Dhaka University

Final Professional MBBS Examination of July, 2016

Short answer question (SAQ)

Subject: Medicine (New Curriculum)

Full marks: 70; Times 2 hours 40 min

N.B.: All questions carry equal marks. Answer any seven questions from each group. Use separate answer script for each group

Group-A (Marks 5×7–35)

1. (a) Briefly discuss the importance of taking family history in clinical practice.
   (b) write down the importance of pulse examination during physical examination.
2. (a) How would you differentiate cardiac from non-cardiac chest pain?
   (b) Enumerate the clinical features of left ventricular failure.
3. A 65-year-old lady has presented with sudden onset of weakness of right side of the body.
   (a) Mention the clinical features differentiating ischaemic & haemorrhagic stroke.
   (b) What immediate investigations you will advice for such a case?
4. A 30-years-old male has presented with haematemesis and melaena.
   (a) Discuss the clinical signs you would look for in such a case.
   (b) Give an outline for management of the patient
5. (a) Define BMI. Enumerate the complications of obesity.
   (b) Discuss the features of hypo-vitaminosis D.
6. (a) Enumerate the complications of acute haemorrhagic pancreatitis.
   (b) Write down the risk factors and complications in a patient with peptic ulcer disease
7. (a) Briefly discuss the general supportive care of an unconscious patient
   (b) Write in short about the drug treatment of gout.
8. A 40-year-old female has presented with polyarthritis for six months.
   (a) Discuss the clinical information which would help to reach a diagnosis.
   (b) What investigations you would advise for such a case?

GROUP-B (Marks 5x7=35)

1. (a) How would you investigate a 25-year-old male presenting with fever, gum bleeding and purpuric spots for one month?
   (b) How would you treat a patient with ITP (idiopathic thrombocytopenic purpura)?
2. (a) Enumerate the common causes of hypokalaemia. How would you manage?
   (b) How would you investigate a 30-year-old male presenting with flank haematuria?
3. A 20-year-old female student presented with palpitation, restlessness, heat on tolerance and weight loss.
   (a) Make a check list of clinical signs you would look for.
   (b)Name the investigations with possible findings.
4. (a) Mention 5 important causes of haemoptysis with physical signs in any of them.
   (b) Write a prescription for a 30-year-old (43 kg) women with sputum positive PTB.
5. A 45 year old women presented with H/O weakness, palpitation & palor. You suspected case of iron deficiency anaemia.
   (a) Mention the clinical signs indicating iron deficiency
   (b) Mention the investigations you will advice her

6. (a) Mention the physical signs indicating iron deficiency anaemia.
   (b) Mention the complications of acute glomerulonephritis.
7. A 40 years old man presented with abdominal distension & Jaundice. You suspected Chronic liver disease.
   (a) Make a checklist of clinical sign suggesting your diagnosis.
   (b) Mention the precipitators of hepatic encephalopathy.
8. (a) Mention the physical signs of right-sided pneumothorax.
   (b) How will you manage a case of Tensional Pneumothorax in medicine ward?

January-2016 : Medicine (Paper –I)

GROUP-A (Marks: (5×7=35)

1. a. What clinical information you can elicit by examination of nails?
   b. Write down the important aspects of clinical history about breathlessness with interpretations.
2. A 60 year old smoker is admitted with acute central chest pain for 2 hours. His ECG shows ST elevation.
   a. What immediate management would you take for the patient?
   b. The patient develops dyspnoea on the following day.
   What additional measures will you take to manage the patient?
3. a. How do you diagnose acute Rheumatic fever?
   b. How do treat a case of mitral stenosis medically?
4. a. What at the causes of meningitis? What CSF findings will differentiate pyogenic from TB or viral meningitis?
   b. How will you clinically evaluate a patient with headache?
5. A 45 year old man is admitted with repealed vomiting out of blood.
   a. Mention clinical symptoms and signs indicating underlying cause of blood vomiting.
   b. Write down the immediate management steps for the patient.
6. A 30 year old lady presents with polyarthralgia, oral ulcer and hair loss.
   a. Mention further clinical information which will suggest underlying aetiology.
   b. Suggest investigations for her with interpretation.
7. a. Define obesity. What are its complications?
   b. How iodine deficiency affects our health?
8. a. What clinical information you may gather by ultrasonography in d patient pregnancy with acute upper abdomen?
   b. How do you clinically differentiate Irritable Bowel Syndrome from Inflammatory Bowel Disease?

GROUP-B Marks: (5×7=35)

1. A 30 year old lady presents with fever with chest pain. Examination findings suggest left sided pleural effusion.
   a. How do you investigate the case to determine the underlying of pleural effusion?
   b. How you differentiate Pleural effusion due to TB or bronchial carcinoma?
2. A 40 year old patient of liver cirrhosis presents with features of hepatic encephalopathy.
   a. What precipitating factors for encephalopathy you look far in this patient?
   b. Mention the treatment plan for the patient.
3. a. What are the clinical manifestations of Chronic Kidney Disease?
   b. What are causes of anaemia in CKD? How would you treat anaemia in CKD?

University SAQ Questions of Medicine Paper-II

University of Dhaka
Final Professional MBBS Examination of July, 2016
(New Curriculum)
Subject: Medicine Paper-II
Short Answer Question (SAQ)
Full Marks: 70 Time: 2 hours 30 minutes

All questions carry equal marks. Use separate answer script for each group. Answer any seven from each group

Group-A (Marks 5×7=35)

1. (a) What are the ulcerative sexually transmitted diseases?
   (b) How will you mange a case of eczema?
2. (a) what you differentiate delirium from dementia? Mention key clinical features of schizo
   (b) Mention 3 common antipsychotic drugs with their side effects.
3. (a) Mention the clinical features of Bipolar affective disorder.
   (b) How will you manage a case of Generalized Anxiety Disorder?
4. (a) Mention the medical causes of generalized prurius.
   (b) Mention the common presentations of AIDS.
5. A 25-year-old male presents with history of fever for 3 months and having anaemia and hepatosplenomegaly.
   (a) Mention 4 common causes with suggestive clinical features.
   (b) Mention your plan of investigations for this patient
6. (a) How will treat a case of Enteric Fever in 2nd trimester of pregnancy?
   (b) How will you differentiate tuberculoid leprosy from lepromatous leprosy?
7. (a) How will you identify poisonous snake bite?
   (b) Mention the general principles of managing a poisoned patient?
8. (a) How would you manage a case of dengue shock syndrome?
   (b) What are the clinical features of turner's syndrome?

GROUP –B (Marks 5×7=35)

1. A 7-year-old boy presented with low grade intermittent fever for last 3 month. He also develop of appetite and cough for last 2 months
   a) What is the most likely diagnosis?
   b) What further information and physical findings will you need to reach a o provisional diagno
   c) Outline the investigations plan with expected findings to confirm his diagnosis.
2. A 13-month-old boy is admitted with high fever for last 2 days and 2 episodes of convulsion a hours.
   a) Mention 4 differential diagnoses.
   b) What investigations will you plan for this patient?
   c) Outline the immediate treatment plan for this baby.
3. A 6-year-old girl presented with history of gradual pallor and repeated blood transfusion since of her age.
   a) What is the most likely diagnosis.
   b) what further information and physical findings will you need to reach a 2 provisional diagno
   c) Outline the investigations plan with expected findings to confirm her diagnosis.

4. a) Mention the diagnostic criteria of acute rheumatic fever. 2.5
b) What do you mean by primary prophylaxis of acute rheumatic fever? 1
c) How will you provide secondary prophylaxis for child with rheumatic carditis. 1.5
5. a) What are the factors influencing the growth and development of a child? 2.5
b) write down the milestone of development of an 18-month-old baby. 2.5
6. A female baby was born at a clinic by LUCS at 35 weeks of gestation with birth weight 1450gms.
a) What is the diagnosis of this baby? 1
b) What further problems do you anticipate for this baby? 2
c) Write down the principle of management of this baby. 2
7. A 5 year-old boy was brought to the emergency department with cough, wheeze and severe respiratory distress. He has history of atopy since early infancy.
a) What is the most likely diagnosis? 1.5
b) Outline the treatment plan for this boy. 2.5
c) What clinical parameters will you look for monitoring during his hospital stay? 2.5
a) Down syndrome
b) Kerosene poisoning

January-2016 : Medicine (Paper – II)

GROUP-A (Marks: 5×7=35)

1. a. Enumerate the bullous skin diseases. Describe Steven Johnson syndrome.
b. How do you treat a case at herpes Zoster involving dorsal dermatome?
2. a. What are the cardinal clinical features of primary syphilis?
b. Discuss the treatment option for primary syphilis?
3. A 30 year old man is suffering from fever for two months. On examination he has splenomegaly.
a. How can old diagnose Kala azar in such a patient?
b. Write in short about Post Kala-azar in Dermal Leishmaniasis (PKDL).
4. a. Write down the clinical features of tuberculoid leprosy.
b. How would you treat a case of tuberculoid leprosy?
5. a. What are delirium, hallucination and illusion? Give example of each.
b. What is anxiety disorder? How do you manage a case of generalized anxiety disorder?
6. a. What is dementia? Mention causes of reversible dementias.
b. How do you manage a case of delirium?
7. a. What are the principles of prescribing in elderly patient?
b. What is status epilepticus? How do treat it?
8. Write short notes on (i) cerebral malaria
(ii) Turner's syndrome

Subject: Medicine Paper II (Paediatrics) GROUP- B

1. A 9-year-old girl presented with fever and multiple large joint swelling for 2 months.
a. Mention 3 probable diagnoses.
b. How will evaluate her problem clinically to reach a provisional diagnosis?
2. A 16-month-old boy presented with history of recurrent respiratory tract infections since early infancy. He is not growing well and becomes tired during breastfeeding. He has a grade III systolic murmur on auscultation of precordium.
a. Mention 3 probable diagnoses.
b. How will you evaluate his problem clinically to reach a provisional diagnosis?
c. How will you investigate his problem?

University SAQ Questions of Obstetrics

University of Dhaka
Final Professional MBBS Examination of July, 2016
Subject: Obstetrics and Gynaecology (New Curriculum)
Paper-I (Obstetrics)
Short Answer Question (SAQ)
Full Marks: 70 Time: 2 hours 30 minutes
Answer any seven questions from each group
All questions carry equal marks, use separate answer script for each group.

GROUP-A

1. a. Define normal labour. What are the stages of labour?
   b. How will you manage a woman in first stage of labour?
2. a. What is amniotic fluid? What is the composition of amniotic fluid?
   b. Discuss the circulation of amniotic fluid.
3. a. Define Antenatal Care. Write down the schedule for WHO antenatal visit.
   b. What are the investigations you will do at booking?
4. A woman of 32 wks pregnancy is admitted in hospital with painless per vaginal bleeding for 3 episodes.
   a. What is your diagnosis?
   b. How will you manage her?
5. A primigravida presents at her 33 wks pregnancy with H/O no foetal movement for 2 days.
   a. What is the probable diagnosis?
   b. How will you manage her?
6. a. Define lie, attitude, presentation & position.
   b. How will you diagnose early pregnancy?
7. A 36 weeks pregnant woman presents with sudden gush of watery discharge vaginally for last 2 hours
   a. What is your diagnosis?
   b. How will you manage her?
8. a. What is AMTSL? What is the advantage of AMTSL?
   b. What are the complication of 3rd stage of Labour?

Group-B

1. a. How will you diagnose Deep transverse arrest of Occipito-posterior position in labour?
   b. How will you treat such a case?
2. a. Write down the difference between caput succedaneum & cephalhaematoma?
   b. Mention the indications of forceps delivery. What are the complications of forceps delivery?
3. a. Define Induction of labour.
   b. What are the methods of Induction of labour
   c. Write down he contraindication of ARM?
4. a. How will you diagnose a case of twin at 32 weeks of gestation?
   b. What are the causes of primary PPH?
5. A primigravida presents after 20 hours of labour pain. On examination, she is dehydrated. Uterus tonically contracted and bladder distended. FHS is 180/min-
   a) What is your probable diagnosis?
   b) How will you manage the case?

6. a. Define hyperemesis gravidarum. What are the complications of this condition?
   b. How will you manage a case of hyperemesis gravidarum?
7. a Define exclusive breast feeding. What are the advantages of colostrum?
   b. Describe position and attachment for breast feeding.
8. a. what are the causes of neonatal jaundice?
   b. How will you manage a case of physiological jaundice?

January 2016 : Obstetrics

GROUP-A

1. A 20 years old woman presents with history of amenorrhea for 10 weeks.
   a. How will you diagnose that she is pregnant?
   b. What are the cardiovascular changes during pregnancy?
2. a. Mention the danger signs of pregnancy.
   b. What is birth planning Write down its importance?
3. A 34 weeks pregnant woman admitted in maternity ward with Hb level 6.5 gm/dl.
   a. What is your diagnosis?
   b. How will you manage the patient?
4. A primigravida presents at her 32 wks of pregnancy with severe headache & blurring of vision. On examination her BP- 160/10 mmHg, albumin +++.
   a. What is your diagnosis?
   b. How will you manage her?
5. a. Define multiple pregnancy.
   b. What are the complications of multiple pregnancy?
6. a. Define Rh iso-immunization. How can you prevent Rh iso-immunization?
   b. Describe hydrops foetalis.
7. a. What are the types of female pelvis?
   b. Write down the bony boundaries of pelvic inlet.
8. A 3rd gravida presents to hospital at her 40 weeks of pregnancy with labour pain O/E she was exhausted, uterine contraction inadequate. FHR 100 bpm. cervix -8 cm and liquor meconium stained
   a. What is your diagnosis?
   b. How will you manage this case?

GROUP-B

1. A 30 yrs pregnant women present at her 36 wks of pregnancy for antenatal checkup. On examination her fundal height is 32 wks of gestation
   a. What are the possible causes? (any four).
   b. Write down the clinical differentiation between placenta praevia & abruptio- placenta.
2. a. Define episiotomy.
   b. What structures cut during episiotomy?
   c. What are the immediate and remote complications of episiotomy?
3. A woman admitted in hospital with severe P/V bleeding with H/O vaginal delivery 2 hours back abdominal examination revealed uterus soft & flabby.
   a. What is your diagnosis?
   b. How will you manage her?

University SAQ Questions of Gynaecology

UNIVERSITY OF DHAKA
Final Professional MBBS Examination of July, 2016
Subject: Obstetrics and Gynaecology (New Curriculum)
Paper II (Gynaecology)
Short Answer Questions (SAQ)
Full Marks: 70 Time: 2 hours 30 minutes
Answer any seven questions from each group.
All questions carry equal marks. Use separate answer script for each group.

GROUP-A

a. Define ovulation. How will you diagnose ovulation?
b. Describe follicular phase of menstrual cycle.
a. Define ectopic pregnancy. What are the sites of ectopic pregnancy?
b. How will you manage a case of missed abortion?
A 25yrs old lady presents with history of MR 5 days back with high rise of temperature and foul smelling P/V discharge.
a. What is your diagnosis?
b. How will you manage the case?
A 40 years old lady came with 14 weeks lamp in the lower abdomen with excessive menstrual loss for last 3 years.
a. What is your diagnosis?
b. How will you manage her?
a. Name the germ cell tumours of the ovary.
b. What are the clinical features of a case of malignant ovarian tumour?
a. What is D & C?
b. What are the indications and complications of D & C?
a. Define DUB. Mention its types.
b. Describe the medical management of DUB.
a. Define primary amenorrhoea.
b. What are the causes of primary amenorrhoea.

Group-B

A 16 years old girl complains of pain during menstruation.
a. What is your diagnosis?
b. How will you manage her?
a. Define Puberty & Adolescence. What are the common problems puberty?
b. Describe the management of puberty menorrhage.
a. What is PID? Mention the sequeles of PID.
b. Enumerate the clinical features of a case of acute PID.
a. Enumerate the hormonal contraceptives.
b. What is the compositions of Depoprovera?
a. Define infertility. What is the treatment of anovulation?
b. Describe the parameters of normal Semen Analysis.
a. Define menopause. What are the clinical features of Postmenopausal syndrome?
b. Enumerate the causes of Postmenopausal bleeding.

7. a. Mention the indications of Total abdominal hysterectomy.
   b. Enumerate the complications of Total abdominal hysterectomy.
8. a. What are the indications of Gynaecological laparoscopy.
   b. Enumerate its complications.

January 2016 : Gynaecology

GROUP-A

1. a. What is menstruation? Describe its secretory phase.
   b. Define ovulation. Name some ovulation inducing drugs.
2. A 14 year old girl presents with primary amenorrhoea with periodic lower abdominal pain for last 1 year. Pervaginal examination shows bulging of membrane at the level of introitus.
   a. What is your diagnosis?
   b. How will you manage her?
3. a. Define abortion. Classify abortion
   b. How will you manage a case of threatened abortion?
4. A patient came with 7 weeks amenorrhoea with severe lower abdominal pain with syncopal attack.
   a. What is our probable diagnosis?
   b. How will you manage the patient?
5. a. Define primary and secondary sub fertility?
   b. How will you investigate the female partner in case of primary sub fertility?
6. a. Define menorrhagia. What are the causes of menorrhagia?
   b. Mention the medical management of endometriosis.
7. a. Mention the clinical presentation of molar- pregnancy.
   b. Write down the follow-up schedule of molar pregnancy?
8. A 24 years old married woman came to emergency room with severe lower abdomional pain and a lump in abdomen. O/E abdomen is also tense and tender.
   a. What is your diagnosis?
   b. How will you manage this case?

GROUP-B

1. A 28 year old woman presents to you with pervaginal discharge with itching.
   a. What are the causes of this condition?
   b. Mention the treatment of vaginal trichomoniasis.
2. a. Classify epithelial tumours of ovary.
   b. How will you different between serous & mucinous cystadenoma of ovary?
3. a. Define CIN. Write down the treatment options of CIN II.
   b. Write down the screening tests used for early detection of carcinoma of cervix.
4. A 55 years old menopausal lady, para-6+2 (ab), presents with post coital bleeding and foul smelling watery vaginal discharge.
   a. What is your probable diagnosis?
   b. How will you manage the patient?
5. a. What is colposcopy? Mention the indication of colposcopy.
   b. Define cervical erosion. Mention the treatment options of this condition.
6. a. How will you prepare a patient before major gynaecological operation?
   b. What arc the complications of vaginal hysterectomy?
7. a. What are the methods of contraception?
   b. What are the absolute contraindications of oral contraceptive pill?

University SAQ Questions of Surgery-I

University of Dhaka
Final Professional MBBS Examination of July, 2016
Subject: Surgery, Paper-I (New Curriculum)
Short Answer Question (SAQ)
Full Marks: 70 Time: 2 hours 30 minutes
All questions carry equal marks
Use separate answer script for each group
Answer any five questions from each group

GROUP-A

1. Define cyst. Classify cyst with example of each. 3.5
2. a) name the blood products used in surgical practice.
   b) write the transfusion order for a single unit of blood. 1+1+1.5
   c) Mention the complications from a single unit transfusion.
3. a) Define degloving injury. Give examples.
   b) Mention the steps of management of acute wound, 1+15+1
   c) Mention the names of chronic wounds you have seen in surgery ward.
4. a) what are the options for management of an abscess? Give example of each 1.5 +1+1
   b) Mention the risk factors for wound infection,
   c) What do you mean by major wound infection? Give example
5. a) what are the surgical conditions produced by *Ascariasis lumbricoids*?
   b) Mention the local physical findings of neck gland tuberculosis? 1+1+1.5
   c) compare bacterial & amoebic liver abscess.
6. Write short notes on: I. Inhalation burn, II. Marjolin ulcer. 1.75+1.75

GROUP-B

1. A woman of 45yrs presented with a fixed, non-tender ump in her left breast for 2 month.
   a) How will you evaluate her?
   b) How will you counsel her for treatment?
2. a. Write down the types gallstone and causal factors for gallstone formation. 2+1.5
   b. How a mucocoele of gallbladder is formed? 2.5+1
3. A young boy admitted with left lower chest pain & abdominal distension following RTA.
   a) What other physical findings you may find on abdominal examination?
   b) What radiographic findings do you expect on plain x-ray of abdomen? 2+1.5
4. A patient of 25 yrs presents with alternate constipation & diarrhea for a months. 1.5+1+1
   a. What other information you want to elicit from the patient?
   b. Mention probable DRE findings.
   c. How will you investigate the patient?
5. A 30 year old women presented with a tender right lower abdominal mass with fewer. 2+
   a. How will you evaluate this patient?
   b. Write down your management plan.

6. Write short notes on: i. management of mastalgia. ii. non-operative treatment for anal fissure. 1.75+1.75

GROUP-C

1 a. What are the bony injuries a person may sustain falls on an out stretched hand? 1+1.5+1
b. What are the typical radiologic findings of Cole's fracture?
c. write down the complications of Colle's fracture
2 a. What are the basic steps of musculoskeletal examination?
b. What are the general principles of treatment of hand infection? 1+1.5+1
c. What are the most common tumors that metastasize in the bone?
3 A young male patient of 22 yrs sustained trauma to his chest following road traffic accident 1+2.5 Examination reveals restricted chest wall movement on right side with breathlessness and tachypnea. a. What are the possible components of the injury?
b. How will you manage the patient immediately?
4. A patient following head trauma underwent CT scan which reveals a bi-convex shaped hyperdense lesion between skull and brain. 0.5+1.5+1
a. What is your radiological diagnosis?
b. How a patient with such lesion typically presents?
c. Outline your management plan of this patient.
5. How will you examine & investigate a patient with chronic peripheral vascular occlusive disease? 3.5
6. Write short notes on: a cleft lip, b. Polydactyly 1.75+1.75

GROUP-D

1. A young boy of 5yrs underwent circumcision 4 hours ago. Now, his parents bring him for promise bleeding from circumcision site. 1+1+1.5
   a. what are the possible causes?
   b. How will you investigate him?
   c. How will you manage him?
2. A 65 yrs old man presented with acute retention of urine.
   a. How will you approach for taking history? 1.5+1+1
   b. What clinical finding will lead you to the correct pathology?
   c. What is your management plan?
3. A60 year male presented with a palpable non-tender swelling on left on with painless hematuria. 0.5+1.5
   a. What is the most probable cause?
   b. How will you investigate?
4. A young patient presented with a hard & insensible testicular swelling. 1+1.5
   a. What are the possible causes?
   b. How will you examine the patient?
   c. What investigations will you advise for him?
5. Write down the steps of examinations of an inguino-scrotal swelling.
6. Write short notes on: i. suprapubic cystostomy, ii.Umbilical hernia.

University SAQ Questions of Surgery Paper - II

UNIVERSITY OF DHAKA

Final Professional MBBS Examination, July, 2016

Subject: Surgery Paper —II

Short Answer Questions (SAQ)

Marks-70; Time - 2 hours 30 minutes

Use separate answer script for each group. Answer any five questions from each group.

Group A

1. a. Draw and label the layers of cornea.
   b. How does cornea get its nutrition?
   c. Name 4 diseases of cornea.
2. a. Classify cataract aetiologically.
   b. What are the preoperative ocular tests done before cataract surgery?
   c. Name the laboratory investigation done before cataract surgery.
3. a. What are coats of eyeball?
   b. Name the intraocular muscles.
   c. Give their nerve supply and action
4. A young man suffering from severe pain RE with photophobia. O/E ciliary congestion, constricted irregular pupil and ↓ Va found.
   a. What are the differential diagnosis?
   b. Manage the case.
5. a. What are the types of lens induced glaucoma?
   b. Write down the mechanisms of phacomorphic glaucoma.
   c. Mention the treatment of phacomorphic glaucoma.
6. Write short notes on : (i) LASIK (ii) IOL.

Group B

1. a. What is astigmatism?
   b. Write down the treatment of myopia.
   c. What's pathological myopia?
2. a. Name the common chemical agents causing ocular injury.
   b. Which one is more injurious to eye and why?
   c. Give the outline of ocular alkali burn management.
3. A 40 years old man presented with painful swelling and redness over the right lacrimal sac area. H had history of watering in right eye for last 2 years.
   a. What is your clinical diagnosis?
   b. How will you treat the patient?
   c. What suggestion will you give to this patient?
4. a. Name four ocular emergencies.
   b. How will you proceed to remove a superficial corneal FB?
5. a. Name four retinal diseases.
   b. What are the ocular complications of diabetes?
6. Write short notes on: (i) Posthumous eye donation (ii) Squint.

Group-C

A 25 years old fair lady notices gradual bilateral loss of hearing for 5 years. Otoscopy normal tympanic membrane
a. What your diagnosis?
b. How will you investigate this patient?
c. Write down the modalities of treatment.
A 40 years old lady with DM complaining of otalgia in right ear. On examination, External auditory canal is swollen congested and discharging.
a. What is your clinical diagnosis?
b. What are the differential diagnosis?
c. How will you manage the case?
A 5 years old girl having the history of recurrent upper respiratory tract infection and 5 obstruction has developed hearing impairment
a. What is your probable diagnosis?
b. Mention five definite clinical findings in favour of you diagnosis
c. How will you treat the case?
A 15 year old boy came to you with progressive nasal obstruction recurrent epistaxis and Check swelling.
a. What is your diagnosis? b. How will you investigate the cas c. How will you treat the patient?
What do you mean by septoplasty operation?
b. What are the indications of septoplasty? c. Enumerate the complications of septoplasty.
Write short notes on: a) Atrophic Rhinitis b) Otomycosis

Group-D

A 60 years old smoker presented to you with progressive hoarseness of voice for 2 months and stridor for 7 days.
a. What is the most probable diagnosis?
b. How will you overcome his stridor?
c. How will you confirm the diagnosis and what are the modalities of treatment of the patient?
A 55 years old man came to you with the complaints of progressive dysphagia anorexia and weight loss for last 6 months
a. What is the probable diagnosis? b. How will you manage the case?
c. Mention five common oesophageal causes of dysphagia.
A 30 years old lady came to you with a firm swelling in her left parotid region with bosselated surface
a. What is your probable diagnosis?
b. What investigations will you do to reach your diagnosis?
c. How will you treat the case and what are the important complications of treatment.
a. What are the common foreign bodies in the oesophagus?
b. How will you treat a case of foreign body in oesophagus.
c. What are the complications of rigid oesophagoscopy and how will you treat the most dangerous complications mention brief?
a. Classify thyroid carcinoma.
b. What are the steps of management of a 45 years old female with papillary carcinoma of thyroid?
c. Write 5 common complications of thyroid surgery.
Write short notes on: a) Peritonsillar abscess b) Ludwigs angina.