EM



UNIVERSITY OF NAIROBI

Himan

UNIVERSITY EXAMINATIONS 2015/2016

 $\frac{\text{LEVEL IV EXAMINATION FOR THE DEGREE OF BACHELOR OF MEDICINE}}{\text{AND BACHELOR OF SURGERY}}$

HSU 400: SURGERY

DATE: JUNE 29, 2016

TIME: 2.00 P.M. - 4.00 P.M.

INSTRUCTIONS

- 1. The examination consists of 100 Multiple Choice Questions.
- 2. Answer ALL questions in the answer sheet provided.
- 3. Write ONLY your admission number on the answer sheet provided.

KING, OINX

1. Which of the following is the most common source of bleeding in epistaxis; A. Oropharnx Ant Blumorda sphenopulating Exiesselback's plexas little D. Nasopharynx Sup. Inbial. E. The tongue 2. The following is true in a patient with thyroglossal cysterian line emonstrained in paramedian position fant median line B. Contains blood & Try raid 185912, Murus & Fluid. C. Moves sideways with swallowing p-D. Is pre-malignant E. Lies along the hypoglossal tract & 3. The following statements about testicular torsion are correct except: A. Pain is the primary symptom B. Scrotal swelling develops T C. The testis become exquisitely tender T Surgical correction is seldom necessary F.

E. Testicular infarction may occur T 4. The triad of abdominal pain, vomiting and slight fever should be considered as indicative of the following until proven otherwise: A. Peptic ulder x B. Strangulated herniax Conte viral enterities 7 Acute appendicitis. Intussusception X 5. Congenital megacolon (Hirschsprung's disease) is not associated with: A. Hypertrophy of the pelvic colon Chronically inflamed, ulcerated mucosa C. Absent parasympathetic ganglion mucosa D. Absent sympathetic ganglion cells E. Familial tendency T 6. Carcinoma of the colon may cause which of the following? A. Diarrhoea B. Constipation C. Maleana D. Obstipation HAll of the above

7. The anatomical division between the anus and the rectum is called the: A. Lateral haemorrhoidal groove B. Anal verge - + end of anal caral. Pectinate line D. Inter haemorrhoidal groove

Anorectal ring boundle con be felt digital-& 8. A ganglion is a common swelling on the dorsal aspect of the wrist. Which is the best method of treating this condition: A. Injection of hypertonic saline x' B. Sclerotherapy ≥ C. Arthroscopic dissection X Aspiration with a hypodermic needle E. Surgical excision 9. The following constitute the clinical feature of intestinal obstruction except: A. Vomiting B) Dysphagia C. Abdominal distension D. Constipation E. Dehydration: #10. All the following are major risk factors for breast cancer except: A. Female sex V B. Family history (mother, sisters) C. Non-invasive carcinoma (ductal or lobular carcinoma in situ) D. Siant fibroadenoma / E. Fibroadenoma 11. A 25-year-old man presents with painless fresh rectal bleeding. He has no change in bowel habits and has hormal appetite. The most likely diagnosis is: A. Colorectal cancer × Haemorrhoids Paing Fissure in ano fringel Way POINFEL D. Ischiorectal abscessor E. Fistula in ano 12. In an assessment of severity of damage in a head injury patient, these parameters are considered except: A. Level of consciousness B. Pupillary reaction to light 🗸 C. Brainstem reflexes Motor examination / Cremasteric reflex

13. In congenital talipes equinovarus:

A. The foot is in eversion \

B. The foot is swollen and shiny k

C. The navicular is displaced laterally relative to the talus of

The foot is in inversion

E. The fifth toe touches the shin on eversion of the foot

14. Compartment syndrome is likely to occur in:

A. Fractures of the humerus X

Eractures of the femurx

Fractures of the tibia

D. Ruptured Achilles tendon a

E. Fractures of the patellax

15. Which of the following is a stress fracture?

A. Fracture of the neck of femur *

B. Fracture of the distal radius X

Fracture of the second metatarsal Hear

D. Fracture of thoracic vertebraex

E. Fracture clavicley

*16. The following statements about osteomyelitis are true excepts

Infection starts in the diaphysis most of the time B. Commonly affects children 1 Maripulate

C. The acute form is mainly treated with medication \

D. Easily spreads to the joints in infants (blood ussels communicate)

E. Chronic osteomyelitis often require surgical intervention T

17. Which of the following is not a cause of non-union of fractures:

A. Infection T

B. Minor movements

C. Interposition

D. Poor blood supply

E. Large gap between fragments

\$18. A patient with the following injuries is classified as having multiple injuries:

A. Skull fracture and subdural haematoma

3. Fernoral fracture and haemopneumothorax

Rib fractures and haemothorax K

D. Fractures of the femur, tibia and humerus

E. None of the above

Entraicestral vend procis A. Neuropraxia 1035 C State Type T Spratte Day

@ yours users combig

B. Axonotmesis 4

C. Neurotmesis & n cara tube are intact

D. Wallerian degeneration

E. None of the above

20. The most commonly injured organ in blunt abdominal trauma is?

A. The liver

The kidney

The spleen

D. The intestines

E. The pancreas

21. The following is not an indication for colostomy:

A. Rectal atresia T

B Rectal prolapse

C. Imperforate anus +

D. Sigmoid volvulus +

E. Carcinoma of the rectumT

*22. Which of the following is considered a clean contaminated wound? - Elean

A. Open cholecystectomy for cholelithiasis

B. Herniorrhaphy with mesh repair × Talean.

C. Breast lumpectomy with axillary node dissection

D. Appendicectomy with a walled off abscess continued

E. Gunshot wound to the abdomen with injuries to the small bowel and sigmoid colon x

23. One of the following is true about green stick fractures:

A. It always communicates with the exterior X

B. It only involves the forearm bones x

It is incomplete

D. Manipulation under anaesthesia is always necessary x

E. The best treatment is by open reduction and internal fixation ×

24. The following is not a complication of burns:

Parotitis

B. Acalculous cholecystitis .

C Curling's ulcery - + Plasma VOI = 25 curamia 17911 norma

Apthous ulcer (Natta)

E. Marjolin's ulcer

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(2) Huraprakis

electric contaminated

- contaminated

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Multiple Fractures

25. Features of splenomegaly on abdominal palpation include all the following except: B. Ballotable in the presence of ascites C. Inferomedial direction of enlargement D. Presence of medial border notch E. Cannot go above it 226. In treating anorectal conditions, the following is considered an emergency: A. Pilonidal sinus B, 'Anal warts X (C) 3rd degree haemorrhoids x D. Fistula in ano Ischiorectal abscess 27. A fistula is defined as: A. A blind ended tract opening onto the surfaceX B A communication between a tubular structure and the skin An abnormal communication between two epithelial lined surfaces D. An abnormal communication an epithelial lined surface and a columnar lined surface E. None of the above 28. In history taking: A. The age of the patient is not important F B. The occupation of the patient adds no value F Past medical and surgical history is very useful D. Systemic enquiry may be skipped especially if the queue is long E. Presence of a chaperone is mandatory F 29. In the postoperative period the following is not important A. Analgesics lup. B. Management for thromboembolism mys C. Fluid and electrolyte management im? Confirming the person responsible for settling the bills E. Prevention of postoperative infection [mp. 30. The following are important in the preoperative management except: A. Appropriate diagnosis T B. Informed consent. IC. Preoperative medication T A full stomach to ensure adequate energy to withstand the surgery a Preoperative investigations including the haemoglobin levels

31. The following principle is not important when making surgical incision: A. Blood supply to the area Imp B. The nerve supply IMP Cosmesis IMP Ensuring as much muscle as possible is cut E. Allowing adequate access to the surgical site lmg. 32. When examining ulcers, the following features are important except: A. The edges V B. The floor C. The base V The origin of the patient E. The duration of the ulcer 33. The following are major principles of medical ethics except: A. Beneficence/ B. Non maleficence I C. Justice 1 D. Patient autonomy T

- A. The Auricular branch of vagus T
- B. The lesser occipital nerve 7 \ The Lesser auricular nerve Greater
- D. The posterior auricular branch of the facial nerve
- E. The auricular branch of the glossopharyngeal nerve

35. The Rinne's test

- A. Compare bone conduction to nerve conduction
- B. Compares bone conduction between the two ears X
- C. Can give the level of hearing loss in conductive hearing loss X
- b. Compares air conduction and bone conduction in the same ear
- E. Requires complicated equipment and is therefore impractical in the field K

36. Which of the following drugs is not ototoxic?

A. Gentamicin Is .

P. Religious background &

- B. Cisplatin
- Penicillin
- D. Furosemide 1s
- E. Quinine

CENTRE CETTERIA - SHETT 37. The following are symptoms commonly associated with allergic rhinitis EXCEPT Absence oc 43. Which is the first-line imaging investigation for suspected gallstones? B. Lacrimation (Coud B. ERCP C. Rhinorrhea T govern gordar C. PTC Marge Stinditions D. Cough Ant cesural D. Ultrasound scan E. Nasal blockage E. CT scan Inidianiany & torregal node Contractors of muscles 44. Meige's disease is: 38. Common allergens in allergic rhinitis include the following EXCEPT Consor Swaling of Jaw & Honsues A. The familial form of lymphoedema praecox A. Pollen 1 018xydate B. Not a familial disease B. Cat and dogs T C. Caused by filarial worms C. Nuts T D. Secondary lymphoedema E. Post-axillary surgery lymphoedema of the upper limb D. Plastic 3-15 -1 E. Dust mites dumas 15-45-0 \$39. Nasal foreign bodies 45. Gas gangrene is: A. Inorganic foreign bodies disintegrate over time and can be allowed to do so if A common complication of acute prostatitis B. Caused by Clostridium perfringens attempts to remove them are unsuccessful & C. A complication of gastritis May present with foul smelling nasal discharge k D. Preceded by circulatory collapse, C. Are more common in elderly patients? E. Caused by Bacillus anthracis D. May get infected and result in subdural and epidural empyema 3 3 - Word Cutust. Which statement with regards to breast cancer is TRUE? E. May be safely pushed into the nasopharynx in children who are uncooperative to Anti have them manouvered out through the nasal aperture the commonest site of metastases is the contralateral breast PLocal spread to the chest wall occurs earlier in male patients than female patients 40. Rectal Juvenile polyps: C. Klinefelter's syndrome is a predisposing factor Almost invariably undergo malignant change X D. Breast sparing surgery always results in local disease recurrence Occasionally persist into adult life ~ E. There is no role for neo-adjuvant chemotherapy & Are pre-malignant D. Are not associated with pain 47. The following signs & symptoms are consistent with acute pancreatitis: E. Are not associated with rectal bleeding A patient writhing in pain and vomiting 41. The most common postoperative complication following appendicectomy is: B. pain initially peri-umbilical, then moves to right iliac fossa & Rovsing's sign positive A. Intra-abdominal abscess Dectal temperature 38.1°C × B. Ileus E. Tenderness over McBurneys points C. Deep vein thrombosis D. Pneumonia E. Wound infection 2 fever, soundire, pain 42. Charcot's triad consists of: A. Fever, nausea and vomiting B. Pain, nausea and jaundice Pain, nausea and vomiting D. Pain, jaundice and fever Jaundice, fever and nausea

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48. A 45-year old primary school teacher presents with recent onset hoarseness of voice; examination reveals a hard nodule in her left thyroid lobe and mobile enlarged certical nodes on the same side. The best test to confirm malignancy is:

FNA cytology

Core needle biopsy

C. Perform left lobectomy and subject specimen for histopathology x

D. Radioactive iodine scan

E. Bone scan

49. A 78 year old diabetic male resident of an old peoples' home is brought to A&E with a two week history of episodes of somnolence and confusion. He is reported to have fallen in the bathroom and hit his head one month ago. The most likely diagnosis is:

A. Alzheimer's disease X B. Acute subdural haematoma

Chronic subdural haematoma

D. Viral encephalitisk

E. Epidural haematoma k

50. Kaposi's sarcoma:

As an X-linked recessive disease Can be treated with radiotherapy

C. Does not respond to chemotherapy

D. Only affects people with AIDSX

E. Mainly affects the central nervous systema

51. Blood transfusion

A. BLOOD lost during surgery should in most cases be replaced by transfusion \

B. Massive transfusion refers to transfusion of more than the equivalent of the patients blood wolume in one week &

Blood stored in citrate may result in low 2.3 DPG and hence increased affinity for oxygen

D. Delays wound healing

E. Stored blood is usually low in potassium & A due to 14513.

52. In haemothorax

A. The breath sounds will be increased on the affected side A

The affected side will be dull on percussion T

C. Both the breath sounds and vocal resonance will be increased on the affected side x

D. Tracheal shift can always be demonstrated X

E. Bradycardia is an early sign

53. Which one of the following is true:

A. Peritonitis is likely if a patient is found 'rolling around' in pain on his bed

B. Patients with renal colic lie still in bed

C. Digital rectal examinations are usually carried out in the right lateral position. Digital rectal exams may be carried out in lithotomy position

E. 'Tenderness anteriorly' is an insignificant finding in digital rectal exam.

54. Dysphagia

phagia difficulty

A. Is defined as painful swallowing (oclyno)

B. Is usually experienced for several years before presentation in patients with cancer of the oesophagus A

C. A pharyngeal pouch is not a cause

D. Endoscopy is done mainly to grade the dysphagia

E. Cancer of the stomach can be a cause

55. In examination of the abdomen;

A bimanually palpable mass may arise from a kidney T

B. Smooth enlargement of the liver suggests liver metastasis a

C. McBurney's point lies half way along a line between the umbilicus and the anterior superior iliac spine√

D. The gall bladder is usually palpable in gallstone disease α

E. Bowel sounds are usually diminished in early mechanical intestinal obstruction.

56. In a patient with multiple injuries;

करण्य दे ६ इस्टर्ग A. The highest priority is to ensure that the patient does not die from hypovolaemia 💘

B. Do not try to secure an airway before stabilizing a spinal injury K

C. Head injuries are often more 'life threatening' than chest injuries x'

Securing the airway is the highest priority

E. Checking for 'breathing' is the same thing as 'securing the airway'

57. Post operative vital signs

A. Should be taken hourly immediately after surgery

(B) Should be taken every 15 minutes immediately after surgery x 30000.

C. Are not usually expected to return to preoperative values *

D. Fever in the first 24 hours after surgery is most likely due to infection &

E. Tachycardia after surgery is rarely due to pain X

58. Concerning traumatic non surgical wounds;

All patients require tetanus toxoid injections

B. Wounds seen after 24 hours should be closed primarily X

C. Generally wounds seen after 8 to 12 hours should not be closed primarily X

D. 'tidy' wounds require surgical excision

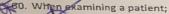
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E. Open sucking chest wounds should be debrided and left openX

59. When taking a history from a patient;

- B. The presenting complaint should be converted into medical language \slash
- C. You will find that patients often have more than 4 presenting complaints \wedge
- D. List the longest standing presenting complaint last \angle

The presenting complaint should be in the patients words \checkmark



Finish examining a system before you examine another 🗸

C. The patient should be fully stripped naked ≪

D._ Inspect the abdomen from the right side of the patient K You may need to ask the patient to stand up in some situations



broduction broathing

Lost losion.

2 61. Patients In shock

A Elderly patients may not have tachycardia

B. The pulse must always be thready K.

C. You must give twice as much crystalloid solution as the volume of blood lost & 3:1

D. Freversible shock can be made reversible if resuscitation is commenced early A . All degrees of shock require intravenous fluid resuscitation

62. In Cushings response;

A. There is tachycardia

There is arrhythmia There is bradycardia

D. There is tachypnoea

E. Glasgow coma scale is less than 8/15

63. Raised intracranial pressure is characterized by;

A. Headache, diarrhea, vomiting and neck stiffness K B. Headache, blurred vision and vomiting

Opisthotonus, convulsion and vomitingx

D. Headache, neck stiffness, fever, vomiting &

E. Headache, depressed level of consciousness, convulsion, apnoeic attacks

64. A 65-year-old farmer was found outside his house, confused with right-sided weakness and aphasia. The most likely diagnosis is:

A. Acute left subdural haematoma

Acute right extradural haematoma

Chronic left sided subdural haematoma &

). Alcoholic intoxication&

F. Diabetic ketoacidosis &

65. A 34-year-old lady presents with history of headache and progressive loss of vision in the left. eye. She has not had monthly periods also for the last 3 months. The most likely diagnosis is: A. Hypertension in pregnancy &

B. Craniopharyngioma

C. Pituitary microadenomax - AS-JM Pituitary macroadenoma

E. Suprasellar meningioma,

\$\therefore 66. A 12-year-old boy from Wajir presents with a one-year history of back pain, night sweats and weight loss. At the time of presentation to hospital he was unable to walk, control his urine and stool. The most likely diagnosis is:

A. Spinal injury after a fall from a camel B Tuberculosis of thoracic spine - Port 1

C. Metastatic disease of the spine from bronchogenic carcinoma

D. Congenital scoliosis X

E. Tethered cord syndrome X

67. A 30 year old man is admitted to hospital after a road traffic accident; He is found to have low blood pressure, low-volume rapid pulse, neck veins are prominent, and the heart sounds are distant and muffled; The most likely diagnosis is;

A. Hypovolaemic shock A

Massive haemothorax & Cardiac tamponade

D. Tension pneumothorax

E. Flail chest A

68. A 65-year-old male presents with a 5-month history of painless haematuria. He admits to being a heavy smoker for the last 40 years. The following investigation would be the most

a) A full haemogram

b) Urea, electrolytes and creatinine levels of 1 ibladder ca.

Cystoscopy

d) Urinalysis K

e) A pelvic X-rayx

A 40-year-old man presents with a two-month history of yellowness of the eyes. There is associated itching, dark urine and pale stools. In his pre-operative preparation the following is important:

at Vitamin K

Fresh blood transfusion of

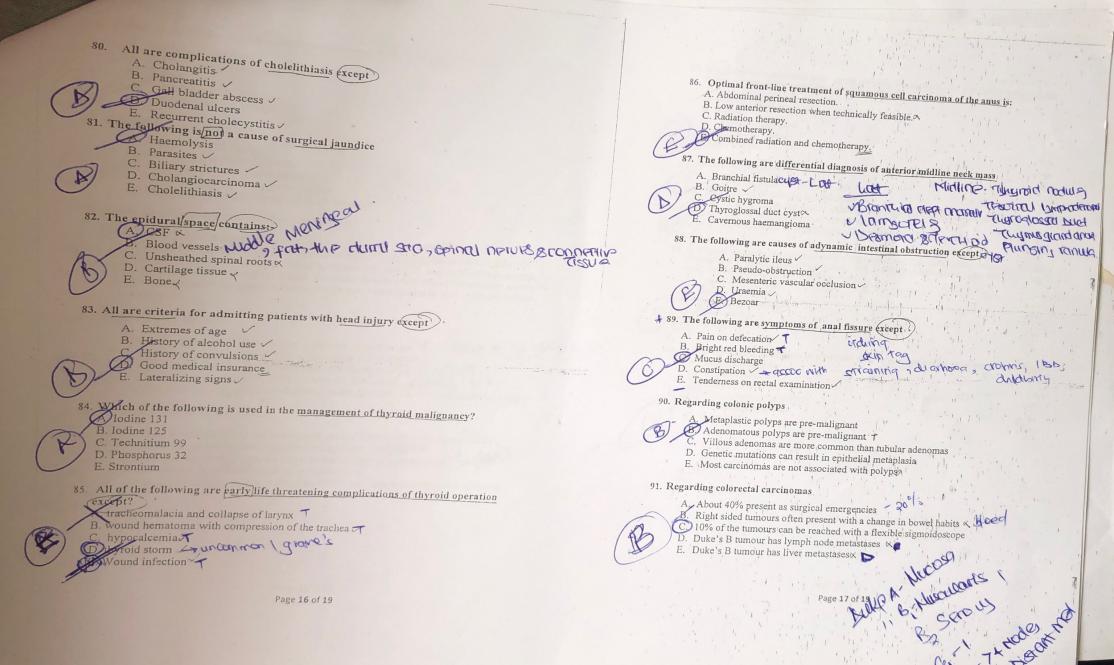
c) Antipruritic agents X

d) Strong analgesics &

e) High protein dieta

A 30-year-old farmer presents with a 3-day history of painful left foot and leg swelling. Prior to the onset a thorn had pricked him. He also complains of associated fever. On examination, b) Gangrene of the leg & Necrosis & Deep venous thrombosis e) Tetanus 71. A 50-year-old male from Kilin presents with a history of a non-reducable left scrotal swelling. On examination, the swelling is non tender, is transilluminable and you can get above it. The a) A femoral hernia hydrocele bbstructed left inguinal hernia chylacia. A hydrocele d) A testicular tumour e) A scrotal haematoma 72. Which of the following is FALSE about a toxic goiter a) The resting pulse rate is elevated T b) Palpitations may occur Sweaty palms is never a feature X d). Exophthalmos may be a presenting feature T Tremors may occur-T According to the Wallace rule of nines in estimating the surface area of burns i a) Head and neck is 18% & Each upper limb is 9% Posterior trunk is 36% X Both lower limbs is 18% & Each Ibwer limb is 9% & 74. In Achalasia cardia a) It is unusual for symptoms to be experienced for several years before the patient Gross weight loss with dysphagia is the usual presentation required to "Birds beak" appearance may be seen on Barium swallow occurs only in young adults and middle age b) Diagnosis can only be made on endoscopy & F ecophagral Manometry & banum dreet boin Rage 14 of 19

75. The following may cause intestinal obstruction in children except: a) Intestinal atresia b) Midgut malrotation ✓ Anorectal malformation ~ Intestinal ascariasis Congenital biliary atresia € 76. Which of the following is true The vomitus in hypertrophic pyloris stenosis is bilious 🗴 🗜 In biliary atresia the stool is acholic-T c) Patient with anorectal malformation do not have associated urinary abnormality d) Phimosis is usually managed by circumcision e) Carcinoma head of pancrease is a cause of obstructive jaundice in children 77. A 12-year-old girl present with a 2-day history of lower abdominal pain, mainly in the right iliac. fossa region. She also reports history of nausea and a slight fever. The most likely diagnosis Salpingitis (b) Pelvic inflammatory disease Right sided pyelonephritis & Acute appendicitis & e) Tubo-ovarian mass & A 35-year-old lady presents with a history of painful defeacation for the last 3 months. She also reports a history of frequent constipation and has noticed streaks of blood on the stool and on the tissue paper. The most likely diagnosis here is: Fissure in ano b) Haemorrhoids / Bacillary dysentery (d) Colorectal cancer e) Amoebiasis 79. During preoperative preparation for John, a 32 year old man, he was informed that he will be "nil. by mouth" from midnight, the day before surgery. In the morning before surgery he had an intravenous line fixed. The following is the main reason for keeping him nil by mouth % avoid secretions during surgery To avoid possible aspiration during anaesthesia 🗸 d. To help with intravenous fluids e. To help the electrolytes settle_x Page 15 of 19



CA <

92. Which of the following is not an absorbable suture? A. Polyglactin (vicryl) B. Polyglyconate (maxon) Polyamide (Nylon) E. Polydibxanone (PDS) 93. Solitary thyroid nodules A. Are always malignant B. Are more prevalent in males C. Are more prevalent in females, D. "Hot" nodules are always malignant E. Should be surgically removed in all patients 94. Regarding the management of major trauma Deaths follow a trimodal distribution B. X-rays after the primary survey should be of AP Cervical spine, chest and pelvis X C. Cardiac tamponade is characterised by raised BP, low JVP and muffled heart sounds & D. Assessment of uncomplicated limb fractures should occur during the primary survey > E. Deterioration of the casualty during the primary survey should lead to the secondary \$25. Regarding appendicitis A. The risk of developing the illness is greatest in middle gae 211-08-51 H 10-30-115 B. Mortality increases with age and is greatest in the young adult. C. 90% of appendices are extra peritoneal in a retrocaecal position & 74 Faecoliths are present in 75-80% of resected specimens of dow. E. Appendicitis is impossible to diagnosis in the absence of abdominal tenderness of 96. Regarding benign breast disease A. Cyclical mastalgia is not the commonest reason for referral to the breast clinical (B) Fibroadenomas are derived from the breast lobule (1986) WO C. Lactational breast abscesses are usually due to Enterobacteriacacex & South Atypical lobular hyperplasia is associated with an times increased risk of breast

97. A 62 year man presents with gross painless haematuria for the last two months, the following are differential diagnosis except

A. Kidney stones

B. Cystitis V

C. Ufological trauma

. Glomerular disease

P.) Hydrocelex

8. Regarding varicocele

A. Most are noticed in childhood The left is affected in 95% of cases

C. In many cases the dilated veins are pampiniform and not cremasteric formactions

D. Usually decompress in supine position

E. Rarely caused by obstruction of left testicular vein by renal tumour

99. A 25 year old man is admitted with a history of sudden onset of severe midepigastric abdominal pain. Upright chest radiograph shows free intraperitoneal air. What is the

A. Upper GI endoscopy

B. Barium swallow ×

C. Gastrografin swallows

. Observation &

(P.) Laparotomy

The most likely diagnosis in a patient with hypertension, hypokalemia and a 7-cm

excess aldosterone

A. Hypernephroma A

B. Cushing's disease

Adrenocortical carcinoma

D. Pheochromocytomax

E. Carcinoid