

Unit: Thorax

Q. NO. 1

(a) What is Flail chest

- ① Flail chest is a life threatening condition.
- ② occurs when a segment of rib cage break due to trauma and become detached from rest of chest wall.
- ③ It is a fracture of 3 or more adjacent ribs in two places either on one side of chest or either side of sternum.
- ④ Chest wall moves paradoxically.

(b) Management of flail chest

- ① Admit
- ② I/V line
- ③ IOP charting.
- ④ vital monitoring.
- ⑤ give analgesia / antibiotics
- ⑥ ABCs analysis until segment
- ⑦ Stabilize.
if severe

Endotracheal Intubation.

Q. NO. 2

You are planning for tube
Thoracostomy in 40y obese
female diagnosed as RT Hemathorax
after met RTA

(a) What is protocol for tube
Thoracostomy.

- ⊙ Resuscitation.
- ⊙ Insert into Safety Triangle.
- ⊙ Aseptic measures
- ⊙ local anesthesia.

(b) How will you monitor
the progress of your procedure.

X-ray
↳ Bubble in water.

(c) Indication of Thoracostomy.

- ⊙ Pneumothorax
- ⊙ Malignant Pleural Effusion.
- ⊙ Empyema
- ⊙ Traumatic Hemopneumothorax.
- ⊙ Postop for Example Thoracotomy.
- ⊙ esophagectomy, cardiac surgery.

Q.No.3 (a) write a note on VATS

video assisted Thoracoscopic Surgery is a type of surgery for diagnosis and treated a variety of condition involving a chest area (Thorax)

Q.No.4

A 35 y male presents with sudden attack of breathless. He is cyanosed irritabile with trachea deviated to left side and hyper resonant percussion note on right. He has similar attack on year ago.

(a) Diagnosis

Primary spontaneous pneumothorax

(b) Management

- observation VATS
- Aspiration.
- Chest Intubation
- Pleurodesis.

Of Recurrent Pneumothorax

- complete parietal pleurectomy.
- Apical Julectomy

Q.No.5

A 25 yr male is brought to ER after met a RTA with severe pain on right side of chest. O/E his pulse 115/min 100/60 mmHg and abrasions with dull percussion on same side.

(a) Diagnosis

Hemothorax.

(b) What x-ray you will request

Erect P-A view.

(c) Radiological finding.

Blunting of costophrenic angle.

Partial or complete opacification of hemothorax.

lateral side of chest appears straight.

Q. NO. 6

A 25y old motorcyclist has been brought to A&E department in panicky state as he is unable to breathe properly and intensely hypoxic. Trachea is shifted to right left hemithorax does not move hyper resonance over left chest wall. with absent breath sound.

(a) Diagnosis

Tension Pneumothorax.

(b) management.

Investigation: Chest - x-ray.

Rx

Percutaneous needle aspiration.

Q. No. 7

A 55y male presents in the A&E with right sided chest Trauma. On Examination he is tachycardia R/R 30/min. with paradoxical movement.

(a) Diagnosis
Flail chest.

(b) Treatment

- ① Admit
- ② I/V line pass
- ③ IOP charting
- ④ Vital monitoring.
- ⑤ Give analgesia/antibiotics
- ⑥ ABCs analysis until segment
- ⑦ Stabilize.
- ⑧ Endotracheal intubation.

Q. 8

A 40y old man brought to emergency after RTA. Complain severe chest pain at right side of rib abrasion on anterolateral chest with

Diagnosis Flail chest - paradoxical movement.

Q.9

A 56 year smoker present with hemoptysis persistent cough and weight loss. On x-ray there was solid lesion in right lung with pleural effusion on same side.

(a) What is most likely diagnosis

Carcinoma of lungs.

(b) Investigation.

Chest x-ray.

(c) Treatment options

- Radiotherapy
 - Chemotherapy.
 - Immunotherapy.
 - Surgical.
-

Q.10

A 30y motorcyclist sustained injury to RTA brought in A&E with severe dyspnea. On Examination pulse 130/min. with diminished breath sounds on right side and dull percussion note

④ Diagnosis

Tension Pneumothorax

⑤ What would be positive finding on CXR.

Q. No 11 What are different types of Pneumothorax.

Spontaneous Pneumothorax

open Pneumothorax

Tension Pneumothorax.

How will you Treat a patient of Pneumothorax

See Q No 4.

Q. NO 12

A young motorcyclist brought to A&E after met a road Traffic accident. He is complaining of Severe pain in right side ribs breath sounds are diminished and percussion note is dull.

Chest -x ray Show obliterations of angles and a horizontal level.

Ⓐ What is most likely diagnosis
Right Sided hemathorax.

Ⓑ Boundries of Safety triangle.

Ⓐ Anterior border of latissimus dorsi

Ⓑ lateral border of pectoralis major muscle.

Ⓐ A line Superior to horizontal level of nipple and apex below axilla.

Ⓒ Indication of Thoracosomy
Repeat.

Q. NO 13

A young motorcyclist is brought in the casualty department by 1122 with impact on chest. He is breathless trachea deviated to left and hyper resonant percussion note on right side of chest

(a) Diagnosis Tension Pneumothorax

(b) Rx Repeat.

Q. NO 14

What is ^{Repeat.} Flail chest. Give management

Q. NO 15 A young man present in emergency with severe shortness of breath on Examination he has tachycardia Tachypnea He is cigarette smoker.

(a) Diagnosis

Secondary Spontaneous

(b) Initial Emergency management Pneumothorax

use of small bore chest drains

(c) Management Repeat