



THE SUPERIOR COLLEGE, LAHORE  
 FINAL PROFESSIONAL MBBS  
 ANNUAL EXAMINATION 2018  
 SURGERY 1  
 (SEQS)

Roll No. 14106  
 Total Marks: 50

ARDS  
 Airway edema/Laryngeal edema  
 Bronchospasm  
 Pulmonary edema  
 Pneumonia  
 Pulmonary embolus

Instructions

1. Attempt all questions.
2. All question carry equal marks.
3. The SEQ's part is to be submitted within 2 hours, Extra time will not be given.
4. Neat Hand Writing use of margin and marker for headlines will increase the presentation of your paper.
5. Do not write your name or disclose your identity in anyway.

h2p  
 Dogar  
 P-250  
 122 Bailey  
 132 P-135  
 135 Dogar  
 386  
 387 Bailey  
 269 Bailey  
 P-112  
 P-145  
 Some are in 2020 send  
 107  
 114 Dogar  
 263 Bailey  
 P-54

1. Surgical Anatomy of biliary tract *14 page 1000 cuts*
  - a. Describe boundaries of Calot's Triangle *3 Tortuous H. Artery*
  - b. Describe common anomalies of cystic and right hepatic artery in calots triangle *2*
2. Blood transfusion *If antibodies present in recipient*
  - a. What is transfusion reaction *2 donor serum incompatibility*
  - b. List down six complications of Massive blood transfusion. *3 180 (Manappal)*
3. A 28 year old man brought to emergency with H/O flame burn and patients was in closed room and was rescued to hospital. He is drowsy and has difficulty in breathing. On examination HR 95/min BP 100/65mmHg, RR 35/min with wheezes all over his chest
  - a. What is suspected diagnosis *Inhalational Burn, check Airway, Breaths, Vitals*
  - b. What should be the initial step in management *Analgesics, Physiotherapy, Nebulization*
  - c. What fatal complication can happen if management delayed *Bacterial pneumonia 1 Warm humidified O2, Arterial Blood Gas*
4. Total Parenteral Nutrition *Simulation injury, Aspiration of fluid*
  - a. What are essential components of total parenteral nutrition *2 Plasma Edema, Electrolyte, Blood Gas*
  - b. Why Enteral nutrition has got advantages over total parenteral nutrition *1 ER rate*
  - c. Enlist Four different metabolic complication related to TPN *2 Non Super 14 ICU*
5. A 30 years old male underwent exploratory laparotomy for enteric perforation. His body weight is 60Kg. He has nasogastric tube and foley's catheter in place. In his serum electrolyte report sodium is 128mEq/L and potassium is 3.1mEq/L *0.6 x Body weight x (K<sup>+</sup>/box hrs)*
  - a. How will you calculate his intravenous fluids for 24 hrs *0.6 x body weight x (sodium)*
  - b. How can you monitor his adequacy of fluid intake *urine output + B.P + N.B.s + drain*
  - c. How will you manage hypokalemia in this patient *2 (204 Manappal)*
6. A 24 year old man front seat passenger involved in a car accident with H/O crashed into the windscreen is brought to emergency by rescue team in ambulance in a semiconscious state with depressed nose and multiple laceration on face, bruised peri orbital area with bleeding from mouth
  - a. Write down steps in primary survey *2 (54 Dogar) (303 Bailey) 2*
  - b. What are indications of maintaining a definite airway *54 Dogar 2*
  - c. What radiological investigations are indicated in this patient?

X-ray skull, face  
 MRI, CT

Failure of Ventilation and Oxygenation  
 1- Obstruction  
 2- Glass less than 8  
 3- Inhalational Injury  
 4- Inability to maintain or protect Airway

7. A 62 years old female presented with swelling, redness & foul smelling discharge from her right foot for last one week. There is discoloration of skin on the lateral border of foot involving little toe. She has H/O high grade fever for last 03 days. She is known case of diabetes mellitus and uncontrolled on Regular Insulin

- (239 Bailey) (8.1) Principles of Anaesthesia
- (slides)
- What is the most likely diagnosis ~~Diabetic Foot~~ Diabetic foot 1
  - What pathological factors lead to this condition (69 Mumpal) 2
  - Outline management steps 2 (68 M)

(548 Bailey  
183 Dogar)

- What is General Anaesthesia Triad → Analgesia + Anesthesia + muscle relaxant 2
- What is the role of Rapid sequence Induction of Anaesthesia Keynote 2
- Name any two common techniques for maintaining airway in Anaesthesia → 1

(Analgesia +  
anesthesia  
+ Muscle  
relaxant)

9. A 52 years man presented in outpatient clinic with severe rest pain in his lower legs for few month. He cannot sleep in the night. He is a chronic smoker for 30 years. On examination of lower limb there is hair loss in his right leg and dry skin. His right popliteal artery is not palpable.

- (877 Bailey  
204 Dogar)
- What is your probable diagnosis? <sup>key 245</sup> Chronic limb ~~ischaemia~~ → critical limb ischaemia 1
  - Which clinical test can explain severity of his disease → Treadmill 2
  - Name two investigation which are helpful in confirming your diagnosis → 2 P-206

10. What is the difference between Keloid and hypertrophic scar → (181 Dogar) 3

Enlist different treatment option for keloid scars → 2

30 Bailey

Q7 B

- \* Ischemia
- \* Microangiopathy
- \* Reduced immunity
- \* Peripheral neuropathy
- \* Reduced healing
- \* Macroangiopathy

Enlist different Mask Airway