PROVISIONAL ANSWER KEY

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Question1:-The surgical procedure known as Posterior Sagittal Anorectoplasty (PSARP), used in the correction of anorectal malformation in children, was first introduced by:

A:-Douglas Stephen

B:-Alberto Peña and Pieter A. de Vries

C:-William E. Ladd

D:-Robert E. Gross

Correct Answer:- Option-B

Question2:-A 26-year-old pregnant woman at 24 weeks of gestation with twin pregnancy is diagnosed with sever Twin-to-Twin Transfusion Syndrome (TTTS). What is the most appropriate treatment in this case?

A:-Fetoscopic laser photocoagulation of placental vascular anastomoses

B:-Immediate delivery of the twins

C:-Administration of corticosteroids for lung maturity

D:-Intrauterine blood transfusion to the donor twin

Correct Answer:- Option-A

Question3:-In a full-term neonate, the glomerular filtration rate (GFR) at birth is approximately:

A:-Similar to adult values (90-120 mL/min/1.73 m^2)

B:-About half of adult values (45-60 mL/min/1.73 m^2)

C:-Less than one-quarter of adult values (20-30 mL/min/1.73 m^2)

D:-Higher than adult values (>120 mL/min/1.73 m^2)

Correct Answer:- Option-C

Question4:-In a Pediatric surgical patient, which of the following clinical features is most suggestive of Vitamin C deficiency?

A:-Delayed wound healing and bleeding gums

B:-Hyperpigmented skin patches

C:-Jaundice and hepatomegaly

D:-Polyuria and polydipsia

Correct Answer:- Option-A

Question5:-Which robotic platform is most commonly utilized for performing minimally invasive surgical procedures in pediatric patients?

A:-VELYS

B:-Cyberknife

C:-ROSA

D:-da Vinci Surgical System

Correct Answer:- Option-D

Question6:-In a pediatric patient with burns and suspected inhalational injury, the most likely finding on an immediate chest X-ray is

A:-Widespread pneumonia infiltrates seen

B:-Normal findings despite significant airway injury

C:-Emphysematous changes seen

D:-Lung atelectasis is seen

Correct Answer:- Option-B

Question7:-In pediatric burn patients, which of the following methods is considered the most accurate for estimating the total body surface area (TBSA) involved?

A:-Palmar method

B:-Rule of Nines

C:-Lund and Browder chart

D:-Brooke formula

Correct Answer:- Option-C

Question8:-Which of the following is NOT part of the classic triad seen in Shaken Baby Syndrome?

A:-Ear bleeding

B:-Retinal hemorrhages

C:-Encephalopathy

D:-Subdural hemorrhage

Correct Answer:- Option-A

Question9:-A newborn develops a scalp swelling 9 hours after birth, with the swelling confined within the suture lines. What is the most likely diagnosis?

A:-Encephalocele

B:-Caput succedaneum

C:-Cephalhematoma

D:-Subgaleal hematoma

Correct Answer:- Option-C

Question10:-On CT of the abdomen, the sentinel clot sign is most useful for localizing which of the following?

A:-Hyperdense clot adjacent to the injured organ

B:-Bowel perforation

C:-Mesenteric injury

D:-Retroperitoneal hematoma

Correct Answer:- Option-A

Question11:-Which of the following is most accurately detected by Focused Assessment with Sonography for Trauma (FAST) in a pediatric patient with blunt abdominal injury?

A:-Mesenteric injury

B:-Bowel perforation

C:-Pancreatic injury

D:-Hemoperitoneum

Correct Answer:- Option-D

Question12:-In a patient presenting with chest trauma, the presence of a precordial crackling sound synchronous with the heartbeat (Hamman's Crunch) is most indicative of which of the following conditions?

A:-Tracheobronchial rupture

B:-Diaphragmatic injury

C:-Pneumomediastinum

D:-Pneumothorax

Correct Answer:- Option-C

Question13:-In a child presenting with an open pneumothorax after blunt chest trauma, the initial management should be:

A:-Immediate thoracotomy

B:-Tube thoracostomy alone

C:-Application of an occlusive three-sided dressing followed by chest tube insertion

D:-Observation only

Correct Answer:- Option-C

Question14:-A 10-year-old boy presents with a history of straddle injury. On examination, there is a characteristic ''butterfly-shaped'' perineal bruising along with scrotal swelling. What is the most likely diagnosis?

A:-Intraperitoneal bladder rupture

B:-Anterior urethral injury

C:-Renal injury

D:-Extraperitoneal bladder rupture

Correct Answer:- Option-B

Question15:-A 7-year-old boy has blunt abdominal trauma. CT Cystogram reveals an intraperitoneal bladder rupture. What is the best treatment?

A:-Indwelling catheter drainage

B:-Immediate surgical repair with bladder drainage

C:-Percutaneous drain

D:-Observation and antibiotics

Correct Answer:- Option-B

Question16:-The imaging study of choice in evaluating the involvement of bone and bone marrow in neuroblastoma is

A:-Tc 99 MDP bone scans

B:-Magnetic Resonance Imaging

C:-Computed tomography scans

D:-Metaiodo benzylguanidine scans

Correct Answer:- Option-D

Question17:-According to the Children's Oncology Group (COG) protocols, which of the following findings would upstage a Wilms' tumor to Stage III?

A:-Microscopic residual disease after surgery

B:-Tumor limited to the kidney and completely resectable

C:-Intraoperative tumor spillage

D:-Hematogenous metastasis to the liver

Correct Answer:- Option-C

Question18:-A 5-year-old child is diagnosed with a large, non-resectable embryonal rhabdomyosarcoma of the bladder. What is the most appropriate initial management approach?

A:-Radical surgical resection

B:-Systemic chemotherapy to shrink the tumor

C:-Palliative care

D:-Observation

Correct Answer:- Option-B

Question19:-A fetal ultrasound at 25 weeks of gestation reveals a large, predominantly solid sacrococcygeal teratoma. The fetus also shows signs of high-output cardiac failure due to arterivenous shunting within the tumor. What is the most appropriate management?

A:-Expectant management

B:-Maternal Steroid therapy

C:-Fetoscopic radiofrequency ablation

D:-Surgical removal after birth

Correct Answer:- Option-C

Question20:-A child with a suspected Wilms' tumor undergoes imaging, but the diagnosis remains uncertain. A surgeon decides to perform an open biopsy to confirm the diagnosis. According to Children's Oncology Group (COG) protocols,

what is the consequence of an open biopsy?

A:-It provides a definitive diagnosis and does not impact treatment

B:-It automatically upstages the tumor to stage III, requiring more intensive treatment

C:-It is the standard approach for all patients with suspected Wilms' tumor

D:-It is contraindicated because it increases the risk of metastasis

Correct Answer:- Option-B

Question21:-The poor prognostic factor in Neuroblastoma is

A:-Amplified N myc

B:-Low N myc

C:-Favorable Histology

D:-Hyper diploidy

Correct Answer:- Option-A

Question22:-The FALSE statement about spill in surgery for Wilms' tumor:

A:-Spill has occurred if there is transection of renal vein or ureter where they contain tumor

B:-Previous incision biopsy is considered spill in COG protocol

C:-FNAC/Trucut biopsy is considered spill as per SIOP protocol

D:-Spill refers to break in capsule during operative removal

Correct Answer:- Option-C

Question23:-Which renal tumour in children is associated late relapses?

A:-Wilms' tumour

B:-Clear cell sarcoma of Kidney

C:-Rhabdoid tumour of Kidney

D:-Mesoblastic nephroma

Correct Answer:- Option-B

Question24:-In the INRG (International Neuroblastoma Risk Group) staging system, which imaging-defined risk factor (IDRF) predicts unresectability?

A:-Displacement of renal vessels

B:-Encasement (>50%) of the aorta or IVC

C:-Ipsilateral adrenal invasion

D:-Local lymph node involvement

Correct Answer:- Option-B

Question25:-Conditions associated with Hepatoblastoma include all except

A:-Extreme prematurity (birth wt <1000 gms)

B:-Beckwith Wiedemann syndrome

C:-Hemihypertrophy

D:-Klinefelter Syndrome

Correct Answer:- Option-D

Question26:-In neuroblastoma, the presence of segmental chromosomal aberrations (e.g. 1p deletion, 11q deletion) is considered:

A:-A favourabel biological feature

B:-Equivalent to MYCN amplification

C:-An independent adverse prognostic factor

D:-Unrelated to prognosis

Correct Answer:- Option-C

Question27:-In Wilms' tumour, diffuse anaplasia correlates most strongly with:

A:-Resistance to chemotherapy

B:-High Vascularity

C:-Metastasis to brain

D:-Favourable prognosis

Correct Answer:- Option-A

Question28:-Which of the following renal tumours shows resistance to conventional chemotherapy and radiotherapy, carrying a dismal prognosis?

A:-Wilms' tumour (favourable histology)

B:-Clear cell sarcoma of kidney

C:-Rhabdoid tumour of kidney

D:-Mesoblastic nephroma

Correct Answer:- Option-C

Question29:-In the PRETEXT staging system of hepatoblastoma PRETEXT IV means:

A:-One liver section involved

B:-Two adjacent sections involved

C:-Three adjacent sections involved

D:-All four liver sections involved

Correct Answer:- Option-D

Question30:-"Thoracoabdominal neuroblastoma" extending across diaphragm is classified as:

A:-INSS Stage 2A

B:-INSS Stage 3

C:-INSS Stage 4

D:-INSS Stage 4S

Correct Answer:- Option-B

Question31:-TRUE abour Renal transplantation in less than 20 Kg child with mother as donor

A:-Trans peritoneal Approach with Left side is preferred

B:-Renal vein has to be kept long for an event free anastomosis

C:-Rena Vein is anastomosed to common iliac vein usually

D:-Large amount of fluid should be replaced to compensate sequestration by adult donor kidney

Correct Answer:- Option-D

Question32:-All are Malignancies commonly associated with post-transplant immune suppression EXCEPT

A:-Skin cancers

B:-PTLD

C:-Liver malignancy

D:-Breast Cancer

Correct Answer:- Option-D

Question33:-Long term complication of Liver transplantation

A:-Celiac disease

B:-Chronic Renal failure

C:-Adrenal insufficiency

D:-Type I Diabetes mellitus

Correct Answer:- Option-B

Question34:-Score for prioritizing Paediatric Liver transplant

A:-Child - Pugh score

B:-Liver disease score

C:-UNOS priority score

D:-PLED score

Correct Answer:- Option-D

Question35:-Most accurate about post transplant lympho proliferative disease

A:-Adeno virus infection

B:-Risk decreases if recipient is EBV negative and donor is positive

C:-Diagnosis confirmed by EBV positivity

D:-Treated by decreasing immune suppression and Rituxinab

Correct Answer:- Option-D

Question36:-Corner stone in drug in immune suppression for intestinal transplantation

A:-Tacrolimus

B:-Sirolimus

C:-Mycophenolate mofetil

D:-Corticosteroid mono-therapy

Correct Answer:- Option-A

Question37:-Immediate management concern in a newborn with Pieree-Robin syndrome

A:-Feeding

B:-Early repair of palate

C:-Cardiac evaluation

D:-Secure airway

Correct Answer:- Option-D

Question38:-Six month old baby with B/L PAS, Cystic neck mass and sensory neuronal hearing loss

A:-Trecher collins syndrome

B:-BOR Syndrome

C:-Golden har Syndrome

D:-Di George Syndrome

Correct Answer:- Option-B

Question39:-Pathogenesis of Cystic Hygroma

A:-Congenital duplication of capillaries

B:-Failure of lymphatic sacs to join venous system

C:-Proliferation of lymphatic tissue due to infection

D:-Neoplasm of lymphatic endothelium

Correct Answer:- Option-B

Question40:-Important Considerations during complete excision of 4th branchial cleft fistula is

A:-Close proximity with facial nerve

B:-Internal opening in tonsillar fossa

C:-Need to perform sistunk's operation for complete excision

D:-Passing posterior to recurrent laryngeal Nerve

Correct Answer:- Option-D

Question41:-Newborn with suspected salt wasting CAH, treatment include all EXCEPT

A:-Fludro cortisone replacement

B:-Hydrocortisone inj.

C:-Supplement Dextrose

D:-Hypertonic saline

Correct Answer:- Option-D

Question42:-16 year old phenotypically female, with primary amenorrhoea and poor breast development was diagnosed with Gonadal dysgenesis. Most significant long term risk for the patient is:

A:-Nephrotic syndrome

B:-Gonadoblastoma

C:-Hypo thyroidsm

D:-Diabetes mellitus

Correct Answer:- Option-B

Question43:-Primary genetic defect in testicular feminizing syndrome is

A:-Mutation in SRY gene on Y chromosome

B:-Mutation in gene for 5 alfa reductase

C:-Mutation in Androgen receptor gene in X chromosome

D:-Duplication of X chromosome

Correct Answer:- Option-C

Question44:-Antenatal USG was showing a conjoint twins at 24 week scan with single chorion and single amnion. Embryologic timing of incomplete division of embryo is

A:-Prior to day 8

B:-8-13 week

C:-13 - 17 days

D:-Beyond 17th day

Correct Answer:- Option-C

Question45:-A 4 month old infant with rapidly proliferative segmental hemangioma over left side to face, mandible and neck, coartation of Aorta and Microphthalmia - Most commonly associated syndrome

A:-Sturge weber

B:-Klippel - Trenaunay

C:-PHACE

D:-Kassabach Merrit

Correct Answer:- Option-C

Question46:-When 'X' is added to the staging of Hodgkin's Disease, it means

A:-Mediastinal mass more than 8 cm or reaches one third of transthoracic diameter

B:-Mediastinal mass more than 10 cm or reaches one half of transthoracic diameter

C:-Mediastinal mass more than 8 cm or reaches on half of transthoracic diameter

D:-Mediastinal mass more than 10 cm or reaches one third of transthoracic diameter

Correct Answer:- Option-D

Question47:-When 'Boat sail sign' is seen on imaging of the thorax, then the mainstay of treatment would be

A:-Sirolimus followed by surgery

B:-Observation only

C:-Observation with or without Corticosteroids

D:-Sirolimus with or without corticosteroids

Correct Answer:- Option-C

Question48:-During fetal lung development, functional gas exchange is possible from which stage?

A:-Pseudoglandular

B:-Embryonic

C:-Canalicular

D:-All of the above

Correct Answer:- Option-C

Question49:-All of the following are predictors of good prognosis is Congenital Diaphragmatic Hernia, Except

A:-Modified Ventilatory Index < 40

B:-Oxygenation Index < 6

C:-McGoon Index < 1.31

D:-Observed/Expected LHR > 35%

Correct Answer:- Option-C

Question50:-In esophageal atresia with large distal fistula, all of the following are accepted methods to reduce respiratory distress and gastric perforation except

A:-Avoid positioning of the endotracheal tube below the fistulous orifice

B:-Gastric division

C:-Banding of the gastro esophageal junction

D:-Placement of Fogarty balloon through the fistula

Correct Answer:- Option-A

Question51:-Predictors of complication following esophageal atresia are all except
(i) Twin birth
(ii) Preoperative intubation
(iii) Post operative intubation > 2 days
(iv) Inability to feed after 10 days
(v) Birth weight less than 2500 gm

A:-(ii), (iii) and (iv)

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

C:-(iii), (iv) and (v)

D:-(iii) and (iv)

Correct Answer:- Option-D

Question52:-Which of the following statements is false regarding Congenital Cystic adenomatoid malformation?

A:-CCAM lesions have equal right and left sided incidence

B:-There is decrease in smooth muscle and elastic tissue within cyst walls

C:-Absence of cartilage other than that found in the entrapped normal bronchi

D:-CCAM lesions have connections with the tracheobronchial tree

Correct Answer:- Option-B

Question53:-Allgrove syndrome, Bird's beak sign and Eckardt score have been used in association with which of the following disease?

A:-Esophageal stricture

B:-H-type of tracheo esophageal fistula

C:-Congenital stenosis of esophagus

D:-Achalasia Cardia

Correct Answer:- Option-D

Question54:-The current recommendation for prenatal treatment of large microcystic CCAM with CVR>1.6 and / or presence of hydrops at less than 32 weeks of gestation is

A:-Termination of pregnancy

B:-Maternal betamethasone

C:-Fetal surgery and lobectomy

D:-Wait and observe till delivery

Correct Answer:- Option-B

Question55:-The most common cause of Empyema Thoracis in children below 2 years of age is

A:-Staphylococcus aureus

B:-Streptococcus pneumonia

C:-Hemophilus influenza

D:-Pseudomonas

Correct Answer:- Option-A

Question56:-Invasion of organism into the pleural space and accumulation of protein and fibrinous material occurs in which stage of empyema thoracis?

A:-Exudative stage

B:-Fibrinopurulent stage

C:-Organizing stage

D:-All of the above

Correct Answer:- Option-B

Question57:-The best combination of investigations to demonstrate gastroesophageal reflux with neutral and mildly alkaline pH is

A:-24 hour pH monitoring and upper GI series

B:-Esiophageal manometry and Endoscopy

C:-Multiple Intraluminal impedance and pH monitoring

D:-Esophageal manometry and Upper GI series

Correct Answer:- Option-C

Question58:-All of the following are advantages of using gastric tube as conduit for esophageal replacement except

A:-Adequate length

B:-Slow transit of food

C:-Good blood supply

D:-Size of Conduit appropriate

Correct Answer:- Option-B

Question59:-Which of the following is true about thoracic duct?
(i) Upper third of the right duct and lower two thirds of the left duct involute and close
(ii) The thoracic duct originates from cisterna chyli at the level of first lumbar vertebrae
(iii) The thoracic duct enters the thorax along with the inferior venecava through its hiatus
(iv) The thoracic duct passes upwards into the posterior mediastinum on the right and crosses at the level of 5th thoracic vertebra
(v) The thoracic duct propels lymph upwards towards the jugular venous junction at the rate of 20 to 50 ml/hour

A:-(i), (ii), (iii) and (iv) are correct

B:-(i), (ii), (iv) and (v) are correct

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

D:-(i), (ii) and (iv) are correct

Correct Answer:- Option-C

Question60:-Which of the following diagnosis fits the description given below?
(i) A portion of lung parenchyma that does not communicate with the normal tracheobronchial tree
(ii) The pathogenesis is a supernumerary lobe developing from abnormal budding early in foregut embryogenesis
(iii) The abnormal bud arises before the development of the pleura
(iv) They have a pulmonary venous drainage and are uniformly associated with lower lobes

A:-Congenital pulmonary airway malformation

B:-Extralobar bronchopulmonary sequestration

C:-Congenital lobar emphysema

D:-Intralobar bronchopulmonary sequestration

Correct Answer:- Option-D

Question61:-A 30 week preterm formula fed infant presents on day 7 of life with abdominal distension, bloody stools and a non-tender abdomen. Abdominal X-ray reveals pneumatosis intestinalis. What is the most probable diagnosis?

A:-NEC stage 1 A

B:-NEC stage 1 B

C:-NEC stage 2 A

D:-NEC stage 2 B

Correct Answer:- Option-C

Question62:-Which is FALSE about Forme Fruste variant of choledochal cyst?

A:-Associated with pancreatico-billary malunion

B:-Possibility of cancer if left untreated

C:-Massive dilatation of the bile duct

D:-Clinical features similar to other types of choledochal cyst

Correct Answer:- Option-C

Question63:-1 month old infant presents with non-bilious projectile vomiting for the past 5 days. On examination, he is dehydrated and a palpable "olive" is felt in the right hypochondrium. Laboratory studies show: Na^+ : 130 *mmol*/L, $K^{+:2.7}$ mmol/L, Cl^-: 78 mmol/L, : HCO_3^- : 34 mmol/L. Which of the following best explains the pathophysiological mechanism of the electrolyte and acid-base abnormalities seen in this condition?

A:-Gastric outlet obstruction leads to loss of hydrogen and chloride ions in vomitus, causing hypochloremic metabolic alkalosis. Secondary hyperaldosteronism results in increased renal potassium loss

B:-Recurrent vomiting causes loss of bicarbonate from the stomach, leading to hyperchloremic metabolic acidosis with secondary hypokalemia due to renal potassium wasting

C:-Prolonged starvation leads to ketone accumulation, causing high anion gap metabolic acidosis with hypokalemia from intracellular shift of potassium

D:-Hypertrophy of pyloric musculature increases gastrin secretion, causing metabolic alkalosis due to enhanced gastric acid production and renal potassium loss.

Correct Answer:- Option-A

Question64:-Dance sign is seen in which condition?

A:-Acute Appendicitis

B:-Intussusception

C:-Infantile hypertrophic pyloric stenosis

D:-Necrotizing enterocolitis

Correct Answer:- Option-B

Question65:-The following is FALSE about using ultrasonogram of the abdomen in Pediatric Appendicitis:

A:-Ultrasound can identify normal appendix in > 75% of children

B:-Ultrasound has a sensitivity >85% and specificity >90% in diagnosing pediatric appendicitis

C:-Identification of a normal appendix can reliably rule out appendicitis

D:-All of the above

Correct Answer:- Option-A

Question66:-Which of the following statement(s) about Meckel's diverticulum is/are True?
(i) Meckel's diverticulum is a remnant of Omphalo-mesenteric duct
(ii) 75% of Meckel's diverticulum have attachment to the abdominal wall
(iii) Tc 99m pertechnetate scan is used to diagnose Meckels diverticulum, because the agent is concentrated in the gastric mucosa
(iv) Most symptomatic Meckel's diverticula presents after 10 years of age
(v) Diverticular inflammation occurs more commonly in older children whereas hemorrhage is more common in younger children

A:-(i) and (ii) are true

B:-(i), (iii) and (v) are true

C:-(ii), (iv) and (v) are true

D:-all are true

Correct Answer:- Option-B

Question67:-A 48 hour old term baby presents with progressive abdominal distension, bilious vomiting and failure to pass meconium. Abdominal X-ray reveals multiple dilated small bowel loops with a ground-glass appearance in the right lower quadrant. Contrast enema reveals a microcolon with inspissated pellets in the terminal ileum. Which of the following statements is most accurate regarding the management of this condition?

A:-Initial management includes urgent laparotomy with resection of the affected segment and primary anastomosis in all cases

B:-Hyperosmolar contrast enema is both diagnostic and therapeutic in uncomplicated meconium ileus, but carries a risk of fluid shifts and perforation

C:-Microcolon on contrast enema suggests colonic atresia, making meconium ileus an unlikely diagnosis

D:-Meconium ileus is not associated with systemic diseases and has no genetic correlation

Correct Answer:- Option-B

Question68:-Why is phenobarbital priming recommended before performing HIDA scan in suspected biliary atresia?

A:-To increase gallbladder contractility and emptying

B:-To stimulate bile flow by inducing hepatic enzyme activity

C:-To reduce uptake of tracer by Kupffer cells

D:-To enhance renal clearance of the radiotracer

Correct Answer:- Option-B

Question69:-Which among the following is NOT a classical component of pentalogy of Cantrell?

A:-Cardiac defect

B:-Sternal defect

C:-Omphalocele

D:-Gastrochisis

Correct Answer:- Option-D

Question70:-A 14-year-old girl with a 2-year history of ulcerative colitis presents with worsening abdominal pain, fever and bloody diarrhea. She has tachycardia (HR 146/min), hypotension (BP 80/50 mmHg) and abdominal distension with diffuse tenderness. Labs show leukocytosis and elevated CRP. Abdominal X-ray demonstrates transverse colon diameter of 7.5 cm without free air. Which of the following is the most appropriate immediate management step?

A:-Start high-dose IV corticosteroids and broad-spectrum antibiotics keep patient NPO and initiate close monitoring for deterioration

B:-Begin infliximab infusion immediately as medical rescue therapy for severe colitis

C:-Urgent subtotal colectomy with ileorectal anastomosis due to impending perforation

D:-Administer high-dose oral mesalamine and continue monitoring

Correct Answer:- Option-A

Question71:-Which is true about thrombocytopenia in Necrotizing Enterocolitis?

A:-Association with gram negative sepsis

B:-Associated with severe disease and is a poor prognostic indicator

C:-Persisting platelet counts <1L/cmm could suggest the need for surgical exploration

D:-All of the above

Correct Answer:- Option-D

Question72:-What is Bilanchi's procedure?

A:-Longitudinal intestinal lengthening tailoring

B:-Serial transverse enteroplasty

C:-Spiral intestinal lengthening and tailoring

D:-Intestinal transplantation

Correct Answer:- Option-A

Question73:-The **most commonly** identified gene in Hirschsprung's disease is

A:-SOX-10

B:-RET

C:-Phox2B

D:-ZFHX1B

Correct Answer:- Option-B

Question74:-A term female neonate presents with abdominal distension and failure to pass meconium. There is a single perineal opening through which urine and

meconium are both seen to pass. A urinary catheter can only be advanced 1.5 cm before resistance is met. Abdominal ultrasound reveals bilateral hydronephrosis and a distended vagina. Contrast studies suggest a common channel length of 3.5 cm. What is the most appropriate management strategy in this neonate?

A:-Primary posterior sagittal anorectoplasty (PSARP) in the neonatal period

B:-Staged approach: initial diverting colostomy ±vaginostomy, detailed genitourinary evaluation, followed by definitive cloacal reconstruction at a later age

C:-Immediate abdominoperineal pull-through with bladder neck reconstruction

D:-Vaginal dilatation followed by elective primary PSARP at 1 year of age

Correct Answer:- Option-B

Question75:-An 8 year old boy with muco-cutaneous pigmentaion and a family history of intestinal polyps presents with abdominal colic, vomiting and passage of red currant jelly stools. Sonogram of the abdomen shows target sign. What is the most likely underlying condition?

A:-Juvenile polyposis syndrome

B:-Peutz-jeghers syndrome

C:-Familial adenomatous polyposis

D:-Cowden syndrome

Correct Answer:- Option-B

Question76:-A 2 year old child underwent massive small bowel resection for midgut volvulus, leaving 35 cm of proximal jejunum and no ileocecal valve. The colon is intact. Six months postoperatively, the child remains dependant on parenteral nutrition due to high-output diarrhea and poor weight gain. Which of the following statements regarding adaptation and long-term management is most accurate?

A:-Presence of colon has minimal impact on fluid and energy absorption in SBS

B:-Children with jejunum-only remnants and no ileocecal valve have the poorest prognosis for achieving enteral autonomy

C:-Ileal adaptation after resection is limited compared to jejunal adaptation, making loss of iejunum more detrimental than loss of ileum

D:-Intestinal transplantation is indicated in all children requiring parenteral nutrition beyond 6 months postoperatively

Correct Answer:- Option-B

Question77:-A 2 month old infant with abdominal distension, constipation and history of delayed passage of meconium, contrast enema shows doubtful transition zone, suggesting possibility of Hirschsprung's disease. A rectal Biopsy and calretinin staining was used to aid in the diagnosis. Which of the following best describes the role of calretinin staining in the diagnosis of Hirschsprung's disease?

A:-Calretinin demonstrates aganglionosis in the affected segment

B:-Calretinin shows strong nuclear and cytoplasmic staining in normal mucosal nerve fibres, while absence of such staining is suggestive of Hirschsprung's disease

C:-Calretinin selectively stains hypertrophied nerve trunks in the submucosa in Hirschsprung's disease

D:-Positive calretinin staining is suggestive of intestinal neuronal dysplasia

Correct Answer:- Option-B

Question78:-A 3 year old child presents with recurrent episodes of abdominal pain, bilious vomiting and intermittent melena. Abdominal ultrasound shows a cystic lesion adjacent to the ileum with a characteristic "double wall" or "gut signature" sign. CECT confirms a well-defined cyst sharing a muscular wall with the ileum. Which of the following statements regarding intestinal duplication cysts is most accurate?

A:-They always communicate with the adjacent intestinal lumen, which explains the high risk of obstruction and bleeding

B:-The presence of ectopic gastric mucosa within duplications is uncommon and does not usually cause complications

C:-The most frequent site of duplication is the colon, typically associated with anorectal malformations

D:-Malignant transformation is a recognized but rare complication of intestinal duplications, especially colonic types in older children and adults

Correct Answer:- Option-D

Question79:-A 6-week-old infant presents with persistent jaundice, acholic stools and hepatomegaly. Laboratory evaluation reveals conjugated hyperbilirubinemia elevated gamma-glutamyltranspeptidase (GGT) and mildly elevated transaminases. Ultrasound shows an absent gallbladder and hepatobiliary scintigraphy demonstrates no excretion into the intestine after 24 hours. In the context of suspected biliary atresia, which of the following statements is most accurate?

A:-Early Kasai portoenterostomy performed within 16-20 weeks of life achieves long-term native liver survival in the majority (>70%) of patients without need for transplantation

B:-Histopathology of liver biopsy typically shows bile duct proliferation, portal fibrosis and bile plugs; absence of interlobular bile ducts rules out biliary atresia

C:-Associated anomalies such as polysplenia, preduodenal portal vein or situsinversus are seen more commonly in the perinatal type than the embryonic type of biliary atresia

D:-Despite successful Kasai portoenterostomy, most patients develop progressive liver fibrosis, portal hypertension and cholangitis, necessitating liver transplantation in childhood or early adulthood

Correct Answer:- Option-D

Question80:-Which is not a key element in Ladd's procedure?

A:-Division of Ladd's bands

B:-Clockwise detorsion of the bowel

C:-Incidental appendectomy

D:-Placement of the small bowel in the right lateral gutter and colon along the left lateral gutter

Correct Answer:- Option-B

Question81:-4-day old full term otherwise normal male baby weighing 3.1 kg

diagnosed to have posterior uretheral valve with bilateral hydroureteronephrosis; blood urea 13 mg% and Serum creatinine 0.5mg%. Optimal treatment is

A:-Bilateral Ureterostomies

B:-Cystoscopy with ablation of valves

C:-Vesicostomy

D:-Valve ablation with bilateral Sober's Ureterostomy

Correct Answer:- Option-B

Question82:-The radiopharmaceutical of choice to study renal function and drainage in a 28-day old baby with suspected pelviureteric junction obstruction is

A:-Technetium-99m DTPA renogram

B:-Technetium-99m DMSA scan

C:-Technetium-99m ethylene dicystine renogram

D:-Iodine-123 orthoiodohippuran

Correct Answer:- Option-C

Question83:-Antenatal Ultrasonogram done at a gestation age of 32 week show normal right Kidney and bladder with hydroureteronephrosis of left Kidney in fetus. AFI normal. Post natal evaluation in newborn period of male baby born should include

A:-USS KUB alone

B:-Clinical examination and diuretic renogram alone

C:-Clinical examination, RFT, USS KUB and Micturating Cystourethrogram

D:-RFT alone

Correct Answer:- Option-C

Question84:-The most common Complication of gastrocystoplasty is

A:-Hematuria dysuria

B:-Stone formation

C:-Metabolic acidosis

D:-Spontaneous rupture

Correct Answer:- Option-A

Question85:-3 year old male child is having penoscrotal hypospadias with chordee of 55 degree after degloving, the procedure of choice is

A:-Tabularised incised plate urethroplasty

B:-Onlay flap Urethroplasty

C:-Two Stage urethroplasty

D:-Mathieu's Flip flap technique

Correct Answer:- Option-C

Question86:-2-month-old female child is diagnosed to have Right duplex system with supper moiety hydroureteronephrosis and ureterocele. EC renogram show normal left kidney and lower moiety of right kidney with right upper moiety

contributing 12% of total renal function with obstructed drainage. The first treatment offered is

A:-Laparoscopic right upper moiety hemi nephroureterectomy

B:-Common sheath ureteric reimplantation with repair of bladder neck

C:-Cutaneous Ureterostomy of upper moiety ureter

D:-Cystoscopy with incision of ureterocele

Correct Answer:- Option-D

Question87:-Finding that suggest inadequate length of testicular vessels requiring Staged procedure during laparoscopy for nonpalpable undescended testis is

A:-Vas and vessels entering an open deep ring

B:-Intra-abdominal testis more than 2 cm proximal to deep ring

C:-Peeping testis

D:-Testis can be brought to opposite side deep ring without mobilization

Correct Answer:- Option-B

Question88:-8 year old male child with sacral agenesis is having a very low-capacity bladder (25 ml) with low bladder pressure and continuous dribbling. The treatment option is

A:-Bladder neck repair with CIC

B:-Anticholinergics

C:-Alfa blockers

D:-Bladder Augmentation with Bladder-neck repair and mitrafanoff procedure

Correct Answer:- Option-D

Question89:-Following are true about Bladder exstrophy except

A:-Anal opening and the levator ani-puborectalis complex are normal

B:-Anterior corporal length is significantly less than in normal children

C:-Retroversion of acetabula and external rotation and shortening of iliac bones

D:-Rectus facial defect with exposed bladder

Correct Answer:- Option-A

Question90:-Autosomal recessive polycystic kidney is due mutation of

A:-Polycystic Kidney gene 2

B:-Wilms tumor 1 gene

C:-Polycystic kidney and Hepatic disease gene 1

D:-Polycystic kidney gene 1

Correct Answer:- Option-C

Question91:-Refluxing, obstruction megaureter is caused by

A:-Ectopic ureteric opening at bladder neck

B:-Ineffective peristalsis of ureters in posterior urethral valves

C:-Incomplete ureteric duplication

D:-Ureterocele

Correct Answer:- Option-A

Question92:-Following are true about Testicular microlithiasis except

A:-Not a percussor of testicular tumors

B:-Only follow-up with testicular examination is needed

C:-Incidence similar in normal and cryptorchid testis

D:-Biopsy to rule out testicular pathology is needed

Correct Answer:- Option-D

Question93:-Curative treatment of Primary Hyperoxaluria

A:-Combined liver and renal transplantation

B:-Isolated renal Transplantation

C:-Isolated liver Transplantation

D:-Medical management with pyridoxine

Correct Answer:- Option-A

Question94:-Incision done in Cecoureterocele is

A:-Transvers/smiling incision of ureterocele inside bladder

B:-Vertical incision from distal end of ureterocele up into just inside bladder neck

C:-Incision at the distal end of ureterocele in the urethra

D:-Vertical incision of uretericele inside bladder

Correct Answer:- Option-B

Question95:-Urodynamic features in Hinman syndrome includes all except

A:-Elevated detrusor filling and voiding pressures

B:-Ineffective detrusor contraction with large residual urine

C:-Normal resting sphincter EMG with unsustained relaxation during voiding

D:-Low bladder pressures during filling and voiding

Correct Answer:- Option-D

Question96:-9 year old female child having abdominal pain for 4 days diagnosed to have Right ovarian torsion with suspected follicular cyst. Tumor markers negative, intra operatively torsion of right adnexa and ovary black colored. The optimal management will be

A:-Detorsion and follow up with USS to look for any ovarian pathology

B:-Detorsion and attempt of excision of the follicular cyst

C:-Right oophorectomy

D:-Right oophorectomy with fixation of contralateral ovary

Correct Answer:- Option-A

Question97:-Gold standard diagnostic investigation of pelviureteric junction obstruction is

A:-Diuretic nuclear renogram

B:-CT Urography

C:-MR Urography

D:-Retrograde Pyelography

Correct Answer:- Option-D

Question98:-Glans approximation procedure of hypospadias repair is appropriate for

A:-Coronal hypospadias with meatal stenosis

B:-Wide proximal glanular meatus with deep groove

C:-Glanular hypospadias Shallow urethral plate

D:-Subcoronal hypospadias with chordee

Correct Answer:- Option-B

Question99:-Following is false about Prune belly syndrome

A:-Dilated urinary tract with low pressure urinary system

B:-Dilated urinary tract with high pressure urinary system

C:-Bilateral undescended testis

D:-Deficient abdominal wall musculature

Correct Answer:- Option-B

Question100:-Following is true about gonadoblastoma

A:-Develops in streak gonads of XX gonadal dysgenesis and turner syndrome

B:-They are always malignant

C:-Presence of Y chromosome is protective against gonadoblastoma

D:-Develops in dysgenitic gonads with Y Chromosome

Correct Answer:- Option-D