UNIVERSITY OF JAFFNA, SRI LANKA FINAL EXAMINATION FOR MEDICAL DEGREES – JUNE 2010 SURGERY Paper II

Date: 24.06.2010 Time allowed: 3 ½ Hours

Answer all Ten [10] questions

Answer each PART in separate answer book

Part A

1.	1.1.	A 73 year old patient was admitted with bladder out	
		flow obstruction symptoms of six months duration. The	
		ultrasound examination of KUB revealed bilateral	
		hydronephrosis and hydroureter, residual urine volume	
		of 220ml and enlarged prostate. His blood urea was	
		180mg/dl.	
	1.1.1.	Mention five relevant investigations with reasons those	
		are useful in the management of this patient.	(15 Marks)
	1.1.2.	Enumerate the management of this patient.	(35 Marks)
	1.1.3.	Mention five post-operative complication of	
		prostatectomy.	(10 Marks)
	1.2.	Write short notes on the place of hormonal treatment in	
		prostatic cancer emphasizing the:	
	1.2.1.	Criteria to offer hormonal treatment	(20 Marks)
	1.2.2.	Options available in hormonal treatment	(20 Marks)

Part B

45 year old female presented with yellowish

discoloration of the sclera for six weeks duration. The

	abdominal examination revealed palpable intra	
	abdominal lump in the right hypochondrial region.	
2.1.	Mention three factors in the history that will help to	
	support the diagnosis of obstructive jaundice. (10 N	Marks)
2.2.	Mention five possible differential diagnoses in this	
	patient (10 N	Marks)

2.3. Mention three investigations with interpretation of the results to confirm the diagnosis of obstructive jaundice (15 Marks)

3.		Brief out the principles of management of thyroid lump under each of the following situation:	
	3.1.	Ultrasound revealed solitary nodule in the right lobe of the thyroid. FNAC revealed follicular neoplasm and	
		thyroid function status shows euthyroid	(30 Marks)
	3.2.	Ultrasound revealed single cystic lesion in the left lobe. FNAC non diagnostic (no cells). Thyroid function-	
		euthyroid	(20 Marks)
	3.3.	Ultrasound revealed solitary nodule in the right lobe. FNAC – benign cells. Thyroid function- Hyperthyroid	
		state	(25 Marks)
	3.4.	Ultrasound revealed multinodular goiter. FNAC-	
		Hashimoto thyroiditis. Thyroid function- euthyroid	(25 Marks)
		Part C	
4.		A 30 year old male patient was admitted with injury to	
		left lower chest after RTA. He was found to be	
		dyspnoeic, pale and hypotensive	
	4.1.	What are the two common internal organs possibly	
	4 0	injured in this patient?	(10 Marks
	4.2.	List the investigations with interpretations to confirm	
	4 2	the injuries mentioned in 4.1.?	(25 Marks
	4.3.	Enumerate the pre operative management of this patient	(30 Marks
	4.4.	Mention five relevant complications that may arise in	
	15	the post operative period	(15 Marks
	4.5.	What measures you will undertake to avoid the complications mentioned in 4.4?	(20 Montes
		Compileanons membrica in 7.7:	(20 Marks
		•	

Briefly describe the investigations to find out the cause

Enumerate the special considerations in the preoperative

Mention five post operative problems faced in a patient

preparation with regards to obstructive jaundice

(20 Marks)

(30 Marks)

(15 Marks)

for the obstructive jaundice

with obstructive jaundice

2.4.

2.5.

2.6.

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5.		Briefly discuss the causative organism, principles of management and complications of the following surgical conditions	
	5 1	Paronychia	(25 Marks)
	5.2.	Carbuncle	(25 Marks)
	5.3.	Perianal abscess	(25 Marks)
	5.4.	Fournier's gangrene	(25 Marks)
		Part D	
6.	6.1.	Brief out the usefulness of CT scan in a head injury	
•		patient	(25 Marks)
	6.2.	Write short notes on drainage systems used in surgical	
		practice	(25 Marks)
	6.3.	Write notes on antibiotic policy in routine surgery	(25 Marks)
	6.4.	Mention five parameters(excluding parameters used in	
		wards) and usefulness of these parameters in the	
		management of critically ill patient in SICU	(25 Marks)
		Part E	
7.		Write notes on:	
	7.1.	Blowout fractures of the orbit	(30 Marks)
	7.2.	Management of severe haemorrhage	(30 Marks)
	7.3.	Write notes on the preparation of patients for the following radiological investigations:	
	7.3.1.	IVP for a female	(10 Marks)
	7.3.2.	Barium enema	(10 Marks)
	7.3.3.	Contrast CT scan of the abdomen	(10 Marks)
	7.3.4.	Micturating cysto-urethrogram (MCUG) for a child	(10 Marks)
		Part F	
8.	8.1.	Discuss the differential diagnosis and management of	
		limping in a 7 year old child	(50 Marks)
	8.2.	Describe the management of open fracture of the tibia of	
		28 year old boy who sustained RTA and admitted to the	
		emergency ward	
			(50 Marks)

Part G

9.		A 55 year old male patient presented with bleeding per rectum of 3 months' duration. Examination of this patient with a rigid sigmoidoscopy revealed a growth in upper rectum. A biopsy from this lesion confirmed a moderately differentiated adeno carcinoma.	
	9.1.	List 3 other possible symptoms, this patient could have	
		presented with	(30 Mark
	9.2.	Mention 2 important investigations needed before	
		finalizing the treatment plan for this patient. Give	
	9.3.	reasons for these investigations What is the most likely surgical treatment this patient	(20 Marks
	7.3.	would undergo?	
	9.4.	How will you prepare the patient for the above surgical	(10 Marks
		treatment	(20 Marks
	9.5.	Briefly describe the staging system used in this disease	•
		condition	(20 Marks
10.		45 year old obese woman underwent laparoscopic cholecystectomy which was converted to open surgery to control bleeding from liver bed. She developed fever on the first post operative day. Fever came down on the second post operative day and again spiked on the fifth postoperative day and she complained of calf pain. She is diabetic and has Ischaemic Heart Disease. She has been treated with insulin and lipid lowering drug. She had used oral contraceptive pill.	
	10.1.	List 5 possible causes for this patient to develop fever in the post operative period	
	10.2.	How will you investigate this patient, when she	(20 Marks
		developed fever in the post operative period	(20 Marks
	10.3.	What is the most likely complication she has developed	
	.	in the post operative period	(10 Marks
		How will you confirm the above complication	(20 Marks
	10.5.	Briefly outline the treatment plan for this patient	(30 Marks