

POST GRADUATE EXAMINATION, MAY - 2018

**MS GENERAL SURGERY
(PAPER ONE)**

**BASIC PRINCIPLES IN SURGERY; SURGICAL PATHOLOGY AND IMAGING;
PERI-OPERATIVE MANAGEMENT; TRAUMA AND CRITICAL CARE**

[Time allotted: Three hours]

[Max Marks: 100]

Note: Attempt all questions
Illustrate with suitable diagrams.

- Q. 1.** Define the different patterns of shock, the pathophysiology and the principles of resuscitations. (20)
- Q. 2.** Define the ideal characteristics of a suture. Classify suture materials and define the ideal suturing techniques. (20)
- Q. 3. Describe briefly:** (3 x 10 = 30)
- a. Ulcers of the leg
 - b. Energy sources used in surgery
 - c. Enteral and total parenteral nutrition
- Q. 4. Write short notes on:** (5 x 6 = 30)
- a. Blood transfusion
 - b. Therapeutic upper GI endoscopy
 - c. Chronic pain management
 - d. Gall stones
 - e. Closed loop obstruction

X

POST GRADUATE EXAMINATION, MAY - 2018**MS GENERAL SURGERY****(PAPER TWO)****SPECIALITIES IN GENERAL SURGERY****[Time allotted: Three hours]****[Max Marks: 100]**

Note: Attempt all questions
Illustrate with suitable diagrams.

- Q. 1.** What are the histological sub types of breast cancers and how does the clinical presentation vary in each. A 28 years old lady with breast cancer, who is very much concerned of the post-operative cosmetic outcome, has a 6 cm lump in the upper outer quadrant of the left breast which is ER+ and PR+ and HER2 neu ++. Outline the management options in this case. **(20)**
- Q. 2.** A 25 years old man who presents with a 1cm sized swelling in the midline of the neck which moves on deglutition. He was found to have level III and Level IV cervical lymph nodes palpable. Describe the investigations and management of this patient. **(20)**
- Q. 3. Describe briefly:** **(3 x 10 = 30)**
- The clinical presentation, evaluation and management of uretero-pelvic junction obstruction.
 - The work up and management of a 50 years male patient who complains of pain on walking for about 1 km which gets relieved on taking rest.
 - Investigation and management of 70 years male with history of painless hematuria for 3 months. He has no history of trauma, fever, abdominal pain or any medication.
- Q. 4. Write short notes on:** **(5 x 6 = 30)**
- Wilm's tumor
 - Extradural hemorrhage
 - Urinary bladder carcinoma - Staging and management
 - Anorectal malformation
 - Malignant melanoma

X

POST GRADUATE EXAMINATION, MAY - 2018

MS GENERAL SURGERY
(PAPER THREE)

GENERAL SURGERY: ABDOMEN

[Time allotted: Three hours]

[Max Marks: 100]

Note: Attempt all questions
Illustrate with suitable diagrams.

Q. 1. Describe causes of mechanical small intestinal obstruction in adults, write its clinical manifestations and management. (20)

Q. 2. Describe clinical features, investigations, differential diagnosis, complications and treatment of pancreatic pseudo-cyst. (20)

Q. 3. Describe briefly: (3 x 10 = 30)

- Clinical features and management of choledochal cysts
- Complications of acute appendicitis and its management
- Types of gastric cancer and its clinical features

Q. 4. Write short notes on: (5 x 6 = 30)

- Enterohepatic circulation
- Post cholecystectomy syndrome
- Ogilvie syndrome
- Spigelian hernia
- Incidentalomas

X

POST GRADUATE EXAMINATION, MAY - 2018

**MS GENERAL SURGERY
(PAPER FOUR)**

RECENT ADVANCES IN GENERAL SURGERY

[Max Marks: 100]

[Time allotted: Three hours]

Note: Attempt all questions
Illustrate with suitable diagrams.

Q. 1. Elaborate the recent advances in the treatment of varicose veins. **(20)**

Q. 2. Describe clinical features, evaluation and current status of management of low rectal cancer. Discuss the recent advances in the principle of treatment of colo-rectal malignancies. **(20)**

(3 x 10 = 30)

Q. 3. Describe briefly:

- a. Discuss who should have or not an axillary node dissection with breast cancer?
- b. Current surgical techniques in management of pilonidal sinus
- c. Perioperative normothermia during major surgery: Is it important?

(5 x 6 = 30)

Q. 4. Write short notes on:

- a. Digital operating technology
- b. STARR procedure for obstructive defecation
- c. Photodynamic therapy
- d. Targeted therapies
- e. Single incision laparoscopic surgery

X