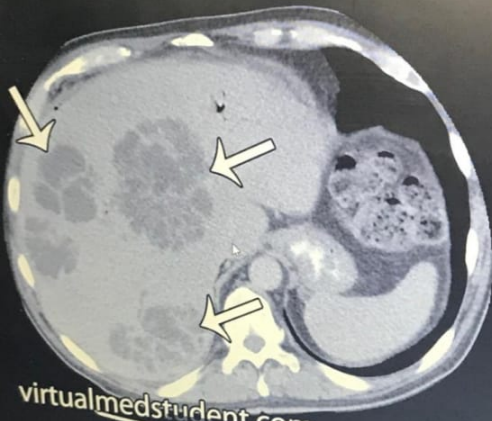


st 70

acer

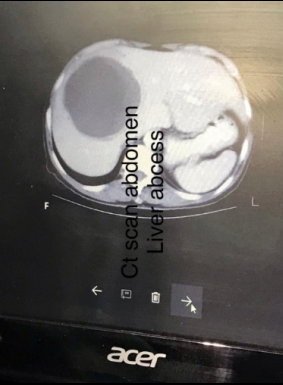


st 71



virtualmedstudent.com

st 72 acer



st 73

CT scan of amebic abscess (A). The lesion is peripherally located and round. Rim is nonenhancing but shows peripheral edema (black arrows). Note the extension into the intercostal space (white arrows).



st 74

acer



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st 75



st 76



st 76



Figure 2 The perforation of the necrosis with a small of moisture gangrene.

st 76



st 76

st 78

Station. 1
swelling behind
the ramus of the
mandible



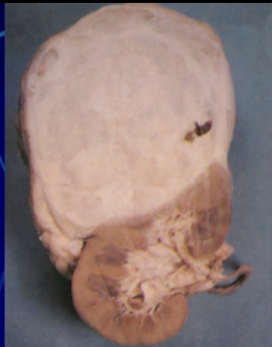
1. What is your provisional diagnosis(1)
2. Suggest operation if the disease is benign (1)
3. What important complication can happens in its operation(1)

Station =2

**Nephrectomy specimen
from child of 05yr. Age**

1. What is provisional diagnosis (2)
2. Which area of kidney it originates (1)
3. Where does it metastasize early ? (1)
4. What are poor prognostic factors in this disease (1)

st 77



Station=6

1. Name the x-ray (1)
2. what is the view 1)
3. Write down radiological finding noted (1)
4. What is the diagnosis. (1)

st 80



Station =4

st 79



1. Name the study (1)
2. Write two radiological findings noted (2)
3. Name two indications for this procedure (2)

st 81

**STATI
ON
NO :
17**



1. What is the diagnosis (1)
2. What are treatment options (2)
3. Name two complications if untreated (2)

21

st 2

Station = 14



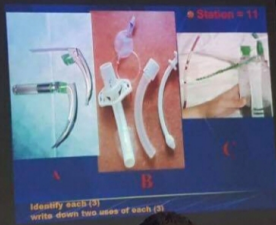
1. Name these gadgets (3)

B

C

Uses of each ? (3)

st 1



A



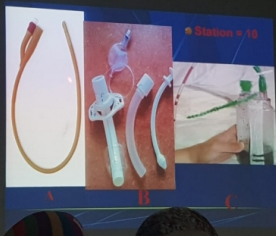
1. Name these gadgets (3)

B

25. Two Uses of each ? (3)

C

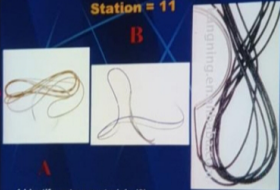
st 3



st 4

Station = 11

B



1. Identify suture materials (3)

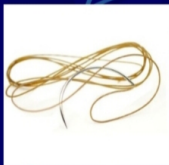
2. Turn 1 uses of each? (3)

The slide displays three distinct suture materials. The first is a yellow, braided suture. The second is a white, braided suture. The third is a black, braided suture. The text on the slide asks for identification and uses of each.

st 4

Station = 11

B



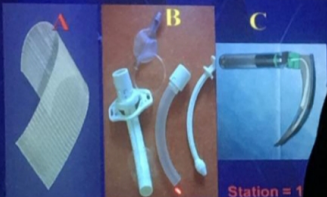
A

1. Identify suture materials (3)

34 Two Uses of each ? (3)

C

st 5



The image shows three dental appliances labeled A, B, and C. **A** is a white, curved, ribbed appliance, likely a maxillary arch wire. **B** shows a white plastic handle attached to a metal rod, with a curved metal arch wire, possibly a removable partial denture or a specific orthodontic arch. **C** is a metal arch wire with a green marker, likely a maxillary arch wire.

Station = 1

1. Identify these appliances (3)
2. Give two uses of each (3)

st 6

Station = 10

A

B

C

1. Name these gadgets (3)
2. Two Uses of each ? (3)



A



B

Station = 10



C

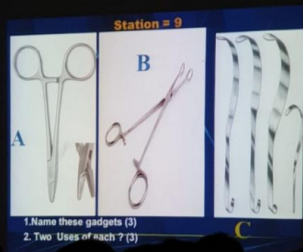
1. Name these gadgets (3)

2. Two Uses of each ? (3)

st 6

st 7

Station = 9



Panel A shows a pair of long-handled surgical forceps and a pair of surgical scissors. Panel B shows a pair of surgical forceps with curved tips. Panel C shows a pair of surgical forceps with long, thin, curved handles.

1. Name these gadgets (3)
2. Two Uses of each ? (3)

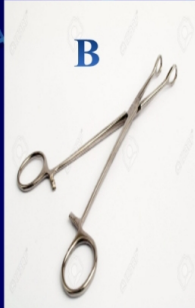


- Name the Instrument
- Name two operations where it is used
- How would you sterilize it

Armed Forces Medical College
Pune, Maharashtra

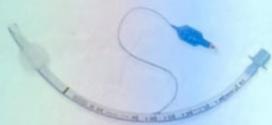
st 8

Station = 9



1. Name these gadgets (3)

21. Two Uses of each ? (3)



- Identify the object 1
- What are different condition in which this tube is indicated 1
- What are two commonly used sizes in adults
- How would you decide size of the tube in adults

st 9



- What are its characteristics
- What are its use
- How it is absorbed in the body

2

1

st 10

st 11



Black bridged silk suture



CHROMIC CATGUT

Absorbable Suture

USP: 4/0 METRIC: 2

Length: 75cm

STEP&STEP

ISO 15848

Mfg 201903

Exp 202003


25mm 1/2

Round Bodied



st 12

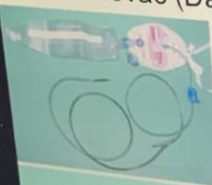


A close-up photograph of a hand wearing a white surgical glove. The hand is holding a long, thin, brown suture thread. The thread is looped and draped across the back of the hand and fingers. The background is dark and out of focus, showing some green and blue elements, likely in an operating room setting.

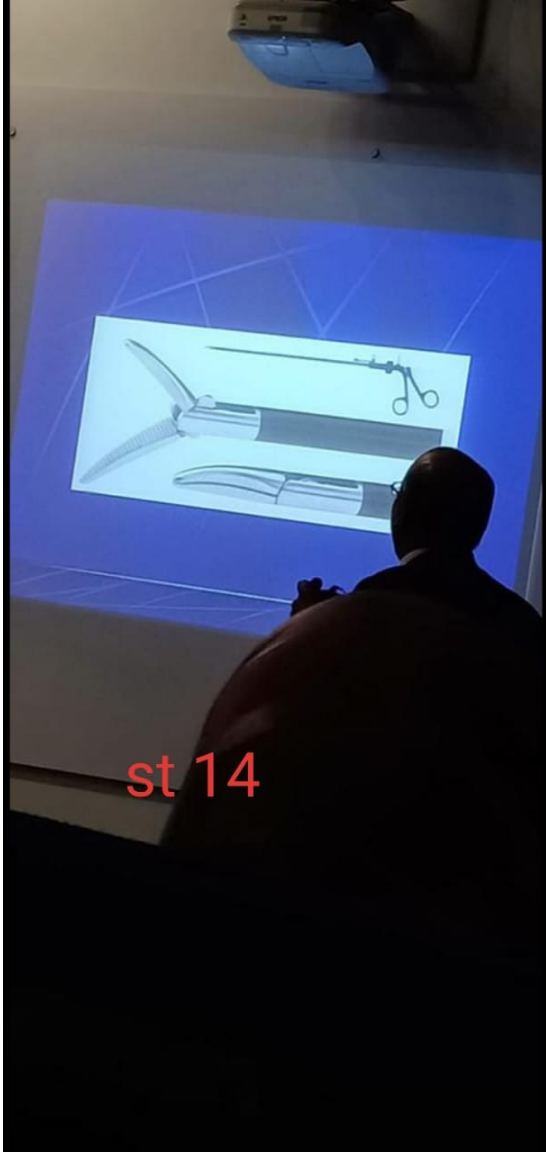
Chromic brown cat gut

st 12

Hemovac (Davol) (redivac)



st 13

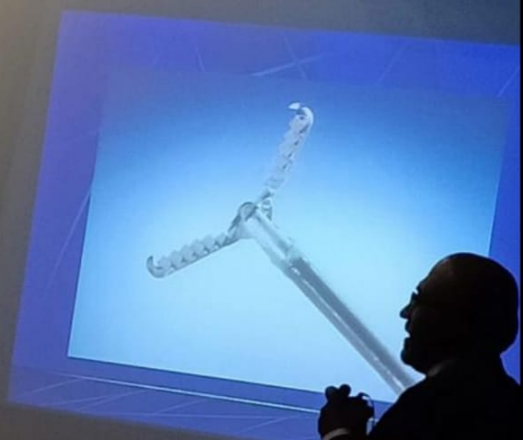


st 14

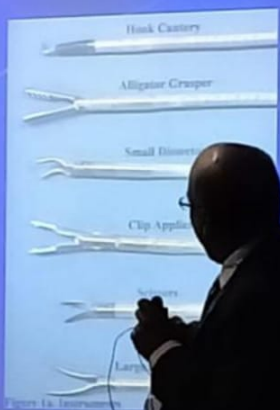


st 15

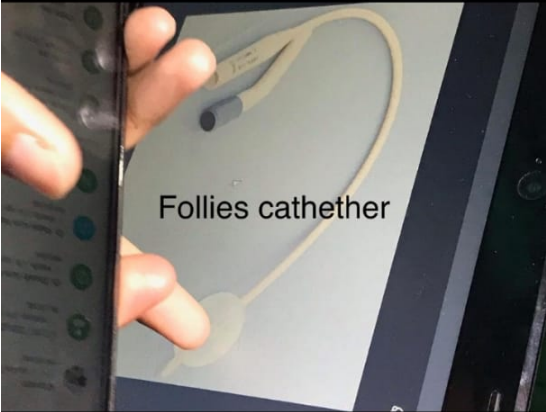
mother. in law



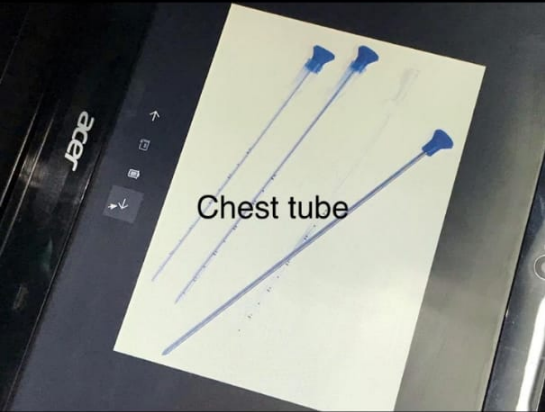
st 16



st 17

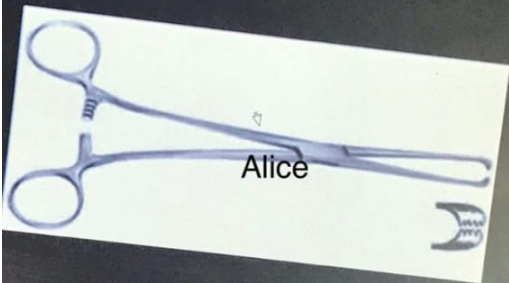
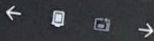


st 18

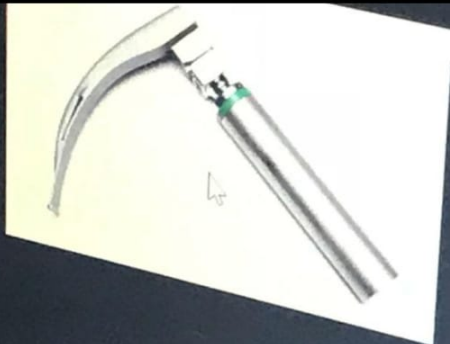


st 19

acer

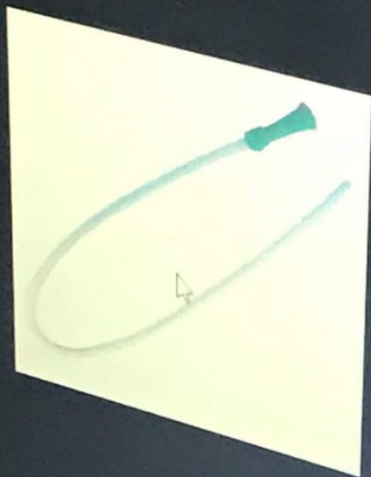


st 20



st 21

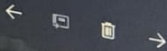




st 22

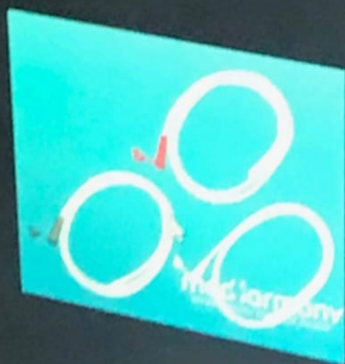


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st 23

acer



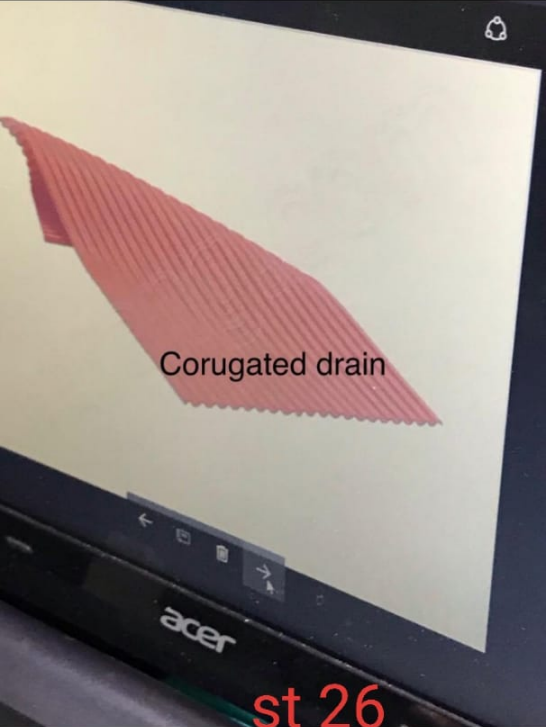
st 24





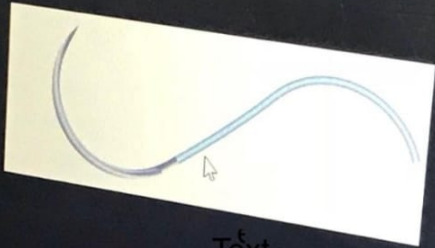
3.chamber

st 25



Corrugated drain

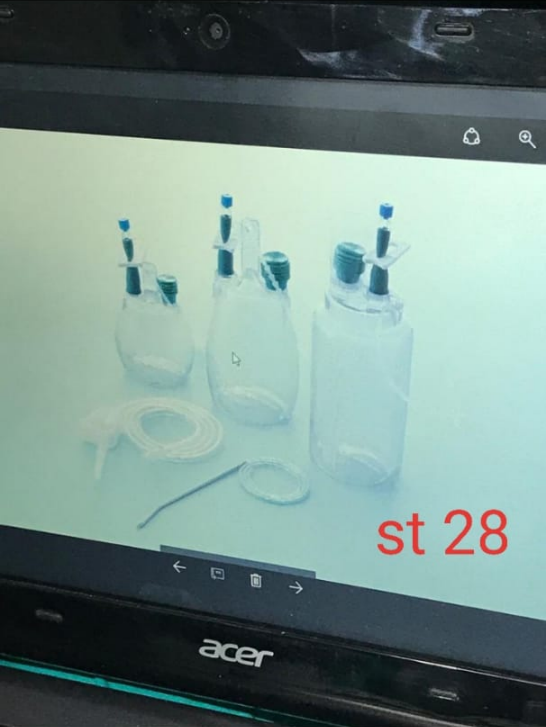
st 26



Text

st 27





st 28

acer



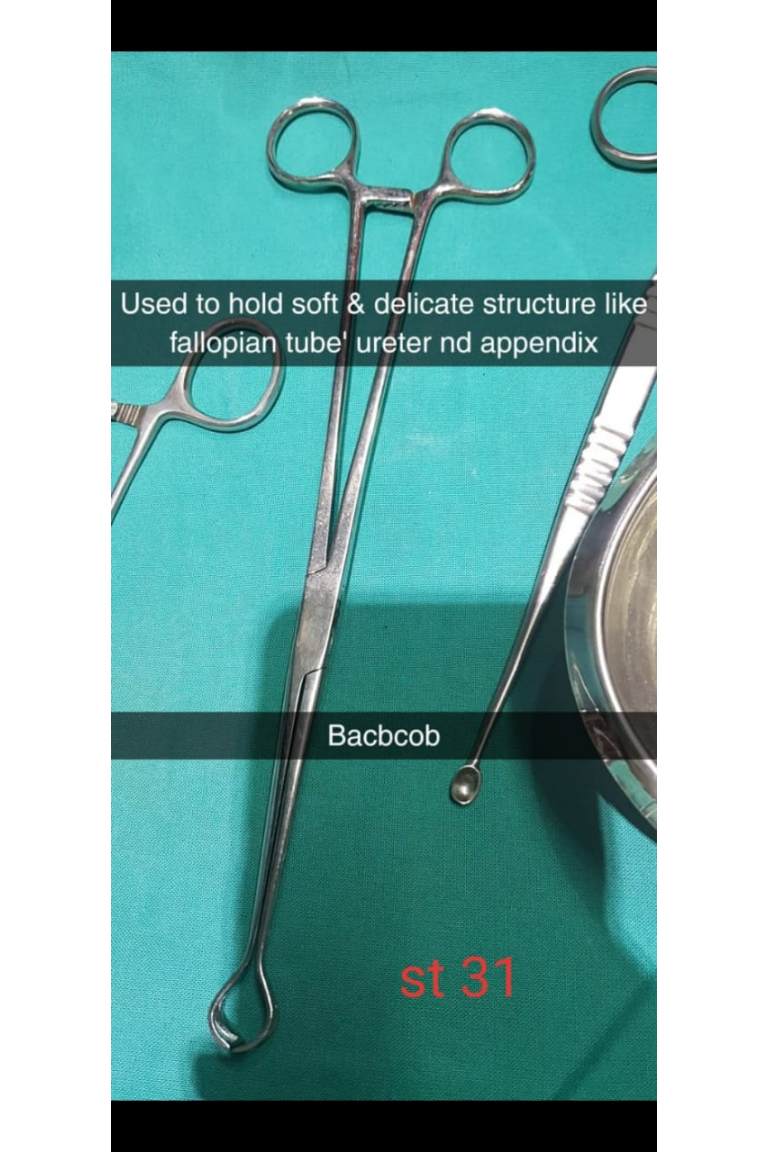
st 30

Cokers forceps

st 29

Plain forcep

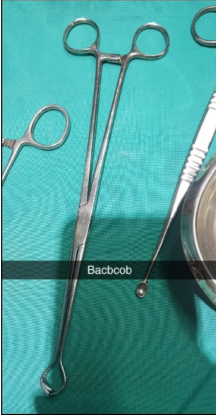




Used to hold soft & delicate structure like fallopian tube, ureter and appendix

Bacbcob

st 31



st 31



st 33



Simple foreceps

st 32




st 34

Tissue holder



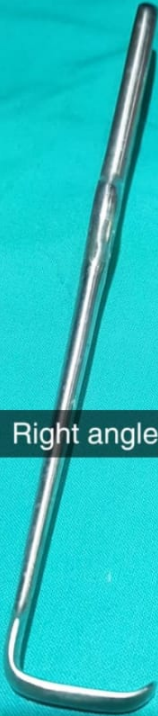
st 35

Blade holder




Morison retractor

st 36



Right angle retractor

st 37



Round body retractor

st 38



Sponge holder

st 39



st 40

Needle holder



Artery clip

st 41




st 42

Pool sucker



Dissecting scissor

st 43

A pair of metal towel clips, also known as towel forceps, is shown against a green surgical drape. The instrument has two long, tapered handles that meet at a central pivot point. Each handle has a circular ring at the top for the thumb and index finger. The distal ends of the handles are curved and pointed. The instrument is positioned vertically, with the rings at the top and the tips pointing downwards. A dark horizontal bar is overlaid across the middle of the image, containing the text 'Towel clip'. In the bottom right corner, the text 'st 44' is written in red. A portion of a metal bowl is visible in the upper right corner.

Towel clip

st 44



Lehigh

st 45



st 46

- 2) Material : Red rubber or PVC
3) Endotracheal tube cuff



st 50



Curet

st 47

2) Endotracheal tube

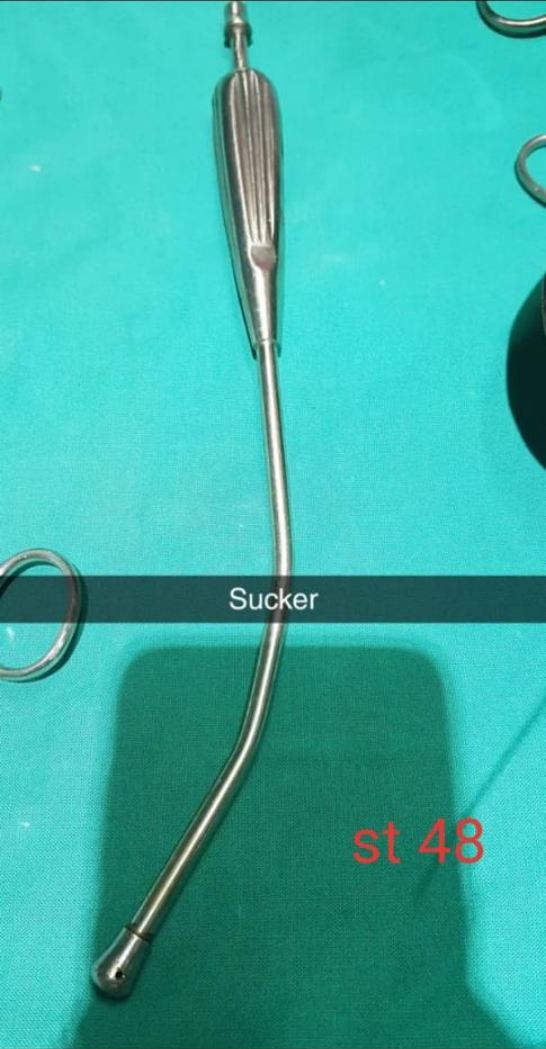


st 51

1) Laryngoscope : handle and



st 49



Sucker

st 48

3) Other equipments

3.1 Stylet



st 52

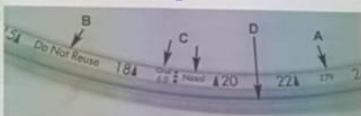
st 54

3.3) Suction catheter

3.4) Slip joint



7) Tube markings



Z-79

st 57

LARYNGOSCOPIC BLADE

- Macintosh (curved) and Miller (straight) blade

Adult : Macintosh blade, small



Miller blade

Macintosh blade

st 58

3.5) Face mask



3.6) Magill forcep



st 55

4) Bevel

5) Murphy's eye



st 56

Station = 11

st 59

B



A

C

1. Identify suture materials (3)

32. Two Uses of each ? (3)

3.2 Oropharyngeal or nasopharyngeal



st 53

st 82



st 83



st 84

