# PROVISIONAL ANSWER KEY

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| Question Paper Code: | 170/2026/OL |
| Category Code: | 014/2026 |
| Exam: | Assistant Professor In General Surgery(NCA-Viswakarma) |
| Date of Test | 29-10-2026 |
| Department | Medical Education Department |

Question1:-Regarding Patent Ductus Arteriosus all are True EXCEPT :

A:-Surgery is the gold standard of treatment

B:-80% incidence in infants with birth weight less than 12000

C:-Spontaneously closes by 2 to 3 years of postnatal life

D:-Medical treatment with indomethacin

Correct Answer:- Option-C

Question2:-Half life of warfarin is

A:-3 to 5 days

B:-36-42 hrs

C:-48-72 hrs

D:-7 days

Correct Answer:- Option-B

Question3:-Obliterated  umbilical vein remains are

A:-Ligamentum Teres

B:-Medical umbilical ligament

C:-Lateral umbilical ligament

D:-Round Ligament

Correct Answer:- Option-A

Question4:-Risk factors of stomach cancer includes all EXCEPT

A:-Helicobacter Pylori

B:-Epstein Barr virus

C:-atrophic gastritis

D:-Female sex

Correct Answer:- Option-D

Question5:-Type II Necrotizing soft tissue infection is :

A:-Involves elderly age group

B:-Amputation is the treatment

C:-Clostridium species are common

D:-Following I/V drug use or trauma

Correct Answer:- Option-D

Question6:-The criminal nerve of grassi is a branch of

A:-Anterior vagus

B:-Hypogastric Nerve

C:-Posterior vagus

D:-Hypoglossal nerve

Correct Answer:- Option-C

Question7:-The axillary lymph nodes are divided into three levels by :

A:-Pectoralis Major

B:-Pectoralis Minor

C:-Teres Major

D:-Teres Minor

Correct Answer:- Option-B

Question8:-Chemokines are involved in :

A:-Cancer therapy

B:-Wound healing

C:-Tuberculosis

D:-Obesity

Correct Answer:- Option-B

Question9:-Massive Blood transfusion protocol includes all EXCEPT :

A:-O negative blood is reserved for females of child bearing age

B:-Patients blood sample should be drawn before transfusion

C:-Low titre O whole blood can be given when whole blood is not available

D:-Blood should always be brought to room temperature before transfusion

Correct Answer:- Option-D

Question10:-Risk factors for Anal cancers include all EXCEPT :

A:-EBV

B:-HPV

C:-Tobacco smoking

D:-HIV

Correct Answer:- Option-A

Question11:-Which of the following is the correct composition of common crystalloid solutions:

A:-0.9% NaCl contains 154 meq of sodium per litre of solution

B:-0.9% NaCl contains 77 meq of chloride per litre of solution

C:-Ringer lactate contains 110 meq of sodium per litre of solution

D:-Ringer lactate contains 50 meq of potassium per litre of solution

Correct Answer:- Option-A

Question12:-A 30 year old gentleman comes to the emergency with history suggestive of massive upper gastro intestinal bleed. He is a diagnosed case of portal hypertension with varices. On examination, he is pale, has a pulse rate of 110/min and blood pressure of 80/60 mm Hg. What is the next most appropriate step in the management of this patient?

A:-Urgent endoscopic sclerotherapy/banding

B:-Cold saline lavage

C:-Large bore cannula and intravenous fluids

D:-Immediate blood transfusion

Correct Answer:- Option-C

Question13:-Which of the following is NOT a risk factor for development of post operative deep vein thrombosis:

A:-Major orthopaedic surgery of lower limb

B:-Extensive pelvic surgery for malignant disease

C:-Pregnancy

D:-Surgery lasting 30 min in a patient 50 years of age

Correct Answer:- Option-D

Question14:-Which of the following tumours is characterized by lytic bony metastasis?

A:-Kidney

B:-Thyroid

C:-Breast

D:-Prostate

Correct Answer:- Option-D

Question15:-Reactionary haemorrhage is seen:

A:-During surgery

B:-Within 24 hours after surgery

C:-After 7 days of surgery

D:-After 14 days of surge

Correct Answer:- Option-B

Question16:-Which of the following is the correct statement about electrocautery?

A:-Monopolar electrocautery requires a return electrode

B:-Bipolar electrocautery requires a return electrode

C:-Monopolar electrocautery requires two active electrodes

D:-Bipolar electrocautery requires one active electrode

Correct Answer:- Option-A

Question17:-Which of the following is a type of advanced bipolar energy device?

A:-Harmonic scalpel™

B:-Sonicision™

C:-Ligasure™

D:-Ultracision™

Correct Answer:- Option-C

Question18:-Which of the following is NOT used as an imaging modality for abdominal trauma?

A:-Plain X ray

B:-Ultrasound

C:-MRI

D:-Contrast enhanced CT scan

Correct Answer:- Option-C

Question19:-Which of the following is NOT an error commonly committed by a surgeon during the care of their patients?

A:-Diagnostic errors

B:-Resuscitation errors

C:-Prescription errors

D:-Follow-up errors

Correct Answer:- Option-D

Question20:-Which of the following is NOT a criterion for discharge after Day Care surgery?

A:-Vital signs stable for at least 1 hour

B:-Has passed stools

C:-Adequate pain control

D:-Has taken oral fluids

Correct Answer:- Option-B

Question21:-Best radiograph requested for a midface fracture following trauma is

A:-PA view of Mandible

B:-Anterior occlusal view

C:-Occipitomental radiograph

D:-Orthopantomogram

Correct Answer:- Option-C

Question22:-Regarding Medullary Carcinoma Thyroid, which of the following statement is incorrect?

A:-Tumour is not TSH dependent and do not take up radio active iodine

B:-Blood borne metastases are uncommon

C:-Involvement of lymph nodes occurs in 55-60% of cases

D:-Familial form of disease frequently affects children and young adults

Correct Answer:- Option-B

Question23:-Most commonly used free flap for reconstruction of tongue after resection in carcinoma tongue is

A:-Lateral arm flap

B:-Facial artery myomucosal flap

C:-Radial forearm free flap

D:-Nasolabial flap

Correct Answer:- Option-C

Question24:-Example of a Quinary blast injury

A:-Burns

B:-Inhalational injury

C:-Tympanic membrane injury

D:-Radiation sickness

Correct Answer:- Option-D

Question25:-Which of the following premalignant lesion carries the greatest risk of malignant change?

A:-Erythroleukoplakia

B:-Erythroplakia

C:-Proliferative verrucous leukoplakia

D:-Epidermolysis bullosa

Correct Answer:- Option-A

Question26:-The following statement regarding salivary duct carcinoma is false

A:-The tumour may arise as a malignant component of carcinoma ex pleomorphic adenoma

B:-It is commonly seen in middle aged men in their fourth and fifth decade of life

C:-On histopathology it resembles high grade invasive ductal breast cancer

D:-It shows androgen receptor and Her2 receptor positivity

Correct Answer:- Option-B

Question27:-Brain metastasis most commonly occurs from

A:-Lungs

B:-Breast

C:-Melanoma

D:-Kidney

Correct Answer:- Option-A

Question28:-Diffuse toxic goitre is usually managed by

A:-Initial course of antithyroid drugs with radio iodine for relapse

B:-Total thyroidectomy following antithyroid drugs

C:-Radio iodine therapy alone

D:-Radio iodine therapy followed by surgery

Correct Answer:- Option-A

Question29:-Base of the skull fracture is indicated by all of the following except

A:-Dysconjugate gaze

B:-Battle’s sign

C:-CSF Otorrhoea

D:-CSF Rhinorrhoea

Correct Answer:- Option-A

Question30:-Following statement about Hyperparathyroidism-Jaw tumour syndrome is false

A:-Approximately 40% of patients will have pathognomonic ossifying jaw fibromas of Mandible or maxilla

B:-It presents with severe hypercalcaemia

C:-It is not associated with increased risk of parathyroid carcinoma

D:-Classically presents with early onset primary hyperparathyroidism

Correct Answer:- Option-C

Question31:-A 32-year-old patient with severe traumatic brain injury is mechanically ventilated in the ICU. CT brain shows extensive cerebral and brain-stem injury. After correction of hypothermia, hypotension and major metabolic abnormalities, the patient remains deeply comatose. Pupils are fixed and non-reactive, corneal reflexes are absent, and there is no gag or cough reflex. The patient makes no respiratory effort during an appropriately performed apnoea test, with $PaCO_2$ rising from 38 mmHg to 65 mmHg. Which of the following most appropriately establishes brain-stem death?

A:-Absence of cerebral electrical activity on EEG alone

B:-Deep coma with absent brain-stem reflexes and a positive apnoea test after exclusion of reversible confounders

C:-Fixed dilated pupils with absent comeal reflexes for 24 hours

D:-Glasgow Coma Scale of 3 persisting for more than 24 hours

Correct Answer:- Option-B

Question32:-A 55-year-old woman has a hard, woody, fixed thyroid mass causing dysphagia and stridor, with no lymphadenopathy. Core biopsy shows dense fibrosis extending through the capsule into strap muscles with lymphoplasmacytic infiltrate. What is the best description and management principle?

A:-Anaplastic carcinoma — urgent debulking + chemoradiation

B:-Riedel’s thyroiditis (IgG4-related disease) — isthmusectomy/tracheal decompression + steroids/tamoxifen; total thyroidectomy avoided

C:-Hashimoto’s thyroiditis — levothyroxine alone

D:-Subacute thyroiditis — NSAIDs alone

Correct Answer:- Option-B

Question33:-A young patient has a thyroid nodule, chronic diarrhea, markedly raised serum calcitonin, and a family history of pheochromocytoma. Before thyroidectomy, which investigation is mandatory to prevent operative mortality?

A:-Serum TSH

B:-Plasma free/24-hour urinary metanephrines to exclude pheochromocytoma

C:-Thyroid ultrasound elastography

D:-Serum thyroglobulin

Correct Answer:- Option-B

Question34:-A 55-year-old man has recurrent painful swelling of the left submandibular gland during meals for 18 months. Ultrasound and non-contrast CT demonstrate a 9-mm radio-opaque calculus impacted at the submandibular hilum. The stone is palpable bimanually in the floor of the mouth. The gland has preserved parenchyma, and there is no abscess or clinical evidence of malignancy. Which is the most appropriate initial definitive treatment?

A:-Immediate transcervical submandibular gland excision

B:-Observation with hydration and sialogogues alone

C:-Transoral hilar sialolithotomy, preferably with sialendoscopic assistance when required

D:-Radiotherapy followed by gland excision

Correct Answer:- Option-C

Question35:-A 56-year-old woman underwent bilateral neck exploration 6 years ago for sporadic primary hyperparathyroidism. The operative report documented excision of three enlarged glands; the right lower gland was reported as apparently normal and was left in situ. She now has recurrent hypercalcaemia with elevated PTH. Sestamibi-SPECT/CT demonstrates a 1.2-cm focus posterior to the right thyroid lobe. Ultrasound is equivocal. Review of the original histopathology confirms hypercellular parathyroid tissue in the three excised glands. Which of the following is the most appropriate next step before undertaking reoperative neck exploration?

A:-Repeat bilateral four-gland exploration without further localization

B:-Proceed directly to right thyroid lobectomy with excision of the suspected lesion

C:-Confirm biochemical recurrence and obtain high-quality localization, with consideration of selective venous sampling if non-invasive studies are discordant

D:-Treat with cinacalcet indefinitely because previous exploration has failed

Correct Answer:- Option-C

Question36:-A 31-year-old woman underwent incision and drainage of an infected midline neck swelling 8 months earlier. She now has a persistent external opening in the midline just inferior to the hyoid bone with intermittent mucous discharge. The opening becomes more prominent during swallowing and tongue protrusion. Imaging demonstrates a tract extending superiorly from the lesion toward the hyoid and then continuing toward the base of the tongue. During definitive surgery, which of the following principles is most important in preventing recurrence?

A:-Excision of the external skin opening alone

B:-Ligation of the fistula at the level of the thyroid cartilage

C:-Wide excision of the entire thyroid gland together with the fistulous tract

D:-Complete excision of the tract with the central portion of the hyoid bone and appropriate superior tract dissection toward the foramen caecum

Correct Answer:- Option-D

Question37:-A 40-year-old woman presents with a slowly growing, pulsatile mass at the carotid bifurcation that splays the internal and external carotid arteries apart on imaging (the ‘‘lyre sign”). Biopsy is contraindicated. What is the most appropriate initial investigation to assess resectability and risk of intraoperative cerebral ischemia?

A:-FNAC of the mass

B:-Balloon occlusion test with assessment of cross-circulation (or CT/MR angiography with collateral assessment)

C:-Ultrasound-guided core biopsy

D:-Direct surgical exploration without further imaging

Correct Answer:- Option-B

Question38:-A 68-year-old man on long-term anticoagulation presents with a three-week history of progressive headache, mild left hemiparesis, and fluctuating confusion following a minor fall. CT head shows a crescentic, hypodense collection over the right cerebral convexity with mass effect. Which of the following best explains the pathophysiology and natural history of this lesion?

A:-Arterial bleeding from a torn middle meningeal artery, causing rapid lucid interval followed by deterioration

B:-Rupture of bridging (cortical) veins with slow accumulation, repeated microhaemorthage, and formation of a neomembrane leading to rebleeding and gradual liquefaction of the clot

C:-Rupture of an aneurysm at the circle of Willis with subarachnoid extension

D:-Venous sinus thrombosis with hemorrhagic venous infarction

Correct Answer:- Option-B

Question39:-A 48-year-old woman has a 3.5-cm solitary thyroid nodule. FNAC reports Bethesda IV — follicular neoplasm. Ultrasound shows a predominantly solid, hypoechoic nodule without abnormal cervical lymph nodes. She undergoes diagnostic hemithyroidectomy. Histopathology demonstrates a follicular-patterned tumour with capsular invasion but no vascular invasion. There is no extrathyroidal extension. Which of the following is the most appropriate interpretation?

A:-The lesion should be classified as follicular adenoma because vascular invasion is required for malignancy

B:-The lesion is minimally invasive follicular thyroid carcinoma and completion thyroidectomy is automatically mandatory in every such patient

C:-Capsular invasion establishes follicular thyroid carcinoma, although the extent of invasion has prognostic implications

D:-The diagnosis cannot be made without demonstration of cervical lymph-node metastasis

Correct Answer:- Option-C

Question40:-35-year-old man with severe traumatic brain injury is examined in the emergency department. His eyes open only to painful stimulation. He makes incomprehensible sounds when stimulated. On motor examination, he attempts to move his hand toward the site of painful stimulation but does not obey commands. What is his GCS score?

A:-E2 V1 M4 = 7

B:-E2 V2 M4 = 8

C:-E2 V2 M5 = 9

D:-E3 V2 M5 = 10

Correct Answer:- Option-C

Question41:-Which colour in the triage colour coding system indicates patients with life-threatening injuries or conditions requiring immediate attention?

A:-Green

B:-Yellow

C:-Red

D:-Black

Correct Answer:- Option-C

Question42:-Which of the following genes is associated with hereditary pancreatitis?

A:-BRCA1

B:-TP53

C:-PRSS1

D:-RET

Correct Answer:- Option-C

Question43:-In CEAP classification of Varicose Veins. atrophie blanche is denoted by ?

A:-C3

B:-C4c

C:-C4b

D:-C4a

Correct Answer:- Option-C

Question44:-In the context of breast cancer risk. what is the age cutoff for "late menopause" as a risk factor?

A:-Menopause at age 45 or older

B:-Menopause at age 50 or older

C:-Menopause at age 55 or older

D:-Menopause at age 60 or older

Correct Answer:- Option-C

Question45:-A 50-year-old male Presents to the emergency department with severe abdominal pain radiating to his back. nausea and vomiting. He has a history of chronic alcohol abuse. Physical examination reveals epigastric tenderness and guarding. Laboratory tests show elevated serum amylase and lipase levels. A CT scan confirms the diagnosis of acute pancreatitis. The patient is managed conservatively and discharged after improvement in symptoms. Three months later, the patient returns with persistent abdominal pain and a palpable mass in the upper abdomen. Repeat imaging demonstrates a fluid collection adjacent to the pancreas consistent with a pseudocyst.

What is the most appropriate next step in management?

A:-IV broad-spectrum antibiotics

B:-Therapeutic Surgical Drainage

C:-Continue conservative management with close observation

D:-Perform endoscopic ultrasound (EUS)-guided drainage

Correct Answer:- Option-B

Question46:-65 year post menopausal lady with history of carcinoma right breast underwent right modified radical mastectomy. Histopathological examination revealed invasive carcinoma breast no special type. IHC markers positive for ER + PR + Her2nu -ve Ki67 high. What is the molecular subtype of this cancer ?

A:-Luminal A

B:-ER PR rich

C:-Triple negative

D:-Luminal B

Correct Answer:- Option-D

Question47:-According to WHO-IWGE standardised USG protocol, the finding of daughter cysts with detached laminated membrane denoted by?

A:-CE 3a

B:-CE 3b

C:-CE 4a

D:-CE 2b

Correct Answer:- Option-A

Question48:-According to the NICE guidelines, all the following is an indication for CT scan in patients with history of head injury. Except?

A:-Age < 65

B:-Vomiting > 1 episodes

C:-GCS <15 at 2 hours

D:-Post traumatic seizures

Correct Answer:- Option-A

Question49:-Which of the following is true about flail chest?

A:-Presence of a single rib fracture

B:-Paradoxical chest wall movement

C:-Low risk of developing pneumothorax

D:-Absence of respiratory distress

Correct Answer:- Option-B

Question50:-All of the following statements are true about tuberculosis lymphadenitis. Except?

A:-More common in India

B:-Matted lymph nodal mass is the typical feature

C:-Diagnosis is by FNAC of the node

D:-Treatment is mainly medical

Correct Answer:- Option-C

Question51:-All of the following factors are not associated with increased risk for malignant change in pre-existing (dysplastic) lesions.

A:-Male sex

B:-Non smoker

C:-Presence of multiple lesions

D:-Size >200 $mm^2$

Correct Answer:- Option-A

Question52:-Lowest score possible in Glasgow Coma Scale ?

A:-0

B:-1

C:-2

D:-3

Correct Answer:- Option-D

Question53:-Which of the following is true about branchial cyst?

A:-Cyst usually develops in the midline

B:-Vesitigial remnants of 3rd branchial arch

C:-Cyst is lined by squamous epithelium

D:-Treatment is by aspiration of cyst

Correct Answer:- Option-C

Question54:-Which of the following is the most common cause of compartment syndrome?

A:-Tight cast / dressing

B:-Soft tissue contusions

C:-Burns contracture

D:-Fractures

Correct Answer:- Option-D

Question55:-For a patient who is diagnosed with malignant melanoma, with a Breslow depth of <1 mm, the ideal margin for wide local excision is _____.

A:-0.5 cm

B:-1 cm

C:-1-2 cm

D:-2 cm

Correct Answer:- Option-B

Question56:-Which of the following is false regarding Klippel-Trenaunay syndrome?

A:-It is a mesodermal abnormality

B:-Surgery is done for varicose vein

C:-It is not familial

D:-There is an increased risk of Deep vein thrombosis

Correct Answer:- Option-B

Question57:-A patient has a breast tumor of size 6x3 cm. with adherence to the pectoralis major muscle. Only the dermis of the overlying skin is found to be involved. The "T" staging of the tumor in the patient is most likely_____.

A:-T4b

B:-T3

C:-T4a

D:-T3b

Correct Answer:- Option-D

Question58:-A 42year old male patient presented with anemia, muscle fatigue which worse in morning, CT imaging reveals anterior mediastinal mass invading surrounding fatty tissue. With the given scenario, which is possible stage of the disease?

A:-Stage 1

B:-Stage 2

C:-Stage 3

D:-Stage 4

Correct Answer:- Option-B

Question59:-Which of the following aberration of normal development and involution of breast tissue is present in patients with fibroadenoma?

A:-Stromal development

B:-Lobular involution

C:-Lobular development

D:-Duct involution

Correct Answer:- Option-C

Question60:-Which of the following is not a part of decongestive lymphoe dema therapy (DLT)?

A:-Multilayer bandaging

B:-Simple lymphatic drainage

C:-Manual lymphatic drainage

D:-Limb elevation

Correct Answer:- Option-D

Question61:-A 62-year-old man presents with a reducible groin swelling. On examination, the swelling lies medial to the inferior epigastric vessels. Which of the following is the most likely diagnosis?

A:-Indirect inguinal hernia

B:-Direct inguinal hernia

C:-Femoral hernia

D:-Spigelian hernia

Correct Answer:- Option-B

Question62:-A 45-year-old woman presents with severe epigastric pain radiating to the back and serum lipase more than three times the upper limit of normal. Which of the following is NOT routinely indicated during the initial assessment of uncomplicated acute pancreatitis?

A:-Assessment of severity and organ dysfunction

B:-Abdominal ultrasonography to evaluate for biliary aetiology

C:-Contrast-enhanced CT immediately in every patient

D:-Assessment for gallstone disease

Correct Answer:- Option-C

Question63:-A patient with small-bowel obstruction develops continuous abdominal pain, tachycardia, metabolic acidosis and increasing abdominal tenderness. Which finding most strongly suggests strangulation requiring urgent operative management?

A:-Mild abdominal distension

B:-Hyperactive bowel sounds

C:-Closed-loop obstruction with signs of bowel ischaemia

D:-Constipation for 24 hours

Correct Answer:- Option-C

Question64:-A young adult presents with weight loss, low-grade fever and recurrent abdominal pain. CT demonstrates ileocaecal wall thickening with necrotic mesenteric lymph nodes. Which diagnosis is most likely?

A:-Crohn's disease

B:-Abdominal tuberculosis

C:-Caecal carcinoma

D:-Acute appendicitis

Correct Answer:- Option-B

Question65:-A patient presents with severe throbbing perianal pain, fever and a fluctuant perianal swelling. What is the definitive treatment?

A:-Oral antibiotics alone

B:-Incision and drainage

C:-High-fibre diet and stool softeners

D:-Local corticosteroid injection

Correct Answer:- Option-B

Question66:-A 38-year-old patient has progressive dysphagia to both solids and liquids. Barium swallow shows a smooth tapering at the gastro-oesophageal junction ("bird-beak" appearance). Which investigation is the gold standard for confirming the diagnosis?

A:-Upper gastrointestinal endoscopy

B:-CT scan of the chest

C:-High-resolution oesophageal manometry

D:-24-hour oesophageal pH monitoring

Correct Answer:- Option-C

Question67:-A 48-year-old woman is found to have asymptomatic gallstones incidentally on ultrasonography. She has no biliary symptoms or complications. Which of the following is the most appropriate management in the usual setting?

A:-Immediate laparoscopic cholecystectomy in all patients

B:-Ursodeoxycholic acid for lifelong treatment

C:-Observation with appropriate clinical follow-up

D:-ERCP with sphincterotom

Correct Answer:- Option-C

Question68:-A patient has haemorrhoids that prolapse during defaecation and require manual reduction. According to the Goligher classification, these are:

A:-Grade I

B:-Grade II

C:-Grade III

D:-Grade IV

Correct Answer:- Option-C

Question69:-A patient following a road traffic accident is haemodynamically unstable despite initial resuscitation. FAST examination demonstrates free intraperitoneal fluid. What is the most appropriate next step?

A:-Contrast-enhanced CT abdomen

B:-Diagnostic colonoscopy

C:-Emergency exploratory laparotomy

D:-Repeat FAST after 6 hours

Correct Answer:- Option-C

Question70:-A 55-year-old patient presents with a progressively enlarging abdominal mass. Imaging demonstrates a large primary retroperitoneal soft-tissue tumour. Which of the following is the most common malignant histological type of primary retroperitoneal sarcoma in adults?

A:-Leiomyosarcoma

B:-Liposarcoma

C:-Synovial sarcoma

D:-Rhabdomyosarcoma

Correct Answer:- Option-B

Question71:-Which of the following statements are correct about abdominal wall?

(i) Zone 3 arterial supply is from musculophrenic and lower intercostal arteries

(ii) Nerves supplying the abdominal wall are situated between external oblique and internal oblique muscles

(iii) Insertion of the fascia of lateral abdominal wall muscles to the lateral edge of rectus abdominis form the linea semilunaris

(iv) Above the arcuate line, the anterior rectus sheath is formed by contributions from external oblique, internal lamina of internal oblique and transversus abdominis aponeurosis

A:-(i) and (iii) only

B:-(i) and (ii) only

C:-(ii) and (iii) only

D:-(ii) and (iv) only

Correct Answer:- Option-A

Question72:-Regarding hernia repair and mesh select the correct statements

(i) Non absorbable meshes preferred in infected fields

(ii) Use of biologic mesh is associated with higher recurrence rates

(iii) In retro muscular sublay placement of mesh better integration of the mesh is seen due to the better blood supply

(iv) Onlay mesh repairs are associated with lower rates of surgical site occurrences

A:-(i) and (iii) only

B:-(i) and (ii) only

C:-(ii) and (iii) only

D:-(ii) and (iv) only

Correct Answer:- Option-C

Question73:-Regarding the antireflux mechanisms at the Gastro esophageal junction correct statements are

(i) Gubaroff valves consist of thickening of gastric mucosa at the GE junction

(ii) Presence of intra-abdominal portion of esophagus contribute to the valve mechanism

(iii) Obtuse angle of His protects against the reflux

(iv) During increased abdominal pressure, diaphragmatic contraction increases lower esophageal Sphincter pressure

A:-(i) and (iii) only

B:-(i) and (ii) only

C:-(ii) and (iii) only

D:-(ii) and (iv) only

Correct Answer:- Option-D

Question74:-Which of the following statements are correct regarding the motility disorders of esophagus?

(i) Achalasia cardia is associated with absent esophageal peristalsis

(ii) Diffuse esophageal spasm is associated with low LES pressure

(iii) High amplitude and long duration waves are seen in Nutcracker esophagus

(iv) Absent esophageal peristalsis is seen in Hypertensive LES

A:-(i) and (iii) only

B:-(i) and (ii) only

C:-(ii) and (iii) only

D:-(ii) and (iv) only

Correct Answer:- Option-A

Question75:-Regarding carcinoma of the esophagus, select the correct statements

(i) Endoscopic Ultrasound (EUS) is superior to CT scan in assessing he T status

(ii) EUS is not indicated if there is distant metastasis detected by CT scan

(iii) In T1a lesion, accuracy of EUS is superior to Endoscopic mucosal resection

(iv) Adenocarcinoma esophagus T1b stage has more chance of lymphnode metastasis

A:-(i) and (iii) only

B:-(i) and (ii) only

C:-(ii) and (iii) only

D:-(ii) and (iv) only

Correct Answer:- Option-B

Question76:-Among the statements regarding peptic ulcer disease, select the correct statements

(i) Type 1 gastric ulcer is associated with increased level of acid

(ii) Association with H.pylori infection is more with duodenal ulcer than gastric ulcer

(iii) for treatment,Type IV gastric ulcer requires acid reducing surgery like vagotomy

(iv) In bleeding peptic ulcers,rebleeding is highest with Forrest classification type 1A

A:-(i) and (iii) only

B:-(i) and (ii) only

C:-(ii) and (iii) only

D:-(ii) and (iv only

Correct Answer:- Option-D

Question77:-These are some statements about gastro intestinal stromal tumors (GIST). Select the correct statements

(i) Small bowel is the most common location

(ii) GIST is the most common mesenchymal neoplasm of GI tract

(iii) Gastric GIST show better prognosis compared to other locations

(iv) Treatment with Imatinib is only indicated in metastatic disease

A:-(i) and (iii) only

B:-(i) and (ii) only

C:-(ii) and (iii) only

D:-(ii) and (iv) only

Correct Answer:- Option-C

Question78:-Regarding bile duct injuries, select the correct statements

(i) Most common cause in procedures like ERCP

(ii) While doing the primary repair of the injury, T tube is introduced through a separate choledochotomy

(iii) Bile leak detected after cholecystectomy in the postoperative period should be immediately explored

(iv) In case of post cholecystectomy persistent bile leak, ERCP and stenting is the best option

A:-(i) and (iii) only

B:-(i) and (ii) only

C:-(ii) and (iii) only

D:-(ii) and (iv) only

Correct Answer:- Option-D

Question79:-About the liver, select the correct statements

(i) Venous drainage tom the caudate lobe is directly into the Inferior venacava

(ii) 75% of hepatic blood supply is from hepatic artery

(iii) Middle and left hepatic veins join intrahepatically to form a common trunk and join IVC

(iv) Hepatocytes make up about 20% of the hepatic cellular mass

A:-(i) and (iii) only

B:-(i) and (ii) only

C:-(ii) and (iii) only

D:-(ii) and (iv) only

Correct Answer:- Option-A

Question80:-Regarding inflammatory bowel disease, select the correct statements

(i) Perianal manifestations are more common in Crohn’s disease

(ii) Rectal sparing seen in Crohn’s disease

(iii) Deep mucosal ulceration is a feature of ulcerative colitis
(iv) Palpable mass is a feature of ulcerative colitis

A:-(i) and (iii) only

B:-(i) and (ii) only

C:-(ii) and (iii) only

D:-(ii) and (iv) only

Correct Answer:- Option-A

Question81:-Major “vascular danger zone” in laparoscopic hernia repair is

A:-Triangle of Pain

B:-Hesselbags Triangle

C:-Triangle of Doom

D:-Triangle of Calm

Correct Answer:- Option-C

Question82:-piggyback technique in liver transplantation refers to

A:-recipient’s retrohepatic IVC is replaced with donor IVC

B:-confluence of the hepatic veins is used to anastomose the donor IVC

C:-Side-to-side cavo-cavoplasty

D:-The portal vein anastomosis

Correct Answer:- Option-B

Question83:-The classical lethal triad in severely injured patients consists of

A:-Hypotension, acidosis and coagulopathy

B:-Hypothermia, alkalosis and coagulopathy

C:-Hyporthermia, acidosis and thrombocytopenia

D:-Hypothermia, acidosis and coagulopathy

Correct Answer:- Option-D

Question84:-Urodynamic study interpretation for bladder outlet obstruction

A:-Normal pressure + low flow

B:-Low pressure + low flow

C:-High pressure + low flow

D:-High pressure+ High flow

Correct Answer:- Option-C

Question85:-A major molecular pathway involved in clear-cell Renal cell carcinoma is

A:-BRCA pathway

B:-RET pathway

C:-APC pathway

D:-VHL-HIF pathway

Correct Answer:- Option-D

Question86:-The plane of dissection in Total Mesorectal Excision (TME) is between

A:-Mesorectal fascia and parietal pelvic fascia

B:-Mesorectal fascia and visceral peritoneum

C:-Rectum and presacral fascia

D:-Rectum and Denonvilliers fascia

Correct Answer:- Option-A

Question87:-Anatomical boundaries of the hepatocystic triangle are

A:-Cystic artery, Common Bile Duct and cystic duct

B:-Cystic duct, common hepatic duct and inferior surface of liver

C:-Common bile duct, inferior surface of liver and hepatic artery

D:-Cystic duct, common bile duct and superior surface of duodenum

Correct Answer:- Option-B

Question88:-In Endoscopic ultrasound (EUS), layer with hypo echogenicity is seen with

A:-Superficial mucosa

B:-Submucosa

C:-Muscularis propria

D:-Serosa

Correct Answer:- Option-C

Question89:-Cystine stone crystals are typically

A:-Envelope or dumbbell shaped

B:-Needle-shaped

C:-Hexagonal

D:-Coffin-lid shaped

Correct Answer:- Option-C

Question90:-Tacrolimus is a

A:-Calcineurin inhibitor

B:-mTOR inhibitor

C:-Cyclooxygenase inhibitor

D:-Antimetabolite

Correct Answer:- Option-A

Question91:-Which of the following is a commonly used patient position for laparoscopic appendicectomy?

A:-Prone with right side elevated

B:-Supine with Trendelenburg and left tilt

C:-Supine with reverse Trendelenburg and right tilt

D:-Lithotomy with right tilt only

Correct Answer:- Option-B

Question92:-Which part of the male urethra is most commonly injured in pelvic fracture?

A:-Penile urethra

B:-Bulbar urethra

C:-Membranous urethra

D:-Prostatic urethra

Correct Answer:- Option-C

Question93:-Which of the following is a characteristic early urinary finding in genitourinary tuberculosis?

A:-Sterile pyuria

B:-Massive proteinuria

C:-Glycosuria

D:-Nephrotic-range hematuria

Correct Answer:- Option-A

Question94:-Which of the following is a recognized cause of secondary bladder stones?

A:-Bladder outlet obstruction

B:-Foreign body in the bladder

C:-Urinary tract infection

D:-All of the above

Correct Answer:- Option-D

Question95:-The ideal mesh position in TEP repair is

A:-Intraperitoneal

B:-Between skin and external oblique aponeurosis

C:-In the preperitoneal space covering the myopectineal orifice

D:-Within the spermatic cord

Correct Answer:- Option-C

Question96:-In a free flap, tissue is transferred to a distant site and

A:-Its blood supply is maintained only by diffusion

B:-Its vascular pedicle is microsurgically anastomosed to recipient vessels

C:-It is always implanted without vessels

D:-It requires no recipient artery

Correct Answer:- Option-B

Question97:-Which of the following congenital syndromes is strongly associated with Wilms tumor?

A:-Beckwith-Wiedemann syndrome

B:-Marfan syndrome

C:-Turner syndrome

D:-Klinefelter syndrome

Correct Answer:- Option-A

Question98:-A patient has recurrent gastrointestinal bleeding, but upper GI endoscopy and colonoscopy are negative. Capsule endoscopy is considered. Which lesion is particularly suitable for detection by capsule endoscopy?

A:-Small-bowel angiodysplasia

B:-Perianal abscess

C:-Gallbladder stone

D:-Pancreatic pseudocyst

Correct Answer:- Option-A

Question99:-Which of the following is the preferred definitive treatment for a persistent undescended testis in an otherwise healthy child?

A:-Observation until puberty in all cases

B:-Orchiopexy

C:-Immediate orchiectomy in all cases

D:-Long-term hormonal therapy alone

Correct Answer:- Option-B

Question100:-Which of the following is a major early complication after liver transplantation?

A:-Hepatic artery thrombosis

B:-Cataract

C:-XOsteoarthritis

D:-Chronic appendicitis

Correct Answer:- Option-A