



THE SUPERIOR COLLEGE, LAHORE
Reduction obtained by K-wire
FINAL PROFESSIONAL MBBS

ANNUAL EXAMINATION 2016

Transverse incision 2cm above supraclavicular notch.
Subcutaneous and vertically

Surgery II
SEOQ

28

Roll No. 14

Time Allowed: 2 hours

Total Marks: 65

Instructions

- The SEOQ part is to be submitted within 2 hours, extra time will not be given.
- Neat hand writing, use of margin and marker for headlines will increase the presentation of your paper.
- Do not write your name or disclose your identity in anyway.

43.5

Nail nodularity

(288) Dogar
(14) Dogar
378

1. Describe the steps of THYROIDECTOMY.

2. a) Discuss the management of supracondylar fracture of humerus in children. (5)
b) Discuss the complications of supracondylar fracture of humerus in children. (3)

3. A 40 years female presents with a multi-nodular swelling in front of the neck for the past several years. She has recently developed palpitation and heat intolerance.

a) What is the most likely diagnosis? → Thyrotoxicosis (1)
b) How will you confirm it? T3, T4, TSH, Thyroid scan (1)
c) What are the treatment options? → Medical (4) (3)

4. A 50 years postmenopausal female presents with 4x3cm lump in the left breast which is hard, irregular and mobile on the chest wall and adherent to the skin. There is also a 1.5x1.5cm mobile lymph node in the axilla. CA Breast.

a) What is the most likely diagnosis? MRI, FNAC, True cut biopsy, Ant Axillary wall (1)
b) What specific investigation will you order? Ultrasound, Core biopsy (4) (2)
c) How will you stage the disease? (2)

5. Discuss the clinical features of injury to anterior urethra in a young male patient.

a) How will you confirm the diagnosis? Relin-X → FBC, Urinalysis, CXR (3) (2)

6. a) Discuss the pathogenesis of gallstones. (2)
b) What are the complications of the stones in the common bile duct? (3)

7. A 21 years old male presents with right lower quadrant pain for the last three days with nausea and vomiting. He is also febrile with pulse rate of 100/min. On examination there is a tender 6x8cm mass palpable in the right lower quadrant. Appendicular mass.

a) What is your diagnosis? Appendicular mass (1)
b) How will you treat this patient? Resect (4)

8. A 50 years male presents in the OPD with C/O fresh bleeding per rectum since 3 months. There is recent history of alteration in bowel habit & tenesmus. Discuss three differential diagnosis.

show pipe stem
A diff in date
DRE → Not used (1.5)
Non Malignant
stricture of anal canal
anal fissure
Colorectal CA (145)
Internal hemorrhoids (178)
IBD - UC (131) Dogar
Squamous cell CA → pain, bleeding
HPV, HIV
18, 18, 31, 33
mucousness of feces

Paraumbilical hernia (198)

para-epigastric umbilica ①

Q9) - A 45 years female presents with a 8x6cm swelling around the umbilicus for the past three years which is reducible and occasionally painful.

- a) Discuss the differential diagnosis.
- b) How will you treat her?

Rectocele / N9 → K level 198
 para-epigastric umbilica / epigastric (1968 Bailey) (3-5) (2) (3)

Q10) - A one month old neonate presents with projectile non-bilious vomiting off and on. On abdominal examination a 3x2cm non-tender mass is palpable in the epigastrium.

- a) What is the most likely diagnosis?
- b) How will you treat him?

hypertrophic pyloric stenosis (2) (113)
 NPO
 Ranstead's pyloromyotomy (3) (Bailey)
 Double Y pyloromyotomy (open)

Q11) - A 25 years motorcyclist sustained head injury after RTA. He was brought to the A&E department and became unconscious, vomited twice. His CT scan brain showed biconvex haematoma at temporo-parietal region.

- a) What is your diagnosis?
- b) What is the initial management of this patient?
- c) What is the definitive treatment?

Extradural → CT, LOC (25 Bailey) (1)
 or Burr hole (2)
 ATLS → open craniotomy (3, 4, 3 Dogar) (2) (2)

Q12) - A 56 years smoker presents with haemoptysis, persistent cough and weight loss. On X-ray there was solid lesion in the right lung with pleural effusion on the same side.

- a) What is your most likely diagnosis?
- b) What investigations you will advise to diagnose the disease?
- c) Name different treatment options for this patient.

CA Lung (305 Dogar) (1)
 859 Bailey (2) (1)
 lobectomy (3-5) (2) (1)
 pneumonectomy

Q13) - Write short notes on:

- a) Spinal Shock. → 329 Bailey, 352 Dogar (2.5) (2.5)
- b) Flail Chest. → 355 Bailey (3) (2)

clinical syndrome
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 loss of reflexes