

facial nerve distributed with auricular branch of vagus → CN X
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Time allowed: 2 Hours
 ATTEMPT ALL THE QUESTIONS

Total Marks: 45

1. A 33 years male came to OPD with complaint of right sided facial weakness & is unable to close his right eye. On questioning he gave history of blood stained, bad smelling ear discharge from right side

- a. What is your diagnosis? **CSOM oticoantral** (1)
- b. Name 4 complications of that disease (4)

2. An 18 years old male was hit on his nose by fist during quarrel last night. He developed bilateral nasal obstruction by morning time. The only and significant finding is bilateral dark red, convex soft swelling occupying anterior part of nose.

- a. What is the diagnosis? **Septal hematoma** (1)
- b. How will you treat it? (2)
- c. What are the complications if not treated? (2)

3. A lady of 30 years of age presented to ENT department with history of deafness and tinnitus in her right ear for the last 5 years, she noticed it during her first pregnancy. Deafness was increasing progressively. Now she is developing same problem in her left ear. There is history of hearing loss in her mother as well.

- a. What is most probable diagnosis? **Otosclerosis** (1)
- b. What is differential diagnosis? **SS Pg** (2)
- c. What is the treatment of this case? **Pg 88** (2)

4. A school boy of 17 years of age presented to ENT OPD with history of right side nasal obstruction, Permanent in nature since childhood and intermittent nasal obstruction of left side, there is also history of headache and post nasal drip

- a. What is your diagnosis? **Chronic simple rhinitis** (1)

Write 4 causes of unilateral nasal obstruction **Pg #172**

- b. How would you treat this case? **1) treat the cause 2) Medical treatment (Antibiotic)** (2)
- c. **3) Alkaline nasal douches** (2)

5. A 50 years old lady presented in ENT with history of dysphagia for 1 year, patient is pale, Hb is 8 mg %, now she developed hoarseness of voice for one month, right sided cervical lymph node was enlarged.

- a. What is your diagnosis? **1) Laryngeal TB** (1)
- b. Give differential diagnosis **2) Papilloma of larynx 3) Syphilis of larynx 4) Lymphoma** (2)
- c. What investigations will you advise? (2)

6. A patient has severe episodic pain right ear for one week. There is no H/O ear discharge or hearing loss. O/E No tenderness on pulling the pinna. Ext auditory canal & tympanic membrane are normal Rinne's is positive both ears

- a. What is most likely diagnosis? **earache (otalgia)** (1)
- b. Write sensory Nerve supply of the pinna? (2)
- c. Name the nerves responsible for pain in the ear if the disease is in

- i) Tonsils ii) Lower molars **(5th nerve)** (2)

7. A young lady came in emergency department with H/O Blunt trauma left ear 2 hours back. O/E she had perforation of the tympanic membrane There was no ear discharge

- a. What advise / treatment you will give to this lady at this stage **conservative treatment** (1)
- b. If perforation does not heal after 3 months what treatment will you give her (2)
- c. What investigation you will require while giving treatment after 3 months → **2) Audiometry** (2)

8. You were called to see a new born baby who was asphyxiated & turned blue soon after birth The symptoms were relieved on crying & recur again on closing the mouth The baby also turned blue on suckling

- a. What is most probable diagnosis **choanal atresia** (1)
- b. What tests you will perform to confirm your diagnosis (2)
- c. How will you treat the baby in emergency & later on (2)

9. Write short notes on

- 1) Name the neck space abscesses **Submandibular space abscess / Ludwig angina**
- 2) Tympanometry **Peritonsillar abscess (3)**
- Retropharyngeal abscess (2)**
- Parapharyngeal abscess**