UNIVERSITY OF NAIROBI COLLEGE OF HEALTH SCIENCES SCHOOL OF MEDICINE

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DEPARTMENT OF SURGERY

END OF ROTATION EXAMINATION IN GENERAL SURGERY

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GROUP: C

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2019/2020MULTIPLE CHOICE (MCQ)

TIME: 2P.M. - 3PM DATE: 16.03.2020 1. INSTRUCTIONS: THERE ARE 50 MULTIPLE CHOICE QUESTIONS. 2. CHOOSE THE SINGLE BEST ANSWER 3. ANSWER IN THE ANSWER SHEET PROVIDED ascerding cholongiti 1. Charcot's triad consists of; a) Fever, nausea and vomiting b) Pain, nausea and jaundice c) Pain. nausea and vomiting A) Pain, jaundice and fever e) Jaundice, fever and nausea BMA 2. In infants with duodenal atresia, all the following statements are true except; a) Atresia mostly affects the second segment of the duodenum b) Duodenal atresia can be detected by prenatal ultrasound examination. c) It may occur in infants with situs inversus, malrotation, annular pancreas, and anterior portal vein. It is best treated by gastroenterostomy. e) There is a high incidence of associated cardiac defects 3. Breast cancer a) Commences most frequently in the nipple - Upper outer quadrant.
b) Peaud'orange is a sign of early disease - Cooper's I garant. c) Pain is an early sign _ All patients should have a tissue diagnosis prior to definitive surgery e) Treatment does not depend on axillary node status 4. The following are true regarding testicular torsion; except () a) The highest incidence is in the neonatal and peripubertal periods b) May present with abdominal pain and vomiting and few testicular symptoms Extra-vaginal torsion is more common in the peripubertal periods nearestal special. d) Testicular viability is reduced if surgery is delayed more than 6 hours e) Contralateral orchidopexy should also be performed if a torsion is confirmed

5. Which of the following statements regarding clinical features of gastric cancer are true?
a) They may be non-specific in the late stages.
a) They may be non-specific in the last of
Anaemia can be a presenting symptom c) Troiser's sign refers to a palpable 'Virchow's node' in the right supraclavicular c) Troiser's sign refers to a palpable 'Virchow's node' in the right supraclavicular c) Troiser's sign refers to a palpable 'Virchow's node' in the right supraclavicular
fossa. (abdominal malignania) (Guitrointehnal malignmey)
tossa. (abdominal matignando) (Clastot)
d) this is a rare cause of 000%
e) Trousseau's sign is diagnostic
6. Adequate minimum urine output during resuscitation is
a 0 5-1 ml/kg/hr
b) 20 ml/kg/hr
c) 50 ml/kg/hr 1.0 - 1.5 mls 1.69 lhr.
d) 45 ml/hr 11 12 25 25 25 25 25 25 25 25 25 25 25 25 25
b) 20 ml/kg/hr c) 50 ml/kg/hr d) 45 ml/hr e) 60 ml/hr And Macrovardar compliations Microvardar compliations Microvardar compliations
7. Al 78 year old Highetic male resident of an old neonles' home IS Drought to Accuminative
weeks history of enjoydes of schmoolence and confusion. He to remorted to have falled in the
bathroom and hit his head two months ago. The most likely diagnosis is
-\ Alphaiman'a diagga (DDC)
a) Alzheimer's disease (DD) Thronic subdural haematoma = demention Thronic subdural haematoma = demention
Chronic subdural haematoma = deminio
d) Viral encephalitis
e) Enidural haematoma
8. Regarding myelomeningocele the following are true except:
8 Regarding myelomeningocele the following are true except:
a) It is part of a complex of diseases known as spinal dysraphism
It is a disorder of secondary neurulation
c) Myelomenigocele surgery aims at preventing preventing further neurological injury and
infection v≪ `
d) It is commonly associated with Chiari II Malformation
Caeserian delivery is preferred where an intrauterine diagnosis of a myelomeningocele
has been made Chias + Mesinguedo.
9. You are the Paediatrics intern on call. You are called to casualty to review a 3 month
old baby brought by the mother with a history of progressive head enlargement, poor
feeding, persistent crying and vomiting after feeds. Which of the following is true
regarding the condition the baby is presenting with?
a) An occipito-frontal circumference is not needed in this baby Needed
A cranial ultrasound is indicated if the anterior fontanelle is open 18 months
d) MRI brain is the imaging modality of choice
10. A 57 year old male patient presents to casualty with a history of persistently worsening
10. A 57 year old male patient presents to casualty with a history of persistently worselfing
headache over 3 months, vomiting, blurring of vision and gait ataxia. He reports the headache
is now not relieved by paracetamol. Which of the following statements regarding his condition
is false?)
a) A thorough history and examination are the most important part of his management
b) A CT scan brain pre and post contrast are the imaging modality of choice
An MRI brain is the imaging modality of choice
d) Urgent neurosurgical review is needed.
e) A fundoscopy is an important part of the management of this patient

11. Regarding congenital malformations of the spine in children, the following is true; The cranial 1/3 of the neural tube forms the brain b) The central nervous system is an endodermal structure exodermal The neural tube forms after closure of the cranial and caudal neuropores by day 28 d) Secondary neurulation is responsible for formation of the spine from L1 to the coccyx e) Folic acid supplementation is not needed in all women of child bearing age - Same (mg. Which of the following represents the correct flow of CSF from production to a) Choroid plexus-Foramen of Monro-Lateral ventricle-Aqueduct of Sylvius-Third ventricle-Foramina of Luschka and Magendie-Fourth ventricle-Arachnoid villi b)r Lateral ventricle-Choroid plexus- Foramen of Monro-Third ventricle-Aqueduct of Sylvius-Fourth Ventricle- Foramina of Luschka and Magendie-Arachnoid villi Choroid plexus- Lateral ventricle-Foramen of Monro-Third ventricle-Aqueduct of Sylvius-Fourth Ventricle Foramina of Luschka and Magendie- Archnoid villi d) Arachnoid villi-Lateral ventricles- Foramen of Monro- Third ventricle- Aqueduct of Sylvius-Fourth ventricle- Cormains of Luschka and Magandie- Chorold olexus b) Unoroid piexus-Foramina of Lusohka and Magendie-Latera, ventricle Aqueduci of Sylvius-Third ventricle- Foramen of Monro-Fourth ventricle-Arachnoid villi 13. You are called to the new born unit to review a baby. On arriving there you find a newborn boy with a midline swelling in the lumbosacral region. Clear fluid is seen coming from the swelling. The head circumference is normal with no lower limb movement noted. What would be your initial management of this baby? a) Proceed to aspirate fluid from the swelling and send it to the laboratory b) First get an ultrasound of the swelling Dress the area with wet sterile gauze and nurse the baby prone d) Suture the leak point of the swelling • 14. Which of the following statements is TRUE? a) Haemospermia usually results from malignancy of the prostate by Pneumaturia is most frequently due to gas-forming organisms in diabetic patients with high concentrations of urinary sugar B c) A thick, purulent, profuse urethral discharge is usually seen in non-gonococcal urethritis × d) Cloudy urine most commonly results from phosphate crystals precipitating in alkaline urine x e) Spontaneous emission of semen from the urethra is abnormal 15. Which of the following statements about scrotal and testicular problems is true? a) Torsion of the testis is most common between 20-30 years of agox. (12-184n) b) Hydrocele is diagnosed by transillumination, if any part transilluminates then malignancy is excluded c) A right sided varicocele is slightly less common than a left sided one of A left sided varicocele could be indicative of left wilms' tumour Nephalatone. e) Epidydymal cysts always occur in the tail of the epididymis x head A endydymost

16. Jose is a 62 year man who has just been diagnosed with pancreatic cancer. You run into his brother in the corridor and he asks you not to tell Jose because the knowledge will kill him faster. A family conference to discuss the prognosis is scheduled for that's same afternoon. What is the best way for you as the doctor to handle the situation?

a) Honour the request of the family member who is protecting his brother from the bad

b) Tell his brother that withholding information is not permitted under any circumstance

c) Tell his brother to withhold the information as he wishes

d) Give the brother a dress down for suggesting such an option

e) Ask Jose how he would wish to handle the information in front of the rest of the family and allow the family some time to discuss the matter

17. A 28 year old man presents to casualty with testicular torsion and in extreme pain. He is scheduled for emergency surgery and the consultant urologist tells you he is on his way and will be there in the next one hour. He asks you not to give any pain medication so that "consent can be obtained" on his arrival. Are the surgeons concerns about informed consent valid?

invalidate the consent

- b) Yes Because hospital policy requires informed consent from a lucid person before
- c) It's an emergency you do not need informed consent in this case \prec
- Because of severe pain, the surgeon's concerns are not valid as it can impair a patient's ability to listen and understand in the informed consent process
 - e) None of the above

18 Which of the following statements regarding management of the acute wound are incorrect?

a) A bleeding wound should be elevated and a pressure pad applied

Clamps may sometimes need to be put on bleeding vessels blindly

c) Anaesthesia is usually required in the assessment of wounds

- d) A thorough debridement is essential
- e) Repair of all damaged structures may be attempted in a tidy wound

19.A 21-year-old woman presents with an asymptomatic breast mass. Which of the following is true concerning her diagnosis and treatment?

a) Mammography will play an important role in diagnosing the lesion

Ultrasonography is often useful in the differential diagnosis of this lesion

c) The mass should always be excised

d) The lesion should be considered pre-malignant

e) The mass will definitely disappear after the first pregnancy

USE THE FOLLOWING CHOICES TO ANSWER QUESTIONS 20-22. SELECT THE MOST APPROPRIATE CHOICE FOR EACH STATEMENT CONCERNING MALIGNANT MELANOMA.

A. Nodular type

 Ω_{γ}

B. Acral lentiginous type

C. Mucosal lentiginous type.

D. Lentigo maligna melanoma.

E. Superficial spreading type. 70%, Head, neck and trule, extenshe

•20. Carries the worst prognosis 21. Usually occurs on the face D. D. linky, raligna melana.

Locally aggressive disease A. 22. AE (Nodular and unper pigal puedos 23. A careful history is necessary in all patients being considered for inguinal hernia repair. Symptoms which deserve investigation and appropriate treatment prior to proceeding with inguinal hernia repair include all the following except: a) Chronic coughb) Urinary hesitancy and straining c) Chronic constipation A specific episode of muscular straining with associated discomfort e) History of long-standing heavy smoking a) Is primarily of squamous cell origin transfer you b) Is preferentially treated by radiation & Cherothory: c) May be successfully treated using only intravesical agents even if it invades the bladder Musical muscle.

A cylindry mimic an acute of a with irritability and naematurist and cylindry.

Is preferentially treated by partial cystectomy. In a diabetic patient scheduled for elective surgery a) Fasting blood sugar of 16 mmol/l on the day of surgery is optimal. b) An intravenous infusion of 5% dextrose should be started on the morning of surgery Insulin requirements may increase after major surgery d) Half the morning dose of insulin should be given on the day of surgery e) Prophylactic antibiotics are not necessary (2-5) T2 72 Lut = 5 cm T3 75 cm 26. In a T1, N0, M0 breast tumour a) The tumour size is between 2-5cm (72) 14 adjacent organi Breast conservative surgery may be a management option c) There is no role for radiotherapy in the management d) There is a definite role for chemotherapy e) This is TIS disease USE THE FOLLOWING CHOICES TO ANSWER QUESTIONS 27-31. CHOOSE THE MOST APPROPRIATE CHOICE FOR EACH STEM. Leriche's syndrome A. В. Chronic ankle ulcers gorto-ilieu occlusive dx -lanches and C. Claudication D. Angina pectoris E. Flank bruit 27. Aorto-iliac arteriosclerosis A Renal artery stenosis Eflank brut 28. 29. Suprarenal aortic dissection Angina pertoni (D) 30. Venous insufficiency & Chance and ween Erectile dysfunction A 31. -A10D Lende: vyndrome: - Pain in leger-ordyle offered.

	USE '	THE FOLLOWING CHOICES TO ANSWER QUESTIONS 32-35. CHOOSE THE
	MOS	APPROPRIATE CHOICE FOR EACH STEM.
	A.	Wet gangrene (Infection)
	B.	Necrotizing fasciitis
	C.	Toxic epidermal necrosis
	D.	Toxic epidermal necrosis Dry gangrene (atmostly), Andulal, Andulal, Andular.
	E.	Gas gangrene
	32.	Meleney's synergistic gangrene Bedrhainy funchi. Clostridium species tau gangrene. Fournier's gangrene Beartaing familie. Demarcation is very clear by gangrene
	33.	Clostridium species Figure and the same and the
	34.	Fournier's gangrana illustration of the
	35.	Demorpotion is some of the control o
	55.	Demarcation is very clearity governo
	36 70	
	36. L	he following statement about peritonitis are all true EXCEPT:
	a)	Peritonitis is defined as inflammation of the peritoneum.
		🚰 (galau kan) di padawa walau ambadhi yake bilahi bahi bahi bahiya adalahi 🛒 1868 (bili beri bili bili).
ľ	1	Primary peritonitis has no documented source of contamination and is more common in
-Childre	A. San	adults than in children and in men than in women.
		A commence of the commence of
-ESRD2	· e	\ Paritanitia aon magant na intestinal alata atian
gram t	ı	3° - surgery
Care	27	All of the following statements about the embryology of Meckel's diverticulum are true
- aichei	1	except:
cirhos	ال رين	a) Meckel's diverticulum usually arises from the ileum within 60 cm. of the ileocecal
و.ده	l:	valve.
·		b) Meckel's diverticulum results from the failure of the vitelline duct to obliterate.
		The incidence of Meckel's diverticulum in the general population is 5%. $\frac{2}{6}$ 2%.
		d) Meckel's diverticulum is a true diverticulum possessing all layers of the intestinal
Q5		wall.
		e) Gastric mucosa is the most common ectopic tissue found within a Meckel's
		diverticulum. V 6.9. gastric 60 other
	20	Panciahi 6%
	38.	The following are forms of primary lymphoedema except a) Milroy's disease lymphoedema b) Meige's disease lymphoedema prices
		a) Milroy's disease Gramma Igmphredena
	11	b) Meige's disease lymphiding proces
	\mathcal{C}	d) Tarda Lynphedema tarda
	•	d) Tarda lymphedema tarda
		e) Sporadic praecox lymphoedema
	39.	The following are symptoms of anal fissure except
		a) Pain on defecation
		b) Copious bright red bleeding. (anal Ca, hacmorrhoids)
		—e) Mucus discharge ademontal to the second
		d) Constipation
		e) Tenderness on rectal examination
		, and the control of

Regarding the management of major trauma 40. Deaths follow a trimodal distribution - 1 Breath wounds Annilar Lynase & Seatostura. b) X-rays after the primary survey should be of AP Cervical spine, chest and pelvis c) Cardiac tamponade is characterised by raised BP, low JVP and muffled heart sounds

Beck's hired: hypotension JRP, 13NP, muffled heart d) Assessment of uncomplicated limb fractures should occur during the primary e) Deterioration of the casualty during the primary survey should lead to the secondary survey X 41. Which of the following is true regarding appendicitis? a) The risk of developing the illness is greatest in middle age b) Mortality increases with age and is greatest in the young adult of c) 90% of appendices are extra peritoneal in a retrocaecal position 74%. d) Faecoliths are present in 75-80% of resected specimens e) Appendicitis is impossible to diagnosis in the absence of abdominal tenderness 42. All of the following are findings of bladder exstrophy by screening ultrasound except: a) Lower abdominal bulge by Low ser-umbilious c) Nonvisualization of the bladder-Hydronephrosis Jus. e) Small penis 43. Regarding patients with rigid abdomen and free air in plain film, which of the following statements is true? a) No further radiologic work up is required b) CT scanning with contrast enhancement is required to confirm the diagnosis c) Bedside sonographic imaging is preferred over CT imaging to confirm the diagnosis of the free air. d) Narcotic are contradicted in patients with an acute abdomen e) Preoperative prophylactic are indicated in patients with free air 44. Suppurative cervical lymphadenitis in a 3-year-old child is commonly related to which of the following organisms? a) Staphylococcus aureus b) Atypical mycobacterial organisms c) Streptococcal organisms d) a and c e) Lymphoma with secondary pyogenic organisms 45. Which of the following is the indicated treatment for a noncommunicating hydrocele in a 2-month-old infant? a) Observation b) Needle aspiration c) Hydrocelectomy through a groin incision d) Hydrocelectomy through a scrotal incision e) Repair of the hernia and hydrocelectomy

1 det ound

46. A newborn presents with discharge of urine from the unbilious. The most probable of diagnosis is: a) Meckel's diverticulum previou Orsk. - Memin, Asis b) Mesenteric cyst Vascular (a) "Urachal fistula. Intech Intern Liquity le d) Omphalocele Upres Phyroid pro CX e) Umbilical granuloma -47. Which of the following statements on the basic analomy of the inguinal canal is least accurate a) The external ring is formed by an arched gap in the external oblique aponeurosis adjacent to the pubic tubercle b) The internal ring is superior and lateral to the external ring, c) The cord in the male and the round ligament curve lateral and posterial to the inferior \checkmark epigastric vessels, a) and and common productes intoligatine posterior wan of the inguinal cahal, mediates the most superial inferior epigastric vessels. sprottime, not within the cremaster tase is of funce vaginalists. 48. All of the following burn injuries require referral to a burn center EXCEPT: a) A 12% total body surface area (TBSA) second-degree burn to the chest in a 3-yearb) A 5% TBSA second-degree burn of the face in a 4-year c) A 3% TBSA second-degree burn of the fignal in a 2 year d) An 8% full-thickness burn involving the perincum in a 5 year e) A 4% TBSA full-thickness burn of the knee in a 3 year old 49. A16-year-old male who was the driver in a head on collision has a pulse of 120 beats per minute respiratory rate of 36 breaths per minute and blood pressure of 70 mm Hg, palpable. His trachea is deviated to the left, with palpable subcutaneous emphysema and poor breath sounds in the right hemithorax. The most appropriate initial treatment would be: a) Immediate thoracotomy b) Catheter insertion in the subclavian vein for fluid resuscitation & c) Intubation and ventilation * Preumonic tx.
Manolides t experience K d) Tube and ventilation * e) Immediate tracheostomy Mynenlin + 1 50. Which of the following is true regarding esophageal atresia (EA) and tracheopesophageal, fistula (TEF)? c) In most patients, gastrostomy is required before definitive repaired.

d) Twenty percent of patients have cardiac anomalies.

e) Upper endoscopy is a serior of patients.