Surgery

Surgery 6th year 2018

GI surgery

- 1. Hamartomatous polyps... Juetz pegher syndrome
- 2. Gastroduodenal artery from which artery ?? Hepatic
- 3. All are part of management of diverticulitis except?
 - -Colonoscopy after 3 weeks**
 - -CT scan
 - -IV abx
 - -Fluids
 - -NPO
- 4. Male with IBD presents with jaundice? PSC
- 5. Highest risk for cholangiocarcinoma?
 - -PSC*
 - -Choledochal cyst
 - -Hepatolithiasis
 - -Caroli disease
- 6. Single most imp step in acute pancreatitis? Rehydration
- 7. 40 y/o BPR, rectal mass 6 cm from anal verge all part of management except?
 - -FOB test*
 - -family hx
 - -Assess for surgery
- 8. What is wrong about intestinal obstruction??
 - -most adhesive SBO are treated conservatively
 - -you shouldn't give analgesia because it will mask the symptoms
- 9. True about GI lymphoma:
 - mucosal biopsy will always diagnose.
 - treated with surgery or chemotherapy.
- 10. true about volvulus
 - -cecum is more common than signmoid
 - -higher in females
 - -high fiber diet
 - -Surgery is 1st line ttt
 - -Chronic constipation is the usual presentation
- 11. Best prognostic factor after CRC:
 - -lymph node involvement
 - -transmural involvement
- 12. HCC tumor marker: AFP

- 13. 88 yo, hx of CKD, DM, brain mets, developed an episode of acute cholecystitis, management:
 - laparoscopic cholecystectomy.
 - open cholecystectomy.
 - cholecystostomy.
 - IV antibiotic and elective surgery.
- 14. Gallstone ileus:
 - recurrent cholangitis.
 - SBO.
 - acholic stools.
 - air in biliary tree.
 - stone on imaging.
- 15. True about small bowel carcinoma?
 - -more in young
 - -more in terminal ileum
 - -Crohn's is a risk factor *
- 16. True about the peritoneum:
 - visceral peritoneum is heavily innervated.
 - secretes fibrinolytics.
 - -Parietal peritoneum is poorly innervated
 - It's surface area is double that of skin
 - It cannot absorb large amounts of fluids (most likely the fibrinolytic activity is correct)
- 17. Young male developed right loin pain of few hours duration, that radiates to his groin, on physical exam there's right lumbar tenderness, he vomited once, he isn't febrile, what's the most appropriate investigation:
 - CT with IV contrast.
 - UA looking for hematuria.
 - ultrasound for appendicitis.
- 18. A patient has undergone cholecystectomy. The hepatic artery was injured during the surgery and was repaired. He received 2000 mlL of blood transfusion. After the surgery, the patient BUN continued to rise (10-12 per day). He is well hydrated and his urine output is 2-3 L/day. The most likely dx:
 - High output renal failure *?
 - persistent bleeding
 - postcholecystectomy syndrome (it's persistent pain after cholecystectomy)
- 19. The most common indication for surgery in chronic pancreatitis is:
 - Pain

- diarrhea
- endocrine insufficiency
- malignancy
- 20. True about gastric bypass surgery:
 - It's more of a restrictive procedure rather than malabsorptive (wrong)
 - It causes protein malnutrition (I don't know)
 - It's not good for obese patients with esophagitis (wrong)
 - Sleeve gastrectomy was found to be better in treating diabetes compared to it (wrong)
 - It rarely causes iron deficiency (wrong)

Plastic surgery

- 21. Compartment syndrome... Fasciotomy
- 22. best way to dx osteomyelitis in pressure ulcer? bone biopsy
- 23. % in burn affects all except? wound healing time
- 24. wrong about thermal burn: Smoke inhalation injury best diagnosed with CXR and ABGs
- 25. 24-48 hrs in wound healing? Neutrophils
- 26. what triggers re-epithelialization? loss of contact inhibition
- 27. Order of regain of sensory function:
 - Temperature, pain, light touch.
 - light touch, pain, temperature.
 - -pain, light touch temperature.
 - pain, temperature, light touch.
- 28. Flaps compare to grafts in all of the following except:
 - used over joints.
 - closure of donor area by primary intention.
 - better vascularity.
 - better sensation.
 - more likely to take successfully
- 29. Wrong about fluids in burns:
 - UOP in children should be maintained at 1-2 mL/kg/hr
 - Colloids are given later
 - High hemoglobin indicates fluid overload *
- 30. A patient with an abscess in the pulp of his thumb, best next step:
 - incision *
 - observation
 - antibiotics

Endocrine surgery

- 31. Elevated C-peptide... Insulinoma
- 32. Diagnostic hemithyroidectomy is done for which of the following?
 - 2 cm nodule with FNA consistent with papillary ca
 - 2 cm nodule with FNA consistent with follicular ca *
 - 2 cm nodule with FNA consistent with medullary ca
 - FNA consistent with degenerative changes
 - FNA that is inadequate
- 33. True about salivary glands... Mucoepidermoid m/c malignant Tumor
- 34. Hyperparathyroidism... Sestemabi
- 35. Management of bilateral Conn's.. spironolactone??
- 36. thyroid known for multifocality?
 - -papillary?
 - -medullary
- 37. An old diabetic lady presenting after suffering an injury to her foot. On exam, she was found to have erythema at the site of injury. There was also crepitus and calf tenderness. What is the best next step?

 Surgical debridement *

Pediatric surgery

- 38. 3 year old, BPR, Hb=8, no abd pain or vomitng.. next setp??
 - -Technetium* (Meckel's diverticulum?)
 - -Colonoscopy
- 39. 2 week old, was breastfed & previously healthy, presented with bilious vomiting (this is a case of volvulus)... what is the test with highest diagnostic yield?
 - -Contrast enema
 - -upper GI contrast study*
 - -CT scan
- 40. Not a risk for inguinal hernia
 - -Female*
 - -CF
 - -Prematurity
- 41. VACTREL? TEF
- 42. new born with respiratory distress on ventilator was found to have reducible inguinal hernia.. management?

- repair while the new born on ventilator.
- repair after extubation and before discharge*
- 43. most common finding in FB aspiration?
 - -hyperinflation**
 - -pneumonia
 - -pleural effusion
 - -foreignbody
- 44. CDH: Persistence of pleuroperitoneal canal
- 45. True about testicular torsion
 - -Testicular torsion is most common before 3yrs and after puberty*
 - -Testicular salvage is very high regardless duration
 - -extravaginal is also called bellclapper deformity
 - -intravaginal is more common in perinatal
- 46. wrong about neurofibromatosis? Autosomal recessive
- 47. Normal testis that is pulled up with cremastric muscle contraction: retractile testis

Cardiothoracic surgery

- 48. True about Dominant Right coronary artery: means that it gives PDA branch and supplies AV node
- 49. requires immediate intervention? transposition of great vessels
- 50. Fatal condition? left coronary from pulmonary
- 51. PDA dependent heart defect? PGE1
- 52. Which of the following is the most appropriate statement regarding chest trauma:
 - 25% of trauma mortalities are related to the chest.
 - most patients with chest trauma will end up needing a thoracotomy.
 - tracheal and bronchial trauma are repaired via a median sternotomy.
 - continuous bleeding of 50 ml/hr requires a thoracotomy.
- 53. A patient undergoes left pneumonectomy for lung ca. 5 days after the surgery, he has fever and cough with copious amount of sputum. CXR showed air fluid level in the post-pneumonectomy space. What is the best next step?
 - Pleural fluid analysis and culture
 - Chest drainage
 - Thoracotomy
 - Sputum cultures and start antibiotics
- 54. All are causes of persistent decrease in CO after cardiac surgery except:
 - poor myocardial function
 - cardiac tamponade

- Hypovolemia
- Bleeding
- Alkalosis (most likely)

Oncology

- 55. All indcate local invasion except :arm edema
- 56. Not viral etiology... Testicular ca
- 57. most common site of rhabdomyosarcoma in children? Head and neck
- 58. wrong? chronic ulcer ---> BCC
- 59. A patient with 2.5 cm grade 3 invasive ductal ca in the right breast, what to do next?
 - wide local excision with sentinel LN biopsy*?
 - Mastectomy with sentinel LN biopsy
- 60. A patient with stage 2 non-small cell lung ca that was resected, which of the following is the most important prognostic factor?
 - number of N1 LNs involved
 - T stage
 - neoadjuvant chemo and radio
 - postoperative radiotherapy
 - invasion of visceral pleura
- 61. A 35-year-old woman, who is currently breast-feeding her firstborn child, develops an erythematous and inflamed fluctuant area on breast examination. Which of the following statements is wrong concerning her diagnosis and management?
 - a. The most common organism which would expect to be cultured is Staphylococcus aureus
 - b. Open surgical drainage is likely indicated
 - c. Breast-feeding absolutely should be discontinued
 - d. If the inflammatory process does not completely respond, a biopsy may be indicated
 - e. The organism has gained access through a macerated nipple

Answer: c

- 62. Which of the following statements is wrong concerning the histologic variants of invasive breast carcinoma?
 - a. The presence of an in situ component with invasive ductal carcinoma does not adversely affects prognosis
 - b. Medullary carcinomas, although often of large size, are associated with a better overall prognosis than common invasive ductal cancers
 - c. Mucinous or colloid carcinoma is one of the more common variants of invasive ductal cancer

- d. Invasive lobular carcinoma is associated with a higher incidence of bilateral breast cancer
- e. When mixed histologies are encountered, the clinical behavior parallels that of the invasive ductal carcinoma. Answer: c

general

- 63. 1st in hemostasis... Vasoconstruction
- 64. Vit. C... Hydroxyaltion
- 65. True about abx: carabapenems have good coverage for gram +ve and anaerobes
- 66. True about gas gangrene??
 - -pain, crepitus and toxemia*
 - -rarely cause gas in muscles
 - -Gram negative
- 67. Wrong about Inguinal hernia?
 - -femoral is the most common hernia in females*
 - -females are more likely to have femoral
 - -males are more likely to have inguinal
 - -Inguinal hernia is superior & medial to pubic tubercle
 - -Femoral hernia is inferior & lateral to pubic tubercle
- 68. True?
 - -Canal of nuck opens in labia majora*
 - -Indrect is medial to epigastric vessels
 - -Processus Vaginalis is superior to spermatic cord
 - -External inguinal ring is a defect is transversalis
 - -Internal inguinal ring corresponds to mid-inguinal point
- 69. True about hemorrhoids?

Pain is unusual unless complicated*

Hemorrhoids are palpable

Permanent prolapse is grade 3

Age 20-40

- 70. True about anal fissures:
 - -m.c is hypertoinic internal sphincter*
 - -in females m.c is anterior
 - -Glyceryl nitrate as effective as LIS
- 71. true about hypovolemic shock? Increased SVR*?
- 72. m.c in septic shock?

staph/ pseudomonas/ Ecoli*?

- 73. true about septic shock: persisting hypotension requiring vasopressors to maintain a MAP of 65
- 74. Who should receive blood transfusion?
 - A patient with with Hb 8 with tachycardia and SOB *
 - A patient with with HB 10 and CAD
 - A patient on hemodialysis and Hb 7
 - A patient with 1 g\dL drop in Hb after bleeding
- 75. Which of the following is an indication for FFP?
 - volume repletion
 - reversal of bleeding due to clopidogrel
 - A patient who received 1 PRBC
 - A patient who is on warfarin with a high INR *
- 76. Not a complication of blood tx?
 - -hyperkalemia
 - -hypercalcemia*
- 77. not commonly seen with diarrhea?
 - alkalosis
 - hypercalcemia
- 78. Management of gastric outlet obstruction with hyperchloremic hypokalemic metabolic alkalosis?? 0.9 NS infusion with KCl
- 79. All of the following can present in an acute trauma patient except:
 - hypoglycemia*?
 - lipolysis.
 - hypercatabolism.
 - gluconeogenesis.
- 80. A patient presenting to the ER after an RTA. He is conscious and communicative. He was found to be hypotensive and is complaining of abdominal pain. What is the best next step?
 - Jaw thrust
 - chin lift
 - intubation
 - IV line *
 - emergent laparotomy
- 81. A patient was being treated for lower leg ulcer with a cephalosporin. He developed diarrhea and tested positive for C.diff with the stool toxin test. Best next step?
 - Switch to oral vancomycin *
 - start metronidazole therapy

- 82. Which of the following is associated with the highest perioperative mortality?
 - MI 4 months ago
 - Aortic stenosis
 - CHF with Hb 7
 - Frequent PVCs
 - Age more than 70
- 83. A patient had epidural anesthesia for a lower abdominal surgery, she has headache after the procedure, which of the following is not done to decrease the headache?
 - bed rest
 - analgesics
 - decrease caffeine intake *
 - epidural blood patch
 - oral hydration

Vascular surgery

- 84. acute lower limb ischemia (The embolus was in the common femoral artery and the patient presented with weak sensation of 5 hour-duration.) best management:
 - -IV heparin
 - -Embolectomy
 - -Aorto-femoral bypass
 - femero-femoral bypass
- 85. PVD ??
 - -most have intermittent claudication
 - -asx have same survival rate as general population
 - -rest pain and intermittent claudication have different natural hx
 - -Normal ABI excludes significant disease
- 86. Wrong about DVT
 - -pt needs dmission before starting the treatment
 - -pt may have PE without any symptoms
 - -It's important to assess whether it was provoked or unprovoked
 - -Level of DVT affects your management
 - -You should not delay treatment till you do the u/s
- 87. What is true about fetal circulation?
 - Functional closure of foramen ovale occurs within 24 hrs
 - Ductus arteriosus continues to shunt blood from Rt to Lt after birth
 - Umbilical artery is a branch of common iliac artery (it's a branch of internal iliac)

- the pulmonary artery resistance decreases after closure of the ductus arteriosus (maybe)
- Low O2 tension is associated with closure of PDA
- 88. A patient presenting with signs and sx mostly consistent with acute mesenteric ischemia. ABGs: pH 7.32, HCO3 14, pCO2 31. What is the acid-base disorder?
 - Metabolic acidosis with respiratory compensation
- 89. There was a question about lower limb amputation but I can't remember the details. I guess the right answer was to start rehabilitation as soon as possible

Thanks to Thabet Qabaja, Lana Al-Sabe', Osama Abed Alkhaleq, Sulafa Saffarini and others.

Surgery 4th Year Final 2018

For the younger generations:

The questions may look easier than you think. Both the question stems and the exam conditions make it way more difficult to answer even the simplest questions. So study hard and expect the worst.

Plastic Surgery

- 1- Not determined by the degree of the burn Systemic management
- 2- False about cleft palate Abnormal swallowing
- 3- False about high-voltage electrical burn fluid management follows Parkland formula
- 4- Patient with burns in both upper limbs (one limb with first degree burn and the other with second-degree burn) and one lower limb, 50 kg, how much fluid does he need in the first 8 hours? 2700 mL (always exclude 1st burns from Parkland formula)
- 5- Hemangioma in the trunk, measuring 7 x 7 cm in diameter, best management? observation
- 6- False about FTSG compared to STSG associated with more successful take
- 7- Best indicator of fluid management in burn patients urine output of 0.5 mL/kg/hr
- 8- Most common cause of burn sepsis is Pseudomonas
- 9- True about BCC the skull forms a barrier that prevents invasion
- 10 Most common ear tumor is SCC
- 11- The best prognostic factor for soft tissue sarcoma is grade
- 12- False about keloid Is pre-cancerous
- 13- A patient with contaminated wound of 12 hrs duration, best thing to do?
- clean the wound, get rid of devitalized tissue without primary closure
- 14- type of collagen in tendons type I collagen
- 15- when does the wound start to have tensile strength? after 3-4 days

Vascular and Cardiothoracic

- 1- Most common site of venous ulcer lower third of the leg and ankle
- 2- Exercise effect in PAD improves the collateral circulation
- 3- Not used for AAA repair Axillo-bifemoral bypass
- 4- Cause of early cyanosis Transposition of the great vessels
- 5- Not in TOF ASD
- 6- Indication for CABG Patient with unstable angina, three-vessel disease, EF = 35 %
- 7- MI with occlusion of LCX artery, patient has left-dominant circulation, which parts will be infarcted?
- Left lateral ventricle and posterior interventricular septum
- 8- False about lymphedema
- lymphedema praecox is primary and lymphedema tarda is secondary (both of them are primary)
- 9- False about pneumothorax tension pneumothorax is diagnosed by CXR
- 10- Which of the following is associated with the highest relative risk of developing DVT? –

Antiphospholipid syndrome (The other choice were heterozygous factor V leiden, prothrombin mutations, heterozygotes protein C deficiency)

- 11- A question about Pancoast tumor? -2/3 of the cases are associated with squamous cell carcinoma
- 12- Which of the following is false about intermittent claudication? becomes better at night

Breast

- 1. False about duct ectasia reduced incidence in smokers
- 2. Not a risk factor of breast cancer first pregnancy at a young age
- 3. Breast cancer with worst prognosis Infiltrating / tubular / mucinous /
- 4. False about phyllodes tumor 90 % malignant
- 5. Which of the following arteries does not supply the breast superior epigastric artery

General surgery

- 1. A patient lost 15 % of her blood, what fluid management to do? crystalloids
- 2. When to start eating after thyroidectomy? After 1 hour
- 3. Which type of shock needs vasopressors as an initial management? Neurogenic shock
- 4. Which of the following does not need Abx prophylaxis? Thyroid surgery
- 5. How much a 70 kg man needs as maintenance fluid in 24hrs 2800 mL
- 6. BMI equals weight in kg / height in m²
- 7. Which of the following is false about antibiotic prophylaxis before surgery? Should be continued for 72 hours
- 8. Most common cause of death after blood transfusion? TRALI
- 9. True about TRALI Can also occur after administration of fresh-frozen plasma
- 10. One feature that makes TPN better than enteral nutrition less incidence of diarrhea
- 11.Patient on NG tube, which is true? Enteral nutrition activates the biliary pancreatic axis and has trophic effects on the bowel

- 12. The most common cause of secondary bleeding in the few days postoperative period is infection
- 13.A patient with nonhealing ulcer is very likely to have a nutritional deficiency in which of the following? Zinc
- 14. Which of the following is false about hypercalcemia:
 - a) breast cancer metastasis is an unusual cause***
 - b) severely hypercalcemic patient will have signs of extracellular fluid volume deficit
 - c) Volume repletion would result in increased urinary excretion of calcium
 - d) Hypercalcemic patients will have signs and symptoms similar to hyperglycemia
- 15. which of the following is not used for assessment of nutrition?
 - a) albumin
 - b) Transferrin
 - c) Hemoglobin***
 - d) Malnutrition by physical examination
- 16.A patient has pencil-stick injury in his forearm, then he developed a swollen tender and fluctuant mass, what is the most likely diagnosis? Abscess
- 17. Which of the following is true about cellulitis? Can be treated by penicillin (It is non-suppurative spreading infection of the skin is incorrect as it affects the subcutaneous tissue not the skin).
- 18. Which of the following is true about body fluids? It might be affected by wide range of physiological variation
- 19. Which of the following is true about body fluids? The concentration of sodium in the intravascular and the interstitial compartment is almost equal.

- 20.A patient has fever, tachycardia, tachypnea, high blood pressure, and on CT scan he was found to have pelvic abscess, what is the most likely diagnosis? Sepsis (the other choices where SIRS, severe sepsis, multiple organ failure etc.)
- 21. Which of the following is not a risk factor of surgical site infections? Hyperthermia (the other choices were old age, malnutrition, infections at other remote sites)
- 22. After surgery, a patient was found to have a fractional excretion of sodium of less than 1%, what is the most likely cause? Pre-renal acute kidney injury (was written as acute renal failure in the exam)

GI Surgery

- 1. Initial investigation in a patient with GERD barium swallow
- 2. True about Barrett esophagus intestinal columnar metaplasia
- 3. Most common site of lymphoma in the colon Cecum
- 4. Which of the following is not part of management of gastric ulcer NG tube insertion
- 5. False about diverticular disease considered pre-cancerous
- 6. False about rectal anatomy superior rectal artery arises from the internal iliac artery
- 7. True about hemorrhoids? Internal hemorrhoid lies above the dentate line and below the anorectal ring
- 8. True about inguinal hernia direct hernia bulges out medial to the inferior epigastric vessels
- 9. Not a risk factor of colon cancer? Young age
- 10. True about FAP Osteoma is an extra-intestinal manifestation that can be associated with it.

- 11. Not associated with gastric cancer blood type O (it's blood type A).
- 12. True about the appendix Contains lymphoid follicles in the submucosa
- 13. True about pilonidal sinus Occurs always in the midline (not sure)
- 14. The least effective bariatric surgery in terms of excessive weight loss Gastric banding
- 15.A case of dysphagia and weight loss, Dx? Esophageal cancer
- 16. True about fibrolamellar HCC The rest of the liver is normal (high AFP is not a characteristic of this HCC type).
- 17. The vascular ligament of the spleen is lienorenal ligament
- 18. Which is true about splenic trauma surgery? Don't know the answer
- 19. Which of the following does not increase the risk of colon cancer? Hyperplastic polyp
- 20. The type of cholecystitis that mimics gallbladder carcinoma is Xanthogranulamatous cholecystitis
- 21. Worst complication of cirrhosis is Esophageogastric varices
- 22. What predicts earlier spontaneous closure of enterocutaneous fistula? long tract
- 23.in which part of the small intestine does absorption of most nutrients occur? Jejunum
- 24. The most common complication of hydatid cyst of the liver is? Cyst infection / Rupture into the biliary tree***
- 25. Which of the following is a risk factor of pancreatic cancer? Smoking
- 26. Which of the following is false about G.I. secretions? Gastric juice is rich in potassium

- 27.Add 38-year-old female presented with right upper quadrant pain with for 12 hrs and mild tenderness with no rigidity. She used to have a similar pain following fatty meals, what is the most likely diagnosis? Acute cholecystitis
- 28.which of the following does not does not pass through the three openings of the day from? Left phrenic nerve (the other choices were IVC, aorta, left vagus nerve, and eaophagus)/ The left phrenic pierces the diaphragm rather than passing through one of the openings.

Pediatric:

- 1. A cause of atypical neonatal SBO Intussusception
- 2. Most common site of CDH- posterolateral
- 3. Most common findings on CXR with foreign body aspiration-hyperinflation
- 4. Rt flank palpable mass, the most likely diagnosis Hydronephorsis.
- 5. Alkali disc battery ingestion, AXR after 5 hours shows it is in the proximal small bowel best next step- admission and run a serial AXR to follow its progress
- 6. Infant with bilious vomiting and signs of intestinal obstruction, best thing to do is? Upper GI series (other choices were abdominal x-ray, CT scan, abdominal ultrasound)

Head and Neck and Endocrine Surgery

- 1. A man presented with right parotid mass, what is the most likely diagnosis? Pleomorphic adenoma
- 2. False about Warthin tumor Becomes malignant in 20 % of cases.
- 3. Thyroid cancer in parafollicular cells medullary thyroid cancer
- 4. Most common thyroid cancer in iodine deficient areas is follicular thyroid cancer
- 5. A patient with a mass in the deep cervical lymph nodes, best next step is? FNA with cytology
- 6. Best describes hyperparathyroidism high calcium and high PTH
- 7. The mechanism of palpitations, sweating, and tremor in insulinoma is increased catecholeamines
- 8. Which of the following does not occur in Addison's disease generalized edema

Collected by: Hashim Ahmad

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Surgery 6th year 2017

Aortic arch

1. Not given in cardiogenic shock: -nitroprusside* -norepinephrine? 2. Which of the following cells is not phagocytic: A neutrphile B natural killer cell C lymphocyte* D kupher cells 3. Antibiotic given for cholecystectomy prophylaxis: Cefuroxime Cefazolin* Ceftriaxone Metronidazole 4. Drug of choice for hydatid cyst: Mebendazole Ketoconazole Albendazole* 5. Drug causes peripheral neuropathy: Vincristine* Methotrexate 6. Wrong about gallstones: - black stones are associated with hemolysis - black stones occur exclusively in the gallbladder - brown stones associated with biliary tract infections - pure cholestrol stones = solitary -brown stones associated with increased calcium bilirubinate* 7. A patient after RTA, with pulsus paradoxus and decreased heart sounds elevated jvp. Dx: Cardiac tamponade 8. A patient with stab wound to his chest ...etc , he has cardiac tamponade , what the heart component that got injured: Rt atrium Rt ventricle* Left ventricle

9. GSC scale for a patient who withdraws to pain, opens eyes to painful stimulus, verbalize with inappropriate words: 9 10. Liver tumor in patient who was taking OCPs for long time: Adenoma 11. all the following associated with c.diffile except: OCP* PPI Steroids Malnutrition 12. Wrong about intermittent claudication: - relieved by rest - increased at night 13. Most common cause of vein graft failure in CABG: atherosclerosis _intimal hyperplasia _spasm coronary artery stenosis **if less than one month -> thrombosis 1-12 months -> intimal hyperplasia more than 12 months -> Atherosclerosis (according to bailey and love) 14. Not part of gastric CA evaluation: CT Endoscopic u/s Laprascopy Lapratomy* 15. Most common cancer that metastasizes to the stomach: Melanoma (hek el net b7ki) Colon 16. Most lethal coronary malformation in neonate: Left coronary artery originates from pulmonary artery* Left coronary originates for rt coronary 17. Wrong about femoral canal: Inguinal ligament is the superior border of femoral canal Pectinular line posterioly to femoral canal Contains lymph. Nodes absr sho lacunar ligament is the lateral border*

18. Trastzumab is used for:

Breast cancer (613 nfso herceptin)*

Melanoma

19. No need for chemo after rectal resection if:

Positive nodes

Lympho vascular invasion

Tumor >3 cm* (size does change our decision regarding chemo)

20. T4 breast Ca is best managed with:

Chemo then mastectomy*

Modified radical and radiation

21. Not a side effect of transfusion

Thrombosis

Bronchospasm

Increased platelets*

22. About diverticular disease which is wrong:

60% develop diverticulitis* (it is 10-25%)

Most common cause of Massive bleeding

- 23. Arrhythmia associated with laparoscopy
 - -Sinus Brady * (rapid stretch of peritonial membrane causes vasovagal response with bradycardia and hypotension)
 - -Sinus tachy
 - -PAC
- 24. We can delay surgery up to age of 1 year in all of following except:
 - congenital inguinal hernia
 - undescended testicle
 - congenital hemangioma
- 25. Wrong about carotid body tumor

Malignant in 35%?

Occurs In middle age

Diagnosed with angio

Stimulus of carotid is hypoxia

26. Patient on tracheostomy developed fresh blood bleeding after two weeks

Cause is

Tracheoinnominate fistula

Bleeding from the granulation tissue * (TIF is verey severe with mortality reaching 100% without surgery so i guess answer is bleeding from granulation tissue)

27. Particular risk of circumcision

Bleeding tendency?

Meatal stenosis?

Excessive skin removal

28. Patient who developed pnemothorax, he is not improving by the third day what to do?

Give 100% O2 and observe

Talc and trachoscopy

bleb excision and mechanical pleurodesis*

29. Diffuse Ca of stomach, what is true:

More in men

Increases with age

Type A personality and genetics?

30. Sublingual gland

There's one only under the tongue

Opens into wartons duct*

Most common cancer is in it

31. Mechanism of septum primum closure:

Fusion of septum primum with endocardial cushion*

Fusion of s.secundum with endocardial cushion

32. ASD associated with mitral insufficiency:

Septum secundum

Septum primum*

Coronary sinus

latrogenic after procedure

- 33. All of following considered distributive shock except:
 - anaphylactic
 - hemorrhagic*
 - septic
- 34. Gastroschisis wrong: to the left
- 35. Undescended testes surgery: one year
- 36. TEF wrong: type one most common and associated with proximal TEF
- 37. hx of greenish vomiting and abdominal pain and other symptoms what mostly help you in location of obstruction: greenish vomiting
- 38. hirschsprung disease wrong:

if you do proper hx and examination no need for other investigation*

it is the m.c.c of functional neonatal obstruction

- 39. case of pyloric stenosis: hypokalemic hypochloremic metabolic alkalosis
- 40. glucose needed to prevent gluconeogenesis from proteins: 200g
- 41. Not part of MEN type 1?
 - parathyroid hyperplasia

- pituitary adenoma
- gastrinoma
- pheochromocytoma*
- facial angiofibroma
- 42. most common neuroendocrine tumor:
 - Insulinoma
 - Gastrinoma
- 43. Unlikely injured site to cause hypovolemic shock:

Intracranial *

Spleen

- 44. frost bite wrong: start antibiotic
- 45. pressure ulcer wrong: treated by skin graft
- 46. MIBG scan for : pheochromocytoma
- 47. A bacteria that isn't from a Gastrointestinal origin:

Strep.

Chlamydia (i think)

Clostridium

- 48. not in TOF: transposition of great vessels
- 49. adult 70kg minimum urine output: 35 ml/hour
- 50. wrong about signs of dehydration in peds:
 - -lethargy
 - -tachycardia
 - -decrease capillary refill
- 51. Best indicator of treatment of dehydration in peds:

Skin turgor

Urine output

Serum chemistry

Mental status

BP and HR

52. What is false about CDH?

Most common is Bochadalek

Failure of septum transversum(something about embryology)

Pulmonary hypoplasia only on affected side*

Scaphoid abdomen

Diagnosed antenatally usually

- 53. Ludwig angina best initial management: secure airway
- 54. neuroblastoma wrong: most common site of metastasis is lungs
- 55. wrong about hemorrhoids:

Peak at age 45-65

most common symptom is pain*

Hemorrhoids are normally cushions found in everyone and aid in continence Internal are covered by mucosa, external by skin

Stage 3 and 4 corrected surgically

56. What is characteristic about rectus sheath hematoma?

Rupture of veins

More common in young atheletes

Fothegrill sign (fixed mass with rectus contraction) is suggestive*

57. True about dermis:

Contains appendages (hair follicles, sweat and sebaceous glands)

- 58. Wrong about Massive blood transfusion:
 - -One blood volume in 24
 - -10 units in 12 hrs
 - -50% blood volume in 3 hrs
 - -4 units in one hour
 - -Transfusion needing FFP to treat coagulopathy*
- 59. Lung cancer stage two resected what affects prognosis:

Neoadjuvant radio

Post op radio

Lymph nodes (N1) status

Involvement of parietal pleura

T status*

60. In neuroendocrine response to stress, which phase can be prolonged and cause metabolic imbalance

Ebb phase

Flow phase*

Balance phase

Healing

61. One is false about hypercalcemia:

Similar to symptoms of hyperglycemia

Breast Ca mets is a usual cause

Calcitonin is given life Long* (Calcitonin can only be used in acute management of hypercalcemia due to rapid development of tachyphylaxis.)

- 62. One is true regarding the orientation of CBD , hepatic artery and portal vein ?? CBD right , hepatic artery left . portal vein posterior
- 63. Not an obligate glucose user?

Cardiac muscle* (uses fatty acids as primary source)

Brain

RBC

64. Patient who is in the operating room and intubated developed tracheal shifting and absent air entry to lungs what to do?

Needle decompression*??

Chest tube insertion

65. About carcinoid what is false?

Most of the appendiceal carcinoid is malignant *

Syndrome is due to 5-HIAA

Bronchial carcinoids usually associated with carcinoid syndrome

carcinoid is part of MEN 1

66. True about breast cancer recurrence:

15-20% of well treated stage I and II will recur

Most recurrences happen within 5 yr?

Radiation of the whole breast reduces risk from 40-10%

67. 55 male patient with inguinal pain , he has had a swelling that was reducible .. Now there's absent cough impulse what to do:

Exploration*? (because pain is a sign of strangulation)

U/s

CT scan

Iv antibiotics in the surgical ward

68. Which is true about FAP:

Problem on ch15

75% will develop into malignancy

Polyps in late adulthood

Panproctocolectomy with pouch is curative*

- 69. A breast cancer patients develop a metastatic lesion on her vertebral column.. the most likely pathway?
 - -Lateral thoracic veins
 - -Branches of intercostal veins*
 - -Lymphatic to axillary LN
- 70. About hernias what is true:

Strangulation mortality is above 10%

Indirect are 20% of inguinal hernia

Females have femoral hernia more than inguinal hernia

Are second to adhesions as a cause of intestinal obstruction*?

71. Wrong about thyroid nodules:

More common in females

FNAB indicated in lesions less than 10 mm*

Retrosternal extension suggests it is benign

More than 90% in adults are benign

Hot nodules have very low risk of malignancy

72. Important in wound healing:

Vitamin A

Vitamin D

Vitamin C

Vitamin B6

Vitamin B12

73. Most risk factor implicated in pancreatic cancer:

Alcoholism

Smoking*

Fatty dies

Radon exposure

74. Least associated with risk of SSI in a major surgery:

Age>70*

Chronic malnutrition

Controlled DM

Distant active infection

75. Major cells in granulation tissue:

عالأغلب Fibroblasts and endothelial cells

76. Dry scaly skin in diabetics is the result of:

Ischemia

Autonomic neuropathy*

Peripheral neuropathy

Sensory neuropathy

77. Most common malignant Tumor of submandibular gland?

Mucoepidermoid

Adneoid cystic carcinoma*

78. A young male has swelling, redness, pain in his arm after severe excoriation, which one is wrong about his condition:

Antibiotics should be given

Underlying osteomyelitis could be implicated*

Elevation of the limb is part of the treatment

His condition can be life threatening

79. Wrong about Fornier gangrene:

Older age are at higher risk

Multiple organisms usually

Can be life threatening

If scrotum is involved, excision plus orchiectomy is indicated**

80. True about gynecomastia:

Unilateral precludes drug related gynecomastia (false)

Associated with increased risk for breast cancer (this only applies for Kleinfelter)

Stopping the drug will result in reversal in all cases (False)

Surgical treatment of choice is subcutaneous mastectomy?

Formal endocrine consult is mandatory?

81. Which one is classified as clean/contaminated?

Penetrating abdominal injury

Large tissue injury

Elective upper GI surgery*

Enterotomy in intestinal obstruction

Abscess in diverticulitis

82. Wrong about bariatric surgery:

Gastric bypass is restrictive not malabsorptive*

bypass is good for sweat eaters

banding is number one on children

83. False statement about septic shock...

It is acceptable to delay IV antibiotics for 6 hr until samples are taken for culture and gram staining

84. False statement about volvolus:

Theory is redundant sigmoid with short mesentery and dysmotility

More common in west

Sigmoid is the most common

Surgery is not recommended after successful derotation*

85. Abdominal anatomy wrong: deep inguinal ring located 1.5 cm below mid inguinal point

86. Not a contraindication for major surgery:

MI in the last 2 months

CVA in the last 4 months

Resolving URI

previous mitral valve replacement

87. True about NG tube feeding:

Very thrombogenic

More sepsis than TPN

contraindicated in CVA patients

potential cause of abdominal cramps and diarrhea?

Used for short bowel

88. About burn management, which is wrong

Delay oral feeding >5 days?

89. Order of return to function after laparoscopic surgery:

Small intestine, stomach, colon

90. Wrong about hypernatremia:

Can occur in major burn

can be classified into low, normal, and high intravascular volume

has high mortality if untreated

hypotonic saline is used as therapy

rate off correction of serum osmolarity is 10 mosm/hour**

91. Which is a poor prognostic marker for breast CA?

Her2/neu**

RB

Raf

- 92. true about PAD:
 - normal ABI excludes significant disease?
 - Asymptomatic PAD have same mortality as general population
 - all PAD are symptomatic
 - Intermittent claudication and rest pain have different natural history
- 93. not a cause of leg edema:
 - CHF
 - -nephrotic
 - cirrhosis
 - DVT
 - acute limb ischemia *

1- true tpn - amino acids 2- true tpn glu - 4 3- tru refeeding - low mg k po 4- wrong atelactasis - 4 days 5- wrong ssi - mild has sys 6- wrong ab prophylaxis - no effect on rs infection 7- ped fluid - 20cc/kg ns 8- wrong about gas gangrene -?? 9- wrong about tetamus -? 10- wrong about necrotizing -?? 11- wrong about erysipelas - flat 12- wrong about ppu - less than 30 have hx of ulcer 13- true about gastric ulce decreased defenses 14- ugib wrong - ng clear fluid above treitz 15-lgib wrong - radio low error 16-sbo + append - adhesion 17- epi pain +vomit - acute pan 18- not in ranson - amylass 19- not in child pugh - ptt

20- wrong about chole - emphesams

21- fresh blood, constipation and no
fam hx - hemorrhoids
22- wront about fisure - 10% post
23- wrong about appendicitis - more
in xhildren
24- high in hcc - afp
25- not in gallstone ileus - acholic
stool
26- true about achalsia - manometry
27- fam hx of crc and cecal tumor -
apc or msh2
28- in uc not crohn's - backwash ileitis
29- wrong crohn - bloody diarrhea
30- wrong carcinoid - syndrome
caused 5hia
31- desmoid tumor, check - colonic
polyo
32- no polyhydra - colonic atresia
33- atypical sbo in neonate - intuss
34- not viral ca - osteogenic
35- not in hps - anorexia
36- not vater - vsd
37- inguinal hernia - diff in hx pe
38- not groin in supine - saphina varex
39- wrong inguinal - direct lat

40- not circumciaim - anomaly or
prophyl
41- mc esophageal atresia - proximal
atresia dista tef
42- wrong duodenal atresia -
gastrojeju
43-1st to do in anorecal - iv fluid
44- not in massive blood -
hypercalcem
45- lost 30% - adh
46- hypotension and chest pain -
needle
47- rf if aaa - htn
48- highest o2 - common caritid
49- mc vsd - membranous
50- not fallot - asd
51- not rt lt shunt - ao co
52- in dvt - ulcer
53- dfu showing tendon - wagner 2
54- most seriois in ao stenosis - chd
55- no compartment - partial thick
burn
56- wrong myasthenia gravis - beta?
57- lung ca prognosi - nodal?
58- crc not prognosis - differentiation

59- not burn degree related - systemic
management
60- not electrical burn - parkland
61- management of hemngioma in
abd - observation
62 - wrong about hemangioma -
always observe
63 - ear bite - delayed primary
64 - percentage - 64%
65 - wrong on injury zone - dependant
position inhances
66- worng melanoma - in situ is
chemo
67- not precursor of scc - chronic
ulcer
68- not in situ - bcc
69- breast local invasion - arm edema
70- poor prognosis of breast - her2
71- krekenburg - transcelomic
72- twin graft - isograft
73- hand muscle wasting - ulnar
74- psammoma - papillary
75- young, thyroid ca - papillary
76- congo red - medullary
77- mibg - pcc

78- glomerulosa - aldos
79- not in men i - pcc
80- thyroid nodule wrong - fna <1cm
81- nor midline neck mass - branchial
cyst
82- submandibilar - stone
83- minor salivary - malignany
84- mc endocrine pancreas ca -
insulinoma
85- penetrating traima - liver or small
bkwel
86- wrong about amputation - energy
expe
87- femoral hernia wrong - medial and
below
88- not immediate cx of surgery -
incisional hernia
89- hiv - kaposi
90- femoral art - midinguinal
91- wrong on anal canal - dentate
92- band - no redo
93- gist - cajal
94- not in hypovolemic - distedndd
neck vein

Surgery exam 2016 - 4th year

- 1. True about medullary thyroid carcinoma:
 - 75% are sporadic **
 - Related to irradiation
- 2. Hurthle cell carcinoma. All true except:
 - Also called oxyphilic cell carcinoma
 - More aggressive than papillary and follicular
 - Considered a variant of follicular carcinoma
 - Eosinophils on microscope



- 3. Psammoma bodies:
 - papillary carcinoma
- 4. Wrong about parathyroid adenoma:
 - 2nd most common cause of 1ry hyperparathyroidism
- 5. The most common pancreatic endocrine tumor in MEN1:
 - Gastrinoma
- 6. To differentiate between benign and malignant thyroid nodules:
 - FNA biopsy
- 7. Most of blood supply of parathyroid is from:
 - Inferior thyroid artery
- 8. True about parathyroid gland:
 - Secrets PTH to control calcium levels
- 9. Activation of trypsinogen as an initial step in acute pancreatitis is conducted by:
 - Lipase
 - Amylase
 - Enteropeptidase**
 - Phospholipase

10. Pseudo-obstruction syndrome (ogilvie's), all true except:

- Increased sympathetic tone and decreased parasympathetic tone.
- More on the left side**
- Risk of perforation is 15%

11. All of following can cause gynecomastia except:

- Cimetidine
- Digoxin
- Spironolactone
- Tricyclic antidepressants
- Cefuroxime**

12. Most common congenital heart defect:

- Membranous VSD

13. Closure of foramen primum by union of:

Septum primum with AV cushions

14. GIST arise from:

Cells of Cajal

Lit oyere

15. Wrong about GERD:

- 90% will have esophagitis on endoscopy due to reflux ** (60% will show normal mucosa on endoscopy).
- Not all types of reflux are diagnosed by PH monitoring
- Barium swallow > hiatal hernia

16. Wrong about diverticulitis:

Endoscopy is the test of choice to diagnose acute diverticulitis. (it is CT)

17. Wrong about CHD:

- TOF is due to aorticopulmonary membrane defect *?? (It is due to anterior and superior deviation of the outlet septum.
- In TOF: pulmonary artery stenosis and overriding aorta.
- In TOF: VSD and RVH

18. Not associated with polyhydramnios:

- Esophageal atresia
- Duodenal atresia
- Colon atresia**
- Congenital hiatal hernia

19. Wrong about bariatric surgery:

- Banding is good for pediatric age group.
- Bypass is good choice for sweet eaters.
- Bypass is mainly restrictive**

20. 2 year-old child has swallowed a 2 cm coin, he has drooling of saliva but no respiratory distress. what is the most likely site to find the coin:

- LES
- At the level of cricopharyngeous muscle**
- At jejunoileal junction
- At level of crura of diaphragm

21. Genetic defect ass with HNPCC:

- APC FAP
- MLH1/MSH2**
- P53 · Li Fraumeni sx

22. Wrong about hemorrhoids:

- 2 right hemorrhoid quadrants and 1 left
- Mainly in young adult
- Grade III > surgery
- Grade II refractory to medical treatment >> banding
-

23. True about colon cancer:

- It is rare for right colon cancer to present as anemia
- 75% from polyps ??

24. Wrong about anal fissures:

- Anterior fissures are more common than posterior fissures**
- Sentinel pile >> chronic fissure
- Usually hyperactive internal sphincter

25. Wrong about fistula:

- Intersphincteric > most common
- Seton is associated with negligible incontinence**

26. Zone 1 in penetrating neck injuries:

- Cricoid cartilage to angle of mandible
- Clavicle to cricoid cartilage**

27. Most common cause of death at site of accident is:

- CNS injury
- Thoracic injury
- Vascular injury**

28. True about neuropathy in DM patient with diabetic foot:

- Ulcer in normal weight bearing parts.
- Cold skin*?

29. Which factor is the most associated with symptomatic PVD:

- HTN
- DM**

30. Diabetic patient presented with redness and swelling on plantar aspect of the foot:

- Acute Charcot

31. Sepsis with organ failure and persistent hypotension is the definition of:

- Septic shock**
- SIRS
- Severe sepsis
- MODS

32. Not part of the SIRS criteria:

- Temperature < 36
- HR >90
- WBC > 12000 or < 4000
- RR>8 or PaCO2 >23mmHg**
- Cell bands > 10%

33. Patient lost 1700 ml of blood:

- Class III shock (lost 30 – 40 % of blood volume)

34. Pt has inappropriate words, open eyes in response to painful stimulus, flex limbs in response to painful stimulus. Find his GCS:

- 9 **
- 8
- 7

35. P50 for a male with normal [Hb]:



36. Wrong about compartment syndrome:

- Fasciotomy of all affected compartments
- Absent pulse is an early sign** (it is very late)

Class of haemorrhagic shock					
	I	II	III	IV	
Blood loss (mL)	Up to 750	750-1500	1500-2000	> 2000	
Blood loss (% blood volume)	Up to 15	15-30	30-40	> 40	
Pulse rate (per minute)	< 100	100-120	120-140	> 140	
Blood pressure	Normal	Normal	Decreased	Decreased	
Pulse pressure (mm Hg)	Normal or increased	Decreased	Decreased	Decreased	
Respiratory rate (per minute)	14-20	20-30	30-40	> 35	
Urine output (mL/hour)	> 30	20-30	5-15	Negligible	
Central nervous system/ mental status	Slightly anxious	Mildly anxious	Anxious, confused	Confused, lethargic	

			Septic
		Severe	Shock
	Sepsis	Sepsis + End Orga	Severe Sepsis + Hypotension an Damage
	SIRS + Infection C or <36°C, <u>HR</u> >90, R 00 or <4,000 or >10%		
7	7 1		

37. Female with DVT. Wrong about treatment:

- admission
- she may have PE without signs
- level of DVT determination would affect the management
- need to determine whether it is provoked or unprovoked
- good treatment reduce recurrence and post thrombotic syndrome

38. wrong about critical limb ischemia:

- mostly are revascularized
- worse prognosis than intermittent claudication
- amputation is occasionally the only choice
- Majority ends with amputation, or become severely diseased in 12 months follow up*??

39. Antibiotic prophylaxis for inguinal hernia repair with mesh:

- Vancomycin
- 1st generation cephalosporin**
- 2nd generation cephalosporin
- 3rd generation cephalosporin

40. Factor that increases the risk of cholangiocarcinoma the most is:

PSC (primary sclerosing cholangitis)

41. Wrong about cholecystitis:

Emphysematous cholecystitis is treated conservatively

42. Wrong about necrotizing fasciitis:

- High mortality
- Caused by single microbe in 80% of patients**

43. Best test for diagnosis of gastrinoma is:

- 24 hour urine gastrin
- Acidity of the stomach

44. Clinical picture of pneumothorax (RTA, SOB, patent airway, hyper resonance and decreased breath sounds on right). What is the most appropriate next step?

- Needle thoracotomy**
- Intubation and ventilation
- IV access
- CXR
- Lavage

45. all are risk factors for C. difficile infection except:

- smoking**
- PPI
- Prolonged broad spectrum antibiotics use
- Severely ill patient

46. Wrong about appendicitis:

Mainly in pediatrics

47. All are contents of the spermatic cord except:

- Genital branch of genitofemoral nerve
- Inferior epigastric artery**





48. Not part of MILAN criteria for liver transplantation:

- 4 small tumors < 4 cm**
- No extrahepatic manifestations
- No vascular invasion
- 49. Not a cause of hyperkalemia:
 - Alkalosis**
 - Renal failure
 - Thrombocytopenia

- Single mass up to 5 cm
- · 2-3 mass not more than 3 cm
- · No vasc. Invx
- · No extrahep, manifestation

50. Associated with high risk of breast cancer:

- Atypical hyperplasia

51. The least invasive carcinoma:

- Comedo carcinoma**
- Tubular carcinoma
- Medullary carcinoma
- Mucinous carcinoma

52. Wrong about mammography:

- 1/3 of palpable CA nodules are missed on mammography • 10%

53. Wrong about fibroadenoma:

- Mostly at 3rd to 4th decades** (it is 2nd to 3rd)

54. Wrong about melanoma:

- Ocular melanomas metastasize to cervical lymph nodes**
- Acral lentiginous melanoma is the most common type in blacks

55. Wrong about breast cancer:

Mc ductsl

- Mucinous (colloid) carcinoma is the most common type of invasive breast carcinomas

56. About burns, all are true except:

- 2nd degree burns usually treated by skin grafts **
- 3rd degree burn causes loss of the tissue elasticity

57. Wrong about electrical burns:

- Hypokalemia is common**
- High voltage >> severe damage
- Damage is proportional to tissue resistance

58. Wrong about early escharotomy:

Removed by bacteria**

59. Wrong about cleft palate:

Hearing loss is congenital**

60. Wrong about hirschsprung disease:

- More in females**

61. Atypical cause of neonatal obstruction:

- Intussusception

62. 8 month old baby with hemangioma on his upper eyelid obstructing the eye, management?

- Laser
- Steroids**
- Surgery
- Observation
- Embolization

63. True about wound healing:

- Activation of coagulation cascade

64. Wrong about excessive wound healing:

- Keloid doesn't improve with time
- number of fibroblast in keloid and hypertrophic is more than normal ulcers**

65. most malignant feature in lung cancer:

- no change on CXR after 5 months
- speculated appearance**

66. serous pleural effusion:

congestive heart failure

67. most common lung cancer:

- metastases
- peripheral adenocarcinomas in non-smokers
- small cell carcinoma in smokers
- squamous cell carcinoma in smokers
- bronchogenic adenoma

68. wrong about gastroschisis:

- ??

69. Not in neuroblastoma:

- Diarrhea**
- Splenomegaly

70. Most common cause of hydronephrosis:

congenital ureteropelvic junction stenosis

71. the complication with worst prognosis of aortic stenosis:

- congestive heart failure**
- syncope
- angina

72. wrong about undescended testis:

- high risk of malignancy
- orchidopexy in neonatal period**

73. wrong about testicular torsion:

- radiologic investigation and isotope scan should be done before surgery

Surgery

may present with vomiting?

74. sternal angle is at level of

2nd costal cartilage

75. Not complication of TPN:

- Hypoglycemia

76. Wrong about IBD:

granulomas are seen in more than 50% of cases Site of origin

77. Blood transfusion least likely to cause:

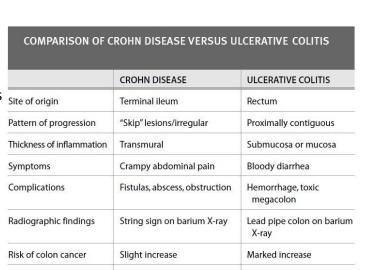
- Hypercalcemia**
- Hypothermia
- Hyperkalemia

78. Trauma patient presented to the ER first step?

Secure airways



 Stage 3b and more we dont go for sx



For complications such

as stricture

Curative

Surgery final examination 6th year medical students 2015

GI Surgery

- 1. After performing Appendectomy, nurse giving you the tissue you removed, MANS: Carefully label and send to histology.
- 2. Right iliac fossa pain with anorexia. MANS:

Arrange for theatre since surgery is the management.

- 3. carcinoid what is wrong:
 - neuroendocrine tumor
 - can be with MEN1 (medscape)
 - the syndrome is due to 5-HIAA?
 -another right choice
 - sth malignancy with appendix carcinoid
- 4. Which of the following locations of carcinoid is most likely to mets:
 - appendix
 - ilium?
 - rectum
- 5. False about endoscopy:
 - endoscopy associated with high false negative results for esophagitis?
 - -esophagitis found on >90% of endoscopies?
 - -60% of GERD pts will have normal mucosa at endoscopy.
- 6. GERD, False:
 - manometry is mandatory before surgery?
 - not all esophageal hernia result in reflux
- 7. Bleeding artery in duodenal ulcer is:

Gastrodudenal artery

- 8. Anatomy, true:
 - pancreas is related to medial side of duodenum
 - liver and GB cover 1st part of duodenum"
- 9. About gastrin, true:
 - secreted from G cells, stimulate pariteal cells
- 10. True about type one benign gastric ulcer:
 - 1) associated with hypergastrinemia
 - 2) increased with increased parital cell activity or sth
 - 3) decreased mucosal defenses ***
- 11. Pt with BMI above 50, sweet eater, comorbidities, best bariatric surgery is:
 - laparascopic sleeve gastrectomy?
 - laparascopic gastric bypass?

- vertical banded gastroplasty
- lap adjustable gastric band
- 12. About GI lymphoma, false:
 - most common site of extra nodal involvement
 - most are NHL B cell type
 - 5 year survival more than 50 %
 - can't be treated with chemotherapy and radiotherapy?
- 13. All may cause pancreatitis except:
 - hyperthyroidism?
 - hyperparathyroidism
 - hyperlipidemia TG >500
 - cardiopulmonary bypass machine
- 14. Pancreatic pseudocyst, false:
 - infected cyst must be drained internally?
 - to drain cyst internally we must wait for maturation of wall
 - size is no longer an indication of surgery
 - all symptomatic must be treated
 - persistent cyst after 6 wks is not an absolute indication for surgery
- 15. Pancreatic adenocarcinoma, false:
 - 1) 70% in the head
 - 2) 90% ductal
 - 3) in resectable, 20% 5-yr survival
 - 4) p16 mutation is found in more than 90% (this is true)
 - 5) papillary and mucinous cystadenocarcinoma are worse pronosis ****
- 16. Neonatal jaundice 6 hour after birth can be caused by:
 - biliary atresia Appears bw 2-6 wks
 - neonatal hepatitis
 - hemorrhagic disease of newborn?
- 17. Pt with fever, jaundice, and abdominal right upper quadrant pain, all appropriate except
 - MRCP is contraindicated?
 - resuscitation with IV fluids and antibiotics
 - most probably as sequel of GB stone
 - most likely direct hyperbilirubinemia
- 18. All seen with Chron's except:
 - leap pipe? UC
 - serosal involvement
 - skipped lesions
 - cobblestone
- 19. Most common incidental solid liver tumor is:
 - hemangioma?
 - hepatic adenoma

- hepatic carcinoma
- mets
- 20. ITP, false:
 - majority of patients improve after splenectomy
 - spleen is usually palpable?
 - most cases resolve with immunosuppressant
- 21. Most likely to benefit from splenectomy is;
 - hereditary spherocytosis?
 - thalassemia major
 - sickle cell
 - ITP
- 22. OPSI, false:
 - occur in 2% post traumatic splenectomy
 - 50% due to pneumococcus
 - majority occur within first 2 years post op
 - present as non specific flu like
 - mortality is 80%? /
- 23. Diverticulosis, false:
 - bleeding most often from right colon
 - -mortality is 10-20%
- 24. Single most prognostic factor in colon cancer is:
 - nodal involvement
 - tumor size
 - transmural involvement?
 - histological type

Oncology

- 1. Not a sign of local invasion: Arm Edema
- 2. Cystic mass in the breast in a 33 year old woman MANS:
 - Aspiration & Cytology *
 - reassurance and reexamine postmenstrual
- 3. single most important risk factor for Breast Cancer: Age.
- 4. Gynecomastia, false:
 - pseudo gynecomastia can be treated with tamoxifen
 - no increased risk of cancer?
 - testosterone can be used for gynecomastia secondary to testosterone deficiency
 - increase incidence with advancing age
- 5. Elderly Male with lesion on forehead for the last 6 months, nodular with talegectasia and central ulcer, most likely diagnosis:

- 6. Sarcomas, wrong:
 - histology affect prognosis?
- 7. pseudogynocomastia: is 2ry to obesity, no pharmacological management
- 8. Pt with family history of colon cancer (his father , uncle , and brother) the tumor marker in this condition:

APC

• FAP APC kras p53 DCC

BRACA1

BRACA2

Ras oncogen

MSH₂

Cardio-Thoracic

- 1. The atrial septal defect (ASD) most commonly associated with partial anomalous pulmonary venous return (PAPVR) is:
 - A. Secundum defect.
 - B. Sinus venosus defect.
 - C. Ostium primum defect.
 - D. Complete atrioventricular (AV) canal defect.
 - E. Coronary sinus defect.

Answer: B

- 2. Which of the following has the greatest impact on the physiology of tetralogy of Fallot?
 - A. The size of the ASD.
 - B. The size of the VSD.
 - C. The degree of pulmonary stenosis.
 - D. The amount of aortic overriding.

Answer: C

- 3. The congenital coronary lesion most likely to cause death in infancy is:
 - A. Coronary artery fistula.
 - B. Origin of the left coronary artery from the pulmonary artery.
 - C. Origin of the right coronary artery from the pulmonary artery.
 - D. Congenital coronary aneurysm.

Answer: B

- 4. Which of the following are the most frequent complications of intra-aortic balloon counterpulsation?
 - A. Stroke.
 - B. Limb ischemia.
 - C. Arrhythmias.
 - D. Aortic thrombosis.

Answer: B

Vascular Surgery:

1. A 55-year-old woman gives a history of tiredness, aching, and a feeling of heaviness in the left lower leg for the past 3 months. These symptoms are relieved by leg elevation. She is also awakened frequently by calf and foot cramping, which is relieved by leg elevation, walking, or massage. On physical examination there are superficial varicosities, nonpitting edema, and a slightly painful, 2 cm. diameter superficial ulcer 5 cm. above and behind the left medial

malleolus. What is the most appropriate diagnosis?

A. Isolated symptomatic varicose veins.

B. Superficial lymphatic obstruction.

C. Deep venous insufficiency.

- D. Arterial insufficiency.
- E. Incompetent perforating veins.

Answer: C

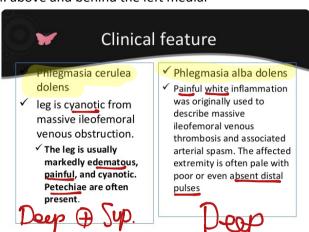
- 2. phlegmasia alba dolens, false:
 - require treatment with LMWH
 - absent distal pulses White
 - limb is blue in color?



- claudication
- ischemic neuropathy
- rest pain
- ulcer
- gangrene
- 4. Which is most lethal coronary anomaly:
 - left-man arising morn pulmonary aftery talkaga)
- 5. Most prognostic in TOF.
 - degree of pulmonary stenosis
- 6 Most likely ASD type with partial anomalous pulmonary venous return:
 - coronary sinus venous
 - septum secondum
 - sentum premina
 - Avernal matermation
- 7. Ejection fraction is defined as:

Stroke volume ratio to end diastolic volume

- 8. Most likely sign indicating pneumothorax:
 - weak lung sounds?
 - dull percussion note
 - shift of mediastinum to same side
 - crepitations
- 9. Most common complication with intra aortic balloon pump:
 - arryhthmias
 - limb ischemia
 - hematoma at site of insertion



stroke?

- aurtic dissection
- 10. Most feared complication after thoracic aortic repair surgery is:
 - paraplegia
- 11. "definitive" to show transection of (forgot the vessel) after trauma?
 - CT?
 - CXR
 - -aortogram/angogram
- 12. Popliteal artery aneurysm, true:
 - 70% bilateral
 - most common peripheral anurysm?
 - likely to present with compression on near nerve and vessels
 - most commonly present with pregnancy
 - if pt have abdominal aortic aneurysm he has 50% risk of having popliteal aneurysm
- 13. Lymphedema, false:
 - filariasis is the most common cause of lymph edema worldwide
 - lymphedema praecox is most common primary lymphedema
 - best viewed by lymphogram
 - weight loss can help to improve lymphedema in obese pt
 - all cases must be managed surgically
- 14. IABP complication: Lower limb ischemia

Pediatrics:

- Hurshsprung whats the wrong?
 Decreased ACh-Esterase on biopsy.
- 2. Tympanic percussion on the left chest w vomiting and scafoid abdomen > left diaphragmatic hernia
- 3. The treatment of choice for neonates with uncomplicated meconium ileus is:
 - A. Observation.
 - B. Emergency laparotomy, bowel resection, and Bishop-Koop enterostomy.
 - C. Intravenous hydration and a gastrograffin enema.
 - D. Emergency laparotomy, bowel resection, and anastomosis.
 - E. Sweat chloride test and pancreatic enzyme therapy.

Answer: C

- 4. A 2.8-kg. neonate with excessive salivation develops respiratory distress. Attempts to pass an orogastric catheter fail because the catheter coils in the back of the throat. A chest film is obtained and shows right upper lobe atelectasis and a gasless abdomen. The most likely diagnosis is:
 - A. Proximal esophageal atresia without a fistula.

- B. Proximal esophageal atresia with a distal tracheoesophageal (TE) fistula.
- C. "H-type" TE fistula.
- D. Esophageal atresia with both proximal and distal TE fistula.
- E. Congenital esophageal stricture.

Answer: A

- 5. The most common type of congenital diaphragmatic hernia is caused by:
 - A. A defect in the central tendon.
 - B. Eventration of the diaphragm in the fetus.
 - C. A defect through the space of Larrey.
 - D. An abnormally wide esophageal hiatus.
 - E. A defect through the pleuroperitoneal fold.

Answer: E

- 6. true about pyloric stenosis:
 - 1) can present as Autosomal dominant condition
 - 2) mostly in first week of life
 - 3) leads to bilious vomitting...
 - 4) tumor can be palpated in most cases
 - 5) if left untreated leads to severe complications in childhood



- esophageal atresia
- pyloric stenosis
- small intestinal volvulus?
- diaphragmatic hernia
- 8. Intussusception, false:
 - mcc of intestinal obstruction btw age of 6-18 months
 - palpable sausage abdominal mass in 80% of pts?
 - ilioceccal is most common type
 - meckles or pyares patch may act as leading points
 - -In ultrasound appear as doughnut sign

General & Misc.

- 1. Rare hernia in females:
 - direct inguinal hernia?
 - indirect inguinal hernia
 - femoral hernia
 - incisional hernia
 - umbilical hernia?







- 2. All absolute contraindications to insert NGT except:
 - confirmed esophageal rupture
 - suspected esophageal rupture
 - esophageal stricture
 - foreign body in esophagus?
- 3. Amino acid most important in improving immunity
 - glutamine
- 4. limit for K in peripheral line:

20 mEg

- 5. False about IV fluids:
 - 1) NaCL has 154 mEq Na & 154 mEq Cl
 - 2) RL is the most physiological
 - 3) hypotonic fluids can increase intracerebral pressure(or edema)
 - 4) colloids can cause volume overload
 - 5)G5W is enough to support nutrition for a fasting patient **
- 6. All given for ttt of pseudo membranous colitis except:
 - metronidazole
 - vancomycin
 - steroids*
 - stop offending antibiotic
- 7. All risk factors for c.difficle infections except:
 - vegetarian?
 - long course of antibiotics
- 8. High velocity penetrating trauma, transverse abdomen at mid umbilicus, which is likely to be injured:
 - small bowel?
 - liver
 - kidney
 - spleen
- 9. Source of infection after inguinal hernia repair is:
 - pt skin?
 - instruments
 - surgeon
- 10. Hypermagnisemia, false:
 - associated with ECG changes consistent with hyperkalemia
 - DTR are exaggerated *
 - levels are parallel with postassium levels
- 11. Pt with crush injury, in respiratory distress, multiple rib fractures, life saving measure is:
 - intubation and mechanical ventilation *
 - cricothyrotomy
- 12. Facial trauma, false:
 - facial fracture can't wait to stabilize the pt?



- 13. Hernia, false:
 - sliding hernia can't be reduced?
 - if reducibly most likely to have positive cough impulse
 - becomes irreducible before strangulation
 - hernia of meckles is called lesser hernia



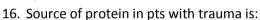
· Intraperut.

To liver

- 14. wrong about soft tissue sarcoma:
 - * retroperitoneal and abdominal mostly metastasize to liver (it's to lung)

SHIEKH

- 15. most important factor for wound healing:
 - 1) vit;.D
 - 2) vit.C
 - 3) carbohydrate
 - 4) caloric intake
 - 5) balanced diet

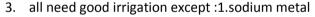


- liver?
- plasma protein
- skeletal muscle

Plastic

- 1. Wrong about Escharotomy for Compartment Syndrome: not usually done when distal pulses are felt.
- 2. most common type of facial cleft:
 - 1.isolated unilateral incomplete cleft lip ..
 - 2.isolated cleft palate







- 3. calcium hydroxide.
- 4.chromium acid
- 4. all are true about cleft palate except: late surgical correction leads to facial growth deformities
- 5. about skin, what is correct
 - 1) skin appendages are mesodermal in origin
 - 2) epidermis is 20% of skin
 - 3)
 - 4)
 - 5) collagen cross-linkage provides tensile strength ** ????
- 6. About inhalational injury, false:
 - best way to diagnose is flexible fiberoptic laryngoscopes?
 - in CO poisoning pulse oxymeter is not reliable
- 7. Electrical burn, wrong:
 - injury result from thermal and non thermal injury
 - high voltage is above 1000 V



- elevated cr, CPK indicate massive injury?
- PET can be used as a quick measure to accurately estimate tissue injury?
- myoglobinurea result in kidney injury
- 8. Compartment syndrome is defined when intracompartmental pressure is above:
 - -40 mmhg
- 9. All true about use of escherectomy and early graft of burn, except:
 - increase incidence of sepsis*
 - decrease hospital stay
 - decrease negative nitrogen balance
 - less contracture
- 10. All help to prevent enlargement of zone of ischemia except:
 - good fluid resuscitation
 - urine output maintained above .5 ml/kg/hr
 - leg dependency to improve blood supply?
- 11. False:
 - nevus of jadasshon has no malignant potential
- 12. Vascular malformation, false:
 - AVM are low flow lesions*
 - capillary malformation result in seizure in brain

Endocrine:

- 1. Most Common Site of Extra-Adrenal Pheochromocytoma is: Abdomen (Organ of ZuckerLandl)
- 2. Which of the following is treated with Radioactive Iodine Ablation: Multinodular Goitre
- 3. Hemithyroidectomy effective for:
 - papillary ca
 - follicular ca
 - medullary ca
 - an aplastic ca
 - Graves' disease
- 4. Pleomorphic adenoma, false
 - most common salivary gland tumor
 - increase risk of malignancy with advancing age
 - ideally treated with total parotidectomy?
 - recurrence treated with radiotherapy?
- 5. pt with conns syndrome and imaging showed bilateral masses on adrenals, next step:
 - 1) FNA
 - 2) bilateral adrenalectomy
 - 3) MIBG
 - 4) venous sampling
 - 5) bilateral radiotherapy
- 6. All cause hypercalcemia except:
 - secondary hyperparathyroidism





- 7. All manifestation of hypercalcemia except:
 - oligurea
- 8. all cause hypercalcemia except:
 - 1) sarcoidosis
 - 2) vit. D toxicity
 - 3) metastatic cancer
 - 4) ..sth causes hypercalcemia too
 - 5) medullary thyroid ca *****
- 9. Most common pancreatic endocrine tumor:
 - inslulinoma
- 10. Neuroblastoma most common mets to:
 - regional LN?
 - lung
 - brain
 - liver
- 11. pt with conns syndrome and imaging showed bilateral masses on adrenals, next step:
 - 1) FNA
 - 2) bilateral adrenalectomy
 - 3) MIBG
 - 4) venous sampling
 - 5) bilateral radiotherapy
- 12. all can be caused by hypermagnisemia except: exaggerated deep tendon reflexes

4th year 2015 Check answers at the end:)

1. -The thyroid lesion that is known for multifocality is: papillary ca

medullary ca

follicular ca

follicular adenoma

anaplastic ca

2. -The best test to localize hyperparathyrooidism:

uptake and scan

sestamibi scan

MIBG scan

techtitium m99

3. -Bilateral hyperplasia of the adrenals (bilateral Conn's) treated with

spironolactone

ketoconazole

PTU

4. -Not a manifestation of Zollinger Elisson's

Duodenal ulcer

Hyperparathyroidism of MEN1

Jejunal ulcer

Migratory rash

diarrhea

5. -Pressure ulcer, which is wrong:

Stage 1 pressure ulcer is blanchable skin after 1 hour of removing pressure

All are colonized with bacteria

Repair by debridement and skin graft usually works

6. -All are benign skin lesions except:

Sebbhoreic keratosis

Spitz nevus

Subdermal nevus

Miltinodular nevus adolescent

Sebacious nevus of Jadasshon

7. -most common soft tissue sarcoma

rhabdomyosarcoma

liomyosarcoma

fibrosarcoma



liposarcoma

8. -About erysepales, all are true except:

Caused by group A strep painful

red, flat, skin lesion

face is a common site treated with penicellin

9. -SSI usually occurs when?

1st post op day

4-5 post op day

10 post op day

30 days post op

10. -Wrong about Crohn's:

bloody diarrhea is a common presentation most common indication of surgery is obstruction the abscence of granuloma doesn't exclude dx crypt abscesses is not pathognomonic

PAISED

11. -Small intestinal tumors, all true except:

Younger age group

malignant tumors have vague symptoms benign lesion usually found incidentally coeliac disease predisposes for small intestinal lymphoma ultrasound not useful in small intestinal tumors

12. -GIST arises from what cell:

Goblet

Interstitial cell of Cajal

Clutchistky cells

13. -Prophilactic antibiotic not indicated in:

hernioplasty

hernioraphy

duct ectasia

oloectomy

14. Which is considered clean surgery:

Coloectomy

Thyroidectomy

15. - Wrong about cholecystitis:

U/S is the practical diagnostic test

U/S can't defferentiate between calculus and acalculus

Ischemia is the cause of calcalus cholecystitis

We use antibiotics in all patients

Emphasematous cholecystitis needs emerent intervention

16. -The cancer marker used for recurrence of non-seminomatous testicular cancer is:

CEA

CA19-9

CA125

AFP

17. -The best diagnostic test of achalasia is:

EGD and biopsy

Barium swallow

Manometry

24-h pH monitoring

18. -A patient has difficulty in swallowing hard food (another question), what is the diagnostic test?

barium swallow

manometry

24-h pH monitoring

24-h pH monitoring EGD with biopsy— \ \(\text{Omon} \)

19. -All true about hepatic adenoma except:

More associated with complications than hemangioma

Associated with the use of OCP

The mass may regress with pregnancy

20. -All contribute to bad wound healing except:



radiation

continuous pressure

immunosuppression

edema

21. -Old are risk factors of dehiscence except: radiation



DM

malignancy

anemia

22. -All are risk factors of wound infection except:

DM

immunosuppression

vit C defeciancy

young age

23. -One is not a cause of thromboembolism:

hemophilia

OCP

BMI>30

Old age

malignancy

24. -The most significant sequele in a patient diagnosed with DVT:

stasis ulcer

pulmonary embolism

arterial occlusion

25. -Does not improve claudication

excercise

angioplasty

aspirin

bypass

smoking cessation



26. -A 50 year old male with a posterior neck lymph node of weeks duration, what is MANS:

FNA biopsy

start on atibiotics and wait

excisional biopsy

incisional biopsy

27. - A patient with multiple fractures and hypovolemic shock, what is the initial

resuscitation:

blood

fresh frozen plasma

hypertonic salina

ringer lactate

albumin

28. -Zone 3 neck injury, hemodinamicaly stable, with obvious bleeding, what is the next step:

ICU admission and monitoring for 24h immediate exploratin

Angiogram

EGD and bronchoscopy

29. -Which of the follwing properties is common in benign tumor:

capsular invasin

high mitotic activity

cells of different sizes and shapes

resembles normal structure tissue

- 30. -What supports the use of synthetic valve over the use of biologic valve:
 - a patient with thrombophila
 - a 30 year old female willing to get pregnant
 - a 75 year old co-morbid male
 - a 30 year old healthy male
- 31. Wrong about ASD:

the murmur is produced by the flow of blood throuh the ASD most common in septum secundum all symptomatic ASD patients are candidates for surgery patient with pulmonary htn are not reommended for surgery

32. -PDA, all true except:

associsted with maternal rubella decrease of the murmur is a bad prognostic factor

LV hypertrophy precedes RV hypertrophy

most of cases close spontaneuosly after neonatal period one third die by age of 40 if not corrected

33. -Most common etiology of thoracic aortic aneurysm

HTN

atherosclerosis

cystic medial necrosis marfan

34. -Boehaarve's syndrome, the place where the esophagus is ruptured is: cricothyroid level

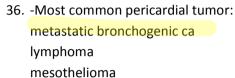
mid-esophagus posteriorly

distal esophagus posteriorly

abdominal portion of esophagus posteriorly

35. -All of the following are true about mediastinal masses except: thymoma ois associated with muscle weakness usually most common mediastinal mass is metastatic ca

thymoma is a posterior mediastinal mass





37. -Which of the following is least likely to cause middle mediastinal mass:

Neoroblastoma
lymphoma
thymoma
ganglioneuroma

38. -Acute vascular injury, one is true:

Paralysis and parasthesia are found in critical limbs pre-op angio is mandatory before repair arterial injuries should be repaired before othe injuries presence of doppler signals exclude vascular injury

39. - Wrong about lymphedema:

lymphedema tarda is a secondary lymphedema m.c.c of secondary lymphedema worlwide is filariasis (read about 1ry and 2ry lymphedema)

40. -True about claudication:

the pain is reproducible and due to ischemia

41. -Plain supine x-ray in small intestinal obstruction, what is the finding peripheral location air-fluid levels huastration valvulae conniventes (= plica circularis)

42. -A fixed mass with il-defined borders in the reast, all are in ddx except: fat necrosis



fibroadenoma

abscess

breast ca

43. -Unilateral bloody nipple discharge goes more with:

paget disease if the nipple

intraductal carcinoma

intraductal papilloma

duct ectasia

inflammatory carcinoma



44. -All are true about spontaneouos tension pneumothorax except:

dyspnea

tracheal deviation towards the affected side

decreased air entry to the affected side

45. -False about pneumothorax (another question)

dypnea

hyperresonance

tachycardia

hypotension

collapsed neck veins

46. -All are true diverticulae except:

esophageal traction diverticulum

secondary duodenal

solitary caecal diverticulum

Meckel's divericulum

Zincker's diverticulum

47. -The highst environmental risk factor for pancreatic cancer is:

alcoho

smoking

radon exposure

48. -Not a symptom of pancreatic head ca:

weight loss

clay-colored stool

dark urine

back pain

Diabetes insipidus

49. - A young man presented with a lump in the anal region for 2 weaks, continuous throbbing pain, not related to defecation, fever and chills, most likely dx is:

perianal abscess

fistula in ano

haemorrhoids

50. -A patient with acute perianal fissure, all are accepted lines of treatment except:

lidocaine

topical calcium channel blocker

lateral internal sphincterotomy

glyceryl nitrate

stool softener

- 51. -Body response to major trauma/shock includes one of the follwing:
- X increased Na and water secretion
- increased renal perfusion

hyperkalemia

- X hypoglycemia
- X decreased cortisol production
- 52. -Compared to the ICF, the ECF has one of the following: lower chloride

higher potassium

lower protein

lower pH

bigger in volume

53. Which of the following is true about femoral hernia:

More common in middle aged and older women

can be above and medial to the inguinal ligament

54. Cut off point of malignancy in pancreatic cancer cytology is:

10 mitotic figures/ high power field

20 mitotic figures/ high power field

30 mitotic figures/ high power field

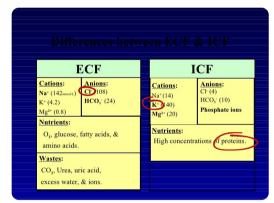
40 mitotic figures/ high power field

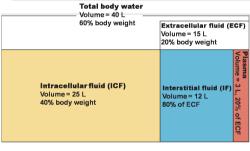
50 mitotic figures/ high power field

55. What is the volume of distribution of crystalloids

ECF

ICF







interstitial

trasncellular fluid



56. -About body fluids, all are true except:

in a 70 kg standard healthy male, TBW is 60%

✓ ICF is 2/3 TBW, ECF is 1/3

Na is the main cation contributing to serum osmolarity

Majority of Calcium in body fluids is mainly intracelluler

57. -Wrong about lung cancer:

65% over-all 5 year survival

adjuvant chmotherapy is useful in advanced disease small cell carcinoma, chemotherapy is the mainstay of treatment radiotherapy combined with chemotherapy is conserved to stage IIIb and IV surgical intervention in early disease is associated with better prognosis

58. -What is the incidence of bilateral pheochromocytoma in pediatrics:

10%

25%

50%

75%

, 5, 6

all cases are bilateral



59. -What is the mechanism of orthostatic hypotension in pheochromocytoma? increased heart rate decrease contractility arrhythmia

decreased venous return

60. -Most common thyroid cancer:

papillary

familial

medullary

anaplastic

61. -Most potent inflammatory mediators are:

cytokines

prostaglandins

TGF

leukotriens

interferon

62. -The enzyme that is autoactivated to its active form is:



1 JAMAN!

enterokinas

CCK

chemotrypsin

gastrin

trypsin

63. -after a CVA, an elective surgery must be delayed for how long?

7 days

6 weeks

3months

6 months

1 year

64. -Which of the following is found in early septic shock?

increased CO

increased cardiac oxygen consumpotion

decreased SVR

decrease to variable right atrial pressure

65. -A neonate with a palpable left flank mass, what is the most probable dx:

Wilm's tumor of the left kidney

Ureteropelvic obstruction

Visicoureteral reflux

Ureterovesical obstruction

66. -Least common cause of neonatal intestinal obstruction is:

Incarcerated hernia

Intussusseption

Hirschprung's disease

Duoenal atresia

67. -Most common cause of intestinal obtruction in the age of 2 years is:

Intussusseption

Hirschprung's disease

Foriegn body

Pyloric stenosis

68. -Pyloric stenosis which is wrong:

At the end of the first month usually

Projectile vomitting

Bilious vomitting

Failure of relaxation

69. -Most common presentation of Hirschprung's disease after the neonatal period (delayed)

Abdominal pain

Distention and weight loss

Constipation

70. -What is the medical contraindication of circumcision:

Phemosis

Enuresis

Hypospadias

Reflux

Recurrent UTI's

71. -Most common CXR finding in foreign body aspiration in children:

Atelactasis

Air trapping

Pneumonia

Infiltrates

Increased AP diameter

72. -Best way to evaluate dehydration in children:

Electrolytes

Blood pressure

Heart rate

Mental status

73. -Undescended testis, all true except:

Laparoscopy is indicated in non-palpable testis

Increases risk of Infertility

Increase risk of torsion

By age of 1 year, less than 50% will spontaneously descend

74. -In testicular torsion, all are true except:

Most common age is neonatal and perpubertal

Can present with nausea and vomitting but with less testicular symptoms

Doppler U/S is mandatory for every encountered case

A 6 hour delay in correction will decrease the viability of testis

Orchidopexy of the contralateral testis is indicated

75. -All are true about spleen except:

more than 50% of it is intraperitoneal

Palpation started in the right iliac fossa

CML is an established cuase of splenomegaly

Most important risk after splenectomy is hemorrhage

76. -Wrong about inguinal hernia:

Less common in premature infants

77. -Double bubble sign is indicative of obstruction in which segment:

duodenum

jejunum

ileum

caecum

78. -Graft is not applicable if the recepient area is infected with:

P.aureoginosa

Staph aureus

Group A strep

E.coli

Klebsiella

79. -Not a common site of BCC

upper lip

cheek skin

lower lip

around eye

80. -Wrong about BCC

most common type is nodular

Morphea is the highst type to recurrence

young age is risk factor

locally invasive

81. -SCC, which is wrong:

Keratoacanthoma may resemble SCC clinically

Ulcerative type is agrassive and highly locally invasive

50% of leukoplakia eventually turn into SCC

HPV and HSV skin lesions have tendancy to turn into SCC

82. -Wrong about melanoma:

less and better prognosi in females

most common type is superficial spreading nodular type in poor prognosis

Radiotherapy in the mainstay of treatment

83. -All are true about soft tissue sarcoma Fibrosarcoma is resistant to chemo and radiotherapy Soft tissue sarcoma has capsule that we shouldn't remove during surgery 50% in extremities

84. -Wrong about cleft lip and palate: isolated cleft lip has incidence of 0.5/1000 live birth cleft lip is more common in females eustachian tube dysfunction is due to poor insertion of palatine muscle most common side effect of cleft palate repair is fistula

85. -Most common of cleft palate and lip is: unilateral isolated incomplete cleft lip unilateral isolated cleft lip and alveolus cleft palate unilateral complete cleft lip combined cleft lip and palate

86. -Wrong about hyperproliferative wound healing: equal in males and females keloid is more common in blacks keloid scar has TGF-beta hyoertrophoc scar increased with older age

87. -Wrong about vascular anomolies:

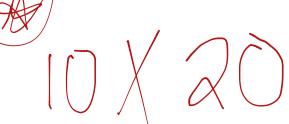
Vascular malformation grows proportionally as a part of the body then convolutes at

older age 88. -About acute burn management, all are true except:

bronchogenic pneumonia is the most common cause if death CO poisoning is treated with 100% oxygen causes hyponatremia and heperkalemia 1% sulfadiazine is a topically applied antibiotic that has spectrum against g+ve and g-ve

bacteria the initial objective of treating chemical burns is to "neutralize" them

89. -11 month old infant, weighs 10 kg, has a 20% TBSA burn, what is the fluid therapy to give:



4 ml/kg/1%TBSA RL 3 ml/kg/1%TBSA RL+ D5W for maintainance

90. -A 24 year old healthy male, undergoing hernia repair at 12 midday, he started fasting at midnight (12 hours fasting), what is the maintainance fluid therapy:

1250 ml NS+ 500 ml D5W

1250 ml D5W+ 500 ml NS

1000 ml D5W NS+ 2500 ml RL 1000 ml RL + 2500 ml D5W

91. -10 kg infant, 11 month old, temperature 38 c, what is the maintainance fluid per day? 300 ml

500 ml

800 ml

800 1111

1200 ml

1500 ml

92. -What is transluminant:

scrotal hernia

epididymal cyst

hematocele

testicular tumor

93. -Which is true about congenital diaphragmatic hernia:

mostly on the right side

usually associated with oligohydramnios

the major cause of death is pilmonary hypoplasia

ECMO (extracorporial mechanical oxygenation) is indicated when PaO2 is below 20

94. -What is the metabolic change associated with excessive vomitting?

Hypochloremic hypokalemic metabolic alkalosis

Hyperchloremic hyperkalemic metabolic alkalosis

Hyperchloremic hyperkalemic metabolic acidosis

Hypochloremic hypokalemic metabolic acidosis

95. -Wrong about Hirschprung's disease:

more common in females

full thickness biopsy is the defenitive diagnostic test agangliosis in the myenteric and submucosal plexus can involve the small intestine rarely

96. -Normal patient underwent a successful surgery, he is on NPO and maintainance fluid

post-op. At which day post-op will the protein start to be metabolized?

5

7

10

13

15

97. -Initial step in securing airways of a multiple trauma victim:

Oropharyngeal airways cuffed endotracheal tube uncuffed endotracheal tune

suctions debris and elevate mandible

tracheostomy

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Surgery final exam answers 21/5/2015



- 15. We use Abx in all patients (not very sure)
- 16. AFP
- 17. Manometry
- 18. EGD+biopsy (not very sure)
- 19. May regress in pregnancy
- 20. Old age (According to Dr.Mohtaseb in lectures)
- 21. Anemia
- 22. Young age
- 23. Hemophilia
- 24. PE
- 25. Aspirin
- 26. FNA (not very sure, the answer maybe Abx and wait because it is a lymph nodes and 2 weeks, the rule we know is: take FNA biopsy of all posterior triangle masses)
- 27. RL
- 28. Angiography (Dr. Ayman Mismar slides: neck injuries)
- 29. Resembles normal tissue (not very sure)
- 30. 30 YO healthy male
- 31. Murmur is of blood flow through ASD (it is through pulmonary art)
- 32. LVH precedes RVH
- 33. Atherosclerosis (cystic medial necrosis is the most common in ascending aorta, the question is about thoracic aorta)
- 34. Distal esophagus posteriorly
- 35. Thymoma is posterior mediastinal mass

- 1. Medullary (don't know why not papillary)
- 2. Sestamibi
- 3. Spironolactone
- 4. Migratory rash
- 5. Repair by debridement and graft (it should be flap)
- 6. Sebacious nevus of Jadasshon
- 7. According to Washington's: most common is fibrous histiosarcoma 45%, followed by liposarcoma ~20% fibrous histiosarcoma and fibrosarcoma were one entity in the past (indistinguishable), so if the question was in 1990 the answer would be fibrosarcoma -_-, nowadays fibrosarcoma is rare.
- 8. Red, flat lesions (they are raised)
- 9. 4-5 days
- 10. Bloody diarrhea is a common presentation
- More common in young age (according to medscape)
- 12. Interstitial cell of Cajal
- 13. Herniorraphy (no foreign body, no established infection)
- 14. Thyroidectomy

Surgery final exam answers 21/5/2015

36. Mets bronchogenic ca LOW PLASMA VOLUME, so probably the answer is decreased venous return 37. Ganglioneuroma 60. Papillary 38. Paralysis and parasthesia in critical limbs 61. Cytokines 39. Lymphedema tarda is secondary lymphedema 62. Trypsin 40. Reproducible/ischemia 63. 6 wk 41. Valvulae conniventes 64. decreased SVR 65. Ureteropelvic obstruction 42. Fibroadenoma 43. Intraductal papilloma 66. Intussusseption (remember that intussusseption is not neonatal) 44. Tracheal deviation towards the affected side 67. Intussusseption 45. Collapsed neck veins 68. Bilious vomiting 46. Zincker's 69. Constipation 70. Enuresis 47. Smoking 48. DI 71. Air trapping 72. Weighing before and after (because 80% of 49. Perianal abscess the baby is water, but not sure) 50. Lateral internal sphinchterotomy 73. By the age of 1 year 50% are descended (it 51. Hyprekalemia (not very sure) is 80%) 52. Lower protein 74. Doppler U/S is mandatory 53. More common in middle aged and older 75. Most imp risk is hemorrhage females 76. Less common in preterm infants 54. 20 MF/HPF (Dr. Ayman Mismar slides) 77. Duodenum 55. ECF 78. Psedomonas 56. Majority of calcium 79. Lower lip 57. 65% 5-year survival 80. Young age is a RF 58. 25% (according to Dr. Ayman Mismar slides) 81. 50% of leukoplakia eventually turn into SCC 59. According to Dr. Ayman Mismar slides it is

Surgery final exam answers 21/5/2015

83. I don't know 84. I don't know 85. I don't know 86. Hypertrophic scar with older age 87. Vascular malformation convolutes 88. The goal in chemical burn is to neutralize (it is to dilute) 89. I don't know 90. 500 NS + 1250 D5W 91. 1200 (not very sure) 92. Epidydimal cyst 93. Most common cause if death is pulmonary hypoplasia 94. Hypochloremic hypokalemic metabolic alkalosis 95. More common in females 96. 7 (not very sure) 97. Suction and elevate mandible (this is jaw

thrust)

82. Radiotherapy is the mainstay

6th year surgery final 2014

1. Not a cause of hypercalcemia
A) Primary hyper PTH
B) Secondary Hyper PTH**
C) Tertiary Hyper PTH
D) Ectopic
E) Vit D intoxications
2. A case of female having pancreatitis was found to have high PTH Normal urinary excretion of Ca++ She had a sestamibi scan showing a hyperactivity below the right thyroid lobe, what to do next:
A) Exploration of all 4 parathyroid glands
B) Excision of the single adenoma??
C) Hemithyroidectomy with exploration
D) Total thyroidectomy with right parathyroidectomy
3. How to differentiate malignant from benign thyroid nodules: A) FNA biopsy** B) U/S
4. All consistent with familial medullary thyroid carcinoma except: A)bilateral
B) Multifocal
C) C-cell hyperplasia
D) Ret proto oncogene mutation
E) Raf mutation**
5. All are indications for surgery in an asymptomatic pt with hyper PTH except: A) Nephrolithiasis
B) Decline in renal function
C) Age>65 **
D) Depression

E) Osteoporosis

6. Most common malignancy of submandibular gland: A) Adenoid cystic adenoma** B) Mucoepidermoid carcinoma C) Acinar cell tumor

- 7. Tumor that only involves the parotid:
- A) Warthin's tumor**
- B) Mucoepidermoid



- 8. Parotid tumor with history consistent of facial nerve palsy since 6 months, next step:
- A) CT
- B) MRI to localize the facial nerve
- C) FNA??
- D) Incisional biopsy
- 9. Female with history of recurrent submandibular swelling upon eating for 5 months, tender on examination, dx:

Aweer.

- A) Sialolithiasis**
- B) Acute sialadenitis
- 10. Patient with recurrent swelling upon eating, after imaging was found to have submandibular Stone 0.5 cm, 1 cm away from the opening of the Wharton, management is:
- A) Intra-oral removal**
- B) Shock wave Lithotripsy
- C) Antibiotics for 2 weeks
- D) Advise good oral hygiene
- 11. Conn's syndrome all true except:
- A) High plasma renin**
- B) Hypernatremia
- C) Hypokalemia

12. Adrenal insufficiency (addisonian crisis) wrong:

- A) Hypertension**
- B) Dehydration
- C) Fever
- D) Nausea
- E) Vomiting

13. Drug used for treatment of Conn's in pts with bilateral hyperplasia:

- A) Spironolactone**
- B) Mitotane
- C) Prednisolone
- D) Ketoconazole
- E) Metyrapone

14. What is true regarding embolic lower limb ischemia?

- A) Embolectomy by a Fogarty catheter should be done??
- B) No need for pre-op anticoagulation
- C) Dark blood after revascularization indicates success (Eshi zy heik)

15. Chronic mesenteric ischemia wrong:

- A) Female more than male?
- B) Pts with venous ischemia require lifelong anticoagulation??
- C) MCC of non-occlusive is IHD
- D) MC source of emboli is from the heart

16. Giant cell arthritis false:

- A) Might involve visceral vessels
- B) More common in elderly females
- C) Presents with jaw claudications
- D) The most common form of vasculitis??
- E) Temporal artery biopsy is Essential for diagnosis??

17. The most common cause of poor graft take:

- A) Vascular degeneration??
- B) Infection
- C) Hematoma formation** (according to Washington manual, but in the dossier the Dr, mentions that the most imp cause is poor vascularity)
- D) Sheering forces

18. Regarding total body water content, true:

- A) Decrease steadily with age**
- B) More in females and obese
- C) Less water content with increased muscle bulk
- D) Wide physiological variation in water content in the single person
- 19. Twelve years old male, presented to the ER complaining of testicular pain that started during soccer practice. He denied trauma. On examination the right testicle is tender, red, and edematous. The patient had vomited once. Dx:
- A) Right testicular torsion**
- B) Acute epididymoorchitis
- C) Idiopathic testicular edema

20. Doesn't need evaluation for intersex:

- A) Bilateral scrotal testes with small penis**
- B) Phenotypically female with fused labia
- C) Male phenotype with bilateral impalpable testes
- D) Proximal hypospadias with perineoscrotal fusion

21. SPECIFIC complication of Neonatal circumcision:

- A) Meatal stenosis** (not sure)
- B) Excessive skin removal
- C) Inadequate skin removal
- D) Bleeding
- E) Infection

22. Gastroschesis wrong:

- A) Can be closed primarily (usually need a flap)**
- B) 80-90% good prognosis
- C) Associated with less anomalies
- D) Defect is to the right of umbilicus
- E) Caesarean section delivery is mandatory?

23. Anterior thigh mass 6 cm fixed to underlying tissue but the skin above it is mobile, next step:

- A) Excisional biopsy??
- B) Incisional biopsy??
- C) Amputation!!!

24. Volvulus wrong:

- A) Ischemia occurs with 180 degree rotation??
- B) Is a common cause of intestinal obstruction in Jordan???
- C) You should attempt sigmoidoscopic derotation if no signs of bowel necrosis
- D) If bowel necrosis or gangrene immediate laparotomy

25. Gastric cancer Q, what is wrong:

- A) CEA and some other tumor marker are used as diagnostic tests**
- B) Stage 3 is potentially resectable
- C) Proximal gastric tumor might present with dysphasia

26. Case of acute cholangitis, which is wrong:

- A) Hematogenous spread of the organism via portal vein***
- B) Classical presentation is abdominal pain, fever and jaundice
- C) Treat by antibiotics, monitoring sepsis, and biliary drainage
- D) If suppurative could also present with hypotension and altered mental status
- E) Most commonly caused by biliary stasis and obstruction

27. Oral cancer all are risk factors exceptA) SmokingB) AlcoholC) Asbestos??

- D) Sun exposure??
- E) Tobacco chewing

28. Snake bite does all of the following except:

- A) IV Antibiotics**
- B) Anti-tetanus toxoid
- C) Remove necrotic skin
- D) Anti venom to all patients

29. Pseudomembranous colitis, all are risk factors except:

- A) Broad spectrum antibiotics
- B) Steroids
- C) PPI**
- D) Cigar smoking
- E) Malnutrition

30. Question about UC and crohn's, which is wrong:

- A) Crohn's 50% associated with caseating granuloma**
- B) Cryptitis and crypt abscess is pathognomonic for UC

31. Pancreatic ca tumor marker:

- A) CA19-9**
- B) HCG
- C) ca 125

32. Hepatocellular carcinoma tumor marker:

A) AFP **

33. Female taking OCP presenting with RUQ, US shows 4 cm adenoma, what is your next step:

A) Stop OCPs and observe**

34. In achalasia, most sensitive test:

- A) Bird peak on Barium swallow
- B) Manometry showing failure of complete relaxation of LES with swallowing**
- C) Biopsy
- D) Aperistalsis of cervical esophagus

35. Bariatric surgery, Band ligation, what is wrong:

- A) Banding shows comparable results with bypass in relation to the extent of weight loss**
- B) Dumping syndrome is not a significant complication
- C) Poor choice for sweet eaters
- D) Results in less leak complications
- E) Something about recurrence

36. Best indicator to anticipate hungry bone syndrome after parathyroidectomy is:

- A) Alkaline phosphatase??
- B) Preoperative Ca levels
- C) Preoperative phosphorus levels
- D) ESR
- E) CRP

37. Indications for surgery in UC EXCEPT:

- A) Toxic megacolon
- B) Massive bleeding
- C) Obstruction
- D) Primary sclerosing cholangitis (PSC) **
- E) Sepsis related colitis

38. In regard to surgical prophylactic antibiotics what is wrong:

- A) Should be given before anesthesia
- B) Occasionally another dose can be administered during the operation
- C) Can be given for 2-3 days post-op. **
- D) We can use more than one antibiotic
- E) Choice depends on the type of surgery being performed

39. Wound infections, what is wrong:

- A) Infection in 1st 24 hours is caused by staph ** (only strept and clostridia can present in first day)
- B) Fresh clean wound is a good indicator of hospital aseptic techniques

40. Associated with HIV:

A) Kaposi sarcoma**

41. Necrotizing fasciitis what is true:

- A) Mortality reaches 50%??
- B) Often polymicrobial??
- C) Muscles can be involved??
- D) Most important step in management is antibiotics

42. Child Pugh score contains all EXCEPT:

- A) Ascites
- B) PTT**
- C) Total bilirubin
- D) Encephalopathy
- E) Albumin

43. Protein not synthesized in the liver

- A) Factor II
- B) Transferrin
- C) Ferritin
- D) Von Willebrand factor**

44. Case of complete transposition of great vessel, what is wrong:

- A) Aorta originated from Right ventricle
- B) Pulmonary Artery originated from left ventricle
- C) Two separated circles
- D) Surgical correction at preschool age **

45. Most common cardiac anomaly associated with Down syndrome

- A) VSD
- B) ASD
- C) AV septal defects** (another name of endocardial cushion defect)

46. Popliteal artery aneurysm, true:

- A) Mostly bilateral**
- B) More in females
- C) Commonly ruptures

47. Diabetic pt with diabetic foot suddenly develops hotness and redness in mid foot:

- A) Acute charcot joint**
- B) Gout
- C) Bone fracture

48. Most common stimulus for ulcer in the foot of a diabetic:

A) Repetitive trauma due to loss of sensation **

49. Insulinoma all true except:

- A) Improves upon giving glucose
- B) Most rule out sulfonylurea
- C) Hypoglycemic symptoms with fasting or exercise
- D) Low C-peptide**

50. All are actions of cytokines except:

- A) Hypoferritinemia**
- B) Septic shock
- C) Trigger CNS to cause fever
- D) Cellular proliferation in wounds healing

51. TNF-□, all are true except:

- A) It acts as an anticoagulant when present inside the circulation??
- B) Acts as angiogenic factor during wound healing??
- C) Secreted by inflammatory cells and cancer cells
- D) Release is stimulated by IL1

52. All are needed for cadaveric renal transplantation except:

- A) ABO compatibility
- B) Reversible brain injury**
- C) Adequate renal function for Age
- D) Negative cross match
- E) Absence of transmissible diseases in the donor

53. Infra renal abdominal aortic aneurysm false:

- A) Concomitant thoracic artery aneurysm is found in 60% of cases**
- b) Risk of rupture is more than 60% when it exceeds 8 cm

54. Question about ABI, which is false:

- A) In non diabetic patient, sensitivity 97% and specificity 100%
- B) In diabetic specificity is down to 40% due to non compressibility
- C) Exercise ABI is a good diagnostic modality or something
- D) When taking the right ankle ABI, you should take the right brachial BP regardless of BP in left arm

 ** (you take the higher BP)

55. A case of a 55 years old man with persistence medial venous ulcer since a year, next step:

- A) Biopsy it
- B) Venography
- C) Doppler of deep system and superficial one ***
- D) Venography of pelvic veins

56. All of the following are side effects of radiation exposure except:

- A) Lymphocytosis**
- B) Telangiectasia
- C) Tissue necrosis
- D) Increased risk of skin SCC



57. Most common condition that makes you change your mind about using chemotherapy:

- A) Hematological suppression
- B) Pulmonary fibrosis
- C) Renal injury
- D) Hepatotoxicity
- E) GI ulceration

58. All are important initial management in a patient with flame burn to restore the borderline area of ischemia except:

- A) Keep urine output above 2cc/kg/hr**
- Put the legs in dependant position??
- C) You need good fluid replacement to maintain perfusion
- D) Good oxygenation should be provided to the patient

59. Necrotizing enterocolitis is associated with all of the following except:

- A) High vitamin A??
- B) Premature baby
- C) Milk formula instead of breast feeding
- D) Sepsis
- E) Umbilical catheterization

60. The lifetime risk of foot ulceration in persons with diabetes is: A) 1-2% B) 5-10%

D) 25-50%

C) 15-25%**

E) >50%

61. Most common cause of death after renal transplant:

- A) Atherosclerotic complications**
- B) Operative technique
- C) Graft rejection
- D) Infection

62. Regarding CABG, true:

- A) Increased mortality with increased number of stenosed arteries??
- B) Females have less mortality rate after CABG than males
- C) 10 year survival after CABG is 75%
- D) Should be done within 1 week after the acute coronary event??

63. Gallbladder function all true except:

- A) Absorption of water
- B) Absorption of H??
- C) Absorption of Na
- D) Absorption of CI
- E) Secretion of glycoprotein??

64. to compensate Gastric loss, we use:

- A) Ringer lactates
- B) Normal saline
- C) Half saline with K??
- D) Half saline??
- E) D5W

65. DNA viruses associated all except:
A) Burkitt's
B) Cervical
C) Testicular**
D) Nasopharyngeal
E) HCC
66. Patient came after RTA he complains of SOB but patent airway. On examination he had hyper-resonance on the right lung, tachycardia and hypotension also, best next step is:
A) Urgent CXR
B) Needle thoracostomy***
C) IV fluids
67. All are boundaries of the femoral ring except:
A) Femoral vein
B) Femoral artery **
C) Lacunar ligament
D) Arcuate ligament
E) Inguinal ligament
68. FB aspiration, all are possible CXR findings except:
A) Normal CXR
B) Unilateral hyperinflation
C) Unilateral atelectasis
D) Increased AP diameter**
E) Pulmonary infiltrates
69. More associated with breast malignancy??

A) Atypical ductal hyperplasia**

B) Sclerosing adenosis

C) Duct ectasiaD) Fibroadenoma

70. Wilms tumor most common presentation:

- A) Abdominal mass**
- B) Hypertension
- C) Hematuria

71. Test for ulnar nerve injury:

- A) Abduction of fingers**
- B) Extension of fingers
- C) Flexion of fingers
- D) Flexion of wrist
- E) Extension of wrist

72. Patient on TPN suddenly became glucose intolerant:

- A) DM
- B) Sepsis??
- C) Low zinc
- D) Addisonian crisis

73. Suppurative hidradenitis, which is wrong:

- A) Eccrine origin??
- B) Rare before puberty
- C) More in blacks
- D) Potential for malignancy??
- E) If extensive it might need surgical excision

74. Behcet disease, which is wrong:

- A) 50% with vasculitis
- B) Hemoptysis
- C) No pathognomonic test for it
- D) Arterial thrombosis more common than venous**

75. Popliteal aneurysm, true:
A) Most common peripheral aneurysm **
76. Best to confirm diagnosis of dissecting aneurysm
A) Wide mediastinum on CXR
B) Chest CT
C) +ve Aortogram??
D) Fracture of 1 st rib
77. A 22 years old boy with a submandibular and axillary enlarged L.N, plus splenomegaly best next step:
A) CT abdomen
B) FNA
C) Open tissue biopsy***
78. Compartment syndrome pressure to do fasciotomy:
A) 5
B) 10
C) 15
D) 40**
E) 60
79. wrong about colonoscopy:
A) Withdrawal time between 6 and 10 minutes??

80. Surgical repair of undescended testicle done at

E) Incidence of perforation is higher after polypectomy

B) Can be used with or without sedation??

D) Perforation is an absolute C/I

C) Comparable results with virtual colonoscopy??

A) 1 year**

81. Hypertrophic scar, false:

- A) More common in females??
- B) Can't be differentiated from keloid scar by histology??
- C) Follows a natural course of growth followed by spontaneous regression
- D) Could be Resolved with surgery when done at proper time??
- E) Occurs on flexor surfaces??

82. Woman with breast cancer, presented with altered sensorium, upon lab investigations Calcium was 15 mg/dl, which of the following is LEAST appropriate:

- A) Dexamethasone and call for Oncology consult
- B) IV inorganic phosphate
- C) Oral phosphate??
- D) IV hydration
- E)furosemide IV

83. Massive blood transfusion, false:

- A) More than 10 bags within 24 hours
- More than 2 blood volumes within 24 hours??
- C) Dilutional thrombocytopenia
- D) Dilutional coagulopathy

84. Platelet transfusion, false:

- A) Benefits ITP patients**
- B) When less than 50,000 bleeding complications are increased
- C) Spontaneous bleeding can occur when less than 10,000
- D) Each unit raises the platelet count by 10,000

85. Torticollis, which muscle is involved:

- A) Sternocleidomastoid**
- B) Trapezius
- C) Platysma

86. Patient with acute appendicitis, the least possible ddx:

- A) Acute pancreatitis**
- B) Ovarian cyst
- C) IBD
- D) Meckel's diverticulitis
- E) Ectopic pregnancy

87. Cleft palate, wrong:

- A) Swallowing is normal
- B) Hearing loss due to infections
- C) Delayed repair leads to facial deformity**
- D) due to failure of fusion of palatine shelves

88. Pyloric stenosis, which is wrong:

- A) Equal loss of both sodium and chloride **
- B) Patient has hypochloremic hypokalemic metabolic alkalosis
- C) Clinical exam and labs is the best way to assess dehydration
- D) Before surgery you first correct the electrolyte abnormalities
- E) Paradoxical aciduria occurs with severe dehydration

89. Not a finding in locally advanced breast CA:

- A) Arm edema**
- B) Skin dimpling
- C) Nipple inversion

90. Colon cancer, chemotherapy given in all except:

- A) Lymph node +ve
- B) T4
- C) Tumor size > 4cm**
- D) Lymphovascular invasion
- E) Liver mets

91. about skin, true:

- A) Collagen imparts tensile strength**
- B) Epidermis is vascular
- C) Skin appendages are mesodermal
- D) Epidermis is more than 20%

92. Not a hard sign of extremity vascular injury:

- A) Absent dorsalis pedis pulse
- B) Pulsatile hematoma
- C) External bleeding
- D) Ischemia signs and symptoms
- E) Neurological deficits ***

93. Woman with melanoma, which indicates prognosis

A) Depth of invasion**

94. Qs about gastric outlet obstruction, what is wrong

- A) Digital gastric cancer causes 35% of cases??
- B) Nowadays more commonly caused by benign lesions
- C) Succussion splash should be elicited
- D) Endoscopy should be used to diagnose it and find the underlying cause
- E) Pancreatic related GOO can be treated medically??

95. Qs about lipase and amylase, what is wrong

- Serum amylase starts to rise 2 hours after pancreatitis?
- B) Increased amylase can be from other sources than pancreatitis
- C) If uncomplicated, amylase starts to disappear 3-5 days after
- D) Hyperlipidemia can affect the assay of lipase
- E) Lipase is more sensitive to alcoholic pancreatic than amylase??

96. Qs about meckel's diverticulum, which is wrong:

- A) Fresh bleeding
- B) Causes Painful hematemesis**
- C) Contains gastric mucosa
- D) Contains pancreatic mucosa

97. Qs about congenital heart problem, the one that most commonly causes death in infancy:

- A) Left coronary from the pulmonary
- B) Right coronary from the pulmonary
- C) Congenital coronary aneurysm
- D) Coronary fistula
- E) Right coronary from left coronary

98. About acute pancreatitis what is wrong:

- A) Gall bladder stones including microlithiasis is MCC worldwide
- B) Alcohol is responsible for 30% of cases in Jordan ***
- C) Incidence following ERCP is 6%

1.neuroblastoma worst	prognosis	according	to
site is:			

A)cervical

B)abdominal

C)mediastinal

D)

E)site isn't associated with worsening of prognosis

2.most associated with DVT:

A)Heterozygous Factor V

B)OCPs

C)APS

D) Heterozygous ...

E)

3. Hirschsprung's disease, what's wrong:

A) rectal biopsy is full thickness biopsy

B) abdominal distention and constipation are the usual presentations

C)definitive diagnosis by suction biopsy which shows lack of ganglionic nerve cells

D)barium enema will show a transitional area between the distal aganglionic part and the proximal DILATED segment

E)rectal examination is usually normal

4.one of the following can't be candidate for fundoplication (surgical repair of GERD??):

A)young patient

B)patient with paraesophageal hernia

C)patient wit esophageal dysmotility

D)patient with LES pressure 8mmHg

E)patient with lateral sliding hernia

5.in small intestinal cancer what's wrong:

A)Celiac disease is associated with SI lymphoma

B)Crohn's is associated with SI adenocarcinoma C)

D)Peutz-Jegher syndrome is hamartomatous E)juvenile polyps are hamartomatous

Benign lesions present early and malignant one present lately لسوال آخر D , E علاطت خيارات

من الخيارات أيضا polypsسؤال الــ

Hyperplastic polyps are true polyps

6. 18 months child, presented with Colicky abdominal pain followed in the next 12hrs by loose blood-stained stool, on P/E he looks febrile(afebrile), his BP was 120/60 and has palpable mass, Your Dx is:

A)appendicitis

B)gastroenteritis

C)intussusception

D)

E)

7.On U/S patient was found to have thyroid nodule , what to do to determine if it's benign or malignant nodule

A)FNA-B

B)open tissue biopsy

C)

D)

E)

8. patient presented to ER with head injury after RTA, GCS 8, MANS:

A)secure airway with C-spine stabilization

B)expose the clothes to determine sites of injury

C)

D)

E)

9.concerning body fluids what's wrong:

A)major intracellular fluids reside in skeletal muscles

B)bicarbonate is the major intracellular anion

C)potassium and magnesium are the major intracellular cations

D)body water content decreases steadily with age

E)body water content is higher in males than in females

10.acute hemolytic transfusion reaction , all are true except :

A)hemolysis due to reaction with preformed antibiotics in the recipient (ABO and Rh)

B)six hours till the reaction start

C)antibodies interacts with complements causing intravascular hemolysis

D)can occur even in 1-2 cc RBCs

E)

11.all of the following are formed by external oblique and its aponeurosis except:

A)inguinal (poupart's) ligament B)external spermatic fascia

C)conjoint tendon
D)superficial ring
E)deep ring

12.concerning chemical burns, what's wrong:

A)deeper penetration and more damage to tissue due to longer action

B)acids produce a barrier that limit their destructive effect due to coaquiative necrosis

C)acids produce less damage than alkali

D)alkali produce liquefactive necrosis

E)management is irrigation by water for 30 mins for alkali

13.on of the following isn't true regarding patient who had moderate to severe trauma or had undergone major operation:

A)-ve nitrogen balance

B)hypercatabolism

C)fever

D)tachypnea

E)hyperphagia

14.an elderly patient had spinal cord injury, one of the following is the cause for his development of ulcer:

A)pressure*

B)Infection

C)shearing force

D)his underlying medical condition

E)level of his neurological injury

15.tumor marker of pancreatic CA:

A)CA 19-9

B)CA 15-3

C)Alpha-FP

D)hCG

E)CEA

16.Not premalignant skin lesion:

A)seborrheic Keratosis

B)erythroplakia

C)sebceous nevus

D)albinism

E)actinic(=solar) keratosis

17. all of the following are CARCINOMA IN SITU except:

A)paget's disease of the nipple

B)BCC

C)Hutchinson freckles

D)Bowen's

E)

18. patient with severe vomiting(pyloric stenosis??), all can occur except:

A)hypochloremia

B)hypokalemia

C)metabolic alkalosis

D)respiratory alkalosis

E)

19.(familial) medullary thyroid carcinoma, what's wrong:

A)multcentric

B)RET proto-oncogene

C)5B-RAF mutation

D)

E)

20+21.one of the following scenarios has increased risk for colorectal CA:

A)rectal bleeding with anal symptoms

B)unexplained iron deficiency anemia

C)Change in bowel habit without rectal bleeding , 50 years old

D)change in bowel habit in the last 3 months(weeks) E)abdominal pain with no change in bowel habit

22+23.locally invasive CA associated with all of the following except:

-A)Arm Edema

B)

C)

D)

E)

24. bile salts are absorbed in :

A)duodenum

B)jejunum

C)ileum

D)right colon

E)left colon

25. regarding meconium ileus, what is wrong:

A)hypertonic enema is used to relieve it

B)cystic fibrosis

C)affect lung, skin, pancreas

D)aganglionic distal intestine

E)

26. the (right) and (left) borders of the heart on CXR are formed by :

A)right atrium, left ventricle

B)right atrium, left atrium

C)right atrium . right ventricle

D)right ventricle, left atrium

E)right ventricle, left ventricle

27. candidate for mechanical valve replacement :

A)young 30 yrs old man(woman?)

B)pulmonary valve replacement

C)young woman (pregnant?)

D)

E)

28) to compensate for gastric losses:

A) half saline with potassium

B)half saline

C)normal saline

D)ringer lactate

E)

29. congenital pyloric stenosis, what is wrong?

A)non-billous vomiting

B)anorexia

C)succussion splash

D)olive sign

E)visible gastric peristalsis

30. TBSA can predict all of the following except:

A) mortality and morbidity

B) sepsis

C) joint contracture

D) time for healing

E)

31.loss of high pitch voice is related to injury of :

A) external branch of superior laryngeal nerve

B)external branch of recurrent laryngeal nerve

C)internal branch of internal laryngeal nerve

D)internal branch of recurrent laryngeal nerve

E)ansa cervicalis

32. Pancreatic cancer, all are true except:

A)epigastric pain , radiates to sides and through to the back

B)increased by eating

C)increased by (?) and fetal position

D)

E)

33. postsplenectomy without vaccination:

A)beta-hemolytic streptococcus

B)clostridium

C)pseudomonas

D)

E)

34. all affect metastasis except :

A)Lymph nodes involvement

B)T stage

C)+ve circumferential

D)lymphovascular dissemination

E)degree of differentiation

35. regarding GERD , all of the following are true except :

A)triad of heartburn , regurgitation and dysphagia are the usual presentation

B)imporvement on PPI is one of the diagnostic criteria

C)ambulatory PH MONITORING is used to assess

GERD in patients with persistent symptoms

D)esophageal manometry is used to

elevate(evaluate) esophageal peristalsis before antireflux surgery

E)Lap. Nissien fundoplication is indicated for patients with normal length esophagus

36.which of the following isn't considered a cause 42.which of the following isn't associated with of stress ulcer: A)steroid neuroblastoma: B)burn A)hepatomegaly C)head injury B)diarrhea D)IV antibiotics C)splenomegaly D)paraplegia E) E) 37.all of thr following can be considered as investigations for suspected pancreatitis except: 43. all of the following are associated with A)abdominal U/S increased requirements of fluid resuscitation B)abdominal lavage except: C)abdominal CT A)patient with inhalational injury D)neck U/S B)electrical burn E) C)infant D)slim patient 38. an overactive cremastric muscle .with inadequate gubernacular attachment, the case is 44.solitary pulmonary nodule, All are in DDx A)ectopic testis except: B)undescended testis A)Hamartoma C)retractile testis B)metastatic lesion D) C)Histoplasmosis E) D)lung abcess E)tuberculosis 39. submandibular lymph nodes A)group 1 cervical lymph nodes* 45. most important cell in wound healing: B)group 2 A)neutorphil C)group 3 B)macrophage D)group 4 C)fibroblast E)group 5 D)lymphocyte E)endothelial 40. regarding gallstones, all are correct except: A)black stones occur due to cirrhosis 46.a case of female patient evaluated was found B)brown stones found in bile duct to have hepatic adenoma > 7cm, she is on OCPs, C)primary gallstones occur in one year what to do: A)stop OCPs postcholecystectomy D)small stones are associated with increased risk of B)observe and follow up in the next month C)Excision of adenoma acute pancreatitis E)large stones are associated with increased risk D) Mirzzi syndrome E)

41.all of the following are risk factors for

C.difficile, except:

E)Broad-spectrum antibiotics

B)Cigar smoking C)steroids D)Comorbidities

A)PPI

47. all of the following are associated with increased formation of cholesetrol gallstones except:

A)exogenous estrogen

B)high calorie diet

C)obesity

D)TPN

E)rapid weight loss

48.the most common PAROTID tumor is :

A)pleomorphic adenoma

B)xpelomorphic adenoma

C)mucoepidermoid

D)

E)

49. all of the following are present in Tetraology Of Fallot (TOF), except:

A)ASD = atrial septal defect

B)VSD = ventricular septal defect

C)pulmonary stenosis

D)dextroposition of Aorta (overriding aorta)

E)right ventricular hypertrophy

50.patient did endoscopy, he developed lower left sided chest and epigastric pain, on P/E there was decreased air entry on the left side, what's the most appropriate investigation:

A) aortagram

B) ECG

C) Chest Film (CXR)

D) barium enema

E)Esophagoscopy

51. all of the following are considered causes of hypercalcemia except :

A)primary hyperparathyroidism

B)secondary hyperparathyroidism

C)tertiary hyperparathyroidism

D)

E)

52. 35 year old male patient previously healthy present with repeated episodes of headache, diaphoresis and palpitations, his BP was 200/160, all of the following measures are useful to evaluate him except:

A)serum renin levels

B)serum glucose levels

C)24-hr urine metanephrine

D)

E)

53. appendicitis is most difficult to be diagnosed in which one of the following :

A)infant 1 year old

B)pregnant woman

C)woman between 18-35

D)patient on anti-inflammatory drugs

E)

بسم الله الرحمن الرحيم

Surgery exam 15/5/2013 4th year

Note: (??) means not sure answer

GI:

- 1) all of the following are on the transpyloric plane **except**:
- fundus of the gallbladder
- termination of the spinal cord
- dudeno-jujenal junction
- neck of the pancreas (??)
- origin of inferior mesenteric artery
- 2) All are true regarding carcinoids **except**:
- -most common site is the appendix
- ileal carcinoids are rarely multicentric (??)
- usually associated with other tumors of the GI of differing histology
- tumor originates from enterochromaffin cells
- ileal carcinoid follow a more malignant course
- 3) regarding Gastrin all are true except:
- secreted by G cells in antrum

- decreased by PPI (PPI results in hypogastrenemia)***
- respobsible for gastric phase of acid secretion
- increased in zollinger ellison
- when elevated causes gastric carcinoid
- 4) A patient u/w a GI surgery in which the Ileum was resected, one of the following is affected:
- Fe
- B12***
- 5) Manometry can show all except:
- length of intraabdominal esophagus
- length of LES
- pressure bl esophagus
- peristaltic contractions
- degree of gastric reflux ***
- 6) Wrong about the physiology of pancreas:
- Acid in the duodenum and bile secretion stimulates pancreatic secretion

- CCK stimulates enzyme release from the pancreas
- pancreatic secretions neutralizes the acid in duodenum
- -Amylase is secreted in its active form the pancreas
- Electrolyte and fluids in pancreatic juice are secreted from **acinuar** cells (??)
- 7) HCC (hepatocellular carcinoma) all are true except:
- it follows geographical distribution of HBV
- increased by smoking and alcohol
- commonly metastasizes to lung, bone and peritoneum
- percutanous biopsy is done for suspected lesion if *operative* intervention will be done
- 8) True about esophagus:
- starts at the upper limit of thyroid cartilag
- starts at C6
- 35 cm in length
- infra abdominal part is not covered with peritoneum
- pass the diaphragm at T8
- 9) All are risk factors for stomach cancer except:
- -Vegetables and citrus ***
- -Poor socioeconomic status

- -H pylori infection
- Adenomatous polyps
- 10) Wrong abut diverticular disease:
- -Barium is diagnostic in acute diverticulitis (??)
- -Its not premalignant
- -Surgery is indicated after the 2nd attack
- 11) Wrong abut zenker diverticulum:
- -Barium is not daignostic and esophascopy is needed (??)
- -Almost all esophageal diverticula are acquired
- Epiphrenic diverticula associated with notility problems
- -Herniation between superior constrictor and sth
- 12) wrong about colorectal cancer:

Mutations in tumor suppressor genes or DNA repairing genes are observed in familial colorectal cancer and NOT the sporadic

- 13) All true about pancreatic cysts except;
- -solid pseudopapillary occurs in middle aged men and is aggressive

- 14) Wrong about pancreatitis;
- amylase levels does correlate with the severity of the infection
- 15) Wrong about peritonitis;
- is inflammation of peritoneum
- most common surgical cause is secondary bacterial contamination
- can be septic or aseptic
- primary peritonitis is more common in adults than in children (??)
- TB peritonitiis can be with or without ascitis
- 16) pt presented with cardiogenic shock due to MI, resuscitated, admitted to the ICU and he was having **sinus rhythm** then, on the second day, he had abdominal pain, dx:
- mesentric artery thrombosis
- non-occlusive mesentric ischemia
- occlusive mesentric ischemia
- mesentric embolus
- venous mesentric obstruction
- 17) Peutz-Jeghers syndrome, which is not true:
- associated with mucocutaneous lesions and hyperpigmentation
- Autosomal dominant

- associated with anemia
- Small bowel contains adenomatous polyps
- ** (hamartomatous)
- 18) Which of the following touches the hilum of the spleen;
- >> tail of pancreas
- 19) Not dangerous in intestinal obstruction :
- crampy abdominal pain (??)
- fever
- rigidity
- absent bowel sounds
- feculant vomitus
- 20) esophagus, all true except:
- primary peristalsis propels food to the stomach, occurs in progressive way
- 2ry peristalsis is initiated voluntarily(??)
- 3ry peristalsis is simultaneous, non peristaltic contractions
- abdominal part of the esophagus is covered by peritnoeum
- LES is not an anatomical structure and it is a zone of high pressure mesuring3-5 cm in length
- 21) rectal prolapse, all are true except:
- more common in elderly

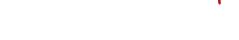
- more common in females
- can be associated with constipation and incontinence
- abdominal operation is associated with higher recurrence rate
- endoscopy should be done for patients

- duodenal atresia
- hirshurbrung disease
 - diaphragmatic hernia
 - 4) All cause slow transient constipation except : Rectocele

Peds:

- 1) All of the following can cause neonatal intestinal obstruction except;
- incarserated hernia
- intussusiption
- meconium ileus
- meconium plug
- 2) infant with a 48h Hx of recurrent cough and wheeze. decreased air entry on left side. hyperlucency on CXR. MANS:
- -lt sided chest tube
- -rt sided chest tube
- -steriod and something else
- -rigid bronchoscope ***
- 3) All of the following can cause polyhydreminous except;
- esophageal atresia

- 5) false regarding gastroschesis:
- extruded bowel looks normal
- bowel is malrotated
- -?



- 6) false regarding omphalocele:
- presence of the liver in the sac confers a bad prognosis
- easy and simple to surgically repair the defect
- sac present
- umbilicus inserted into the sac
- 7) Contraindication to circumcision:
- Hypospadia
- 8) Wrong abut neurobalstoma:
- Stage 4s worst prognosis

- 9) All of the following can cause bilious vomitus except
- pyloric stenosis
- 10) All of the following true about inguinal hernia in peds except;
- >>> lower incidence in premature infants
- 11) Which is wrong about hirschsprung disease;
- absence of myenteric and aurbach plexus
- the ganglionic segment appears dilated in Barnum enema
- the initial treatment can be emergentic colostomy
- biopsy shows decreased Ach esterase in the affected ganglions ***
- Cardio:
- 1) ASD all are true except:
- 80% caused by ostium secundum
- commonest cause of ostium secundum is defect in septum primum
- causes pulmonary hypertension in adolescence
- -fixed split S2
- transesophageal echocardiography nicely views the defect

- 2) Which of the following is candidature for mechanical valve replacement:
- -Young male less than 30 yrs*
- Woman in childbearing age
- 3) The paO2 in the coronary sinus (supposing the original paO2 is 100 mmHg):
- >>35 mmHg
- 4) Not of the Criteria of SIRS:
- Temperature, < 36° C or > 38° C.
- Heart Rate, > 90 bpm.
- Respiratory Rate, > 20 breaths/min or PaCO2 < 32 mmHg. White
- -White Blood Cell Count, > 12,000 or < 4,000
- systolic BP < 90 mmHg***
- 5) ARDS, all true except:
- >>Increase PaO2/ FiO2
- 6) All cuase of high out-put HF except:
- >>Mitral stenosis
- 7) young (?) male patient with no previous history present with dilated veins on lower limb (and pain?). whats the first site to show clinically notable varicose veins:
- -medial thigh
- -antertior (or lateral?) thigh

-medial calf	- infection
-lateral calf	- t <mark>racheomalecia (??)</mark>
-posterior calf	- tracheal stenosis (??)
	- tracheosophageal fistula
8) All true abou tetralogy of fallot except:	- fistula with smth innominate artery
-Anemia (??)	
-Cyanosis	12) Which of the following correctly
-Boot shaped heart	describes pt with traumatic pneumothorax;
-Clubbing	 VAST (video-assisted thoracoscopic surgery) must be done if pt didn't respond to
-Unexplained tendency to bleed	oxygen admission
	- pt doesn't benefit from oxygen admission
9) All of the following might be injuries when clamping Subclavian vein except;	- pt requires intercostal ??? With closed chest drain
- anterior rami of T1	
- anterior rami of T1 - ansa cervicalis	General:
	1) which of the following drugs is a
- ansa cervicalis	1) which of the following drugs is a bacteriostatic:
- ansa cervicalis - phrenic nerve	which of the following drugs is a bacteriostatic: -imipenem
- ansa cervicalis- phrenic nerve- subclavian artery	1) which of the following drugs is a bacteriostatic: -imipenem - vancomycin
 - ansa cervicalis - phrenic nerve - subclavian artery - pleura 10) All of the following can cause mass in the 	1) which of the following drugs is a bacteriostatic: -imipenem - vancomycin -stryotomycin
 - ansa cervicalis - phrenic nerve - subclavian artery - pleura 10) All of the following can cause mass in the middle mediastinum except; 	1) which of the following drugs is a bacteriostatic: -imipenem - vancomycin -stryotomycin -quinolone
 - ansa cervicalis - phrenic nerve - subclavian artery - pleura 10) All of the following can cause mass in the middle mediastinum except; - bronchiogenic mass 	1) which of the following drugs is a bacteriostatic: -imipenem - vancomycin -stryotomycin
 - ansa cervicalis - phrenic nerve - subclavian artery - pleura 10) All of the following can cause mass in the middle mediastinum except; 	1) which of the following drugs is a bacteriostatic: -imipenem - vancomycin -stryotomycin -quinolone
 - ansa cervicalis - phrenic nerve - subclavian artery - pleura 10) All of the following can cause mass in the middle mediastinum except; - bronchiogenic mass 	1) which of the following drugs is a bacteriostatic: -imipenem - vancomycin -stryotomycin -quinolone
 - ansa cervicalis - phrenic nerve - subclavian artery - pleura 10) All of the following can cause mass in the middle mediastinum except; - bronchiogenic mass - lymphoma 	1) which of the following drugs is a bacteriostatic: -imipenem - vancomycin -stryotomycin -quinolone -clindamycin (??)
 - ansa cervicalis - phrenic nerve - subclavian artery - pleura 10) All of the following can cause mass in the middle mediastinum except; - bronchiogenic mass - lymphoma - pericardial cyst 	1) which of the following drugs is a bacteriostatic: -imipenem - vancomycin -stryotomycin -quinolone -clindamycin (??) 2) Neurogenic shock,, all are true except:

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7) Other Q about gas gangrene: sth about gas - spinal cord injury is most common cause of in muscles (gas might be present in the neurogenic shock muscle) Spinal shock if form of neurogenic shock (???)8) Erysipelas "all true except: - increased capacitance of veins - painful 3) Not present in the inguinl canal in female: - caused by streptococcus - red flat lesion - round lig. of uterus - most common site is the face - ilioinguinal nerve - internal pudendal artery 9) Patient with MI how long to wait before - remnants processus vaginalis doing an elective surgery: - lymph vessels from the fundus of the uterus - 1 month - 6 months *** 4) All in septic shock except: - 1 year - bradycardia* - 2 years - wide pulse pressure - decreased diastolic pressure. 10) in hemorragic shock: - all pts shoud be given crystalloids 5) Femoral canal wrong: lateral to femoral vein - ttt is by vasopressin along with blood (at the same time) (??) Correct: it's medial to femoral vein Order (med to lat): femoral canal, fem: ملاحظة VAN 11) not elevated in the acute response to stress: - glucagon 6) about gas gangrene: Wrong: incubation period (7-10 days). - glucocorticoids - catecholamines - insulin (??)

י. עם אינו מרוכם של משמים את בנוצים משל בין האינו של האינו את האינו אותר בין בין היו בין היו אותר בין היו היו אותר

- ADH
- 12) The strongest stimulus for neuro endocrine response after injury is;
- afferant nerve stimulation from site of injury
- hypovolemia
- elevated temperature
- infection
- 13) Which of the following occur following respiratory acidosis;
- chloride ions exit cells to compensate
- bicarbonate retention occurs as a normal response (??)
- renal compensation is rapid
- 14) Which of the following is wrong about acute appendicitis;
- the site of max tenderness varies btw ppl
- rovsing sign is specific for acute appendicitis
- bsoas sign indicate inflammation has reached psoas muscle
- rebound tenderness indicate severe underlying inflammation
- 15) Which of the following improves mortality in pt with septic shock;
- methylprednisolone

- activated protein c
- -Norepinephrine (smth like this)
- 16) Aseptic gel used in the bedside of pt protect against all of the following bacteria except:
- staph aureus??
- streptococcus
- pseudomonas aeruginosa
- clostridium difficile ??
- 17) Doesnt happen in Pneumothorax
- -Mediastinal shift
- -Hypotension
- -Collapsed neck veins ***
- -Tachycardia
- 18) about extracellular fluid, which is true:
- ECF is 48 % of body wight (msh akeed 43)
- plasma is 1/3 of ECF
- interstitial fluid equlibrates slowly with other body fluids
- -phosphate is the main buffer
- major extra cellular cation is potassium
- 19) Blood supply to the small bowel during rest!
- 10-15%
- 15-20% (???)

- Can be associated with marked - 35% hypocalcemia after parathyroidectomy in - 40-45% patients with bone disease. - 55% - Can cause anxiety, depression, or confusion. - Can cause physical signs such as Chvostek's and Trousseau's signs. 20) Not part of child Pugh score: - Is treatable acutely with intravenous - PTT calcium salts and chronically with oral calcium and vitaminD. **Endocrine:** 1) all of the following drugs are given to 4) Most common cause of Hypothyroidism in control symptoms of thyrotoxicosis except: adults: -PTU Hashiomoto's thyroditis -methimazole -(carbimazole?) 5) One of the following doesn't cause thyrotoxicosis: -iodine - Hashimoto thyroditis - propranolol ** - anaplastic thyroid carcinoma - graves 2) The most precise diagnostic screening procedure for differentiating benign thyroid - Anaplastic carcinoma nodules from malignant ones: thyroid ultrasonography 6) Posterior triangle mass from 2 months in - thyroid scintiscan an elderly man, initial management is; - fine needle aspiration biopsy (FNAB) *** - FNA - thyroid hormone suppression. - neck CT - give antibiotics and observe 3) 15. Hypoparathyroidism all are true except - examine under anesthesia - open biopsy - Is most commonly encountered as a post viral syndrome. ***

- 7) not found in primary hyperaldosteronism : hyperkalemia
- 8) all of the following are suggestive of malignancy in thyroid except:
- rapidly growing painful nodule
- hoarseness
- thyrotoxicosis (msh active nodule wala TSH)
- dysphagia
- 9) one of these isnt a developmental problem of thyroid:
- Thyroglossal cyst
- Reidels thyroditis (??)
- Sublingual goiter
- Lobar agenesis
- 10) All true except:
- -Facial nerve is deep to the vessel ***
- -Deep lobe forms 10-15%
- -Fascia of parotid derived from platysma
- -Sublingual glands empty into wartons duct
- -submandibular gland secretes mucus and serous
- 11) most common malignant tumor of parotid:
- mucoepidermoid (???)

- adenoid cyst
- adenocarcinoma
- -squamous cell carcinoma
- pleomorphic adenoma
- 12) All of the following result in euthyroid multinodular goiter except;
- pregnancy
- activation of Gs mutation ??
- hashimoto thyroditid
- myxedema
- 13) thyroid, all except:
- 90% of absorbed iodine is taken up by the thyroid
- T3 half life is 6-12 hours
- T4 half life is 5-7 days
- most of T3 is formed by peripheral conversion of T4
- TSH acts on thyroid by iodine Na symporter

Onco:

1) Partial chemotherapy response (to the tumor size):

- -less than 9
- 10-30
- 30-50

- 50-99 (??)
- 100% but appear in another area
- 2) skin tumor most imp: depth of invasion
- 3) Melanoma, pt had undergone excision, why do we need to follow him up;
- -for local recurrence
- for lymph node mets
- for systemic mets
- Intransient metastasis
- 4) Skin tumor question...

a mole, with irregular margin and Nodular surface, a biopsy taken that showed primary skin tumor... What determines the prognosis of it?

- >>> depth of skin invasion
- 5) Old farmer with 2 month history of mass on his upper lip, it's pearl shaped, with necrotic core and talengectasia... What is the most likely dx:
- >> basal cell carcinoma
- 6) Nipple discharge " which is true : bloody discharge indicative of malignancy ?
- intermitent milky discharge could be physiologic

- 7) All of the following are risks for skin cancer except;
- solar keratosis
- sebacious nevius
- xeroderma pigmentosum
- albinism
- Sturge-Weber syndrome

Plastic:

- 1) Parkland formula: pt wt is 50 kg, had bilateral lower limb burn (full burn), fluids to be given for 8 hours:
- >>3600 ml of ringer lactate.
- 2) Most effective for frost bit:
- Rapid warming (42 C)
- Heparin
- Hyperbaric oxygen
- sympathomectomy
- -Thromboxane
- 3) all true for pressure sores except:
- Moisture decrease ischemia (??)
- caused by pressure >32 mm Hg
- affects the sacrum and heels mostly

- ischemia related to stretching of the underlying vessels
- 4) in cleft palate wrong answer: Swallowing defect
- 5) wrong about grafts:
- -graft neovasculariztation occurs in 2-3d
- -grafts on escahrs have poor take
- -grafts on bones (or something similar) have poor take
- -meshed grafts have poorer take than non-meshed
- -blanching is a sign of take
- 6) Wrong about electrical burn:

The skin is most affected

- 7) Wrong about wound healing:
- collagene type 1 is the most common in wound healing
- inflammatory phase begins directly and continue for 2-3 days
- source of epithelization mainly from wound edges

- decrease of neovascularization in remodeling phase
- scar vascularity is decreased in remodeling phase
- 8) about vascular malformation, all true except;
- capillary malformation are confined to specific nerve distribution on the face
- arterial malformation are mostly symptomatic
- arteriovenous malformation in the limb can cause steal syndrome
- hemangioma need no intervention and reassurance in all cases ***
- 9) All are accepted in the management of tetanus except:
- give antibiotic
- lare dose of tetanus toxoid
- convulsion control
- give human tetunus immunoglobulin
- debridement of the wound

Surgery

- 1 most common malignant salivary tumor:
 - a mucoepidermoid
- 2 post op 3 days after whipple procedure, he complains of shortness of breath, your next step:
 - a Chest X-ray
 - b CT angio*
 - c V/Q scan
- 3 A 40 year old examined and found to have a 4 cm tender cyst, your approach:
 - a Mammogram
 - b MRI
 - c Aspiration and cytology*
 - d reassure and reexam after menstruation
- 4 Patient with enlarged thyroid, hoarseness due to recurrent laryngeal nerve, your management:
 - a Thyroidectomy with lymph node dissection*
 - b total thyroidectomy
 - c subtotal thyroidectomy
 - d right hemithyroidectomy
 - e radiation
- 5 About hemorrhoids, which of the following is incorrect:
 - a 20% of continence is contributed for by hemorrhoids
 - b surgery is indicated only in grades III and IV
 - c Blood mixed with stool*
- 6 Patient presented with hemorrhoids grade II (and some other info), management:
 - a rubber band ligation
- 7 A mass in the posterior triangle of the neck, your next step:
 - a FNA*
 - b Neck CT
- 8 Asymptomatic carotid bruit, the best screening test is:
 - a MRA
 - b doppler*
 - c CTA
 - d
- 9 Acute arterial ischemia due to embolus, your managment:
 - a direct embolectomy
 - b heparin
 - c warfarin
 - d aspirin
 - e LMWH
- 10 about venous insufficiency, one of the following is correct:

- a it is caused by valvularincreased dysfunction and venous pressure
- 11 which is true about extralobar sequestration:
 - a most at the right side
 - b recurrent infection*
 - c supplied by aorta*
- 12 All of the following in regards to GERD are true except:
 - a vomiting undigested food is common
- 13 duodenal ulcer with outlet obstruction, wrong:
 - -do endoscopic Bx to r/o malignancy
 - vomiting of old undigested food
- 14 All the following are true about pylonic stenosis except:
 - a longitudinal muscle growth, it's enlarged and elongated
 - b growth is from smooth muscle cells and intestinal secretions
- 15 Adenocarcinoma of the colon management
 - a liver mets PRECLUDES resection of tumor
- 16 thyroid scan was done, cold nodule was found, all are possible diagnoses except:
 - a autonomous*
 - b cancer
 - c colloid
 - d
- 17 Which of following is true about breast cancer:
 - a Dimpled skin is caused by Cooper ligament shortening
- 18 Which is true about fluids:
 - a fourth of extracellular fluids is plasma*
 - b extracellular fluids 40% of body weight
- 19 All true about laser except:
 - a all can cause comeal damage *
 - b thermal burn can result from it
- 20 Tip of thumb, 1 cm amputation, no bone is exposed, best managment:
 - a Full thickness graft*
 - b Partial thickness graft
 - c cross finger flap
 - d cross abdomen flap
- 21 Autoimmune disease related to Raynaud's phenomenon:
 - a Scleroderma*
 - b sjoren
 - c sle
 - d rheumatoid arthritis
- 22 Not true about antibiotics for anaerobes
 - a clindamycin has a wider activity than metronidazole
- 23 in relation to parotid gland:
 - a facial nerve is deep to facial vessels

- 24 Most common complication after superficial parotidectomy
 - a salivary fistula
- 25 pleomorphic salivary gland tumor, all are true except:
 - a. Recurrence after partial superficial parotidectomy is 2%
- 26 All about the tumors of pancreas with MEN I are true except:
 - a treat hyperparathyroidism first
- 27 medullary thyroid
- 28 Not a complication of thyroidectomy
 - a hypoglossal nerve paralysis*
 - b external laryngeal nerve paralysis
 - c seroma
- 29 Cashier, couple of months lower limb pain, increasing during the day, your diagnostic approach
 - a duplex
- 30 Which of the following is wrong about intermittent claudication
 - a increases at night
- 31 Aortic stenosis, all are true except:
 - a do surgery for asymptomatic patient with valvular diameter 1.1 cm
 - b do surgery for severe symptomatic
 - c syncope, dypnea, chest pain are the classic presentation
 - d syncope due to calcification of AV valve secondary to it could occur
- 32 All of the following are present in tetralogy of Fallot except:
 - a ASD*
 - b RVH
 - c VSD
 - d pulmonary stenosis
 - e ovemiding aorta
- 33 Farmer with upper lip mass, pearly with central ulcer:
 - a BCC*
 - b scc
 - c melanoma
 - d
- 34 inhalational injury, all are associated except:
 - a need prophylactic antibiotic
- 35 Which of the following is an indication for CABG:
 - a 35% ejection fraction, with triple vessel disease*
 - b non diabitic with right coronary and circumflex
- 36 not a risk factor for AAA rupture:11
 - a smoking history
 - b BMI >35*
 - c more than 5 cm diamerter
 - d increase more than 1 cm in the past 6 months
 - e HTN
- 37 rectal cancer, T2, no mets on CT, good condition, next step

- a surgery*
- b radiation
- c chemo
- d radiation and chemo
- 38 All are used in decreasing synthesis in thyrotoxicosis except:
 - a lodine
 - b propranolol*
- 39 diagnosis o['[[\]
- 40 f bronchial transection by:
 - a bronchoscopy
 - b CT*
- 41 not an indication for hydatid cyst resection
 - a total calcification*
- 42 Most common symptom in Wilm's tumor
 - a abdominal mass*
 - b hematuria
 - c abdominal pain
- 43 child with bilateral masses and lower abdominal mass, what is the cause:
 - a posterior urethral valve*
 - b neuroblastoma
 - c wilms tumor
 - d
- 44 bariatric BMI 50, sweet eater, diabetic, hypertensive, with reflux:
 - a laparoscopic gastric bypass
 - b jejunoileal bypass*
 - c gastric band
 - d sleeve
- 45 All mimic necrotizing enterocolitis except:
 - a duodenal atresia
- 46 All occur in hyperthyroidism except
 - a anorexia*
 - b fluid retension
 - c tremor
- 47 CT findings of appendicitis, all except:
 - a halo or target sign
 - b diameter of 3-5 mm*
 - c fecalith
 - d fat streaking
- 48 Aseptic gel used in the bedside of pt protect against all of the following bacteria except:
 - a staph aureus
 - b streptococcus
 - c pseudomonas aeruginosa
 - d clostridium difficile*
- 49 Gallstorie ileus most commonly caused by:

- a Gallbladder to second part of duodenum*
- b CBD to duodenum
- c CBD to gastric
- d Gallbladder to gastric
- e CBD to jejunal
- 50 PT, which is true:
 - a associated with jaundice
- 51 gastrin:
 - a inhibited by acid in antrum
- 52 risk for cholangiocarcinoma:
 - a primary sclerosing cholangitis*
 - b Choledocal cyst
 - c Caroli's disease
- 53 which of the following doesn't have a malignant potential:
 - a spitz nevus*
 - b xeroderma pigmentosum
 - c congenital hairy nevus
 - d something freckles
- 54 liver adenoma 6 cm for a female taking OCP:
 - a stop OCP
 - b surgical excision
 - c observe
- 55 nonoperative management of splenic injury, all correct except:
 - a if CT showed contrast blush this means failure of conservative management
 - b NOM 80-90% in large volume centers
 - c fails in only 10%
- 56 most common visceral aneurysm:
 - a splenic*
 - b celiac
 - c ima
 - d aortic
- 57 Wrong about GIST
 - a endoscopic biopsy diagnostic in 95% of cases
- 58 all occur after operation except:
 - a hypoglycemia
- 59 PVD which is false:
 - a less than 25% require surgery or cath
 - b 25% end up with amputation
 - c 30% mortality at 5 years and 50% at 10 years
 - d in time due to collaterales 75% improvement in their symptoms*
- 60 one is false about post op fever
 - a. m.c.c of death is pneumonia
 - b.fever first three days is always caused by infection
 - c.surgical site inf need abx and surgical management

- 61 ganglia, which is true:
 - a ganglia are the most common cause of swelling of the hand*
 - b occurs mostly on the radial palmar aspect of the hand
 - c they are easily confused with CA
 - d they are easily removed surgically
 - e never occur beyond the MCP joint
- 62 bone technetium scan, all are true except:
 - a high risk for anaphylaxis*
 - b More sensitive than other modalities in detecting mets
 - c less specific than other modalities
 - d renal excretion may cause a false positive
- 63 aneurysm below the level of renal arteries is caused by:
 - a trauma
 - b infection
 - c degeneration
 - d dissection
 - e connective tissue diseases
- 64 hypotension despite fluid intake, dyspnea, previous MI,high PCWP,high CVPcause is:
 - a cardiogenic shock*
 - b septic shock
 - c ARDS
- 65 cushing, wrong

if the cause was exogenus it could be suppressed with high dose dexa

- 66 Sarcoma with highest lymph node metastases:
 - a malignant fibrous histiocytoma
- 67 wrong about acute cholecystitis:
 - a U/S can differentiate between calc and acalculus*
 - b U/S has 97 % diagnostic accuracy
- 68 popcorn lesion on CXR
 - a hamartoma*
 - b Mets
 - c primary lung CA
 - d Chondroma
 - e Chondrosarcoma
- 69 esophageal cancer, all true except:
 - a most patients in jordan present with late stage 3 B
 - b adenocarcinoma increased in incidence due to barrets esophegas
 - c no matter the site, we always have to check the celiac LN
 - d 5 year survival rate has reached 60% in recent years
- 70 fluids, which is true:
 - a lung is the major insensible loss site
 - b Increase in cell catabolism decreases total body water
 - c can have normal 300ml per day urine output
 - d sweat is isotonic

- e normal daily loss is 800 to 900 ml
- 71 llaser all true except
 - a always affects the cornea*
 - b causes thermal burn
 - c is used for the treatment of AV malformation
- 72 about the new consensus regarding the ttt of congenital diaphragmatic hernia hernia:
 - a after extubation
 - b in utero*
- 73 about TPN, wrong:
 - a dextran 20% could be used in a peripheral line*
- 74 maximum tourniquet time for the upper limb:
 - a 0.5 hr
 - b 1 hour
 - c 1.5 hours*
 - d 2 hours
 - e 2.5 hours
- 75 intestinal obstruction, wrong:
 - a intussusception in an adult could cause it due to a pathological cause behind it
 - b hernia is the m.c.c in children*
 - c tumors obstruction due to peritoneal mets is a leading cause in adults
 - d adhesions m.c.c in adults
- 76 idiopathic intussesption,wrong:
 - a a leading point is found in 1/3 of the time
- 77 cushing could be caused by all except:
 - a pituitary adenoma
 - b adrenal hyperplasia
 - c lung CA
 - d a functioning adenoma in reticularis
 - e adrenal carcinoma
- 78 All the following are indications to remove the parathyroid in an asymptomatic patient except:
 - a age> 75 yrs
- 79 Radiation to the breast:
 - a it causes fat necrosis and edema
 - b erythema usually disappears n a few weeks
- 80 Paget disease of the breast:
 - a presents as eczematous type of lesions
- 81 Melanoma, pt had undergone excision, why do we need to follow him up;
 - a for local recurrence
 - b for lymph node mets
 - c for systemic mets
 - d Intransient metastasis*
- 82 Prophylactic antibiotics are given in all except:
 - a craniotomy

- b hernioplasty*
- c joint replacement
- d hemiomhaphy
- e Bypass surgery
- 83 What structure passes with the aorta through the opening of the diaphragm:
 - a IVC
 - b superior

gastric vessels

- c Thoracic duct*
- d Phrenic nerve
- e Vagus nerve
- 84 most common cause of massive GI bleeding in children less than 6 months old:
 - a Meckel's diverticulum
 - b AV malformation

^

- 85 laparoscopic surgeries, disadvantages of CO2:
 - a hypercarbia*
 - b insoluble
 - c slow absorption
- 86 A patient presented with a picture of cholecystitis, wrong:
 - a after 72 hours do an open surgery
- 87 which of the following is wrong about metronidazole
 - a shares the same bactericidal action of clindamycin*
 - b the best anaerobic coverage of all antibiotics?
 - c used for C.difficile
 - d usually used with a cephalosporin(3rd) or fluoroquinolones
- 88 A patient who has respiratory acidosis:
 - a always has hypoxia
 - b renal correction is so fast
 - c retains bicarb and ammonia*
 - d bicarb to carbonate ratio is 20:1
- 89 septic shock, wrong:
 - a the blood culture is positive in 75%
 - b candida is responsible for 10%
 - c the patient hyperventilates before shock
 - d decreased cardiac function
 - e increased sensitivity of smooth muscle receptors to vasopressin and angiotensin
- 90 Enteral feeding all the following except:
 - a no translocation of bacteria*
 - b pancreatitis
 - c gallstones
 - d overcomes the inflammatory process
- 91 Palliation in pancreatic tumors, all except:

- a surgery is used *
- 92 All are true in regards to PNS except:
 - a Hair has minimal role in pathogenesis
- 93 Pancreatitis case, initial step in management:
 - a Fluids

94

General:

- 1. Patient bled 20 % of his blood volume, what will u not find?
- A. Oliguria***
- B. Tachycardia more than 120 C.
- 2. Fluid requirements in a 35 child ?=10*100+10*50+15*20=1800 A. 1800 ml *** B.
- 3. Which one of the following is not a response to trauma?
 A. Hypoglycemia *** B.
- 4. Which one of the following patients will not benefit from fresh frozen plasma?
- A. Bleeding time more than 15 seconds***
- B. REST OF THE CHOICES WHERE ABOUT SECONDARY HEMOSTATIC DEFECTS (I.E. IN RELATION TO CLOTTING FACTOR DEFECIENCY. NOTE THAT BLEEDING TIME IS RELATED ONLY TO PLATELET FUNCTION/NUMBER PROBLEMS)
- 5. Regarding perioperative infection control, one is TRUE:
- A. Prophylactic antibiotics should be given within one hour of abdominal surgery.***
- B. Prophylactic antibiotics should be appropriated to include a wide spectrum

- of activity against expected microorganisms.
- C. Antibiotic prophylaxis is a cause of severe antibiotic resistance.
- 6. All affect the temp of the patient in operating room except :

a-muscle relaxant

b-humidified air

- c- I.V fluid
- d-O2 saturation (the answer i guess)
- 7. What is the major source of protein for catabolism in a trauma patient?
- A. Serum proteins.
- B. KidneyC. Liver D. Skeletal muscles.***
- 8. All are true regarding femoral hernia except:
- A. Femoral hernias are relatively rarely strangulated *** B.
- 9.All of the following are true regarding anatomy of abdominal wall except:
- A. Floor or posterior wall of the inguinal canal are formed by transversus abdominis aponeurosis and fascia.
- B. Iliohypogastric nerve runs anterior to internal oblique muscle. C. Femoral

hernia might present sometimes above the inguinal ligament.	15.A. Colloid is advised. B. Dopamine
10. Which one of the following is the best indicator for malnutrition?	16. Regarding neurogenic shock, all are true except :A. Tachycardia or bradycardia with
A. Clinical examination. ***	hypotension.***bradycardia only
B. CBC	B. It might be caused by transection of the spinal cord.
C. Albumin and transferrin levels. D.	C. It's usually treated by giving an alpha agonist like phenylephrine. D.
11. Regarding GERD which one of the following is false?A. It's associated with dysphagia to fluids. ***B.	17. Multiorgan failure syndrome, all are true except: A. Cardiac output should be measured invasively all the time.***
12. Which one of the following is a specific complication of left internal jugular vein cannulation rather than the right?	18. Multiorgan failure syndrome A. Sepsis sepsis is associated with lower mortality bcz it can be identified and treated by Abs.*** B.
A. Thoracic duct injury.***B.	
13.all affect healing except :(plastic Qs)	19. What is wrong?A. Bone density is increased in bed ridden patients.
13.all affect healing except :(plastic Qs) A. Fatty acids low *** B.	
A. Fatty acids low *** B. 14.:all increase risk of operative	increased in bed ridden patients.
A. Fatty acids low *** B.	increased in bed ridden patients. 20. Which of the following is true? A. Old people and females have more

ENDOCRINE:	A. It tends to have multicentric involvement.*** B. It tends to metastasize via blood stream.
 What is the most common initial presentation of insolinoma? A. Hypoglycemia *** B. Psychological 	5. Which one of the following is not an indication for surgical intervention in the thyroid? A. Autonomously functioning thyroid nodule.***
2. What is the most common pancreatic endocrine tumor?	6. All of the following drugs decrease synthesis of thyroid hormones except:
A. Nonfunctioning *** (according to	A. Methemazole.
uptodate) B. Insulinoma.	B. Propranolol***
C. Gastrinoma.	C. Propylthiouracil
D. Glucagonoma. E. VIPoma.	D. Carbimazole. E. Iodine.
3. r false :	7. :all are treatment options of hashimoto except :
A. most common cause of hypoparathyroidism is postviral.**	a- thyroxine
nypoparatnyroidism is postvirai.**	b- Iodine
True :	c-surgery
a-Superior parathyroid glands come	d- antithyroid drugs
from the third pharyngeal pouch.	e- antiinflamatory drugs ,,MY point of view that all can be used bcz of the
b-Superior parathyroid glands has constant location***	different clinical stages of this disease except the anti inflamatory ????

8.all are indication of surgery in graves ds except: A. Led retraction.

4. All are true regarding follicular careinoma of the thyroid except:

15. A patient presented with

B. Presents with nonbilious projectile

vomiting.

C. 2-5 m ?!?!?!?!? D.

galactorrhea. What of these will indicate the correct diagnosis? A. Bitemporal 9. A. Atrial fibrillation in an old man. hemianopia***B. Gonadal atrophy. PEDIATRIC SURGERY: 10. What is the most common presentation of a branchial cleft? 1. Which one of the following is an ABSOLUTE indication for surgery in A. Infection ** necrotizing enterocloitis? (NOTE THAT ALL OF THE CHOICES B. Respiratory obstruction WHERE INDICATIONS!) A. Evidence of gas in the portal vein. 11. Which one of the following tests is not used to diagnose insulinoma? B. Abdominal wall edema and erythema. A. Secretin stimulation test *** C. Pneumoperitoneum.*** (according to Medscape). D. 12. the most common risk factor of development of neck lymph nodes (2shi 2. All of the following are used in INITIAL investigations in a child with zay haik) febrile UTI except: A. Old age? B. Smoking? A. IVP B. DMSA.**** 13. Which one of the following is wrong regarding parotid gland? C. eshi in boys. D. eshi in girls. A. Deep lobe constitutes 10-15 % of the gland. 3. Pyloric stenosis, false? B. Parotid secretion is mixed serous and mucinous. *** A. Child will be hungry immediately after feeding.

14.A. Hypercalcemia is caused by PTH

from a tumor.***

- 4. was all regarding intussusception what's wrong:
- A. you will see dougnut sign on U/S(this sign is for pyloric stenosis)*** this is what was wrritten exactly in the slidespyloric stenosis: daughnut signintussusception: kidney and target sign
- B. Intussusiption is the most common cause of intestinal obstruction in children 3-5 years of age.
- 5. Wilms? all are true except:
- A. Lymph nodes involvement is associated with poor prognosis.
- 6. All of the following can be present in a child with esophageal atresia, except?
- A. Low birth weight.
- B. Oligohydramnios.*** C.
- 7. Regarding testicular torsion, all are true except:
- A. surgical delay more than 6 hours earries a very poor prognosis.
- B. most in infant and peripubertal boys
- C. can be present with nausea and lower abdominal pain without testicular symptoms*** (of course there always will be something wrong with the testes !!)

- D. Doing ultrasound or Doppler studies is a must in all cases (this is what's done in JUH)
- E. You should do BILATERAL orchidopexy

ONCOLOGY:

- 1. Medullary breast cancer:
- A. associated in over 90% of acses with positive estrogen receptors. B. Presents with fixed axial lymph nodes and still, has good prognosis.

PLASTIC SURGERY:

- 1. A patient presented with a 50 % burn with inhalational injury w makel hawa... all are correct therapeutic interventions except:
- A. Giving prophylactic antibiotics.***B.
- 2. Which one of the following cases will cause the most increase in basal metabolic needs:
- A. 50 % burn patient.***
- B. Major trauma patient.
- C.narcotizing panereatitis

3. All are true except: A. A patient presenting with a burn due to an alkaline substance should be treated by topical weak acids*** B.	8. Which one of the following is NOT a constituent of ringer lactate? A. Magnesium 5 mg ***
4. Which one of the following is premalignant? Wella eshi tani? A.Nevus sebaceous.	9. Management of fluids in a burn patient. USE PARKLAND FORMULA. DO NOT ADD 1ST DEGREE BURNS TO THE FORMULA! A. 3600 ml in the first 6 hours. B.
5.all are true regarding skin tumors exceptA. Morphea type basal cell carcinoma low recurrence ?	10. Which of the following is wrong regarding pressure sores? A. Using a wound swap for culture ***
b.nodular basal cell carcinoma is the most common c.lentigo maligna is found on head and neck	11. A patient presented to the ER with human bite in the ear 5 cm in length. Minimal tissue loss. What's the best management?
d. nodular melanoma is the most aggresive one	A. Delayed closure with a graft.B. Immediate grafting.
	C. primary closure.
6. Which one of the following is not a contraindication to enteral feeding?	D. Delayed primary closure*** E. Secondary.
A. Severe diarrhea resistant to medical therapy.	
B. 180 cm ?!	12. Which one of the following is wrong regarding felon (paronychia):
7. What's the meaning of half strength formula? A. 50% formula with 50 % water ***	A. It's treated by antibiotics ***
	CARDIOTHORACIC AND

VASCULAR

5. what is the most common lung CA in nonsmoker? 1. Atrial septal defect that is associated with partial anomalous pulmonary A. Squamous cell carcinoma. venous return is due to defect in: B. Adenocarcinoma.*** C. Bronchogenic carcinoma. A. Osteum primum.? B. Osteum secondum.? C. Sinus Venosus*** (according to uptodate there are two types: septum primum 6. Which one of the following is NOT defect and sinus venosus defect). present in cardiac tamponade? A. Muffled heart sounds. B. Kausmaul sign *** 2.A patient presents with symptoms typical of venous insufficiency in the lower limb (rising leg to get better. Waking from sleep with pain....) What 7. Popliteal aneurysm, which one of the is the most likely cause? following is true? A. Deep venous insufficiency *** A. Most common peripheral aneurysm B. B. Perforating veins insufficiency. C. Complicated varicose veins. D. 8. Which one of the following is false regarding fomeral aneurysm? 3. A motor vehicle accident patient A. Involves all three layers of the presents with signs and symptoms of vessel*** respiratory distress w ashya2 o5ra. What's the most likely cause? B.bilateral in 10% A. Traumatic diaphragmatic rupture. B. C.eshe 2n type1 fomeral aneurysm 4. All of the following are true except: 9. Which one of the following scenarios regarding congenital anomalies is A. Diaphragmatic hernia is more associated with the worse outcome? common on the right.*** B.

A. Left coronary artery coming out of

the pulmonary artery.

B. Right coronary artey coming out of the pulmonary artery. C.	13. Obstructive sleep apnea???!all except: A. Left sided heart failure.
10. Which one of the following is associated with mild hemoptysis?A. Chronic bronchitis.***B. Lung cancer.C. Tuberculosis. D.	14. Which one of the following best describes the function of the aortic valve? A. Aortic valve prevents backflow of blood from aorta to left ventricle during diastole.*** B.
11. Regarding Intraaortic balloon pump counterpulsation ?!?!?!?:A. paraplegia. ?!?!?B. Stroke. (rare according to uptodate)	15. Which one of the following is not an indication for CABG?A. two vessel disease with patent left coronary lumen.B. C.
C. aortic thrombosis.	
D. Limb ischemia.*** (occurs in 6-25 % of cases. Uptodate) E. Femoral artery aneurysm.	GI surgery: 1-All are associated with malignant transformation in small intestine except:
12. Which one of the following is most diagnostic of thoracic aortic aneurysm rupture?	a- Sclroderma***b- Crohn's diseasc
A. Wide mediastinum on X-ray.	c- FAP
B. CT scan ***	d- Puets jeghers syndrome
C. Aortogram (is the best when we want to detect branch vessel pathology according to uptodate).	Answer is

A- Stroke		C-	Nodular arthritis
B- Arrhythmia		D-	Erythema nodosum (I think)
C- Limb ischemia		Ansv	wer is C
3-One of the following is diverticulum	a true	8-Or elder	ne is false about appendicitis with rly:
A- Duodenal		A-	WBC is normal
B- Jejunal diverticulur	n	B-	Fever is not always present
C- Zenker's		C-	50% are ruptured at presentation
D- Cecal			ne is right about esophagous omy:
4-One of the following is hydatid cyst	true about	A- at dia	It deviates anterior and to the left aphragm.
A- IHA-serology is the	most specific	10-C mets	One is false about abdominal wall:
5-One of the following do	pesn't cause	A- sprea	Associated with hematogenus ad of malignancy
A- Scleroderma		B- entry	Seeding at site of laparoscopic
		C- mass	Present as painful peritoneal
6-One is false about ulcerA- Associated with coB- Rarely involve rect	bble stoning		omething about testicular cancer seminoma
7-One is not associated w	ith crohn's	A-	Alfa fetoprotein .
A- Sacroilitis			which genetic defect associated with
B- Ankylosing spondy	litis	nered	ditary non polyposis syndrome:

A- FPC	b. can be associate with cancer in the long run
B- K-ras	c.megacolon and rupture is rare
C- MLH1/MSH2	1
D- P53	17- opss-pneumococcus
Answer is C	17- opss-pheumococcus
13- one of the following is not secreted	18-GIST all true excpet
by stomach:	a-mets to the lymph nodes is common
A- Lipase	19-child C
B- Glucagon	19-ciliid C
C- Gastrin	20- gastric cancer ,all true except
	a.PET is a good diagnostic tool
Ana bagool glucagon.	b.endoscopic ultrasound can be used in determining T and N
14-all of the following dencrease reflux	
to esophegous except : A- Fundus distention	21-papillothyroid = obesity
	22-pancreas = head and tail
15-needle stick injury by HBV contaminated needlechances you get it is:	23-Which one of the following is a paraneoplastic syndrome associated with hepatocellular carcinoma?
A- 3/10	A.Hyperealcemia
B- 3/100	•
C- 3/1000	B.Hypoglycemia
	(Both happen according to uptodate)
D- 3/10000	**.Crohn's most
E- 3/100000	all are affect beating account afetter and
16- one is false about crohn's	all are affect healing except :fatty acid low

Mostly at 4th and 5th decades

- 1. All of the following can cause thyrotoxicosis except:
- a- Stromaovarii (monodermal teratoma that contains mostly thyroid tissue) b-Medullary thyroid cancer(originates from the parafollicular cells (C cells), which produce the hormone calcitonin) c-hashimoto
- d- Plummer syndrome e-Grave **Answer: B
- 2. About the mechanisms of thyroid hormone synthesis
- a- it is controlled at the level of both pituitary gland and hypothalamus
- b- TSH effect is limited to the release of stored hormones**
- 3. Solitary thyroid nodule found in a patient with 6 month history of hoarsness of voice, what is the most probable diagnosis
- a- Graves disease
- b- anaplastic carcinoma of the thyroid
- c- Medullary carcinoma
- d- papillary carcinoma
- 4. the most common cause of goitrous hypothyroidism
- a- DeQuervian thyroiditis
- b- reidel thyroiditis
- c- Hashimoto thyroiditis
- d- Graves disease
- e- drug-induced thyroiditis

- 5. A patient with a thyroid nodule, what is the most appropriate next step (or something like that)
- a- U/S
- b- FNA
- c- uptake
- d- scan
- 6. regarding parathyroid gland, which of the following is correct a- it releases PTH and calcitonin in order to control Ca levels
- 7. Regarding the parathyroid gland, which of the following is the most important finding in a patient with parathyroid adenoma
- a- elevated PTH
- b- elevatedCa
- c- elevated Na
- d- reduced phosphate
- e- osteoporosis
- 8. Submandibular sialedinectomy is associated with all of the following EXCEPT:
- a- Frey's syndrome
- 9. Most common cause of facial nerve palsy is
- a- Parotid CA
- b- maxillofacial trauma
- c- Bell's palsy

d- surgery

Familial form of medullary thyroid

ca....all true except:

10. All of the following causes constipation EXCEPT	a. can be assosiated with pheochromocytoma b. assosiated with MENIN mutation
a- opiates	c-calcitonin secreting cells undergo hyperplasia
b- ZE syndrome	d. elevated calcium
c-hypothyroid 11- the most important electrolyte disturbance in patients with Conn's syndrome is	Solitary thyroid nodule found in a patient with 6 month history of hoarsness of voice, what is the most probable diagnosisa- a.Graves disease
a- hyponatremia	
b- hypokalemia	b- anaplastic carcinoma of the thyroid
c- hypernatremia	c- Medullary carcinomad-
d- hyperkalemia	d. papillary c arcinoma
which of the following raise the	Hirshsprung disease , all are true
possibility of PT cancer in 1ry hyperparathyroidism:	except:
•	
hyperparathyroidism :	except: a. Biopsy show evidence of decreased
hyperparathyroidism : a.v.highCa	except: a. Biopsy show evidence of decreased ACH esterase in the aganglionic segment b- Auerbach and Messiner plexuses are missing
hyperparathyroidism: a.v.highCa b. v.high pth	except: a. Biopsy show evidence of decreased ACH esterase in the aganglionic segment b- Auerbach and Messiner
hyperparathyroidism: a.v.highCa b. v.high pth c.v.highCl d.v.low PO4 MCC of goitorus hypothyroidism in	except: a. Biopsy show evidence of decreased ACH esterase in the aganglionic segment b- Auerbach and Messiner plexuses are missing c- unaffected segment is dialted
hyperparathyroidism: a.v.highCa b. v.high pth c.v.highCl d.v.low PO4 MCC of goitorus hypothyroidism in adults:	except: a. Biopsy show evidence of decreased ACH esterase in the aganglionic segment b- Auerbach and Messiner plexuses are missing c- unaffected segment is dialted thyroid noduleMANS:
hyperparathyroidism: a.v.highCa b. v.high pth c.v.highCl d.v.low PO4 MCC of goitorus hypothyroidism in	a. Biopsy show evidence of decreased ACH esterase in the aganglionic segment b- Auerbach and Messiner plexuses are missing c- unaffected segment is dialted thyroid noduleMANS: a. u/s
hyperparathyroidism: a.v.highCa b. v.high pth c.v.highCl d.v.low PO4 MCC of goitorus hypothyroidism in adults:	a. Biopsy show evidence of decreased ACH esterase in the aganglionic segment b- Auerbach and Messiner plexuses are missing c- unaffected segment is dialted thyroid noduleMANS: a. u/s b.FNA
hyperparathyroidism: a.v.highCa b. v.high pth c.v.highCl d.v.low PO4 MCC of goitorus hypothyroidism in adults: a.hashimoto	a. Biopsy show evidence of decreased ACH esterase in the aganglionic segment b- Auerbach and Messiner plexuses are missing c- unaffected segment is dialted thyroid noduleMANS: a. u/s b.FNA c. Thyroid scan

8- A 6 year old with undescended c.lymphoma testes, what do you tell the parents: d.teratoma a. orchiectomy (may be with orchidopexy of the other testis) 13-not acceptable as tracheostomy b. orchidopexy to reduce possibilty of ca indication: c. orchidopexy without affecting a.croups spermatogenesis b.unilateral vocal cord paralysis 9-all are medical indications of 14-ASD assosiated with absrsho: circumsussion except: a. sinus venosus a'phimosis b.secundum b-enurisis c.primium c.uti d.reflux 15-all are clinical types of BCC except: a.nodular 10-doesn't improve claudication: b.cystic a-stop smoking c.subcutaneouseb-aspirin d pigmented c-excersise e-ulcerated d.bypass e.angioplasty 16-mcc of mammary fistula: a.trauma 11-long term with DVT a.PE b.fat necrosis b.stasis ulcer c.cancer 12-most common pericardial tumor:

a. mesothelioma

b. met bronchogenic ca

d.brest syrgery

e.mastitis

23-acute pancereatitis cause...all true 17-SCC all true except: a.marjolin ulcer is less agressive except: a. caused by hyperlipidemia 18-staph aurius is the mcc of all except: b.caused by CBD stones passed to a. breast abscess deudenum b.cellulitis c- 5-MP is an established cause 19-all decreases collagen synthesis 24-all are common causes of solitary except: lung nodule except: a.hypoxia a.wegner's b.anemia b.tuberculoma c.protien depletion c.metastasis d.infection d.abscess 20-all are mechanisms agautoregulation in shock except: 25-blood transfusion in emergency stateall true except: a. increase capillary hydrostatic a.O+ to male pt with no history of pressure transfusion b.increase angiotensin 2 b.O+ to female maried with no history c. precapillary sphincter decrease tone of transfusion 21-internal thorasic artery ...one is true: c. O- to young male patient d.O- to married female a. it supplies the breast. b. it's a branch of ..?? 22-one of the following antibiotics is with broad anaerobic coverage: 26-which causes LES contraction: a.protien a.gentamycin b.fat b.clindamycin

c.pepper

d.fundal expansion

c.cefotaxime

d.ciprofloxacin

e-alchohol c. pericyst, a fibrous layer acquired from the host 27-major blood supply to paratyhroid: 32-diagnosis of acute diverticulitis (to exclude it): a.ssuperior thyroid a. U/S b.inferior thyroid artery b.CT 28-pt ppn with major trauma, all except: c. colonoscopy a. decrease in ADH d.barium b.increasedcortisole 33- not a complication of submand. c.increased prolactin gland surgery: a. frey's syndrome 29-wrong about thyroid: a. TSH regulates only release of b.lingual nerve injury thyroxin c.mandibular branch injury b. thyroid is the store for thyroxine 34- fullthicknessvs partial thickness true 30-all are elements of childpughexcept: except: a. FTSG is assosiated with better take a.PTT b.to be used at exposed joints b.encephalitis 35-all about burn is true except: c.ascitis a. diagnosed as first degree in the first day then turned to be 2nd degree on the following day. 31.hydatid cyst...all true except: b.degree of burn affects the systemic menagement of burns a.sands.... b.calcified = dead

36-head and neck in infant TBSA:

a.14%	b.myofibroblasts.
b.16%	c. Macrophages
c.1 9 %	42-pressure sore, which is wrong:
37-claudication , which is true : a.caused by muscle ischemia	a. flaps are assosiated with minimal recurrance
38-which cell produce TNF-a:	43-wrong about anal fissure: a. in males, most commonly ant median
a.activated t lymphocye	44-gastric Ca, not a RF:
b-monocyte	a. female sex
c- damaged endothelial cells	
d-fibroblasts	b. smoking
	45- a ques fistula in anno ?!! ⊗
39-not assosiated with SIRS pathology :	46-Hepato cellular Caall except :
a.IL-5	a. HBv,HCV are independant RF's
b.1L-8	b.60% of patients can areresectable
c.TNF-a	47- An adolescent with a history of sudden testicular pain of 4 hours
40-most important electrolyte abn in conn's :	duration that is continuous, on examination he has tenderness, absent cremastiric reflex on the affected side
a- hyponatremia	with high riding testis, the most appropriate next step is:
b- hypokalemia	a. ultrasonography to evaluate blood
c- hypernatremia	flow.
d- hyperkalemia	b. urgent scrotal exploration with possibility of bilateral orichidopexy??
41-which cell doesn't play a role in the healing of cleaned excised wound :	c. observe to see if the pain is relieved by narcotics
a. P MNLs	

d. responsive to medical but persisted 48- most common XR finding in forign body asoiration: more than 7 years. a. air trapping b.pneumonia 52-most common extraintestinal in crohns: c.nlxr a.Ankylosing d. FB b.arthritis e. atelactasis c. erythema nodosum 49-1 year patient ppn with (....) (d- iritis related to respiratory i don't remember the ppn) on xray was found to have 53-regarding CBD stones ...all true hyperinflatedIft lung feild ...what to do: except: a. left chest tube a.if the sonesdiscoverd less than 2 years post cholycystectomy it's retained b.rt chest tube c. brochoscopy b.if the sonesdiscoverd more than 2 years post cholycystectomy it's recurrent 50-mcc of death in acute pancereatitis: c.stones are ass with increased risk for a.hemorhage stasis and infection d.most patients with stone obst have b.hypovolemia ve bile culture c. pseudocyst rupture d.infection 54-appendecitis in pregnant lady...which is true: 51-not indication for surgery in UC: a. risk is the same with normal ladies a.toxic mega colon b.risk is highest in the 1st 2 trimesters b. massive GI hemorhage c. if suspected acute appendecitis then remove as early as possible c. refractory to medical 55-wrong about acute cholysystitis:

a. open cholecystectomy is the 1st line of treatment	60-enteral feeding, which is wrong:
of deathern	a. it increases bacterial translocation
Gall stone, which is wrong? >> 1ry gall stones are from stasis and	b. it is the choice in head trauma pt
infection	61-mcc of spontaneous pneumothrx :
56-Regarding esophageal cancer, which is wrong:	a. bronchiactasis
1- around 80% present with dysphagia	b.TB
2- dysphagia causes wt loss	c. pulmonary blep s
3- all Adult pts with dysphasia should undergo esophugscopy to rule out malignancy	d. chronic bronchitis
4- Screening for esophageal cancer in Jordan, is not cost effective**	62.1st airway management in multi trauma patint
57-c.perfringes are considered to be :	a. debris sucction with jaw elevation
a. G +ve bacill i	b.oral airway
b.G+ cocci	c.uncuffet tracheal tube
58-all can cause constipation except :	d.cufffed tracheal tube
a.zolingerelisonsyndrom	63-not a middle mediastinalmass :a.ganglioneuroma
b. alaminiom hydroxide	64-patient underwent breast biopsy and
c-opiates	3 y's later ppn with Ca, she mostly had had:
d-iron	a. atypical hyperplasia
59-shock patient fluid management, ist to give :	b.fibroadenoma
a. ringer lactate	

67- which op doesn't need prophylactic antibiotics:	
a. herniotomy in children	71-which of the following is not associated with billous vomiting: a- pyloric stenosis
b. breast for ductal ectasia	b-volvulus
68-about class 3 wounds(72. Most common cause of facial nerve palsy is
contaminated) , which is not of this entity :	a- Parotid CA
a. fresh traumatic	b- maxillofacial
b. anal traumatic with feculant	traumac-
contamination	Bell's palsy
	d- surgery
69-Lower limb ischemia :	73- cleft palate, which is wrong:
a. critical LL ischemia causes paralysis and parasthesia	 a. hearing loss due to recurent ear infections
b. In multiple trauma patient you must first perform surgery to fix arterial injury	b. palatal muscles are wrongly inserted
followed by orthopaedic surgery	c. early repaire is assosiated with facial growth problem
70 411 611 611	d. problem in swallowing
70- All of the following can cause thyrotoxicosis except:	e.caused by failure of palatal process meet at the medline
a- Stromaovarii (monodermalteratoma that contains mostly thyroid tissue)	74-PUD perforation , which is Wrong:
b-Medullary thyroid cancer(originates from the parafollicular cells (C cells),	1-mostly in the ant.wall
which produce the hormone calcitonin)	2-20% present with pneumoperitoneum
c-hashimooto's	**
d-Graves' disease	

3 Omental patching is an effective surgical treatment	1- with cirrhosis
_	3- with infected bile **
75-Regarding Hereditary Spherocytosis , wrong :	
1- abnormality in spectrin	80-Obstructive jaundice, all are true except :
2- spleenectomy doesn't treat anemia**	1- High Bilirubin in urine
76-Regarding laparoscopy, which is wrong:	2- High urobiliogen in urine **
1- more risk of DVT	3- normal AST
2-trochar site hernia	4- High ALP
2-trochar site herria	
3-trochar site recurrence of malignancy	81-Not a stimuli for visceral pain
	1-infarctiom
77-Regarding FAP, which is wrong	2-inflammation
1- polyps are adenomatous	3-Heat*
2- all patient will have cancer at some	3-neat*
point	4- Stretch
3- clinically present in teens *?	5-distention
4- mostly the surgery is, coloectomy	82-Wrong about wound healing:
with ileorectalanastmosis	a. increase vascularity happens in remodiling phase
78-Polyps in Rectum	
1- mostcmn type is tubulovillous**	83-on in favor of mechanical valve:
2- villous is most dysplastic	a.younge male less than 30 yrs
79-Abt black pigments gall bladder stones, WRONG:	84-patient with a.fib& came with acute abdominal pain wts your Dx: a-Acute embolic mesintric Ischemia
1- asccocited with hemolysis	

b-Chronicmesintric Ischemia

91-wrong about hernia in children:

cAcute thrombotic mesintric Ischemia	1- less common in premature infants
85-Wrong abut 3rd degree burn: a-skin will blanch upon pressure b-painless skin	92- which of the following is wrong about esophegeal atresia:
86-True about pulmonary circulation: a-pulmonarywidge pressure is 12 mmhg**	a. most common type of esophageal atresia associated with proximal tracheo-esophageal fistula
87-What will not cause cyanosis at birth:	b. presence of gas in the bowel indicates distal tracheal fistual
a-Tetralogy of fallot	c. associated with polyhydraminos
b-VSD*	d.sth about aspiration
c- Transpostion of great vessels	93- respiratory acidosis - increased bicarbonaceabosrbtion and
d- pre ductal coarctation of the aorta distal to subclavian	ammonia producation ** - narcotic is nt a common cause of it
88-which will cause hydronephrosis:	94- sth wrong abt lymphedema - lymphedema tarda is secondry
a-pelvouretric stenosis**	95- PTH:
- Ferrosi - State - St	a- oxyphill cell release pth
89- All cause hypokalemia except:	b- originate from 2nd and 3rd pharyngeal pouches
a-severevomitting	c- ectopic adenoma can present anywhere from the mouth to the deep
b-severe diarrhea	mediastinum ****
c-crush injury of the lower limb** 90-Not a risk factor for DVT:	96 - preauricular sinus ; which is wrong 1st branchial cleft
a-thoracic surgery to a man less than 40 Y/O	97- co poisoning or gas injury: diagnosed by blood gases and chest xray not sure abt the answer

- 98- Severe atherosclerosis
- a. Left coronary artery
- b. Right coronary artery
- c. anterior descending artery
- 99- in blood transfusion there is no risk for bacterial or fungal transmission
- 100- in respiration : pleural pressure is

less than alveolar

101- not in shock : shortened capillary

refill



Surgery 6th year-2011

- 1. 3rd degree burn and 3rd space loss >> one is false:
- a. Cause edema in places other than burn
- b. Increasedhb means fluid overload

Answer is :b

- 2. about transfusion:
- a. Still there's possibility for hep b, hiv
- b. Cmv on wbc surface
- c. Can cause ca recurrence
- d. Can cause autoimmune disease

Answer is :D

- 3. In chronic inflammation all are true except:
- a. lymphocytosis
- b. fibrosis
- c. eosinophilia
- d. multinucleated giant cells

Answer is :C

- 4.long term survival with prosthetic valve??
- a- mitral
- b- aortic
- c- mv+av
- d-tricuspid

Answer is :B



5. After knee injury if pulses are intact:

- a. observe or angiogram
- b. discharge
- c. send to OR

Answer is :A(observe)

- 6. the most imp after DVT:
- a. PE
- b. venous ulcer

Answer is :A

- 7.to confirm aortic transection:
- a. x-ray--- wide mediastinum
- b. ct
- c. aortogram

Answer is :C (ctangio is the best)

- 8. after knee dislocation the most important is:
- a. nerve injury
- b. vasular
- c. tendon
- d. capsule

Answer is :B (popliteal)

- 9. a true diverticulum:
- a. duodenal
- b. jeujenal
- c. mickele's
- d. epiphrenic

Answer is :C



10.fresh frozen plasma is indicated in all except:

- a. volume expansion
- b. coagulation factor defeciency
- c. hemophelia

Answer is :C

- 11. about hemorrhage, one is wrong:
- a. primary --- during surgery
- b. reactionary --- during 24 h
- c. secondary --- after a week
- d. secondary --- slipped ligature
- e- reactionary due to inc blood supply

Answer is :D

- 12.brestca increases with:
- a. braca 1
- b. family hx
- c. induced menopause
- d. first child at 35

Answer is :C

- 13. about breast imaging:
- a. mammogram sensitivity increase with age
- b. mammogram is better in older than 4o

Answer is :B is false

- 14. surgery is indicated in all of the following except:
- a. pnt with complications of antithyroid drugs
- b. pregnant requires high dose
- c. large goiter and suspicious nodiole
- d. small goiter

Answer is:D



15. withhyperparatyroidism:

- a. high ca, low phosphate, high cl
- b. high ca, low phosphate, low cl

Answer is :A

- 16. TNF, wrong is:
- a. secreted by inflam cells and tumer
- b. stimulate IL 1
- c. causes cachexia
- d. anticoagulant
- e. play a role in angiogenesis Top of Form

Answer is :D

- 17. pancreatic enzymes, wrong one:
- a. lipase is secreted in the active form and causes dec serum Ca
- b. activated by duodenal enz
- c. stimulated by secretin
- d. inhebited by somatostatin
- 18. energy requirement:
- a. 30 kcal/kg
- d. increase in burn
- c doesn't increase with peritonitis
- 19. hypermagnesemia, one is false:
- a. treated with cagluconate
- b. with renal failure
- c. with hyperaldosteronism
- d. dec deep tendon reflexes
- e. prolonged P-R

Answer is :C



20. all the following involve the extrahepatic duct except

Answer is: Allaigile disease(it's a disease of intrahepatic bile duct)

21. hashimoto wrong:

Answer is: high TSH is diagnostic(Anti Tpo and Anti Tg antibodies are diagnostic)

- 22. wrong about F.B in children:
- a- more in male
- b- coins m.c.
- c 80% in the stomach will pass

Answer is :B (peanuts is the most common)

- 23. q about h.pylori→ It is not a gram positive organism
- 24. HIT WRONG -- platelets >20000?
- 25. small bowel Carcinoid are multiple in 3 % in cases --> this is Wrong
- 26. Omphalocelewrong is: easy to repare
- 27. wilms tumor ---> involvement of IVC does not alter prognosis
- 28. About graft, wrong → meshed is less intake than non- meshed
- 29. pectusexcavatum...
- a. mainly for cosmetic



b. regress with age

Answer is :B

- 30. laser in all except....
- a.scleroderma
- b.small nevi
- c.hair removal

Answer is :A

- 31. exophthalmous is less in graves than toxic goiter? feeshehek??
- 32. about heart —all affect coronary perfusion except:
- a-heart rate
- b- ventricular strength
- c- aortic stenosis
- d-myocardial contractility

Answer is :A

- 33. about spleenectomy --
- 1st choice in b thalassemia?
- 34. ARDS ... inc lung compliance ??
- 35. pyloric stenosis... common worldWide without ethnic variation
- 36. least common nonsurgical cause of acute abdomen: hyperthyroid?
- 37. GCS wrong: higher more mortality



38.about hernia: a-recommended to repair in pregnancy ??..

- 39. emphysema in gallbladder. One is wrong: it is calculous?
- 40. Hypotension and bradycardia
- neurogenic shock
- 41. Which of the following statements about true femoral artery aneurysms is/are correct?

Answer is :All three layers of the blood vessel wall are involved in true aneurysms.

- 42. Which of the following confirms the diagnosis of transection of the descending thoracic aorta?
- A. Widened mediastinum.
- B. Fractured first rib.
- C. Left pleural effusion.
- D. Positive aortogram.

Answer is :all are true

43. about UC .. one is true

Answer is :10% terminal ileum

44. not a risk factor for breast ca:

Answer is :artifitial menopause

- 45. the most serious microorganism??
- a-B-strep
- b-staph
- c-mycoplasma



d-psudomonus

Answer is :D

46.All of the following cause gallbladder stone due to stasis except:

- a. spinal cord injury
- b. post bariatric surgery

Answer is :b

- 47. not a vascular anomaly in neoborn:
- a. a-v malformation,
- b. venous mai,
- c. lymphatic mal,
- d. teratoma.
- e. fibrosacystica

Answer is :b

48. a common cause of massive lower GI bleeding in a 6 month old ??

Answer is :AV malformation

49. about prophylactic cholecystectomy ??

50.WRONG ABOUT ENERGY:

- a. decrease need in peritonitis
- b. 25-35 kcal/kg/day in adults

Answer is :A??

- 51. not a risk for sever acute pancreatitis: obesity
- 52.not a cause of polyhydramnious: hischbrung



53. sepsis wrong:

a- 90% culure known at presentation

b- UTI is less sign than g.i causes ..eshehek ????

54. molem.i prognostic factor:

a-depth

b-size

if the question is about:

*** melanoma then the answer would be the ABCDE rule (asymmetry, irregular border, variation of colour , diameter >6mm, elevation)

*** skin ca prognosis the answer would be depth

55. DVT: long term complication:

a- venous ulcer

b- P.E

56. carcinoid in appendix → less than 1.5 do rthemicolectomy

57. m.c. n CXR: emphysematous changes...

58. neuroblastoma.,,wrong stage 4s associated with increased mortality??

note :stage 4s affect one side of the body like stage 1, 2.. but affects the liver, skin, and or bone marrow, if the age <1 year: cure rate 50-80%, if the age >1 year cure rate is 10-40%



59.not in child criteria for liver cirrhosis: AST

- 60. not a symptom of hypercalcemia: oligouria
- 61. q about popliteal aneurysm
- a. bilateral in 70%
- b. symptoms due to compression of structures...

Answer is :A

(50% are bilateral, usually asymptomatic, symptoms is due to compression of nerve and soft tissue)

- 62. not CI for surgery in lung ca:
- a. stage III A
- b. pleural effusion

??

(contraindications of surgery are: Mets, mediastinal involvement, small cell ca, poor respiratory reserve, age >70)

- 63. not a risk for P.E: chest infection
- 64. about diaphragmatic hernia:
- a.rt diaphragm close earlier
- b. PDA w left to right shunt is complication
- 65. q about cleft palate
- 66. wound healing wrong: good healing 40% of original strength
- 67.3rd degree burn wrong :blanchable

68. most common cause of acute mesenteric ischemia:

- a- atherosclerotic disease
- B- EBOLISIM
- C- VENOUS OCCLUSION

Answer is :A

- 69. most important in organ transplant
- a- HLA
- **B-ABO**
- c- T cell ...

if the Q was about cadaveric organ transplant the answer would be ABO but if it was about living donor the answer would be HLA typing

- 70. most specific sign of thoracic aortic dissection
- a- wide mediastinum
- b-apparent on ct scan
- c- injured by 1st rib fracture ...

Answer is :b (shows intimal tear)

- 71. TOF most imp prognostic indicator ??eshehek
- a- ASD size
- b- VSD size
- c- pulm stenosis...
- ??
- 72. gastrinomam.c:
- a.anrtum of stomach.
- b. head of pancreas...
- c. body of pancreas.
- d. gastroduodenal junction ???

Answer is :duodenum is the most common



73. wrong in obesity: high HDL

- 74. crhons ... wrong:
- a- bleeding per rectum
- b- fistulas
- c-skip
- d-commonly involved rectum

Answer is :D

- 75. fluidmaintenace in 22 kg child: 1550
- 76. gastroschisis wrong: in the midline
- 77. appendicitis wrong:
- a- differnet anatomy .. different clinically
- b- if u are sure go to OP
- C- obstruction in the appendix is important but not a must
- d- if unclear of dx radiologic tests must be done before appendectomy

Answer is :??

abdct is a must in female, c is correct

- 78. least common cause of bleeding in 6 months old:
- 79. loweresophygeal sphincter wrong:
- pressure or competnecemaintaiend by high abdominal pressure
- -contraction of diaphragmatic crus will cause decrease LES pressure

both are correct

- 80. not carcinoma in situ: BCC
- 81. significant in CAD: LAD



82. COIN F.B in child for 2 hrs..xray- in upper esophagus ,next: a-admission and urgent endoscopy for removal b-discharge and reassure family bcz it goes spontaneously both are wrong

**blunt object in esophagus is not urgent and is either removed by a foley catheter or passed to stomach by a bougie k followed by observation till it pass with stool

Surgery 4th yr/2011

- 1. Recurrent laryngeal nerve is a branch of:
 - a. Vagus nerve
- 2. A 65 year old comes with an attack of diverticulitis in the sigmoid, is managed conservatively and gets better.

What's the next step in management?

- a. Offer surgery on 2nd attack
- 3. What is chemodectoma?
 - a. Tumor of the carotid body!
- 4. Not a risk factor of gallbladder carcinoma?
 - a. Choledochal cyst
 - b. Porcelain bladder
 - c. Dysfunction in the sphincter of Oddi
 - d. Anomalous insertion of the pancreatic duct in the CBD

e.

- 5. One of tge following is wrong regarding acute inflammation:
 - a. Capillary dilatation causes arythmia of skin
 - b. Capillary leakage due to increase hydrostatic preasure
 - c. Capillary dilation causes increase permeability
 - d. Arteriolar dilatation causes hotness of skin
- 6. Patient with obstructive jaundice, initial diagnostic step:
 - a. U/\$
 - b. ERCP
 - c. MRCP
 - d. PTC
- 7. causes of conjugated hyperbilirubinemia except :hemolysis
- 8. 1ry hyperaldosteronism causes all the following except: hypotension
- 9. One of the following is not a cause of NEONATAL small bowel obstruction:
 - a. Malrotation
 - b. Hirschsprung
 - c. incarcerated hernia
 - d. intussusception
 - e. meconium Plug
- 10. Tetralogy of Fallot, all except:
 - a. ASD
 - b. VSD
 - c. pulmonary stenosis
 - d. dextroposition of aorta
 - e. right ventricle hypertrophy
- 11. Presentation of biliary atresia:
 - a. pain and vomiting
 - b. coagulopathy
 - c. hepatomegaly
 - d. acholic stool
- 12. Most imp. Contributing factor to pressure sore:
 - a. Pressure
 - b. Infection
- 13. Bradycardia is a characteristic finding of which type of shocks:
 - a. Neurogenic shock
- 14. Wrong about ulcer:
 - a. The margin in the area immediately surrounding the ulcer

- b. The edge is the relationship of the ulcer with the skin
- c. Floor is what we see
- d. The base is what lies underneath
- e. Biopsy is best taken from the center of the ulcer
- 15. about lung cancer which is wrong:
 - a. 70 % present with stage 1 or 2
 - b. targeted therapy is proving efficiency
 - c. most common type is adenocarcinoma
 - d. surgery is the main line of treatment for ...
- 16. WrongAbout trauma in children:
 - a. US is superior to CT
 - b. most common cause of death in 1-14 age group
 - c. multiorgan
 - d. blunt traumas are the major cause 4-25% head injuries
- 17. Trigering factor for reepithelialization in wound healing:
 - a. loss of contact inhibition
- 18. Most common visceral aneurysm:
 - a. Splenic artery
 - b. Inferior mesenteric artery
 - c. SMA
 - d. Hepatic
- 19. which of the following is wrong about shock:
 - a. Septic shock is mainly due to pump failure
- 20. One of the following is not part of SIRS:
 - a. temp <36 or >39
 - b. WBC >12000 or < 4000
 - c. systolic blood pressure < 100
 - d. respiratory rate > 20
 - e. heart rate >90
- 21. goiter can reach all the following places except:
 - a. submental
 - b. submandibular
 - c. posterior triangle
 - d. superior mediastinum
 - e. retroesophegeal
- 22. Wrong about follicular ca of thyroid:
 - a. it occurs at age older than papillary
 - b. it spreads hematogenously
 - c. is less common than papillary
 - d. multicentric
 - e. spread is usually to bone
- 23. Use of mechanical valve is indicated in:
 - a. man younger than 30
- 24. which of the following is not associated with 3rd space loss
 - a. massive soft tissue infection
 - b. pancreatitis
 - c. peritonitis
 - d. anaphylactic shock
- 25. Most related to DVT:

- a. heterogenous protien C deficiency
- b. heterogenous V laden deficiency
- c. Antiphospholipid
- d. OCPs
- e. Prothrombin mutation
- 26. Wrong about varicose veins
 - a. Commonest PRIMARY cause it DVT
 - b. Hereditary predisposition
- 27. all of the following are hard sings of vascular injury Except:
 - a. absent pulses
 - b. distal ischemia
 - c. bruit or palpable thrill
 - d. stable hamartoma
- 28. one is wrong about HNPCC:
 - a. Autosomal recessive mutation in MMR
 - b. negative genetic testing in a highly suspected subject rules out the dx & the person is dealt with as any one else from the general population
- 29. A pt who had wound infection after hernioplasty (groin) mostly due to:
 - a. Patient's skin
 - b. room air
- 30. Open cholecystectomy is considered:
 - a. clean contaminated
- 31. a 67 year old male presented with enlarged nick lymph node for 2 months, whats ur next step:
 - a. FNA
 - b. antibiotic and observation
 - c. CT
 - d. MRI
- 32. About Lymphedema, one is wrong:
 - a. Secondary lymphedema is termed lymphedema tarda
 - b. Primary is more in females
 - c. mcc of secondary is filariasis
 - d. clymphoscintography is a helpful diagnostic tool
 - e. can be ttted with compression surgery
- 33. compression of dermal lymphatic vessel causes one of the following:
 - a. reflex pain in other side
 - b. peau d'orange.
 - c. nipple retraction
- 34. Wrong about colorectal cancer:
 - a. its good to use Astler coller dukes staging
- 35. Which of the following is true regarding skin:
 - a. epidermis is vascular
 - b. collagen is produced by angiogenesis
 - c. epidermis is 20% of the skin
 - d. skin appendages are mesodermal
 - e. Collagen increases the tensile strength
- 36. Concerning Tetanus, all of the following are true except:
 - a. tetanoendotoxins affect sensory and motor fibers **
 - b. it causes spasms in the muscles
 - c. can cause respiratory failure

- d. can be treated with penicillin
- e. the shorter the time between infection and spasm, the poorer the prognosis
- 37. Mitral stenosis causes all except:
 - a. Left ventricular hypertrophy
- 38. the internal thoracic artery is the least to get aneurysm because:
 - a. increased NO and decreased prostacyclin
- 39. One doesn't cause DVT or something like that:
 - a. Congestive Heart failure
 - b. OCPs
 - c. Blood group O
 - d. Central venous line
- 40. patient lost 1L blood all of the following is True Except:
 - a. decrease renal blood
 - b. Increased body temperature
 - c. Increased platelets
 - d. Increased fibrinolysis
- 41. exotoxins associated as a primary cause in all except:
 - a. beta hemolytic strep
 - b. clostridium tetani
 - c. clostridium botulin..
 - d. diphteria bacilli
 - e. E. coli
- 42. most common associated with HIV:
 - a. Kaposi Sarcoma
- 43. Noninvasive ca of the breast ??
 - a. Comedo
 - b. Medullary
 - c. Mucinous
 - d. Infiltrative ductal
 - e. papillary
- 44. Most useful way to diagnose gall stones
 - a. ultrasound
- 45. Hydronephrosis most common cause:
 - a. Ureteropelvic obstruction
 - b. Vesicoureteral reflux
 - c. Wilm's tumor
- 46. Fixed mass attached to skin all except:
 - a. fibroadenoma
- 47. A question about Obesity:
 - a. Doesn't have a genetic component
 - b. mother smoking makes offspring at higher risk of becoming obese later on?
- 48. ERCP:
 - a. 1/3 get pancreatitis
- 49. Gastric cancer:
 - a. CA cancer screening is warranted and necessary in Jordan.
- 50. serious atherosclerosis when involve: anterior descending coronary artery
- 51. All of the following are indications for tracheostomy except:

- a. excessive secretions
- b. Bronchial obstruction
- 52. Blood reached heart with concentration O2 100% the expected O2 sat at the coronary sinus is:
 - a. 75%
 - b. 60 %
 - c. 50%
 - d. 35%
 - e. less than 20%
- 53. all are associated with parietal pain Except:
 - a. distention of organ capsule
 - b. sharp localized
 - c. somatic nerve
- 54. Crohn's disease associated fistula all are true except:
 - a. colovesical is associated with acute UTI caused by single organism *
 - b. colovesical is associated with pneumaturia
 - c. colointestinal may be asymptomatic
 - d. colovaginal associated with feces and fltus through vagina
 - e. colocutaneous associated with secretion to the skin
- 55. most common cause of death in burn patients ??
 - a. inadequate resuscitation
 - b. pneumonia
 - c. UTI
 - d. Wound infection
 - ---Dr.Barega says pneumonia---
- 56. prophylactic abx all true except:
 - a. given 24 hrs after surgery in cholecystectomy
 - b. given at time of anaesthesia induction
 - c. should not be used in any case of clean surgery *
 - d. first gen cephalosporin are used
 - e. if given after surgery effect is negligible
- 57. Hydatid cyst indication for surgery incllude all of the following except:
 - a. >10cm
 - b. infected cyst
 - c. calcified cyst
 - d. open to bilary tree with no symptoms
 - e. open to biliary tree with symptoms
- 58. intermittent claudications all except:
 - a. increase with exercise
 - b. relieved by rest
 - c. increased at night
 - d. can be bypass as a choice
 - e. can get back to normal
- 59. all are true about femoral canal except:
 - a. vein artery and nerve run lateral
 - b. inguinal lig anterior
 - c. lacunar lig lateral
 - d. pectinate posterior
 - e. contain lymph node of coll
- 60. wrong:

- a. indirect inguinal hernias in adults are usually congenital hernias
- b. femoral hernia mostly obstructed
- c. femoral hernia occurs medial to the femoral artery, vein & nerve
- d. indirect med to inf epigastric

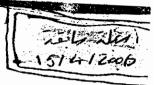
e.

- 61. All about wound healing is true Except:
 - a. 70-80% of strength can be maintained
 - b. Collagen III replace collagen I
 - c. PMN add to tensile strength in wound repair
 - d. All stages of wiund repair are affected by infection, malnutrition etc...
 - e. epithelization at first 2 day hellp to conserve fluids
- 62. A person 20 year old 80 kg, 40% burn. which of the follwing is the correct fluid rescucitation in first 24 hours:
 - a. 640 RL first 8 hrs and 640 RL next 16
 - b. 640 RL first 12 hrs and 640 RL next 12
 - c. 640 NS first 12 hrs and 640 RL next 12
 - d. 640 NS first 8 hrs and 640 NS next 16
 - e. 640 RL first 8 hrs and 640 RL next 16 +maintaenance GW 5%
- 63. patient with mild hypercalcemia, peptic ulcer and diarrhea:
 - a. Zollinger-Elson syndrome
 - b. Cholera
 - c. VIPoma
 - d. Glucagonoma
- 64. All are correct about adrenals exept:
 - a. cortex from mesoderm
 - b. medulla from neuroectoderm
 - c. extraadrenal medull can be found at the sympathetic chain
 - d. Extradrenal cortex can be found in spermatic cord
 - e. extraadrenal tissue can secrete epinephrine primarily
- 65. Bacterial ifection associated with blood transfusion all true except:
 - a. mainly with packed RBCs
 - b. can cause sepsis
 - c. from a donor who had bacteria on slin or bacteremia
 - d. can be preveneted by storage at 2-4C
 - e. it is uncommon
- 66. All of the following are feature of locally advanced tumors except:
 - a. cutaneous lymphatic block
 - b. ulceration
 - c. nipple inversion
 - d. arm edema
- 67. All are true about skin tumors except:
 - a. BCC is more common than SCC
 - b. pigmented BCC can mimic malignant melanoma
 - c. exophytic BCC is more aggressive than ulcerative
 - d. lentigo maligna involves head and neck of elderly
 - e. prognosis of malignant melanoma is affected by depth of invasion
- 68. All are true about GIT lymphoma except
 - a. Gastric lymphoma is the most common extranodal site
 - b. Burkitt's presentation is usually bleeding from proximal jejunum
 - c. H.pylori associated with MALT

- d. celiac associated with Tlymphoma
- e. Surgical excision of stomach is reserved for those with perforation and bleeding
- 69. about hypertrophic and keloid scars:
 - a. caused by excessive inflammatory response
 - b. treated by surgical resection
 - c. mast cells present in both
 - d. keloid inherited sometimes as autosomal dominant
 - e. keloid extend beyond the border
- 70. Blood transfusion with reduced allergy and more concentration:
 - a. Washed RBC
 - b. Packed
 - c. Fresh frozen plasma
 - d. Lymphocyted depleted blood
- 71. all increase gastrin secretion except:
 - a. antrectomy
 - b. vagotomy
 - c. Z-E syndrome
 - d. Atrophic gastritis
 - e. achlorhydria
- 72. All of the following are associated with bochdalek hernia except:
 - A- pulmonary distress on clamping of umbilical cord
 - B- scaphoid abdomen
 - C- barrel chest
 - D- apparent dextrocardia
 - E- distended neck veins *
- 73. GIST, wrong:
 - a. stomach is most common site
 - b. antrum is the most common place to occur
 - c. better prognosis than small intestine
 - d. poor prognosis with size >2cm and high mitotic acivity
 - e. Surgical resection when size >2 cm
 - f. large size tumor and high proliferation index have relative risk of malignancy
- 74. Gastroschisis is associated with all except
 - a. defect is small
 - b. Umbilicus is normally located in abdomen
 - c. protruded bowel is normal
 - d. malrotation of small bowel and large bowel are associated
 - e. bowel is less functional
- 75. Mcc of mechanical intestinal obstruction in adult population is:
 - a. internal hernia
 - b. adhesions after surgery **
- 76. wrong about duodenal atresia:
 - a. most common cause of intestinal obstruction
 - b. non-bilious vomiting
- 77. about pancreatic cyst cancer ?? --> it opens to pancreatic duct..??
- 78. All of the following are associated with response to trauma except:
 - a. increased growth hormone
 - b. hyperglycemia
 - c. decreased insulin

- d. leukocytosis
- 79. Burns, true:
 - a. Second degree burn blanches
- 80. All of the following are response to starvation except:
 - a. Hyperglycemia
 - b. increased urine nitrogen
 - c. decreased metabolic rate
 - d. ??
 - e. food intolerance
- 81. pathophysiology of GERD ???
- 82. contraindication to circumcision
 - a. hypospadias
- 83. concerning burns management, which is wrong:
 - a. prophylactic antibiotics decrease mortality
- 84. all of the following cause acute pancreatitis except:
 - a. hypertriglyceridemia more than 1000
 - b. Hepercalcemia

Collected together by the students of 4th year 2010-2011 Re-organized by: Hamza Jassar (sorry for the mess anyway =D)



>15 INVIT

General Surgery I

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whall I gall

1) anthrax is caused by a bacteria b - fungus c- virus
2) regarding carbuncles, which of the following is wrong © Corbon to multiple a-common in DM b- not common in face c- has multiple sinuses — with
3) cellulites, all are true except a- mostly in lower limb b fever, chills are uncommon c-caused by strept. Pyogens d- lymphangitis is a complication
4) actinomyces israilli, all are true except a- gram +ve aerobes b- sulfur granules are diagnostic © mostly cause infection in iliocecal area (most Common Site Cromin Facial 70%)
5) gas gangrene, all are true except: (A) (mostly) No vaccion, a-vaccination effectively prevent it b-fermentation of CHO of muscle produce the gas $c - X$ ray can detect gas early
6) hydradenitis suppurative, all are true except: a-potential for malignancy (apocitive screen grands) (apocitive screen grands)
7) gas gangrene a- incubation period < 3 days b- gram stain shows enormous RBC and few WBC gas can be detected in the liver
8) necrotizing fasciitis, all are true except: a- mostly pt has impaired immune system c- cause thromosis of the local vessels appearing viable skin b- poly microbial d-debridment depends on the
9) tetanus, all are true except: (a) caused by mixed clostridial infection b- pts who recover require active immunization c- pt develops titanic muscle spasm and convulsions
a) all are true regarding neurofibromatosis except: a) autosomal recessive b-> 5 café au lait c-!!!1 deniment

in type INF Cale au lair spars in adules

11) regarding gall stones, one is wrong: a- increased in hemolytic disorders (b) associated with sq cell CA of	GB
12) appendicitis, one is wrong: (20s) 1-40% are pelvic appendicitis b mostly in childhood c-pelvic appendicitis may show no tenderness d-70% associated with fecolis	t h
13) prophylactic AB, one is wrong: (a) the broader the spectrum the better b- ineffective if given after the incision is made	ne)
14) portal hypertension, one is wrong: a- can be relieved by shunt b-caused by portal pressure = 5 mmHg c- can cause rectal varices	>Dmm Hg
a- mostly malignant b glucagonoma cause hypoglycemia c- ZE syndrome cause multiple ulcers	· · · · · · · · · · · · · · · · · · ·
16) vomiting cause all except: a- hypokalemia b- metabolic alkalosis c- hyponatremia d- hypochlormia e respiratory alkalosis	
17) all came from hindgut except: a-rectum b-descending colon c-epithelium of UB d-epithelium of vagina	
18) all came from foregut except: (a) mouth b- stomach c- pharynx d- GB	
19) all are true about liver embryology except: a-bile synthesis start by 12 th wk (b) liver comes from dorsal segmen mesentery that rotate counterclockwise	t of
20) all are boundaries of ischiorectal fossa except: a urogenital triangle b- fascia over levator ani c- skin and subcut. tissue of perineum d- lower rectum e- tubosacral ligament	

in liver transplant, one is wrong: a) the most common indication is hepatocellular CA (Chronic C hepatitis 40) b- one donor can give several transplant c- liver transplanted in heterotopic location (Liver transplant) d- liver mets is relative contraindication to transplant
in renal transplant one is wrong: a-pneumonitis carinii is common in recipient b- diabetic nephropathy recurs in transplant most kidneys can be preserved for 24 hours d- transplanted heterotopically
22) all are factors causing wound infection except: a- hematoma / b- prolonged surgery / c- immunocompromised / d- advanced malignancy
22) all increase risk for fungal infections except: a-broad spectrum AB b obesity c-immunosuppressant d-malnutrition e-malignancy
23) in hypovolemia, all the following occur except: a-increase ANP b increase ADH
24) obstructive jaundice, one is wrong: a- increase conjugated bilirubin in blood b- increase conjugated bilirubin in urine (c-) increase unconjugated bilirubin in blood d- decrease urobilonogen in urine
25) in small intestinal obstruction, the most useful diagnostic method: a- small bowel follow thru b- CT scan c-erect and supine X-ray d- U/S for abdomen e- endoscopy
 in organ transplantation, all are true except: a- blood group O recipient can receive from group A donor with use of immunosuppressant b- better to have HLA I and II matching c- in hyperacute rejection, there is thrombosis of venules d- acute rejection can occur with weeks to months after transplantation e- both humeral and cellular immunity play a role in acute rejection

pt with 35% blood will have all the following except a- significant change in mental status b- respirate at 25 / min c - hart rate 130 / min d- pulse pressure 40mmHg e-systolic BP 60 mmHg
28) injury to ulnar nerve in upper arm will most likely result in a-wrist drop b- no hope for reconnection c atrophy of hypothenar
 inguinal canal, all are true except: a- anterior wall formed of ext. oblique aponurosis b- int. ring located 0.5 inch above midpoint between ant. Sup. iliac spine and pubic tubercle int. ring is medial to inf. Epigastric artery
30) all are true about water intoxication except: (2)?? a-confusion b-hyponatremia c-tachycardia
all can cause paralytic ilieus except : a- hypokalemia b- hypermagnesemia c- hypocalcemia d- hyponatremia e- retroperitoneal hematoma
32) hypercalcemia cause all except: a- polyuria b- constipation c- tachycardia d- muscle weakness
a- corticosteroids b- liver disease c- acute MI d- TPN
How many lobes are in the left lung: (a-) 2 b- 3 c- 4

all can be transmitted by blood transfusion except: HIV Malaria **HVC CMV** → HAV Regarding nutritional requirements, all are true except a- 1 gm of prtn gives 9 Kcal (gives The best indication in burn pt that he's resuscitated is: a) urine output b- serial PCV c- CVP In neuroendocrine response to trauma, one is wrong: a- insulin decrease in early stage, then increase (b-) insulin increase causing hyperglycemia bone disease in 2nd hyperparathyroidism due to CRF is caused by all except a- decrease vit D b-) increase Ca c- increase K d- increase PO4 one can cause hypercalcemia a- paraneoplastic synd (b-) loop diuretics c- hypothyroidism mixed salivary gland tumors, one is true a- mostly malignant b- mostly in submaxillary gland c-) radioresistant d- commonly cause facial palsy one is contraindicated in renal disease: a- enflurane

b- halothanec- isofluraned- sevoflurane

In metabolic response to injury, protein degradation mostly comes from: a- liver b- diet c-) skeletal muscle
one is true regarding hernia a) obturator hernia cause pain in lateral thigh (week, aspect) b- spigelian hernia is common c- Richter's hernia means patient bowel is strangulated
diverticular disease of colon, one is wrong: a- mostly in sigmoid b- false diverticulum (c-) usually in colon and rectum
MIckel's diverticulum, all true except: a- occurs in 2% of population b- false diverticulum (1995) c- most common cause of lower GI bleeding in children
vetillointestinal duct, can cause all except: a- fistula between ilieum and umbilicus b- umbilical hernia c- fibrous cord between umbilicus and ilieum d- cystic lesion behind the umbilicus e- Mickel's diverticulum
all can cause depressed ST segment in ECG except a- hypokalemia b- HTN c- Digitalis d- Chronic Pericarditis
One of the following chemical burns shouldn't be irrigated with water a- concentrated NaOH b- elemental Na
all can be caused by massive blood transfusion except: a- hyperkalemia b- acidosis (aikulesis acesare -> Coz +H20 then by kichney (amente of the cos) c- hypothermia d- hyponatremia

Side effects of NaHCO3 in CPR include all except

- a- hypernatremia
- b- shift of O2 dissociation curve to left
- c- hyperosmolarity
- d- alkalosis
- e- hyperkalemia

Anostruía

all these medications are important to ask about pre-op except:

- a- warfarin
- b- paracetamol
- c- digoxin

regarding heparin, all true except:

- a-) its composed of mixed sulfated peptides
- b- activate antithrombin III
- c- antagonized by protamin sulfate
- d- t1/2 = 8 hrs
- e- cause thrombocytopenia

fibroadenoma of breast, all true except:

- a- can be treated conservatively safely
- b- mostly in adolescents
- c- 30% decrease in size after 2 years
- d- Malignant potential
- (e-) Monoclonal cell proliferation

Ductectasia, all are true except:

- a- can cause nipple inversion
- b- wide excision of major duct is ttt
- c- brown green discharge
- (d-) decrease incidence in smokers
- e- usually associated with aerobic and anaerobic infections

post-op, one is wrong:

- a- IL-1 decrease pain perception
- b- IL-1 produced by macrophage and endothelial cells
- c- Long t1/2 for IL-1 = 10 days

Umbilical hernia, one is wrong:

- a- more common on blacks
- b) mostly requires repair in the 1st 2 years

the most cardiovascular stable inhalation anesthetic is: (a-) sevoflurane b- isoflurane c- halothane d- enflurane all are indications for inhalational anesthesia, except a- pt wish b- difficult intubations c- pediatric age d- uncooperative patient (e-) suspected upper airway obstruction one undergoes hoffman's degradation a- tubocurarin (b) atracurium c- pancuronium spinal anesthesia is indicated in all except: a-liver surgery b- cesarean section c- leg surgery d-inguinal hernia prevention of aspiration in anesthesia can be achieved by all except: antiemetics antacid fasting at least 6 hours NG tube > Use of long acting muscle relaxants Time recommended to fast after solid food h hrs \rightarrow 10 hrs 3hrs Ttt of aspiration at time of induction can be by all except: intubations bronchoscopy NG tube BAL

Always require post OP ventilation

in pyloric stenosis, one is wrong: a- projectile vomiting b- after vomiting child is better c-) early kidney response is by excreting acidic urine d- no bile in vomitus what is the surface area of a burn involving head of new born a- 9% b- 17% c- 13% d- 11% e 19% -> I'm sure enha e, Fanin & the highest risk to have DVT in: a- hip replacement surgery all are complications of spinal block except: a- headache b- HTN All these can benefit from oxygen except: a- V/Q mismatch (b-) Absolute shunt Painful defecation with blood on toilet paper, the most likely cause (a-) anal fissure b- hemorrhoids c- rectal CA d- rectal polyp

in urine analysis of pediatrics, one is wrong:

a- urine volume 1-2ml/kg/hr

(b-) fractional excretion of Na = 3 – 5 %

c- urine osmalrity = 250

d- specific gravity = !!!

11 /4 / 2006

in new born discovered to have imperforated anus, the priority to:

- a maintain fluid balance
- b' determine the level
- c- search for other anomalies

Hirshsprug disease:

- (a) delayed passage of meconium for 24hrs is diagnostic
- b- if sever present with perforation
- c- most are diagnostic is neonatal peroidf and other half < 2 years

in child operated for sliding hernia, the deteriorated fetus after repair most likely cause is:

(Status).

- a- hematoma
- b- diaphragmatic dehiscence

مشى أكب (المناسلة النانية . مسكن تكون بالحنيارات النانية .

toxic ulcerative colitis management includes all except:

- a- IV fluids
- b- IV steroids
- c- Antidiarrheal agents

Wilm's tumor, all are true except:

- a- mean age = 3 years -
- b- mostly present with abdominal mass discovered by parents \(\)
- c- HTN
- d- Can present with gross hematuria

Neuroblastoma can present with all except:

- a- abdominal mass
- (b) paraplagia
 - c- resp. distress
 - d- mediastinal mass
 - e- horner's synd

intussuseption, one is wrong:

- a- current jelly stool is diagnostic
- b-) important cause of lower GI bleeding in infants
- c- mostly occurs in mid summer and winter
- d- child is healthy and present with sudden abdominal pain

GENERAL SURGERY I (Answers) 2006

- 4] 4. Torsion is rare to excue. Interes
- 5] 1,persantine = dipyrydamole = anti platelets.
- 6] 1.
- 7] 3.
- 8] 4, its 10X more than any other tumor of the appendix.
- 9] 3, on the contrary, it causes metabolic acidosis.
- 10] the accuracy of this question is questionable, I suggest to forget about it.
- 11] add except to the question:
 - 1, a sterp. Infection.
- as I think. (الف = 5. the word 'spircious' is meant to be 'spurious' as I think.
- 13] 2.
- 14] 1.
- 15] 2.
- 16] 3. remember that in DIC consumption of fibrin occurs, so the level of degradation products of the consumed fibrin rises but fibrin level drops.
- 17] 2, the valves are destroyed, why to improve the venous flow?
- 18] 5.
- 19] 2.
- 20] 2, no role for surgery in initial stabilization of an unstable patient with pancreatitis.
- 21] 4, smoking and chronic pancreatitis are the only ones implicated in pancreatic CA -(Bailey).
- 22] 1. As a rule: solid organs are prone to injury more than hollow viscera, namely the liver, spleen and kidneys than intestines. Pancreas injury indicate severe trauma.
- 23] 1, almost complete relief at least of the anemia.
- 24] 4, splenomegaly- producing conditions esp those infiltrating its capsule predispose to such a condition.
- 25] 3, we are actually looking for PE.
- 26⁷ 1 & 3, also Al H.
- 27] 3.
- 28] 3, it is a congenital cyst due to dermal cells being buried along the lines of closure of embryonic clefts and sinuses by

74-All are branches of external carotid, except:

- 1-Lingua artery
- 2-Ophthalmic artery
- 3-Periaricular artery

75-All correct about hydatid cyst except:

- 1-Exocyst is from host
- 2-germinal layer form daughter cyst
- 3-Spillage causes anaphylaxis
- 4-Lamillated layer form daughter cyst

76-Patient presented with painful suppurating masses in the groin, it could be:

- 1-Mucus jungoidis
- 2-Actionomycosis
- 3-Hidradinitis Suppurativa
- 4-Furunclosis
- 5-Curbunclosis

77-All correct about UTI except:

- 1- Microorganism in suprapubic specimen is Dx of the infection
- 2- Culture from midstream urine of 100,000 cfu/ml is Dx
- 3- WBCs not correlated well with number of Bact cells
- 4- TTT of symptomatic pyuria in pregnant lady is not important

78-One of the following is not associated with perianal suppuration:

- 1-UC
- 2-Crhon's disease
- 3-diverticulitis
- 4-TB

79-In septic shock all are correct except:

- 1-In ICU patients most common cause is respiratory
- 2-10% are due to Candida
- 3-Anerobs are uncommon

30-All are associated with Rhaunold's Except:

- 1-Burger disease
- 2-DM
- 3-Cold agglutinin disease
- 4-Acrocyanosis

31-All are true about Neuroblastoma Except:

- 1-From neural crest origion
- 2-usually bellow 5 years of age
- 3-Abdominal mass is the most common presentation
- 4-secretes catecholamines
- 5-Radiresistant

22-About wound healing all are correct except:

- 1-primary intention healing is closing a clean wound hours after making it
- 2-secondary closure is a synonym to healing by secondary intention
- 3-closure of wound need epithalization



























skin fusion. Angular dermoid is so called koz it is found in the lateral angle of the eye. It can extend to the dura through the orbital blates. 29] 2. 30] 2. 31] 2. 32] 2, with my conservation about this choice. 33] 2. 34] 4, can occur everywhere, but mostly in inguinal. 35] 2. 36] 1. 37] 1. 38]! 39] 2. 40] 4. 41] 3. 42] 3. 43] 1, serious; highly associated with neurovascular injury. 44] 1. 45] 2. 46] 1 & 2, 1: cleft not arch 2: not upper. 47] 5. 48] 2,OCP.s causes benign hepatic tumors not malignant, And hepatoadenoma can stimes transform into malignant esp. if large (> 10cm) and multiple. 49] 4. 50] 3. 51] of those choices 1, although I deeply believe that all can occur. 52] b and c koz ringer lactate is better as initial fluid. 53] a. 54] a. 55] c, it is associated with Riedel's thyroiditis not hashimoto. 56] a. 57] c, wallahe so2al zn5. 58] c. 59] b. 60] b.

61] c, no role for antithyroid drugs during its thyrotox state.

```
62] a, sternoclavicular joint.
63] c.
64] c.
65] about 1: liver carcinoid is not associated with
           carcinoid syndrome.
          2: on the contrary,
                                   small intestinal ones are
           largely associated with the syndrome.
66] all can occur but if we feed the pt. 1 would supposedly not
occur.
67] 1.
68] 1.
69] 2, only a small note: veins are more prone to injury than
arteries but much difficult to repair.
70] 4.
71] 3.
72] 1.
73] 4.
74] 2 & 3.
75] 4.
76] 3.
77] 4.
78] 1.
79] 1.
80] 4....
```

Sorry for any defect,,,

81] 5.

82] ALL are Correct

Best Wishes For All

- 56- Best diagnostic tool for splenic enlargement:
- a. Ultrasound.
- b. C.T.
- c. MRI.
- d. Peritoneal lavage.
- 57- Most common site for intestinal duplication:
- a. Duodenum.
- b. Deodeno-jejinum.
- c. Jejuno-ileal.
- d. stomach.
- 58- One of the following is not pre-malignant:
- a. Familial Adenomatous Polyposis.
- b. Senile keratosis.
- c. Chronic duodenal Ulcer.
- 59- About Gastro esophageal reflux:
- a. increase with upright position.
- b. increase when esophagogastric junction is above the diaphragm.
- c. columnar metaplasia.
- 60- Increased TSH, one is true:
- a. Thyroglobulin...
- b. can occur with normal T3 and T4.
- 61- Anti-thyroid drugs are used in all of the following except:
- a. Toxic adenoma.
- b. Grave's Disease.
- c. de Quervian's thyroiditis.
- d. MNG.
- 62- All are true about patient presented with sternal fracture due to steering wheal injury in road traffic accident.
- a. Most common injury is at the sternomandibular point.
- b. Undisplaced fracture is treated conservatively.
- c. Complication of displacement in psuedoarthrosis.
- d. This fracture does not correlate with the severity of the injury.
- 63- All of the following are wrong about carcinoma of the lip except:
- a. Affect upper and lower lips equally.
- b. Mostly basal cell carcinoma.
- c. Starts at an area of hyper-keratosis in the lip of smokers.
- 64- All are complications of scelerosing therapy in varicose veins except:
- a. Intra-arterial injection.
- b. Tissue necrosis.
- c. Lymphadema

65. All not correct regarding Carcinoid Except: 1-Carcinoid of the liver is associated with the syndrome 2-Small intestinal carcinoid is associated...... 66-Prolonged NG can cause all except: 1-hypoproteinemia 2-Metabolic alkalosis 3-hypoK+ 47- Axillobrachial injury worsen by one of the following 1-associated vein injury 2-associated nerve injury 3-difficulty in the repair of arteries 4-decrease no of collaterals G-Immediate management for open Pneumothorax: 1-Close immediately+ tube 2-chest tube into opening 3-close opening only 6 q-In vascular blunt trauma of the abdomen, all are true except: 1-Safty ligate Superior mesenteric artery 2-Ligation of IVC above renal vein is fatal 3-veins are more affected than arteries 70-Angiodysplasia, all are true except: 1- can present as Fe deff. Anemia 2- can cause massive GI bleeding 3- more on right colon 4- can ulcerate 71-All are true about retractile testis, except: 1-due to hyperactive cremasteric muscle 2-assure patient 3-malignant potintial is high 4-can be milked into scrotum 72-Dubble bubble appearance on X-ray: 1-duodenal atresia 2-ileal atresia 3-CA stomach 73 About esophagus, Except: 1-25cm long (10 inches)

2-has 3 physiological strictures 3-2cm of it isbelow diaphragm 4-mostly made of striated muscles

1. no. of lymph nodes involved 2. level of L.N involved 3. histopathology 4. estrogen receptors 5. preg. After 2 years of ttt by mastectomy

48-all associated with liver malign except:

- 1. alfatoxin
- 2. OCP
- 3. nitrosamine
- 4. hepatoadenoma

49-internal hemorrhoids all true except:

- 1. Exclude proximal ca.
- 2. usually surgical ttt for permanent prolapse
- 3. usually bleeding is red bright
- 4. I.V injection with phenol and oil

50-pt. presented with shot gun in abd. And is hemodynamically stable in ER management of choice:

- 1. observation for few hours then to home
- 2. admit and observe in hospital
- 3. laparotomy

51-One is not a complication of spont. Pneumothorax:

- 1. hydrothorax
- 2. recurrence
- 3. pneumomediastinum
- 4. pneumopericardium

52- In patient with 40 % turn, do all except:

- a. Dressing.
- b. I.V. colloid initial fluid management.
- c. I.V. saline initial fluid management.

53- Most common soft tissue tumor in abdominal wall:

- a. Lipoma.
- b. Rhabdomyoma.
- c. Sarcoma.
- d. Liomyoma.

54- Most common cause of hemobilia

- a. Choledochlithiasis.
- b. Cancer of the pancreas.
- c. Cholngiocarcinoma.
- d. Hepatic artery aneurysm.

55- Retroperitoneal fibrosis:

- a. Ureter is first affected.
- b. Conservative treatment of veins.
- c. 50% of Hashimoto's thyroiditis.
- d. Seritonine and anti-serotinie cause retroperitoneal fibrosis.

1. sign and symptoms	
2. mortality	(D)
3. age	
38-one is mostly associated with positive culture for bile	in cholangitis:??? "cholecystitis"
1. elderly female	
•	
39-pt. presented with left varicocele mostly by lesion in:	•
1. left testis	
2. lt kidney	(2)
3. pelvic tumor	
40-all of the following are prognostic factors for pancrea	ntitis except:
1. hyperglycemia more than 200	•
2. hypocalcemia	
3. age more than 55	
4. amylase more than 1000 IU	
i, dinjudo moro andi 1000 10	
41-child presented with burn involving head and right up	nner limb % is:
1. 18%	pp 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
2. 9%	(1)
3. 27%	94. <i>1</i>
4. 36%	
4	
42-one feature differentiate between ulcerative colitis an	nd crohn's
1. granuloma	id Croim's.
 crypt abcess strictures 	
3. Suictures	
43-arterial injury most commonly associated with:	
1. knee dislocation and fracture	
	7)
 # of neck of femur # of shaft of femur 	
3. # Of Share of Temus	
44 shild accepted with mit would on thish host manage	mont if blooding is profess.
44-child presented with cut wound on thigh best manage	entent it breeding is profuse.
1. press on femoral artery	G.
2. press on it	
3. apply tourniquet	<u> </u>
45 should be 1	
45-about inflammatory breast ca. except:	•
1. bad prognosis	• • •
2. can be mixed up with breast abscesses	
3. rapidly growing	٠,٠
 treatment by mastectomy and chemoradiotherapy 	y
46.11	
46-all are correct about branchial fistula except:	
1. second arch defect	
2. open into upper triangle of the neck	
lined by columnar epithelium	
4. commonly infected	

37- one feature that doesn't different between calculus and acalculus cholecystitis:

28-One known to have intracranial extension:

- 1. cystic hygroma
- 2. thyroglossal cyst
- angular dermoid
- 4. sebaceous cyst

29-child with cleft lip and palate:

- 1. close lip at 3 months, palate 6 months
- 2. close lip at 3 months, palate 18 months
- close at sametime at 15 months

30-most common cause of meconium ileus in infant:

- 1. mucoviscoidosis
- 2. ileal atresia

31-One of the followings premalignant:

- 1. Tubular adenoma
- 2. villous adenoma
- 3. pseudo polyp
- 4. juvenile polyp

32-one is true about pleomorphic adenoma:

- 1 made of mesoderm only
- 2. highly implantable
- 3. in males 10%
- 4. highly malignant

33-all occur in burn pt. except:

- 1. hyperkalemia
- 2. + nitrogen balance
- 3. dehydration
- 4. abn. Lipid metabolism
- 5. increasing in energy production

34-sliding hernia except:

- 1. organ is part of hernia
- 2. can not remove sac completely in op
- 3. high risk of irreducibility
- 4. Doesn't occur in umb. Hernia

35-One does not occur after removal of parathyroid gland post op.:

- 1. multiple bone # immediately after due to hypocalcemia
- 2. PO4 remains high till bone healing is complete
- 3. alkaline phosphatise increased indicating bone healing

36-one causes subclavian artery aneurysm:

- 1. thoracic outlet obst. Syndrome
- 2. atherosclerosis
- 3. IHD























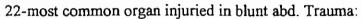




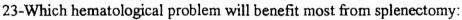
20-All of the are indication for operation in pancreatitis except: 1. Obstruction of biliary tree by stone 2. hemodynamically unstable 3. abscesses 4. ?

21-which of the following has been implicated in pancreatic cancer:

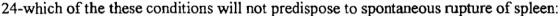
- 1. protein rich diet
- 2. fat rich diet
- 3. alcohol
- 4. smoking



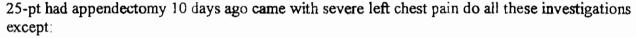
- 1. liver
- 2. spleen
- 3. kidney
- 4. pancreas
- 5. bowel



- 1. Spherocytosis
- 2. sickle cell anemia
- 3. TTP
- 4. Thalasemia
- 5. autoimmune anemia



- 1. malaria
- 2. kala azar
- 3. leukemia
- 4. TTP



- 1. CT
- 2. CXR
- 3. Thoracocentesis
- 4. Doppler for lower limbs

26-bronchogenic lung ca.:

- 1. **PTH**
- 2. a-Feto protein
- 3. ACTH
- 4. Erythroprotein
- 5. TSH

27-connective tissue associated with esophageal disorder:

- 1. SLE
- 2. **RA**
- 3. scleroderma









```
Foll-Owing cause spircious diarrhea in an old debilitated man:

12-one of the ca.

12-one of the ca.
  olon ca.
  2. cirrhosis
     divertion divertime
  3. crhons
     diver imp actation
5. 100 peripheral aneurysm due to the atherosclerosis:

13-most compal
femoral
   1. femoral
      popliteal
      populatal
brachial
ant. Tibial
 4. fo lowing cause diarrhea as a presenting symptom:

14 one retroitial appendicitis
    one retroilial appendicitis
    1. Paracecal
2. Paracecal
        retrocecal
     3. It. si Lana
        subhepatic
  5. fibrin degradation products in all of the following except:

15-decreased in one dose
     decreasin one dose
      2 hemophilia A
      heurithrombin 3
3. Aprithrombin 3
   DIC all correct except:
       about Pration of thrombin

1. thrombocytopenia
       1. throng 1. decrease fibrin degradation product
    17-all of the following can used to treat a chronic venous ulcer except:

17-all of the following can used to treat a chronic venous ulcer except:

17-all of the following can used to treat a chronic venous ulcer except:
       all of elevation

1. elevation
2. venous bypass
            superficial ligation of perforators
            bandage dressing
     18-all of the following can be transmitted through blood transfusion except:
        malaria
            hep B
            hep C
            CMV
         4 pneumocystis carini
       19-most common complication of pancreatitis:
         abscess
          2 pseudocyst
             ARDS
          3. splenic vein thrombosis
```

General surgery II

Lis - LIPYI

4-post hernia repair pain due to all except:

- 1. hematoma
- 2. infection
- 3. recurrence
- 4. testicular atrophy? "torsion"
- 5. entrapment of iliofemoral ligament Newe

5-One of these drugs can be given safely to PUD:

- 1. persantine
- 2. aspirin
- 3. indomethacin
- 4. steroids
- 5. phenylbutazone

6-one of the following is pencillin resistant:

- 1. pseudomonas
- 2. strept. Pneumonia
- 3. strept. Viridance
- 4. actinomycosis
- 5. strept. Pyogenous

7-one of the following is made of lymphoid tissue:

- 1. branchial cyst
- 2. ranula
- 3. cystic hygroma
- 4. ?

8-most common tumor in appendix:

- 1. adenoca.
- 2. lymphoma
- 3. liomyoma
- 4. carcinoid

9-all of the following cause metabolic alkalosis except:

- 1. excess aldosterone
- 2. chronic vomiting
- 3. salicalate poisoning

10-tumor that causes solitary lung mets:

- 1. brast
- 2. prostate
- 3. renal cell ca.
- 4. liver ca.

11-all of the following are staph infection:

- 1. erysipelas
- 2. carbuncle
- 3. osteomyelitis
- 4. acute parotitis
- breast abcess



1 Tracheoeosophygeal fistula and eosophygeal a except (A)— Cyanosis at rest relieved by crying * B _ inability to continue feeding C _ Air in the stomach D _ cant pass nasogastric tube	atresia all the following are trure	
2 Hepatic encephalopathic is precipitated by all A _ infection B _ narcotics C cclusion of portosystemic shunt* D _ hypokalemia	except	
3 CA of head of pancreas all except A- local invasion B- liver mets c-back pain d-jaundice e-thombophlibitis	Not super because Ithink thrombopheloihi anocinted with ponerentic cf (tail)	
4 Hemia vs. hydrocele best to differentiate between a- Hx and PE btransillumination c- ultrasound d-hemioscopy e- CT scan	veen them is	
5 Acute cholecystitis practical diagnosis a- HIDA bultrasound c-ERCP d-oral ????? e-Xray		
6Acute cholecystitis best diagnosis is HIDA scan		
7 Splenic artery (a) upper border of the pancreas b-lower border of pancreas c-posterior to stomach d-Uncinate process relation e-posterior to transverse colon		
8 Vitilline duct reminant is the a- omphalocele b-gastroschesis Meckel's diverticulum d-bladder neck		

e-patent urachus

(A)mean age=3 years (B)most common presentation is abdominal mass discovered by parents (C)HTN (D)gross hematuria

86) neuroblastoma can present with, except:

(A)mass (B)paraplegia (C)rep distress (D)mediastinal mass (E)homer syndrome

87) intessuseption: except..

(A)current jelly stool is dx

(B)important cause of lower GI bleeding in infants

Omostly occurs in mid summer and winter

(D)healthy child w sudden abdominal pain

88)in pyloric stenosis: \

(A)persistent projectile vomiting (B) early kidney response by excretion of acidic urine (c)non-bilious vomiting

89) surface area of a burn involving the head in a newborn: (9%) (17%) (13%) (11%) (19%)

TV. SC.

2-3d.

2h. Ch. Tel
HH or Hprophyl.

NH.

anlish.

PTP

INR.

```
c-hemolytic anemia
 d-DIC
 18 Insensible water loss all except
 a-Doesn't increase in fever
 b-lung and sweat
 c-cause hypovolemia in tracheostomy
  19Cushing's all except
Opositive nitrogen balance
                                                -a
                                             -b
  b-decreased potassium
  c-polyurea
                                  -c
  20 Acute appendicitis least important sign
  a- Rovsing
  b-psoas pain
  c-local tenderness
  d-local guarding 2?
  e-pain upon coughing
  21Chemical burn best management
  a-identify the agent
  b-nutralize the agent
 Girrigate with large amount of water
  d-give antibiotic
  22Regarding ulcer, all except
  a-the base is what we feel
  b-margin is skin adjacent
  c-edge is attatchment of the ulcer to skin
  d-floor is what we see
  (e)best biopsy is from the content 🗸
  23 Malignant melanoma most common is
 (a) superficial \checkmark
  b-nodular
  c-
  24Hydadit cyst second most common site is
 🕝 lung 🧹
  b-stomach
  c-spleen
  d-kidney
  25-All are parts of plasma osmolarity except
  a-Na
  b-K
  O-Ca ✓
   d-urea
```

9 Most common cause of eosophigitis is a-corrosiv injestion (D-reflux ~ c-viral e-fungul 10 All associated with lithogenicity except @jejunum resection 🎺 b-hypercalcemia c-cirrhosis d-spinal cord?? e-morbid obesity 11 Choose the true statement a-bilirubin is produced from hemosidrin b-urobilinogen is dark in colour (2)??? jaundice has increased urobilinogen 12 Circulating CCK a-relax the sphincter of oddi b-stimulate gastric secretion c-activated intra luminally d-stimulate the pancreas e-it is a peptide secreted from the stomach 13 Least common presenting symptom in the carcinoma of the head of pancreas a-jaundice hemobilia 🗸 c-back pain 14 Hashimoto thyroiditis all except a-Autoimmune disease b-commonest cause of hypothyroidisim c-associated with lymphatic infiltrate and cell debris (d)best treatment is surgery 📈 15 Saliva contains 🕝 amylase 🦤 b-lipase 16 All cause delayed wound healing except a-decreased albumin b-cushing > Odecreased vitamin B12 d-uremia e-hypothermia 17 Massive blood transfusions all except a-decreased Ca

(D) decreased potassium /

©toxoid 🗸 d-debridement e-relieve vasospasm 34Pyogenic liver abscess cause, all except a-RUO pain (b)diaπhea ✓ c-fever d-anorexia e-tendemess 35After splenectomy for spherocytosis a-thrombocytopenia persists B-RBCs still spherocytes V c-RBC osmotic fragility increases d-RBC life span decreases e-transient lukocytosis 36Signs of thrombophlebitis @tender cord like vein ... b-edema C-37Undescended testis should be treated at the age of (a) 2 years 🔑 b-4 years c-6years d-10 years e-18 years 38Absence of ganglion cells in Messner corpuscle @constipation < b-fecal soiling c-increased mucous secretion d-blood per rectum 39 All cause fibrothorax? Except a-empyema bpneumothorx / c-hemothorax d-chronic pleural effusion e-irradiation 40Non metastatic extra thoracic disease associated with oat cell carcinoma a-hypercalcemia b-osteoarthropathy c-ADH secretion d-Cushing 1

41 All associated with MEN Except

26 primary hyperparathyroidism all except

Most common cause of increased Ca in hospitalized patients
b-increased Ca and PTH

c-

27Response to injury all except a-decreased N2 execretion b-increased cortisol c-increased rennin d-increased growth hormone eA but not sure!

28 Achalasia an except:
a-high pressure in manometry
D-predispose to hypercalcemia
c-degeneration on Aurbach plexus
d-degeneration of vagus

29Most common cause of wound infection is

astaph b-strept
c-E.choli
d-bacteroids
e-Anaerobics

30Septic shock all except
a incraesed sodium?
b-leukopenia c-warm hands
d-tachycardia
e-tachypnea

a-Cardiac tamponade
b-tension pneumothorax

Operforated viscus
d-upper airway obstruction

32 Massive PE all except
a-tachycardia
b-tachypnea
d-distended neck veins
d-decreased PO2
e-hypotension

33 Treatment for tetanus all except: a-human Ig b-penicellin G

d- Xray may be misleading

50 Necrotizing enteocolitis all except

②Intestinal atresia

b-hypoxia during delivery

c-premature delivery an decreased weight

51Exotoxins except

a-staph

-diphtheria

©E.choli /

d-clostredium difficele

e-clostredium botulenium

52Retractile testicles



a-usually bilateral

b-treatment is reassurance of the patient

c-it is precancerous

d-increase in cremasteric reflex

e-can be retracted to???of scrotum

53Acute appendicitis all except

a-Due to lumen occlusion

(b) common cause of intestinal obstruction

c-commenest in the 4th decade

d-ovrlooked ina certain percentage of patients

e-easily rupture in???

54Indirect inguinal hernia all except

(a)Doesn't reach the scrotum

b-more common than direct inguinal hernia

c-passes thru the internal inguinal ring

d-herneal sac is preserved

55 CA of stomach all except

a-adenocarcinoma is the commonest cause

(b) Massive hemoptysis and melena

c-pernicious anemia may be present

56Least malignant colon polyp is

a-villous

b-tubular

c-FAP

@juvenile

e-Gardner

57Signs of cardio pulmonary arrest, all except

a-unconsciousness

b-low b.p

c-cyanosis and pallor

a-medulla of thyroid b-gastrinoma c-neurofibromatosis (d)hypernephroma/ e-pheochromocytoma 42Case of a child with vomiting and double bubble appearance on X-ray leads to the diagnosis of @duodenal atresia 🗸 b-biliary atresia 43Stab wound of the chest with hypotensionand muffled heart sounds a-pneumothorax (b) pericardial tamponade c-hemothorax 44Pediatric inguinal hemia a-10%family history V b-left is more than right c-3% to 5%incidence \checkmark d-triples in premature babies 45Infiltration of Cooper ligament in breast CA a-Peu d'orange b-skin distortion ©nipple retaraction / 46 Management of noninfected venous ulcer, all except a-systemic antibiotics b-keeping it wet c-debridement d-biologic???? 47About wound healing a-keloid and hypetrophic are similar b-collagen III is most important c-soluble factors (d)epithelialization occurs within 24 to 48 hors 48Bochalek hernia (a-pleuroperitoneal canal b-short eosophagus c-ventral wall d-everted?? 49 High small intestinal obstruction all except a-early vomiting b-rare distention Gearly constipation

66 STP is agood anesthetic because of its Smooth induction

67All cause accumulation effect except Atracorium

68 The dru that is used in cardiac surgery a-fentanyl b-halothane

c-propofol

d-isoflorane

nflorane

69 Pressure of O2 in the hospital is a- 60 pounds

70All characteristics of visceral pain except

(a)transmitted via fast alpha fibers 🗸

b-ill defined

c-continious

71Chronic pancreatitis all except

a-abscess

b-pseudocysts

c-dilated ducts

d-DM

e-constipation

72Skin graft

a-the thicker the best take

b-the thinner the faster healing

c-the thicker the easier the growth of hair follicles

All are complications of CBD stones except a-liver failure b-ileus / ? c-juandice

a-surgery is infrequent
b-more complications than duodenal osperally
c-more in the antrum
d-endoscopy is a must
e-hyperacidity of the stomach 74 Gastric ulcer all except (e

75 Protien calorie malnutrition diagnosis is by a-decreased albumin level

@ > Diarrhen and not

b-decreased transcolloid c-decreased lymphocytes d-wt loss e-skin anergy

76 Perforated duodenal ulcer all ecept
a-it is the least common complication
b-air under the diaphragm is present in 70%
c-more in the anterior wall
d-one third of them had a previous history of pain

77Paralytic ileus all except a-narcotics increase motility b-no pain c-generalized d-increased sympathetic activity

78 Ulcerative colitis
a-skip lesions
b-transmural
c-granuloma
d-crypt abscess
e-cobble stone appearance

79 Superior mesenteric artery embolisism a-diagnosis by plane abdominal Xray b-sudden generalized pain c-associated with bleeding d-associated with atrial fibrillation

80 Papillary thyroid cancer all except a-Amyloid b-depends on thyrotropin c-slowest to grow d-may turn to anaplastic in old age e-has anaplastic variant

81All predispose to superficial varicose vein AV shunt -a
B-atherosclerosis -b
C-pregnancy -c
D-obesity -d
E-positive family history -e

82-Severe acidosis causes include all except a-Pyloric obstruction b-renal failure c-DKA d-lactic acidosis MA embolism.

cours Hypo Kolemic Hypochion:

83 A patient with 40% burn and poor management, his death within 84 hours would most probably be due to a-hypokalemia and cardiac shock b-sepsis c-cardiovascular collapse d-renal failure

84In severe atherosclerosis all are indications for amputation except a-pain at night



b-rest pain relieved by dependency

c-heel ulcer

d-impaired venour refilling

e-dependancy rubor

85 Hemorrhoids



a-pain

b-portal HTN

c-cancer

d-stool with blood

e-reduction in weight

86Acute arterial ischemia all true except

(a)swelling

b-paralysis

c-parasthesia

d-cold

e-weak pulses

f-pallor

87Complete rectal prolapse all are true except



a-intussuseption

b-females more than males

c-treatment is conservative

d-best examined during squanting

88 Commonest diaphragmatic hernia

a-bochdalic

Desliding beautiful to be for I (53 continues and mile).

c-morgagni

d-traumatic

e-para eosophageal

89 Commonest cause of hypothyroidism is

a-subacute viral

b-post surgery

(c) autoimmune

90Clostredia Welchi(its new name is perfrenjie)

a-incubation period is from 1-2 weeks

b-Resistant to penicillin

c-gram negative spore forming anaerobic d-presence of cellulites virtually excludes its presence e-Gas not present in some???

91 Regarding calcium cataion
a-hyperventilation increases ionized calcium
b-calcitonin decreases serum calcium
c-mostly it is excreted by the kidneys

1 think it is more from Rt side.

92 Unilateral undescended testis all are true except a-treated by gonadotropin b-it is precancerous c-rt is more common than the left

93 BCC commonest site
a-lower lip
bnose
c-leg
d-trunk
e-forehead

94 Congenital umbilical hernia all are tre except a-more common in blacks than whites b-strangulation more in children c-family history d-resolves by the age of 3 years

95Indication for DFL all except a-bullet injury b-unconsciousness c-spinal injury d-closed head injury e-equilocal PE

96All are indications for laparatomy in penetrating wounds except a-increased bowel sounds b-blood in stomach c-peritonitis d-exverted viscus

97 Cystic hygroina all are true except
(a) it rarely disappears spontaneously
b-present in the posterior triangle
c-extends to the mediustinum
d-appears within one year of age
e-males equal females

98 Commonest cause of obstructive jaundice
a-cholangio CA

BCBD stones

	(a) ant wall by ext. Oblique aponeurosis (b)ant ring about 0.5 inch above mid point between ant sup iliac spine and pubic tubercle (c)ant ring is medial to inf epigastric artery
	32) all true about watwer intoxication except: (a)confusion (b)hyponatermia (c)tachycardia
	33)all causes paralytic ileus except : (a)hypokalemia (b)hypomagnesemia (b)hypocaclcemia (d)hyponatremia (e)retroperitoneal hematoma
, ς	34)hypercalcemia causes all except: (a)polyuria (b)constipatin (C)achycardia (d)muscle weakness
	35)all can cause hyperglycemia except: (a)corticosterioids (b)MI (c)TPN (d)liver dis
• •	36)how many lobes are there in the left lung? 2
?	37)in metabolic response to injury prtn degredation mostly come from: (a)liver (b)diet (c)skeletal muscle
	38) one is true regarding hernia: (A) obturator hernia causes pain in the lat thigh × // (b) silpegian hernia is common × × (C) richter hernia means that part of the bowel is strangulated —
CS	39) diverticular dis of the colon, except: (A) mostly sigmoid (b) false diverticulum (c) usually in colon and rectum
50 i	40)mickles diverticulum, except: (A)occurs in 2% of population (b)false diverticulum (C)most common cause of lower Gi bleeding in children
•	41)Vitellointestinal duct can cause all except: (a)fistula (b) umbilical hernia (c)fibrous cord (d)cyst (e)mickles diverticulum
	42)all can cause depressed ST segment on ECG except: (a)hypokalemia (b)HTN (()digitalis (D)chronic pericarditis

	43) one of the the following chemical burns should not be	irrigated w water :	
	(a)concentrated NaOH (b)elemental Na	~ 4 LO ->	NaOH
C	44) all can be caused by massive blood TX except: (a) hyperkalemia (b) acidocis (C) hypothermia (e) hyponat	remia	•
	(45) all can be transmitted by blood to except: (a)HIV (b)malaria (C)HCV (D)CMV (E)HAV		
. 1	(46) regarding nutritional req of the body all true except: (a) 1 g prtn gives 9 KCAL		
C	the best indicator of resuscitation in burn pt is: (A)urine output (B)serial PCV (c)CVP)	
g\$ ³ €	48)in wound healing all true except: (A)fibronectin acts as a scaffold (B)monocytes are essen phase collagen I and II become in 1:1 rtaio	•	
	49)38 yr old pt 60 kg 50% TBS burn the best rate of flui (A)750 ml\hr (B)450 ml\hr (C)1000 ml\hr (D)600 ml\	hr s	B
	(A)vertebral anomalies (B)lung hypoplasia (c)cardiac an (D)imperforate anus (E)renal anomalies	omalies 4x 60	* '2 C
Ø	(A) fever after 1-2 days is due to anastomostic leak (B) spiking fever after 2 weeks deep seated abcess Ostrep causes delayed infxn		
	52) w light and skin CA, except:		•
1.	(A)bcc more than SCC (B)more in Europeans than midteranneans		
	©immunosupression is A RF		
	(D) UV band b is responsible for most cancer s(E)UV band c is responsible for clinically significant Ca	V .	
A	Rexpanded mesh grafts have advantages over sheet gra	ifts in all except:	٠,

	(a)allow epithelium growth except (B)over irregular surfaces (C)earlier in healing (D)better for donor healing
	54)hypertrophic and keloid scars, except (B)histologically no difference (B)hypertrophic scars outgrow wound margin (D)genetic predisposition (D)genetic predisposition (S)
	55)all are RF for PE, except: (A)male sex (b)heart disease (C)malignancy.
	56)all are RF for DVT, except: (A)obesity (B)short surgery (C)malignancy (D)age>40
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	(A)more in females (B)more in LL (C)after puberty (D)the rarest type of edema
	(A) lipolysis (B) inhibit gluconeogenesis 7767 7767
?	59)all causes shift of Hb-Oxygen dissociation curve to the right except: 7 2/3 DFG (A)acidocis (B)increased temp (C)increased Pco2 (D)DPG (B)HB-fe (D) PH
	60)neuroendocrine response to trauma, except: (A)insulin decrease at an early stage then increase (B)insulin increase cause hyperglycemia
	61)bone dis in secondary hyperparathyroidism in CRF can be caused by all except: (A)low VIT d (B)high Ca (C) hyperkalemia (D)hyperphospahtemia
	62)one can cause hypercalcemia: (A)hypothyroid (b)loop diuretics (C)paraneoplastic syndrome
_	63)mixed salivary gland tumors: (A)mostly malignant (B)radioresistant (C)commonly cause bell's palsy (D)mostly in submaxillary glands