

FINAL ANSWER KEY

Question 40/2024/OL

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Category 338/2023

Code:

Exam: Assistant Professor in Paediatric Surgery

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Department Medical Education

Question1:-All the following served as President of Indian Association of Pediatric Surgery except

A:-Professor RR Nair

B:-Professor KK Varma

C:-Professor CS Gopal

D:-Professor KE Mammen

Correct Answer:- Option-A

Question2:-A 30 yr old primi at 20 wk pregnancy underwent evaluation. The Maternal serum AFP is more than 1000 ng/ml. All the following are associated with the above except

A:-Folate deficiency

B:-Carbamazepine

C:-Valproate

D:-Phenytoin

Correct Answer:- Option-D

Question3:-A Neonate in the post-operative period is started on parenteral nutrition. The glucose content is gradually increased to achieve optimal weight gain. It is noticed that the glucose content in the parenteral fluid is $>18\text{g/kg/day}$. This is likely to cause

A:-decrease in plasma triglyceride levels

B:-decrease in CO_2 production

C:-increase in efficiency of glucose metabolism

D:-decrease in net fat oxidation

Correct Answer:- Option-D

Question4:-A 12 day old neonate underwent primary closure of Exstrophy bladder. At the end of the procedure, the temperature was noted to be 32 degrees C. All are associated effects except

A:-acidosis

B:-vasodilatation

C:-impaired immune function

D:-delayed wound healing

Correct Answer:- Option-B

Question5:-Parents of a 2 yr girl with known Hirschsprung's disease involving hepatic flexure come for counselling as the mother is anxious to conceive. Choose the correct statement for counselling.

A:-The risk is lower if the next child is a boy

B:-The risk is lower if the next child is syndromic

C:-The risk is higher if the next child is a boy

D:-The risk is higher if the next child is non syndromic

Correct Answer:- Option-C

Question6:-A 1 yr old child with closed space burns is brought with respiratory distress. Among the following identify the correct precaution to be observed while intubating this child.

A:-The larynx is anatomically lower and more posterior, necessitating deep insertion of tube

B:-The epiglottis is shorter and tilted posteriorly over the glottis, requiring straight blade laryngoscope

C:-In view of airway safety, noncuffed endotracheal tube is to be used

D:-Narrowest point of the airway is the glottis, hence negotiation of glottis ensures secure tube placement

Correct Answer:- Option-B

Question7:-In the calculation of the burn involvement, which part of the body remains the same across all ages of children?

A:-Thigh

B:-Leg

C:-Head

D:-Neck

Correct Answer:- Option-D

Question8:-A 2 yr old girl child from a low socio economic status is brought with fracture Rt Femur following trivial trauma. She has 2 elder sisters. All the following are relevant in the diagnosis and management of this child except

A:-identification of torn frenulum of upper lip

B:-evaluation of spine fractures

C:-identification of bruises of various colours

D:-evaluation of rib fractures

Correct Answer:- Option-B

Question9:-A neonate is brought with lack of motion of right shoulder. History revealed shoulder dystocia at birth. What is the correct statement in this scenario?

A:-Aggressive primary microsurgical repair is recommended for better result

B:-Upper limb adduction/internal rotation is indicative of Klumpke's paralysis

C:-Phrenic nerve paralysis to be investigated

D:-Wrist dysfunction is classical of Erb's paralysis

Correct Answer:- Option-C

Question10:-A 5 yr old boy with history of trauma is brought with abdominal wall bruising. All the following are indicative of bowel injury except

A:-intraluminal air

B:-free intraperitoneal fluid

C:-bowel wall thickening

D:-bowel wall enhancement and dilation

Correct Answer:- Option-A

Question11:-A 10 yr old girl with blunt injury abdomen on ventilation for 5 days with conservative management developed progressive abdominal distension. All the following are consequences except

A:-Splanchnic hypoperfusion

B:-Renal function impairment

C:-Inferior vena caval distension

D:-Increased airway pressure

Correct Answer:- Option-C

Question12:-A 8 yr old boy with blunt injury chest on observation is noted to be in distress with paradoxical chest wall movement and SpO₂ 88%. The chest X ray showed evidence of multiple rib fractures. All are relevant in the management except

A:-Ventilation perfusion scan

B:-Oxygen

C:-Intercostal nerve block

D:-Splinting

Correct Answer:- Option-A

Question13:-A 9 yr old girl with motor vehicle accident was referred to the district headquarters hospital with respiratory distress and left shoulder tip pain. Initial chest X ray was reported normal at the peripheral centre. In view of vomiting and worsening distress, a nasogastric tube was placed. A repeat chest X ray showed ng tube in the left chest. All are features of diaphragmatic injury on CT chest except

A:-Obscured hemidiaphragm

B:-Atypical pneumothorax

C:-Depressed hemidiaphragm

D:-Plate like atelectasis adjacent to the diaphragm

Correct Answer:- Option-C

Question14:-A 6 yr old boy is being followed up after conservative management of

renal trauma. The likely sequel known to occur in the long term is

- A:-Hypertension
- B:-Renal dysplasia
- C:-Complex renal cyst
- D:-Xanthogranulomatous pyelonephritis

Correct Answer:- Option-A

Question15:-A 10 yr old boy with renal trauma undergoes CT, which shows evidence of renal laceration extending 1 cm in depth contained within the Gerota's fascia. What is the recommended management?

- A:-Immediate operative exploration
- B:-Percutaneous nephrostomy under sonography
- C:-Cystoscopy and stenting
- D:-Watchful waiting

Correct Answer:- Option-D

Question16:-A 2 yr old girl is brought with a solitary, well-circumscribed, alopecic plaque in the temporal region of scalp. The Surgeon recommended excision in view of progression to Basal cell carcinoma. What is the diagnosis?

- A:-Giant hairy nevus
- B:-Aplasia cutis congenita
- C:-Sebaceous nevus
- D:-Congenital melanocytic nevus

Correct Answer:- Option-C

Question17:-A 9 yr old girl presents with multiple neck nodes. In differentiating reactive lymph nodes from neoplastic involvement on sonography, all the following favour non neoplastic etiology except

- A:-Central necrosis
- B:-Long to short axis ratio < 2
- C:-Hilar vascularity
- D:-Central hyperechogenicity

Correct Answer:- Option-B

Question18:-A 16 year old boy, tall for his age was noted to have mass on a chest X ray. CT chest revealed an anterior mediastinal mass. Histology of the resected mass is likely to show

- A:-Schiller Duval body
- B:-Homer Wright rosettes
- C:-Call Exner body
- D:-Flexner Wintersteiner rosettes

Correct Answer:- Option-A

Question19:-A 9 yr old boy with right scrotal mass on sonography was identified to be paratesticular. CT abdomen/chest did not identify any additional abnormality. All the following are indicated except

A:-Retroperitoneal lymph node dissection

B:-Chemotherapy

C:-Bone scan

D:-Bone marrow biopsy

Correct Answer:- Option-A

Question20:-A 10 yr old girl with intussusception, was noted to have a lead point with mass involving the Ileo cecal region. After histological diagnosis which showed a starry sky appearance, she received chemotherapy. What would have been the recommended procedure, undertaken by the surgeon?

A:-Right hemicolectomy

B:-Limited resection and mesenteric lymphadenectomy

C:-R0 resection and Ileostomy

D:-Biopsy

Correct Answer:- Option-D

Question21:-A 3 yr old girl with abdominal pain, distention and jaundice after work up underwent biopsy followed by chemotherapy and radiotherapy. On follow up at 1 year, she is well. The likely diagnosis is

A:-Spindle cell Embryonal RMS

B:-Translocation positive Alveolar RMS

C:-Botryoid Embryonal RMS

D:-Askin's tumour

Correct Answer:- Option-C

Question22:-A 4 yr old girl with Cushingoid features on evaluation was found to have a right adrenocortical tumour. What is the management?

A:-Neoadjuvant chemotherapy followed by surgery

B:-Surgery

C:-Biopsy and Mitotane therapy

D:-Fractionated radiotherapy and chemotherapy

Correct Answer:- Option-B

Question23:-A 15 yr old girl with primary amenorrhoea on work up was noted to have 45X/46XY karyotype. She is at risk for development of

A:-Steroid cell tumour

B:-Arrhenoblastoma

C:-Gonadoblastoma

D:-Granulosa stromal cell tumour

Correct Answer:- Option-C

Question24:-A 11 yr old girl with pain abdomen on investigations was identified to have cystic left Ovarian mass with negative tumour markers. Preferred option is

A:-Salpingo Oophorectomy

B:-Oophorectomy

C:-Oophorectomy (left) and right sided 'hot dog in bun technique'

D:-Ovarian sparing cystectomy

Correct Answer:- Option-D

Question25:-A 4 yr old with asymptomatic right upper quadrant mass underwent a CT which showed multiple lesions with centripetal enhancement. Of the following, the relevant test is

A:-B HCG level

B:-Thyroid function test

C:-CEA level

D:-Serum calcium level

Correct Answer:- Option-B

Question26:-A 15 month old child with liver mass, after work up underwent surgery. The tumor was of pure fetal histology with negative margins. Child requires

A:-Observation

B:-Cisplatin monotherapy

C:-PLADO regime

D:-Irinotecan short pulse regime

Correct Answer:- Option-A

Question27:-A 3 yr old with abdominal Neuroblastoma is taken up for surgery. All are relevant surgical principles except

A:-Periadventitial plane dissection

B:-En bloc contiguous resection

C:-Second look surgery

D:-Organ sparing resection

Correct Answer:- Option-B

Question28:-Among the following, which requires chemotherapy as part of management?

A:-Cystic Partially differentiated Nephroblastoma

B:-Cystic Nephroma

C:-Bosniak type II cyst

D:-Mesoblastic Nephroma

Correct Answer:- Option-A

Question29:-A 2 yr old child is on follow up after completion of treatment for right stage III Wilm's tumor as per NWTS protocol. All are late effects of Radiotherapy

except

A:-Osteosarcoma

B:-Kyphoscoliosis

C:-Pectus carinatum

D:-Carcinoma breast

Correct Answer:- Option-C

Question30:-A 2 month old baby was brought with large tongue and umbilical hernia. The child weighed 4.5 kg at delivery and required glucose infusions for low sugar levels. As part of the follow up, sonographic screening is advised until _____ years of age.

A:-2

B:-4

C:-6

D:-8

Correct Answer:- Option-D

Question31:-Most common acquired cause of end stage renal disease in children

A:-PUV

B:-Reflux nephropathy

C:-C/C Glomerulo Nephritis

D:-Focal Segmental Glomerulo Nephritis

Correct Answer:- Option-D

Question32:-Second branchial cleft anomalies reach up to

A:-Foramen caecum

B:-Pyriform fossa

C:-Tonsillar fossa

D:-Inner ear

Correct Answer:- Option-C

Question33:-Thoracic duct crosses at the level of

A:-_{3rd} Thoracic Vertebra

B:-_{4th} Thoracic Verterbra

C:-_{5th} Thoracic Vertebra

D:-Thoracic Vertebra

Correct Answer:- Option-C

Question34:-In 46XX DSD, most common mutation is at

A:-CYP21 gene

B:-P450 C17

C:-CYP11A

D:-CYP11B

Correct Answer:- Option-A

Question35:-TENCKHOFF catheter is used for

A:-Central Venous Catheterization

B:-Long term chemotherapy

C:-Peritoneal dialysis

D:-Enteral nutrition

Correct Answer:- Option-C

Question36:-Pre auricular sinus occur due to

A:-Incomplete fusion of 1st and 2nd Branchial arches

B:-Rupture of 2nd Branchial cleft

C:-Persistence of 1st branchial cleft

D:-Upward migration of Ultimobranchial body

Correct Answer:- Option-A

Question37:-Congenital lobar emphysema most commonly affects

A:-Left Upper lobe

B:-Right Upper lobe

C:-Right middle lobe

D:-Left lower lobe

Correct Answer:- Option-A

Question38:-Antenatal treatment of congenital Adrenal hyperplasia

A:-Amniocentesis done to assess the sex of infant and dexamethazone given if 46XX

B:-Hydrocortisone is given to mother as it can cross placenta

C:-Dexamethazone is started before 5th /6th week of gestation and continued, as per sex determined later

D:-Dexamethazone given before induction of labour and continued if it is a female baby

Correct Answer:- Option-C

Question39:-Heteropagus twins means

A:-Conjoint twins with fused hearts

B:-Parasitic twin with no definite internal connection

C:-Fetus in fetu

D:-Dizygotic twin

Correct Answer:- Option-B

Question40:-Not true about Kassebach-Merritt syndrome

A:-Elevated D dimer values

B:-Elevated fibrinogen

C:-Seen in Kaposiform Hemangio endothelioma

D:-Normal PT/APTT

Correct Answer:- Option-B

Question41:-Congenital cyst adenoid malformation Stocker type I- All are true except

A:-Multiple small cysts (<2cm)

B:-Commonly seen in lower lobes

C:-Associated anomalies are rare

D:-Good prognosis

Correct Answer:- Option-A

Question42:-Treatment of A/C graft rejection in renal transplant includes all EXCEPT

A:-Methyl prednisolone

B:-Thymoglobulin

C:-Basiliximab

D:-OKT3

Correct Answer:- Option-C

Question43:-Prognosis is good in congenital diaphragmatic hernia, if

A:-Lung head ration value is less than 1

B:-Mc Goon index less than 1.31

C:-Pulmonary Arterial Index less than 90

D:-Modified Ventilatory index less than 40

Correct Answer:- Option-D

Question44:-Extralobar sequestrations

(i) Not connected with foregut

(ii) May be seen both above and below the diaphragm

(iii) Frequently associated with other congenital anomalies

(iv) AV shunting and congestive cardiac failure

(v) Communicates with neighbouring alveoli via abnormal air spaces

A:-i, ii, iii, iv, v correct

B:-ii, iii, iv correct

C:-i, ii, v correct

D:-i, ii, iii correct

Correct Answer:- Option-B

Question45:-Reflux Index for GE reflux in children means

A:-Percentage of time pH of oesophagus is <5 in 24 hours

B:-Percentage of time pH of oesophagus is <4 in 24 hours

C:-Percentage of time pH of oesophagus is <3 in 24 hours

D:-Percentage of time pH of oesophagus is <2 in 24 hours

Correct Answer:- Option-B

Question46:-Torticollis is managed by all except

A:-Botulinum Injection

B:-Physiotherapy

C:-Surgical division of sternocleidomastoid heads before six months

D:-Deep brain stimulation

Correct Answer:- Option-C

Question47:-University of Wisconsin solution is

A:-Hyperkalemic hyper osmolar

B:-Histidine-Tryptophan Ketoglucocide sol

C:-Hypo natremic Hypokalemic

D:-Iso osmolar with added ca and Mg

Correct Answer:- Option-A

Question48:-Epignathus-- All are true EXCEPT

A:-Arises from Tonsillar fossa

B:-Common in female baby

C:-Elevated MSAFP

D:-Managed by EXIT procedure

Correct Answer:- Option-A

Question49:-Morgagni Hernia

- (i) Presents in older children
- (ii) Occurs through embryonic space of Larry
- (iii) Usual content is stomach with no sac
- (iv) Barium meal is diagnostic
- (v) Associated with cardiac defects

A:-ii, iii, iv, v correct

B:-i, ii, v correct

C:-ii, iii, v correct

D:-i, iii, iv, v correct

Correct Answer:- Option-B

Question50:-In Live donor liver transplant in children, part of liver used is

A:-Right half of liver

B:-Segments ii, iii

C:-Left half of liver

D:-Segments i, ii, iii, iv

Correct Answer:- Option-B

Question51:-Most common Anterior mediastinal tumour in children

A:-Thymoma

B:-Neuroblastoma

C:-Teratoma

D:-Lymphoma

Correct Answer:- Option-D

Question52:-All are true about Ovotesticular DSD except

A:-Gonadal Asymmetry

B:-46XX karyotype most common

C:-True Hermaphrodite

D:-High levels of Testosterone present

Correct Answer:- Option-D

Question53:-Progression of advanced stages of Empyema is suspected if pleural fluid demonstrates

(i) Presence of pus

(ii) pH >7.2

(iii) LDH>1000

(iv) Glucose less than 40

(v) Bacteria visible in Gram stain

A:-All of the above

B:-i, iii, v correct

C:-i, iii, iv, v correct

D:-ii, iii, iv correct

Correct Answer:- Option-C

Question54:-Achalasia cardia ---- All are true except

A:-Manometry is the best diagnostic tool

B:-Oesophagoscope easily negotiates the Achalasia area

C:-Balloon dilatation is the best treatment in younger children

D:-Paucity of interstitial cells of Cajol

Correct Answer:- Option-C

Question55:-Los Angeles grading is used for

A:-Reflux oesophagitis

B:-Pulmonary Hypertension

C:-Splenic Injury

D:-Portal Hypertension

Correct Answer:- Option-A

Question56:-Perflurocarbons are used in treatment of

A:-Empyema treatment

B:-VUR management

C:-Congenital Diaphragmatic Hernia

D:-Meconium ileus

Correct Answer:- Option-C

Question57:-Shortest route for oesophageal replacement

A:-Retrosternal

B:-Subcutaneous

C:-Posterior mediastinal

D:-Trans pleural

Correct Answer:- Option-C

Question58:-Gross Type A Oesophageal Atresia --- All are true EXCEPT

A:-Commonest Type of OA + TEF

B:-Associated with high incidence of prematurity

C:-Cardiac defects are common

D:-Gastrostomy and Oesophagostomy done

Correct Answer:- Option-A

Question59:-True about Gastric tube Oesophagoplasty

(i) Right gastro epiploic artery is divided at origin

(ii) Long anastomotic line

(iii) Splenectomy may be necessary as short gastric arteries are divided

(iv) Trans pleural is the preferred route

(v) Gastrostomy done

A:-i, ii, iii, iv, v correct

B:-ii, iii, iv correct

C:-i, ii, v correct

D:-ii, iii, v correct

Correct Answer:- Option-C

Question60:-Incorrect statement about etiology of cleft lip/palate

A:-Intake of Phenytoin during pregnancy caused 10 fold increase in cleft

B:-Intake of retinoic acid during pregnancy decreases the incidence

C:-Children born to parents with cleft

D:-Alcohol intake during pregnancy increases risk

Correct Answer:- Option-B

Question61:-All of the following are Adenomatous polyposis syndromes EXCEPT

A:-FAP

B:-Gardner syndrome

C:-Turcot syndrome

D:-Cowden syndrome

Correct Answer:- Option-D

Question62:-APC gene which is implicated in FAP is located on

A:-Short arm of chromosome 17

B:-Long arm of chromosome 5

C:-Long arm of chromosome 18

D:-Short arm of chromosome 7

Correct Answer:- Option-B

Question63:-All of the following may contribute to the development of gastric volvulus EXCEPT

A:-Polysplenia

B:-Hyperplasia of left lobe of liver

C:-Volvulus of transverse colon

D:-Peptic ulcer disease

Correct Answer:- Option-B

Question64:-A baby with gastroschisis was taken up for primary closure after reduction of the bowel. Which of the following will prompt you to create a silo on postoperative day 2?

A:-Bladder pressure of 8 mm Hg

B:-Splanchnic perfusion pressure of 45 mm Hg

C:-Gastric pressure of 9 mm Hg

D:-Central venous pressure of 6 mm Hg

Correct Answer:- Option-D

Question65:-Which of the following contributes to the development of Necrotizing enterocolitis in preterm newborns?

(i) Immature motility of the intestines

(ii) Decreased pancreatic and gastric secretions

(iii) Decreased bile acid level

(iv) Decreased nutrient digestion and absorption

A:-i, ii and iii only

B:-i, iii and iv only

C:-ii, iii and iv only

D:-i, ii and iv only

Correct Answer:- Option-D

Question66:-Which of the following findings is NOT suggestive of stage IIB NEC according to Modified Bell's classification?

A:-Portal venous gas

B:-Widespread pneumatosis

C:-Abdominal wall erythema

D:-Ascites

Correct Answer:- Option-C

Question67:-Which of the following is FALSE regarding intestinal atresias?

A:-Familial multiple intestinal atresia has an autosomal dominant transmission

B:-Mutation of TT7CA gene causes multiple atresias with immunodeficiency

C:-'String of Pearls' appearance is pathognomonic of familial multiple intestinal atresia

D:-CNS abnormalities are seen in 25% of patients with nonfamilial multiple intestinal atresias

Correct Answer:- Option-A

Question68:-All of the following have a score of '2' on HAEC (Hirschsprung Associated Enterocolitis Score) EXCEPT

A:-Diarrhea with explosive stool

B:-Explosive discharge of gas and stools on rectal exam

C:-Diarrhea with bloody stool

D:-Diarrhea with foul smelling stool

Correct Answer:- Option-C

Question69:-Which of the following statements are true regarding acute appendicitis?

(i) Appendectomy increases the risk of developing clostridium difficile associated colitis

(ii) Incidence of appendicitis increases during summer

(iii) Increased right lower quadrant pain with coughing is called 'Dunphy sign'

(iv) Pediatric Appendicitis score of more than 6 suggests appendicitis

A:-ii, iii and iv are correct

B:-i, ii and iii are correct

C:-i, iii and iv are correct

D:-All are correct

Correct Answer:- Option-D

Question70:-Which of the following statement is FALSE regarding Meckel's Diverticulum?

A:-Meckel's diverticulum is supplied by the distal end of right vitelline artery

B:-Omphalomesenteric duct involutes between seven to nine weeks of gestation

C:-Angiography can be used to detect Meckel's if bleeding is more than 0.5 ml/min

D:-Glucagon can be used to augment the sensitivity of Meckel Technetium 99 scan

Correct Answer:- Option-B

Question71:-Kimura's procedure in short bowel syndrome refers to

A:-Serial transverse enteroplasty

B:-Longitudinal intestinal lengthening procedure

C:-Transverse bowel lengthening procedure

D:-Sequential intestinal lengthening procedure

Correct Answer:- Option-C

Question72:-White's technique was described in

A:-Esophageal duplication

B:-Gastric duplication

C:-Duodenal duplication

D:-Colonic duplication

Correct Answer:- Option-B

Question73:-A 11 yr old boy presented with rectal bleeding, diarrhea and weight loss. His colonoscopy revealed cobblestone appearance of mucosa with skip lesions. Microscopy showed noncaseating granulomas. Laboratory parameters of this patient may show all of the following EXCEPT

A:-Thrombocytopenia

B:-Leucocytosis

C:-Hypoalbuminemia

D:-Anemia

Correct Answer:- Option-A

Question74:-All of the following have been used in the drug management of Crohn's disease and its extra intestinal manifestations EXCEPT

A:-5 ASA and Prednisolone

B:-Aspirin and NSAIDs

C:-Azathioprine and 6 mercaptopurine

D:-Ursodeoxycholic acid and IL 10

Correct Answer:- Option-B

Question75:-Regarding Alum Precipitated Toxoid test which of the following is False

A:-Used to differentiate fetal blood from swallowed maternal blood

B:-Reagent used is 1% Sodium Hydroxide

C:-Maternal blood gives a pink colour with sodium hydroxide

D:-Fetal blood gives a bright red colour with sodium hydroxide

Correct Answer:- Option-C

Question76:-Persistent posterior ledge is a complication of which of the following procedures?

A:-Posterior sagittal Anorectoplasty

B:-Anterior sagittal Anorectoplasty

C:-Minimal Psarp

D:-Anoplasty

Correct Answer:- Option-B

Question77:-Whose classification of pouch colon is based on the adequacy or inadequacy of the colonic length for pull through?

A:-Narasimha Rao et al

B:-Wakhlu et al

C:-Peña et al

D:-Krickenberg et al

Correct Answer:- Option-D

Question78:-What is Type IV Rectal atresia?

A:-Rectal atresia with fibrous cord between 2 atresia ends

B:-Rectal atresia with a gap between 2 ends

C:-Rectal stenosis

D:-Multiple rectal atresias

Correct Answer:- Option-B

Question79:-Which of the following is/are true regarding pathological classification of mesenteric cyst by Losanoff and Colleagues?

(i) Type 1-Sessile within the leaves of the mesentery

(ii) Type 2-Pedicled type

(iii) Type 3-Extending into retroperitoneum

(iv) Type 4-Multicentric type

A:-All are correct

B:-(i), (ii) and (iii) are correct

C:-(i) and (iv) are correct

D:-(iii) and (iv) are correct

Correct Answer:- Option-D

Question80:-What is 'Gross Theory' of development of mesenteric cyst?

A:-Deficiency of normal lymphaticovenous shunts in perinodal tissue

B:-Failure of embryonic lymphatic spaces to join with the venous system

C:-Proliferation of ectopic lymphatics in the mesentery which lack communication with the rest of the lymphatic system

D:-Failure of fusion of the leaves of the mesentery

Correct Answer:- Option-C

Question81:-8 yr old female child awaiting reimplantation for left grade IV vesicoureteral reflux with history of urinary tract calculus which procedure would you like to avoid

A:-Politano-Leadbetter technique

B:-Cohen cross trigonal technique

C:-Lich-Gregoir technique

D:-Paquin technique

Correct Answer:- Option-B

Question82:-Which of the following is true regarding antenatal intervention in a 24 wk fetus with lower urinary tract obstruction with severe oligohydramnios and favorable fetal urine biochemistry?

A:-Will improve perinatal and early survival only by improving pulmonary function

B:-Will improve short and long term renal and pulmonary outcome

C:-Avoid need for future renal transplantation by preventing development of CKD

D:-Will avoid need for bladder management in future

Correct Answer:- Option-A

Question83:-4 yr old male child presents with haematuria was found to have a horse shoe and Wilms tumor involving right kidney. The treatment of choice is

A:-Upfront excision of the right kidney with tumor

B:-Preoperative chemotherapy followed by excision of the right kidney with tumor including isthmus

C:-Preoperative chemotherapy followed by excision of tumor alone preserving residual kidney

D:-Radiofrequency ablation of tumor

Correct Answer:- Option-B

Question84:-Following are part of Prune Belly Syndrome except

A:-Bilateral undescended testis

B:-Bilateral Hydroureteronephrosis with megacystis

C:-Megalourethra

D:-Epispadias

Correct Answer:- Option-D

Question85:-11 month old male infant who presents with right absent testis on examination was found to have no palpable testis in groin or inguinal canal on right side and descended testis on left side. What is the next step in the management?

A:-Diagnostic laparoscopy and proceed according to findings

B:-HCG stimulation test

C:-USS abdomen and inguinal canal to localize right testis

D:-MRI to localize right testis

Correct Answer:- Option-A

Question86:-7 yr old female child is having urinary incontinence since birth. Clinical examination showed urethral meatus just inside vaginal introitus (female hypospadias) which was difficult to catheterize and distended bladder. On evaluation the child is having distended bladder with significant residual urine and

bilateral VUR with cortical scarring. Urodynamic study showed good capacity bladder with poor bladder contractility and low flow rates with abdominal straining during micturition. The best possible treatment that can be offered is

A:-Bladder augmentation with CIC through native urethra

B:-Medical therapy with Oxybutynin and Tamsulosin

C:-Bilateral ureteric reimplantation with Mitrafanoff appendicovesicostomy for CIC

D:-Bilateral ureteric reimplantation alone

Correct Answer:- Option-C

Question87:-The best option available for Bladder augmentation in a 6 yr old child under treatment for cloacal exstrophy is

A:-Stomach

B:-Sigmoid

C:-Ileum

D:-Distal ileum with caecum

Correct Answer:- Option-A

Question88:-An asymptomatic female baby with antenatally suspected renal anomaly was found to have left duplex system with upper moiety hydroureteronephrosis and ureterocele. The upper moiety had differential function of 11%. Next treatment which should be offered is

A:-Left upper-moiety heminephroureterectomy

B:-Left ureteroureterostomy

C:-Cystoscopy and incision of ureterocele

D:-No intervention with antibiotic prophylaxis alone

Correct Answer:- Option-C

Question89:-Which procedure among the following gives best results for ureteropelvic junction obstruction?

A:-Davis intubated pyelotomy

B:-Endopyelotomy with stenting

C:-Nondismembered pyeloplasty

D:-Dismembered pyeloplasty with dependent anastomosis

Correct Answer:- Option-D

Question90:-The best option in management of a 6 yr old boy with suspected torsion testis with symptoms of 3 hr duration is

A:-Tc-99 Technetium pertechnetate nuclear scanning to assess vascularity

B:-Doppler USS Scrotum

C:-Scrotal exploration

D:-Conservative management with analgesics and antibiotics

Correct Answer:- Option-C

Question91:-A 4-week old male baby with antenatally suspected renal anomaly presented with a mass on Rt side of abdomen. USS revealed right gross hydronephrosis with pelvic APD of 60 mm, parenchymal thickness of 2-3 mm, non-visualized ureter, normal bladder and normal left kidney. Next evaluation is best done with

A:-Tc DTPA renogram

B:-Tc99 EC or Tc99 MAG3 renogram

C:-DMSA scan

D:-MR Urogram

Correct Answer:- Option-B

Question92:-2 yr old boy presented with hypospadias. On examination he is having a mid-penile hypospadias with 8 mm urethral plate, wide grooved glans, no chordee and bilateral undescended testis. He is best treated with

A:-Urethral mobilization and advancement

B:-Staged urethroplasty

C:-Tubularised incised plate (Snodgrass) urethroplasty

D:-Karyotyping for evaluation of DSD

Correct Answer:- Option-C

Question93:-The indication for upper urinary diversion (ureterostomy) in a child with posterior urethral valve is

A:-Hydroureteronephrosis with normal renal function

B:-Normal capacity bladder with vesical ureteric reflux

C:-Raised blood urea and serum creatinine in new born period normalizing with bladder drainage with catheter followed by valve ablation

D:-Urosepsis with hydroureteronephrosis not responding to antibiotics and bladder drainage

Correct Answer:- Option-D

Question94:-Treatment of primary Vesicoureteral reflux include all except

A:-Antibiotic prophylaxis

B:-Management of constipation

C:-Cystoscopic injection of botulinum toxin into detrusor

D:-Follow with Tc-99 DMSA scan and cystogram

Correct Answer:- Option-C

Question95:-4 yr old child reared as female presented with bilateral inguinal hernia. Evaluation revealed bilateral inguinal testis, karyotype 46 XY, no mullerian structures and normal external female genitalia. The best treatment is

A:-Bilateral orchiectomy at earliest followed by hormonal therapy at adolescence

B:-Retain testis to adolescence for normal breast development followed by orchiectomy and hormonal treatment

C:-Male conversion

D:-No intervention at all

Correct Answer:- Option-B

Question96:-3 yr old male child developed rhabdomyosarcoma of bladder underwent chemotherapy followed by cystectomy with bilateral ureterostomy for residual disease. Now at 10 yrs of age he is doing well with preserved renal function and no reoccurrence of malignancy. He and parents want social urinary continence. Which is the best treatment that can be offered?

A:-Penn Pouch (ileocecal pouch) with CIC

B:-Ureterosigmoidostomy

C:-Ileal conduit with ileostomy bag

D:-Continue with ureterostomy

Correct Answer:- Option-A

Question97:-6 month old asymptomatic baby with antenatally diagnosed renal anomaly was evaluated and found to have left multicystic dysplastic kidney. Management includes all except

A:-Follow up to check for regression of MCDK in childhood

B:-MCU to rule out contralateral VUR

C:-Follow up in adolescence and young adulthood for development of hypertension

D:-Immediate nephrectomy to avoid follow-up

Correct Answer:- Option-D

Question98:-The rationale behind 'Top-Down approach' for evaluation of urinary tract infection in children is

A:-UTI which doesn't affect kidneys/with normal DMSA won't have significant VUR/anomalies that require treatment

B:-Those with Normal DMSA don't have any VUR

C:-All children with urologic anomalies will be identified with DMSA

D:-It will bring down cost of evaluation

Correct Answer:- Option-A

Question99:-1 yr old boy with lumbar myelomeningocele operated in newborn period is having adequate capacity bladder with grade III VUR on left side and significant post void residue. Urodynamic study revealed hyperactive detrusor. DMSA is showing normal kidneys. Treatment required at present is

A:-Bladder augmentation with Mitrafanoff procedure

B:-Bladder neck repair

C:-Antibiotic prophylaxis, Oxybutynin and CIC

D:-Antibiotic prophylaxis alone

Correct Answer:- Option-C

Question100:-Asymptomatic 3 yr old male child with history of antennal

hydronephrosis was found to have primary obstructed mega ureter on right with relative function of 35% and normal left kidney. The best possible treatment is

A:-Right ureteric reimplantation

B:-Cystoscopy with ureteric stenting

C:-Follow up with observation

D:-Ureterostomy

Correct Answer:- Option-A