

## PROVISIONAL ANSWER KEY

Question 54/2025/OL

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Question1:-In defining shock and its pathophysiology following statements are TRUE EXCEPT

A:-Hypo perfusion of tissue results in a shift in cellular metabolism from aerobic to anaerobic nature

B:-Cardiac output is reduced in all forms of shock

C:-Venous hypertension is a feature of cardiogenic shock

D:-Both hypo and hyperthyroidism results in shock

Correct Answer:- Option-B

Question2:-In understanding the pathophysiology of shock following statements are TRUE EXCEPT

A:-During compensated shock phase Reperfusion injury is rare

B:-Multi organ failure can occur during Compensated shock phase

C:-Reperfusion injury primarily affect lung and kidneys

D:-Fall in Blood pressure occurs only when there is loss of 30-40% of blood volume

Correct Answer:- Option-A

Question3:-In Classification of Haemorrhagic shock (ATLS/ACS) blood volume loss in class II is

A:-5 - 10%

B:-10-15 %

C:-15-30%

D:-30-40%

Correct Answer:- Option-C

Question4:-Reactionary haemorrhage is

A:-Haemorrhage occurring within 72 hours

B:-Most often due to infection

C:-Often life threatening

D:-Re exploration is often needed

Correct Answer:- Option-A

Question5:-Following statements regarding Hypothermia are TRUE EXCEPT,

- A:-Can lead to coagulopathy
- B:-Can lead to Acidosis
- C:-Usually corrected by compensatory mechanism
- D:-One of the lethal triad in shock

Correct Answer:- Option-C

Question6:-Normal Shock Index is

- A:-0.5 - 0.7
- B:-0.6-1.0
- C:-1.0-1.4
- D:-1.5-1.9

Correct Answer:- Option-A

Question7:-Regarding Peri operative Blood transfusion indication what is the level of Hb for transfusion if there is no ongoing bleeding

- A:-5 gm/dl
- B:-6 gm/dl
- C:-7 gm/dl
- D:-8 gm/dl

Correct Answer:- Option-B

Question8:-ABO Compatibility is not required in following

- A:-PRBC Transfusion
- B:-FFP transfusion
- C:-Platelet transfusion
- D:-Emergency whole blood transfusion

Correct Answer:- Option-C

Question9:-40 year old female presented with profuse bleeding due to deficiency of fibrinogen. What is your ideal blood product

- A:-Packed red cells
- B:-Fresh Frozen Plasma
- C:-Platelet
- D:-Cryoprecipitate

Correct Answer:- Option-D

Question10:-In Massive blood transfusion

- A:-Both Hyperkalaemia and hypokalaemia can occur as complications
- B:-1:1:1 protocol means adequate fluid between the transfusions
- C:-Coagulopathy is a frequent sequelae

D:-Mismatched transfusion mainly affects kidneys

Correct Answer:- Option-B

Question11:-Wound healing occurs by granulation, contraction and re-epithelisation in

A:-Primary healing

B:-Healing by tertiary intention

C:-Secondary healing

D:-Delayed primary healing

Correct Answer:- Option-C

Question12:-The term Morel-Lavallee lesion is used to describe

A:-Lymphoedema following compartment syndrome

B:-Open degloving injuries of digits

C:-Non-viable degloved tissue

D:-Haemolympathic collection between the fascial planes in closed degloving injuries

Correct Answer:- Option-D

Question13:-Which of the following is not a common feature of acute compartment syndrome?

A:-Absent distal pulses

B:-Pain on passive movement of affected muscles

C:-Paresthesia

D:-A pressure of  $\leq 30$  mm of Hg between the diastolic pressure and intra-compartmental pressure

Correct Answer:- Option-A

Question14:-Type II necrotising soft tissue infections are characterised by

A:-Infection by *Vibrio vulnificus* in marine contamination of open wound

B:-Monomicrobial infections by beta hemolytic streptococci

C:-More involvement of older and immunocompromised individuals

D:-Fungal infection by *Zygomycetes candida* in burned wounds

Correct Answer:- Option-B

Question15:-The following statement regarding scar contracture is false

A:-Contracture may result from differential growth pattern between scar and surrounding tissue

B:-Reconstruction with flaps offers the only curative surgery for contracture

C:-Free flaps are required for re-surfacing severe contractures

D:-Contractures across joints can lead on to restriction of range of movements and deformity

Correct Answer:- Option-B

Question16:-Wound following appendicectomy for acute appendicitis is an example of a

A:-Clean contaminated wound

B:-Clean wound

C:-Contaminated wound

D:-Dirty wound

Correct Answer:- Option-C

Question17:-The following statement regarding abscess is false

A:-If the abscess cavity is left open to drain freely systemic antibiotics are mandatory

B:-An antibioma forms when an abscess is partially sterilized with empirical antibiotics

C:-Small breast abscess can be managed by needle aspiration of the pus and antibiotic therapy

D:-Skin can be closed after incision and drainage of perianal abscess and curettage of walls, if appropriate antibiotics are used

Correct Answer:- Option-A

Question18:-Intra-abdominal abscess following laparotomy and bowel resection

A:-Can be due to peri anastomotic contamination

B:-Usually results from anastomotic leakage

C:-Can be detected by contrast radiographs

D:-Cannot be diagnosed by isotope-labelled white cell scans

Correct Answer:- Option-B

Question19:-The following statement regarding felon is true

A:-It is an abscess in between aponychium and perionychium of nail

B:-It is an abscess in between perionychium and hyponychium of nail

C:-It can cause terminal phalangeal osteomyelitis

D:-It is an abscess within the specialised fibrous septae of nailbed

Correct Answer:- Option-C

Question20:-Regarding surgical management of paronychia which statement is false?

A:-It is essential to strip back the cuticle and lateral nailfolds from the surface of nail

B:-Cutting of cuticle should always be performed for free drainage of pus

C:-Base of nail is resected if it is undermined by pus

D:-No drains are necessary

Correct Answer:- Option-B

Question21:-Major cause of preventable death among Trauma patients is

A:-Pnmothorae

B:-Airway obstruction

C:-Haemothorae

D:-Fractures

Correct Answer:- Option-B

Question22:-"LEMON" - Mnemonic to assess

A:-Amount of bleeding in Trauma

B:-Predictability of Surveillance

C:-Oncosurgical Assessment

D:-Airway difficulty in Trauma patients

Correct Answer:- Option-D

Question23:-'SALT' protocol used in

A:-TRIAGE

B:-Damage control surgery

C:-Burns Management

D:-Chemotherapy method

Correct Answer:- Option-A

Question24:-'Level 4' Trauma care centre means

A:-Trauma Surgeon is present at Trauma bay

B:-Trauma surgeon is present at hospital research facility not present

C:-Trauma Surgeon not available

D:-Surgeon not in hospital but can be arranged

Correct Answer:- Option-C

Question25:-'FAST' assessment has been positively identify the presence of as little as a \_\_\_\_\_ peritoneal fluid

A:-500 ml

B:-250 ml

C:-150 ml

D:-100 ml

Correct Answer:- Option-B

Question26:-In 'FAST' scoring system 96% of patients requiring Laparotomy in

A:-3 or more score

B:-more than 2 score

C:-one or more

D:-none of the above

Correct Answer:- Option-A

Question27:-Maximum Rate of heat transfer with available rewarming method in

- A:-Cardiopulmonary bypass
- B:-Body cavity lavage
- C:-Continuous Arterio Venous rewarming
- D:-Airway rewarming

Correct Answer:- Option-A

Question28:-'Reverse Triage' used in

- A:-To Swiftly return able war fighters to combat
- B:-Reverse the source
- C:-Trial run
- D:-None of the above

Correct Answer:- Option-A

Question29:-True in Tension pneumothorax

- A:-Consist of immediate decompression after radiological confirmation
- B:-Rapid insertion of large bore cannula into 2nd inter costal space
- C:-Insertion of chest tube through the 5th inter costal space
- D:-Immediate Xray chest and tube insertion

Correct Answer:- Option-B

Question30:-'Sucking chest wound' is

- A:-Open defect in the chest > 3 cm
- B:-Penetrating wound in the chest
- C:-Open defect in chest of lung
- D:-Multiple chest wounds

Correct Answer:- Option-A

Question31:-All are symptoms of DVT except

- A:-Highgrade fever
- B:-Local rise of temperature
- C:-Pain
- D:-Swelling

Correct Answer:- Option-A

Question32:-In modified wells criteria for predicting DVT have highest score in

- A:-Previous DVT
- B:-Malignancy including treatment upto 6 months
- C:-Intravenous drug abuse
- D:-Bedridden for > 3 days

Correct Answer:- Option-C

Question33:-Investigation of choice for Diagnosis of DVT is

- A:-Venous Duplex ultrasound
- B:-Ascending venography
- C:-MR venography
- D:-Angiogram

Correct Answer:- Option-A

Question34:-Indication of need for thrombolysis / Embolectomy is in pulmonary embolism is

- A:-DVT with pedal Oedema
- B:-Severe right heart strain and shortness of breath
- C:-DVT more than 6 months
- D:-Hospitalisation with DVT

Correct Answer:- Option-B

Question35:-Compression based prophylactic measures should be avoided in patients with

- A:-Symptomatic DVT
- B:-DVT of > 6 months
- C:-Patients with DVT
- D:-Risk of pulmonary embolism patients

Correct Answer:- Option-C

Question36:-In Burns after 24 hr fluid administration in adults

- A:-As a Crystalloids
- B:-Colloids 20 - 60% of calculated plasma volume
- C:-Ringer Lactate 4ml / kg / % burns
- D:-According to Parkland Formula

Correct Answer:- Option-B

Question37:-Formula for fluid management in burns in children

- A:-Parkland's formula
- B:-Shriner's Cincinnati
- C:-Monafo formula
- D:-Evan's formula

Correct Answer:- Option-B

Question38:-Wolfe's grafts are harvested using a

- A:-Humby's knife
- B:-Scalpel
- C:-Skin Mesh Machine

D:-Silver Knife

Correct Answer:- Option-B

Question39:-Strepto Coccus beta hemolyticus is an absolute contra indication for skin grafting because

A:-It's eat's up the graft

B:-Cause some amount of graft loss

C:-Fibrinolysin inhibits fibrin adhesion

D:-Severe infection

Correct Answer:- Option-C

Question40:-Changes to intestine due to burns

A:-Micro vascular damage and Ischemia to get Mucosa

B:-Burning of the serosa of the GI wall

C:-Swelling food particles

D:-None of the above

Correct Answer:- Option-A

Question41:-Which is high grade salivary gland carcinoma

A:-Warthin tumour

B:-Squamous cell Carcinoma

C:-Adenoid Cystic Carcinoma

D:-Acidic cell Carcinoma

Correct Answer:- Option-B

Question42:-"Dumb bell" Parotid tumour is

A:-Superficial Parotid Swelling

B:-Tumour from deep lobe of Parotid

C:-Metastatic Tumour to Parotid

D:-Cystic Tumours of Parotid

Correct Answer:- Option-B

Question43:-In Warthin's Tumour M:F is

A:-5:1

B:-6:1

C:-7:1

D:-4:1

Correct Answer:- Option-C

Question44:-Incidence of 'LN' mets in mucoepidermoid carcinoma of Parotid

A:-50 %

B:-40 %



C:-30 %

D:-10 %

Correct Answer:- Option-A

Question45:-'Hot Spot' in Tc Scan in which salivary gland tumours

A:-Oncocytoma

B:-Adeno Carcinoma

C:-Squamous Cell Carcinoma

D:-Adenoid Cyster Carcinoma

Correct Answer:- Option-A

Question46:-'Extended Radical Parotidectomy is

A:-Parotid gland and facial nerve removed

B:-Temporal bone and skin overlying parotid gland with parotid gland

C:-Superficial Parotidetomy with neck dissection

D:-Total Parotidectomy

Correct Answer:- Option-B

Question47:-'Sialocoel' is

A:-Sub Mandibular gland stone

B:-Post Parotidectomy complication

C:-Chronic Sialadenitis

D:-Painless salivary gland enlargement

Correct Answer:- Option-B

Question48:-Gustatory Sweating is

A:-Frey's Syndrome

B:-Uncherestri Sweating on eating

C:-1 and 2

D:-None of the above

Correct Answer:- Option-C

Question49:-Landmarks for Facial Nerve in Parotid Surgery is

A:-Tympano Mastoid Suture

B:-Tragal Pointer

C:-All of the above

D:-None of the above

Correct Answer:- Option-C

Question50:-Most important aspect of Facial Nerve injury rehabilitation is

A:-Facial Symmetry preservation

B:-Corneal protection

C:-Electric stimulation

D:-Physiotherapy

Correct Answer:- Option-B

Question51:-Plummers disease is

A:-enlarged nodular thyroid containing one or more autonomously functioning nodules leading to a state of hyperthyroidism

B:-Single autonomously functioning nodule existing within an otherwise normal or nontoxic nodular thyroid gland

C:-Benign, non-inflammatory enlargement of the thyroid gland that is not associated with hyperthyroidism

D:-Goiter with a significant proportion of the gland extending inferiorly through the thoracic inlet and into the mediastinum.

Correct Answer:- Option-A

Question52:-Which among the following is/are example/s of granulomatous thyroiditis

i. Chronic lymphocytic thyroiditis

ii. Hashimoto's disease

iii. de Quervain's thyroiditis

iv. Riedel's thyroiditis

v. Tuberculous thyroiditis

A:-i, ii, iv, v

B:-i, ii, iii, iv, v

C:-v

D:-iii

Correct Answer:- Option-D

Question53:-All are true about Positron Emission Tomography (PET) in thyroid except

A:-Scans have limited application in thyroid disease

B:-They may be considered in the setting of recurrent thyroid cancer

C:-This is particularly useful when the disease does not concentrate iodine

D:-FDG uptake increases and lesions become positive on PET scans even if disease concentrates iodine

Correct Answer:- Option-D

Question54:-660-kDa glycosylated protein that acts as a precursor protein for the active iodinated forms of thyroid hormone is

A:-Thyroglobulin

B:-Tetraiodothyronine

C:-Triiodothyronine

D:-Thyroid stimulating hormone

Correct Answer:- Option-A

- i. Plain films have previously been used to assess tracheal compression and deviation
- ii. The modality of choice now in assessment of airway is CT scanning
- iii. CT scanning is useful in metastatic disease in the neck
- iv. Core biopsy can be useful in rapid diagnosis of widely invasive malignant disease or in the diagnosis of lymphadenopathy

D:-i, iii, iv

Question56:-All are indications for thyroidectomy except

D:-Toxic adenoma

Correct Answer:- Option-A

C:-ii and iii are correct

D:-ii, iii, iv are correct

Correct Answer:- Option-A

Question59:-All are follicular epithelial differentiated thyroid malignancy except

A:-Papillary carcinoma

B:-Follicular carcinoma

C:-Anaplastic carcinoma

D:-Medullary carcinoma

Correct Answer:- Option-D

Question60:-Mark the false statement about the following statements

A:-If a RLN is injured during surgery and the transected ends are identified, they should be reanastomosed.

B:-In the event that a length of nerve is excised, anastomosis of the ansa cervicalis may be considered

C:-This does not return mobility of the vocal cord but maintains neurological input to the muscles of the larynx

D:-The voice quality remains unacceptable even after avoiding denervation and related muscle atrophy

Correct Answer:- Option-D

Question61:-In differentiated thyroid malignancies all are true except

A:-Suppressed Tg < 0.2 mg / ml and stimulated Tg < 1 mg/dl is considered as excellent response to treatment

B:-Tg level can be monitored every 12 to 24 months while on thyroid hormone as their risk of recurrence is low

C:-Tg measurements in FNAB aspirates have also been shown to be useful in the detection of nodal metastatic disease.

D:-Non-specific imaging findings, suppressed Tg detectable but <1 ng/ml and stimulated Tg detectable but < 10 ng/mL or stable or declining anti-Tg levels require additional investigation

Correct Answer:- Option-A

Question62:-Post thyroidectomy follow up after treatment, select the true statements

- i. After the first post treatment scan, low- and some intermediate-risk patients with negative TSH-stimulated Tg and cervical ultrasound do not require routine diagnostic whole body radioiodine scans
- ii. Diagnostic whole-body scans 6 to 12 months after remnant ablation may be value in the follow-up of patients with high-or intermediate-risk patients with higher risk features.
- iii. Scenarios for follow-up scans include patients with abnormal uptake outside the thyroid bed on post therapy scan
- iv. Those with poorly informative post ablation and patients with Tg antibodies

A:-i, ii, iii, iv

B:-i, ii, iii

C:-i, iv

D:-all are false

Correct Answer:- Option-A

Question63:-All are true regarding role of radiotherapy in metastatic thyroid carcinomas except

A:-External - beam radiotherapy is required to control unresectable, locally invasive, or recurrent disease

B:-To treat metastases in support bones to decrease the risk of fractures

C:-Control of pain from bony metastases when there is minimal or no RAIU

D:-Stereotactic radiotherapy and intensity - modulated radiation therapy has no role in metastatic lesions

Correct Answer:- Option-D

Question64:-Active surveillance for DTC - select appropriate answers

A:-Active surveillance is appropriate for a specific set of patients

B:-tumour features and risk profile; patient demographics, long-term compliance, patient preferences and the experience of the medical/surgical team running the surveillance program are all major factors in consideration

C:-Specific cost-effectiveness implications of long-term surveillance versus surgery is an advantage

D:-Japanese studies have included highly selected patients with no more than 1.5 cm unifocal PTCs and papillary thyroid microcarcinomas are enrolled into a regimented active surveillance program

Correct Answer:- Option-D

Question65:-DTCs at higher risk for recurrence and/or disease-specific mortality. Such scenarios include the following except

A:-Tumor at least 4 cm

B:-Gross extrathyroidal extension

C:-Evidence of metastatic disease

D:-Unifocal unilateral DTC less than 1 cm

Correct Answer:- Option-D

Question66:-Muscle responsible for retraction of nipple is?

A:-Mullers

B:-Sappeys

C:-Myerholtz

D:-Heister

Correct Answer:- Option-C

Question67:-Probability of malignancy in BI-RADS 4a lesion is?

A:-More than 10% to less than 50%

B:-More than 10% to less than 30%

C:-More than 2% to less than or equal to 10%

D:-More than 95%

Correct Answer:- Option-C

Question68:-Indications of MRI in diagnosis of carcinoma breast is?

(i) Discordant findings in mammogram

(ii) Distinguish scar from recurrence

(iii) Women with breast cancer who are BRCA positive

(iv) Women with implants

A:-(i) and (ii)

B:-(iii) only

C:-(iii) and (iv)

D:-All of the above

Correct Answer:- Option-D

Question69:-All of the following statements are true except?

A:-Nipple inversion is congenital

B:-Fibrosis in and around the major milk ducts causes nipple retraction

C:-Transverse slit like retraction is seen in carcinoma

D:-Nipple retraction is an acquired condition

Correct Answer:- Option-C

Question70:-In the molecular classification of carcinoma breast Basal type is?

A:-Triple negative

B:-ER, PR positive HER2/neu negative

C:-ER positive PR negative HER2/neu positive

D:-ER, PR negative HER2/neu positive

Correct Answer:- Option-A

Question71:-Lucknow-Cardiff visual analogue scale is used to assess?

A:-Granulomatous mastitis

B:-Breast nodularity

C:-Cystic changes in breast

D:-Cyclical mastalgia

Correct Answer:- Option-B

Question72:-Which of the following conditions has the highest risk of turning malignant?

A:-Papillomatosis

B:-Atypical lobular hyperplasia

C:-Complex fibroadenoma

D:-Sclerosing adenosis

Correct Answer:- Option-B

Question73:-50 year old nulliparous female presented with 6x4 cm hard lump in the right breast with pectoral fixity and 1x1 cm hard ipsilateral axillary lymph node. What is the stage of the disease?

A:-T4a N1 M0

B:-T3 N1 M0

C:-T4b N1 M0

D:-T2 N1 M0

Correct Answer:- Option-B

Question74:-Most common molecular subtype of breast cancer?

A:-Luminal A

B:-HER2/neu enriched

C:-Basal-like

D:-Triple-Negative

Correct Answer:- Option-A

Question75:-What is the standard surgical treatment of DCIS?

A:-Axillary dissection

B:-MRM

C:-Chemotherapy

D:-Simple Mastectomy/BCS with radiation

Correct Answer:- Option-D

Question76:-Which of the following gene mutation is strongly associated with hereditary breast cancer?

A:-p53

B:-APC

C:-KRAS

D:-BRCA1

Correct Answer:- Option-D

Question77:-First line of hormonal therapy for post menopausal ER positive lady is?

A:-Anastrozole

B:-Leuprolide

C:-Tamoxifen

D:-Fulvistrant

Correct Answer:- Option-A

Question78:-Most common cause of male breast cancer is?

A:-Hormonal imbalance

B:-Estrogen exposure

C:-BRCA1 mutation

D:-Family history of breast cancer

Correct Answer:- Option-B

Question79:-Post Mastectomy radiation is contraindicated in all except

A:-Pregnancy

B:-p53 mutation

C:-Active SLE

D:-Polyarteritis Nodosa

Correct Answer:- Option-D

Question80:-Regarding DCIS which is not true?

A:-DCIS are morphologically heterogenous

B:-Papillary and cribriform are higher grade lesions

C:-Can present as pleomorphic / linear microcalcification

D:-If not treated DCIS can transform to invasive carcinoma

Correct Answer:- Option-B

Question81:-Silent appendicitis is seen in which location of appendix?

A:-Pelvic

B:-Retrocaecal

C:-Post ileal

D:-Paracecal

Correct Answer:- Option-B

Question82:-All of the following are differential diagnosis for acute appendicitis except?

A:-Ureteric colic

B:-Acute diverticulitis

C:-Perforated peptic ulcer

D:-None

Correct Answer:- Option-D

Question83:-Which component has got highest score in Alvarado Score in acute appendicitis?

A:-Rebound tenderness

B:-Leukocytosis

C:-Migratory pain

D:-Shift to left

Correct Answer:- Option-B

Question84:-Regarding appendicitis in pregnancy, false is :



A:-Most common extra uterine cause of abdominal pain

B:-Conservative management by antibiotics should be tried

C:-The diagnosis is often complicated by delay in diagnosis

D:-Foetal loss can be more than 20% in case of perforation

Correct Answer:- Option-B

Question85:-Most common post operative complication following appendicectomy is

A:-Ileus

B:-Wound Infection

C:-Intra abdominal abscess

D:-Adhesive intestinal obstruction

Correct Answer:- Option-B

Question86:-Strangulation can occurs without obstruction in

A:-Littre's hernia

B:-Richter's hernia

C:-Interstitial hernia

D:-Sliding hernia

Correct Answer:- Option-B

Question87:-Which of the following is not an early complication of inguinal hernia surgery?

A:-Pain

B:-Seroma

C:-Bleeding

D:-Urinary retention

Correct Answer:- Option-B

Question88:-All of the following are false regarding stapled haemorrhoidopexy except

A:-Recurrence rates are higher than following conventional haemorrhoidectomy

B:-The procedure is more painful than conventional Haemorrhoidectomy

C:-Slower recovery

D:-Lesser complications than conventional haemorrhoidectomy

Correct Answer:- Option-A

Question89:-All of the following are early post operative complications in haemorrhoidectomy, except

A:-Incontinence

B:-Acute urinary retention

C:-Pain

D:-Reactionary haemorrhage

Correct Answer:- Option-A

Question90:-Indications for haemorrhoidectomy are

(i) third-and fourth-degree haemorrhoids

(ii) second-degree haemorrhoids that have not been cured by non-operative treatments

(iii) 'Mixed' haemorrhoids when the external haemorrhoid is well defined

(iv) bleeding causing anaemia

A:-(i) only

B:-(i) and (ii)

C:-(i), (ii), (iii)

D:-(i), (ii), (iii), (iv)

Correct Answer:- Option-D

Question91:-Investigation of choice for Fistula-in-Ano?

A:-Fistulography

B:-MRI

C:-Anal Endo Sonography

D:-DRE (Digital Rectal Examination)

Correct Answer:- Option-B

Question92:-Which is not true about Fistula-in-Ano?

A:-2/3rd of patients undergoing incision and drainage of an anorectal abscess may develop Fistula-in-Ano later

B:-It is the most common anorectal disease

C:-It is more common in men than women

D:-Smoking and hyper lipidaemia can be the risk factors of developing Fistula-in-Ano

Correct Answer:- Option-A

Question93:-Most common type of Fistula-in-Ano?

A:-Supra-sphincteric

B:-Trans-sphincteric

C:-Inter-sphincteric

D:-Extra-sphincteric

Correct Answer:- Option-C

Question94:-What is true about Seton placement in management of Fistula-in-Ano

A:-LIFT procedure can be performed following seton placement

B:-It is often reserved for simple and uncomplicated fistulas

C:-it is a 3 staged technique

D:-Rate of faecal incontinence following this procedure is as high as 41%

Correct Answer:- Option-A

Question95:-The drug used in medical management of Fistula-in-Ano with a closure rate of 36% following 54 weeks treatment is

A:-Azathioprine

B:-6-Mercaptopurine

C:-Tamoxifen

D:-Infliximab

Correct Answer:- Option-D

Question96:-Which is not true about acute cholecystitis?

A:-About 65% with acute cholecystitis have gall stones

B:-Only 20% of patients with asymptomatic gall stones develop symptoms within a period of 20 years

C:-Before the onset of symptoms, only 1 % of people with asymptomatic gall stones develop complications

D:-Prophylactic Cholecystectomy is not indicated in patients with asymptomatic gall stones

Correct Answer:- Option-A

Question97:-Which of the following structures does not form the boundary of Calot's Triangle?

A:-Common hepatic duct

B:-Cystic duct

C:-Inferior surface of the liver

D:-Cystic artery

Correct Answer:- Option-C

Question98:-Biradiate sign seen in CT image of a patient with gall stone is called as?

A:-Mercedes-Benz sign

B:-Seagull sign

C:-Murphy's sign

D:-Boas' sign

Correct Answer:- Option-B

Question99:-USG in a 40-year-old female with right hypochondrial pain and vomiting showed a stone in the bile duct. Which of the following will not be present in this patient?

A:-Flatulence

B:-Jaundice

C:-Dyspepsia

D:-Murphy's sign

Correct Answer:- Option-D

Question100:-Which of the following does not come under grade II acute cholecystitis in Tokyo Consensus guidelines for grading the severity of acute cholecystitis?

A:-Duration of complaints more than 72 hours

B:-Platelet count less than  $100000 \text{ mm}^3$

C:-White blood cell count more than  $18000 \text{ mm}^3$

D:-Palpable tender mass in the right upper abdominal quadrant

Correct Answer:- Option-B