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THE SUPERIOR COLLEGE, LAHORE
FINAL PROFESSIONAL MBBS

FINAL PROFESSIONAL MBBS SEND UP EXAMINATION 2018 SURGERY II

(SEQ's)

Time Allowed: 2 Hrs.

Instructions

- 1. Attempt all questions.
- 2. All question carry equal marks.

spontaneous pneumothorase

- 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.

Q1. A female 65 years slips on her right foot washroom is brought to the emergency. On examination her right leg is shortened or externally rotated. X ray hip joint shows intra capsular fracture. she was hapertensive controlled with medicine, non diabetic and other wise independent. What is the fate of upper end of femur if not operated.

What operation you will suggest? 160

Avascular necrosis 2

Q2. A 40 year lady-known case of diabetes mellitus, presents with severe pain in upper abdomen for Intraca privilar two days associated with vomiting. She has history of fatty food intolerance. On examination she is toxic with pulse 115/min, temperature 101 and has a tender clobular intra-abdominal mass in right hypochondrium that moves with respiration. Acte challystitis What is your diagnosis? 02 How will you investigate? 4 5 02 02 What are the treatment options? 01 Q3. What are different causes of dysphagia? How will you investigate a 20 year female patient with dysphagia for liquids and weight loss? 3.5 Bossion Swallow 132 SUHS Q4. A 50 year woman presents in emergency with sudden onset of severe epigastric pain that spreads whole of her abdomen. She has habit of self-medication for her back pain for six months. On examination she is in shock like state with distended still abdomen and generalised rigidity. 3) What is your diagnosis? 2 650 Perforated 02 b) What is the initial investigation to diagnose the case? c) Outline the treatment plan 01 117 SUHS 02 Q5. A 30 year thin tall labourer presents with sudden acute breathlessness for two hours. On exanimation he is cyanosed, trachea is shifted to the left and decrease breath sounds on right side. He has similar but milder attack 6 month ago. a) What is your diagnosis? b) How will you manage the patient? 02 03

